



8-Ball League Score Sheet



Visiting Team: _____

Home Team: _____

Date: _____

THIS SCORE SHEET AND MONEY CREDITED TO:



PRINT FULL NAMES BELOW

VISITING TEAM

HOME TEAM

AVG	FULL NAME	1	2	3	4	Total		AVG	FULL NAME	1	2	3	4	Total
A								1						
	B		B								B		B	
B								2						
	B		B								B		B	
C								3						
	B		B								B		B	
D								4						
	B		B								B		B	
E								5						
	B		B								B		B	
TEAM AVG	TOTAL							TEAM AVG	TOTAL					
	HANDICAP								HANDICAP					
	TOTAL INC. HANDICAP								TOTAL INC. HANDICAP					
	CIRCLE ROUNDS WON	W	W	W	W	W			CIRCLE ROUNDS WON	W	W	W	W	W
SUBTRACT LOWER TEAM AVERAGE FROM HIGHER TEAM AVERAGE TO GET HANDICAP								SUBTRACT LOWER TEAM AVERAGE FROM HIGHER TEAM AVERAGE TO GET HANDICAP						
HIGHER TEAM AVERAGE		ROUNDS WON				HIGHER TEAM AVERAGE		ROUNDS WON						
LOWER TEAM AVERAGE		ROUNDS LOST				LOWER TEAM AVERAGE		ROUNDS LOST						
HANDICAP PER ROUND		TOTAL POINTS				HANDICAP PER ROUND		TOTAL POINTS						

Captain's Signature _____

- | | | | |
|-------|-------|-------|-------|
| A - 1 | D - 1 | B - 1 | E - 1 |
| B - 2 | E - 2 | C - 2 | A - 2 |
| C - 3 | A - 3 | D - 3 | B - 3 |
| D - 4 | B - 4 | E - 4 | C - 4 |
| E - 5 | C - 5 | A - 5 | D - 5 |

BREAK & RUN	X

THE TEAM CAPTAIN IS RESPONSIBLE FOR THE DELIVERY OF THE SCORE SHEET AND MONEY TO ONE OF THE DROP OFF POINTS BY 12:00 NOON OF THE DAY FOLLOWING THE MATCH OR THERE WILL BE A \$5.00 PENALTY. THERE WILL ALSO BE A \$5.00 PENALTY FOR NOT 'PRINTING' NAMES IN THE SPACE PROVIDED.

ROSTER CHANGES

NAME OF TEAM: _____

NEW PLAYER: _____

PLAYER DROPPED: _____

NAME OF TEAM: _____

NEW PLAYER: _____

PLAYER DROPPED: _____