# Soccer Team BSAT (Qualifying Score)
## Summary Worksheet

**Special Olympics Washington**

(Use **Soccer Skills Assessment for Individuals** form to determine scores for this worksheet)

Delegation: _____

Team Name: _____

Team Gender: _____

Age Group: _____

Total Team BSAT Rating:

(Add all Individual Overall Scores and divide by # of players)
Insert your average into the above box **AND** onto your FINAL
REGISTRATION FORM -- SEE NOTE BELOW!

Top 5 Players:

(Add top 5 scores and divide by 5)

Bottom Players:

(Add bottom scores and divide by number of players)

We recommend you list player's in order from highest to lowest rating:

| Player Name | Jersey # | A or UP | Game Awareness | Dribbling | Passing | Shooting | Defense | Total | GK Score | Overall Total |
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**IMPORTANT:** This worksheet will assist you in determining your team's BSAT (Qualifying Score). **Place your team's BSAT Rating Score onto the FINAL REGISTRATION FORM** in the designated column <u>and</u> upload BOTH forms into our **REGISTRATION PORTAL!**