

tape here please (postal machines don't like staples)

tape here please (no staples)

FROM: _____

PLACE
STAMP
HERE

"C" League Match reporting form

Doug Matthews
"C" League Coordinator
10076 Persimmon Hill Ct.
Jacksonville, FL 32256-3526

Fold here please

Match # _____ Date Played _____ Check: Regular Match _____ or Raindate _____.
Draw circle around names of winners below:

Court	Position	HOME:	VISITOR:	SET	SCORES (Home team first)	
Number	Number	Print Home Team name in box above	Print Visiting Team name in box above	First	Second	Third
<input type="checkbox"/>	1	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	2	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	3	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	4	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	5	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	6	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	7	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

New Home Team Members

New Visiting Team Members

Number of matches won by:

Home:

Visitor:

We certify that 1) the score is correct and that 2) no player listed has played more than three (3) higher level matches, that 3) no player is ranked higher than 3.5, or 4) is a sub from a higher level team:

Signature of Home Team Captain

Signature of Visiting Team Captain

Please fold under here so this end of paper is inside form when folded in thirds