***\*\* Game day checklist is to be submitted to the arena attendant on the day of the event.***

|  |  |  |  |
| --- | --- | --- | --- |
| **TEAM NAME:** |  | | |
| **GAME DATE:** |  | | |
| **ESSENTIAL GAME DAY VOLUNTEERS**  Between 7 – 10 Individuals | | **NAME** | **CONTACT PHONE NUMBER** |
| Camera Operator | |  |  |
| Press Box:  Hockey TV Tech Support (1)  Broadcast personnel (2)  Music (1) | |  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Scorekeeper | |  |  |
| Timekeeper | |  |  |
| Shotclock | |  |  |
|  | |  |  |
| **TO BE COMPLETED BY STAFF** | | | |
| Facility Staff # 1 | |  |  |
| Facility Staff #2 | |  |  |

*\*Essential game day staff must not come into contact any time with the hockey group of 50 during the event or during access and egress.*

**HOCKEY GROUP FOR GAME DAY**

(Maximum of 50)

|  |  |
| --- | --- |
|  | **Size of the Group** |
| Home Team (players/ coaches/trainer) |  |
| Visiting Team (players/ coaches/trainer) |  |
| PA announcer  Name:    Phone No.: | 1 |
| Stats Keeper  Name:  Phone Number: | 1 |
| COVID Safety Ambassadors  Name:  Phone No.:  Name:  Phone No.: | 2 |
| 3 Officials (including referees)  Name:  Phone No.:  Name:  Phone No.:  Name:  Phone No.: | 3 |

\* The hockey user group must provide a variance request for these individuals and provide a safety plan for these individuals as part of the user groups safety plan.