

# East Bay Youth Athletic League

## OFFICIAL SCORE SHEET (2007/8 Season)

GAME DATE: \_\_\_\_\_

GYM: \_\_\_\_\_

**Official Timekeeper** (team on right, **HOME TEAM**)  
**Official Scorekeeper** (team on left, **VISITING TEAM**)  
**First Scorekeeper** provides score sheets and playing rules for the scores desk.  
**Last Scorekeeper** completes this score sheet and **reports the scores** to the **Publicity Director** by Monday, 9:00 pm to:  
**Gary Kihara** email [gkihara@uct.com](mailto:gkihara@uct.com) (650-279-0103 cell) (650.326.0929 Fax)  
**Referees "Name & Signature"** required in the assigned space on the bottom of this form.

**NOTE:**  
**A \$ 100.00 late fee will be charged to any organization not reporting scores by Monday, 9:00 pm.**  
**A \$ 10.00 fee will be charged to any organization whose scorekeeper fails to record the game score and individual high scorers on this form.**

**Each Team Pays for one referee** (If there is only one referee, please pay 1-1/2 times the regular fee)  
 Fee Schedule: All Divisions D, C and B are to **pay referees \$25.00** (if only **one referee, \$18.75 per team**)

The two teams playing the **LAST GAME** are to help put away the chairs and bleachers.

If there are any problems with the gym, janitors, referees, player sportsmanship, etc., please make note in the **REMARKS SECTION**, please include a contact name and phone number.

GAME #1				
Division	WINNING TEAM	Points	LOSING TEAM	Points
Full Name High Scorer:			Full Name High Scorer:	

GAME #2				
Division	WINNING TEAM	Points	LOSING TEAM	Points
Full Name High Scorer:			Full Name High Scorer:	

GAME #3				
Division	WINNING TEAM	Points	LOSING TEAM	Points
Full Name High Scorer:			Full Name High Scorer:	

GAME #4				
Division	WINNING TEAM	Points	LOSING TEAM	Points
Full Name High Scorer:			Full Name High Scorer:	

<b>REFEREES:</b>	<b>Print Name</b>	<b>Signature</b>	<b>Time at the end of last game:</b>
#1			
#2			

**Remarks:**