

# McDonald's Skills Zone

## Score Sheet

Name:											Age:
CHALLENGE	My Attempts										
	1	2	3	4	5	6	7	8	9	10	<b>BEST</b>
<b>PASSING</b> [points]											
											Level:
<b>DRIBBLING</b> [seconds]											
											Level:
<b>TURNING</b> [seconds]											
											Level:
<b>SHOOTING</b> [points]											
											Level:
<b>BALL CONTROL</b> [points]											
											Level:
<b>OVERALL LEVEL ACHIEVED</b> (BRONZE, SILVER, GOLD)											
Coach or Parent signature: .....											
I confirm that ..... has reached this level of the McDonald's Skills Zone Challenge.											