

This form must be used for all award requests.



## Awards Request Form

Midam Hockey District: \_\_\_\_\_ Association Name: \_\_\_\_\_ )

Team Level/Classification: \_\_\_\_\_  
(i.e. 14U-Scholastic, JV, Varsity .)

**Zero Award:** For a goalkeeper **playing a complete game** without allowing a goal.

**Hat Trick Award:** For a player scoring three goals in one game.

**Playmaker Award:** For a player registering three assists in one game.

**Player awards are distributed under the following conditions:**

1. The recipient is a registered and rostered player.
2. The game was in league competition (not scrimmage or exhibition).
3. The game was officiated by registered USA Hockey referees and they have signed the score sheet.
4. Eligible player categories: All players 14U-Scholastic JV, Varsity.
5. **A readable, unaltered copy of the score sheet with the players listed is required with the application.**
6. **Limit of ONE of each award per player per season - i.e. one Hat Trick, one Playmaker and one Zero**
7. **Please batch your requests and send them in 1 time per season – not every time an individual has earned a patch.**

	Players Name	Opponent	Game Date	Game Score	Zero Award	Hat Trick	Play-maker
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

Please allow 10 to 14 days for processing.  
**We do not mail patches to individual players.**

Email Requests to:  
**Michelle.Miller@usahockey.org**

**Coach/Manager - this is where the awards will be mailed**  
**Phone Number:** \_\_\_\_\_  
**Name:** \_\_\_\_\_  
**Street:** \_\_\_\_\_  
**City, State, Zip Code** \_\_\_\_\_  
**Email:** \_\_\_\_\_