'24-'25

STARK COUNTY
High School Bowling Conference

Respect The Game

Center: _____

Day: _____ **Circle One** **Varsity** **JV**

Date: _____ **Circle One** **Boys** **Girls**

Home Team:

Individual Game Format

Number	Name	Game #1	Game #2	Subtotals
	Subtotal of Individual Games			

CIRCLE ALL COMPOSITE GAMES & PUT SCORE WHERE IN THE SPOT OF THE BOWLER WHO STARTED THE GAME. USE SAME FORMAT ONLINE.

GAME 1 +/0

GAME 2 +/0

Away Team:

Individual Game Format

Number	Name	Game #1	Game #2	Subtotals
	Subtotal of Individual Games			

Baker Rotation

	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th		
Game 1 score											Game 1 Score	Ind. Games + Game 1 total
Game 2 score											Game 2 Score	Ind. Games + Game 2 total
Game 3 score											Game 3 Score	Ind. Games + Game 3 total
Game 4 score											Game 3 Score	Ind. Games + Game 4 total

BAKER 1 +/0

BAKER 2 +/0

BAKER 3 +/0

BAKER 4 +/0

Baker Rotation

	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th		
Game 1 score											Game 1 Score	Ind. Games + Game 1 total
Game 2 score											Game 2 Score	Ind. Games + Game 2 total
Game 3 score											Game 3 Score	Ind. Games + Game 3 total
Game 3 score											Game 3 Score	Ind. Games + Game 3 total

Ind Game Subtotal _____ +Bakers Subtotal _____ =Match Total _____

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Visiting Coach's Signature: _____

Home Coach's Signature _____

*The Head Coach is the Match official. The Head Coaches must sign for the sheets to be official. Once submitted there will be no changes so please confirm the numbers are correct. Use only **black ink**. Scores must be submitted to the Commissioner within 1 hour of competition. Send all recaps to stark.hs.bowling@gmail.com from a smart phone or tablet.*