

GOALBALL Shot Record Sheet

Date	Time	No.	Pool	Male / Female	Venue
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Team A _____

Team B _____

REGULAR TIME - 1st half

Team (Left): _____

Team (Right): _____

REGULAR TIME - 2nd half

Team (Left): _____

Team (Right): _____

OVERTIME - 1st half

Team (Left): _____

Team (Right): _____

OVERTIME - 2nd half

Team (Left): _____

Team (Right): _____

Shot Recorder _____ Signature _____