



SCORESHEET

TEAM NAME: _____ Score: _____

OPPONENTS NAME: _____ Score: _____

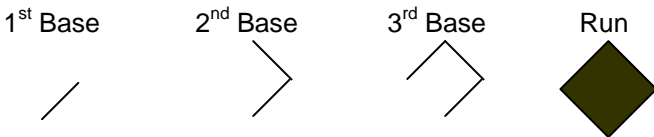
Sportsmanship Rating for Opponents: _____ (+1, 0, -1)

Date: _____

Field: _____

Kicking Order	1	2	3	4	5	6	7	8	9	
Runs Our Team Inning/Total	/	/	/	/	/	/	/	/	/	/
Runs Opponents Inning/Total	/	/	/	/	/	/	/	/	/	/

SO = Strike Out
 GO = Ground Out
 FO = Force Out/Fly Out



Scores must be reported by 5:00pm tomorrow:
<http://www.edmontonsportsclub.com/kickball/scores.shtml>