

# GAVEL GAMES SCORE CARD

TEAM NAME: \_\_\_\_\_

Junior     Intermediate     Senior

Team members name/CLUB

Age

Office (in presentation)

Alternate (name):

ORAL PRESENTATION	EXCELLENT	GOOD	NEEDS WORK	COMMENTS
A. Overall Presentation				
a. Pronunciation, Articulation & Volume ----- b. Attitude, Naturalness & Ease of Presentation ----- c. Appearance of Members & Presentation area				
B. President's use of gavel				
C. Call to Order				
D. Reading of Minutes				
E. Communications				
F. Treasurer's Report				
G. Committee Reports				
H. Unfinished or New Business (rating determined by parliamentary procedure)				
I. Announcements				
J. Adjournment				

Judges Initials \_\_\_\_\_

Final Rating: Purple \_\_\_\_\_

Blue \_\_\_\_\_

Red \_\_\_\_\_

White \_\_\_\_\_