

Illinois High School Association 2715 McGraw Dr., Bloomington, IL 61704

Phone: 309-663-6377 Fax: 309-663-7479

Girls Soccer Up-to-Date Statistics

(Submit through Super-Sectional Tournament if you are a state qualifier)

The fields in this form will accept a cursor and can be filled out prior to printing.

Coach: Please fill out this form as thoroughly as possible and fax it to the IHSA Office at 309-663-7479 by 10:00 a.m. Wednesday, May 28, 2014 for Class 1A and Wednesday, June 4, 2014 for Class 2A & 3A. If your school does not keep statistics in a given category, please indicate so on the form.

School Name			C	lass 🔘 1A	○ 2A	○3A	
Head Coach							
List numericall	y from smallest number to large	st number. Please	use the same	listing as on t	he Roster pag	ge of the Tear	n Data.
		No. of	.	6 1			
PLAYERS (First and Last Name)		Games Played	Shots Attempted	Goals Scored	Assists		
Your Team Totals							
		No. of		Per			
GOALKEEPERS (Firs	st and Last Name)	Games Played	Goals Allowed	Game Average	Saves	Penal Blocked	lty Kicks Allowed