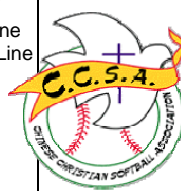


Name: _____

Card #: _____ Team: _____

Pre-Game	Game	Post-Game
<input type="checkbox"/> Opening Prayer <input type="checkbox"/> Weather <input type="checkbox"/> Conditions / Hazards <input type="checkbox"/> Dimensions (20', 30', 60') <input type="checkbox"/> Lines: Fair/Foul, Home Plate, Commitment, Safe, Pitchers <input type="checkbox"/> Equipment: Bases/spikes, Game Ball <input type="checkbox"/> Equip Pt? <input type="checkbox"/> 15 min Grace <input type="checkbox"/> M:F ratio <input type="checkbox"/> Uniforms <input type="checkbox"/> Ground Rules <input type="checkbox"/> Jewelry <input type="checkbox"/> Bats cleared <input type="checkbox"/>	<input type="checkbox"/> Calls and signals <input type="checkbox"/> Mercy Rule <input type="checkbox"/> Thrown Bat <input type="checkbox"/> Language <input type="checkbox"/> Thrown Objects <input type="checkbox"/> Infield Fly <input type="checkbox"/> Score / Time check (1hr30) <input type="checkbox"/> Interference / Obstruction <input type="checkbox"/> Injury / Substitution <input type="checkbox"/> Fan <input type="checkbox"/> Interference <input type="checkbox"/> Fielder's / Player's line <input type="checkbox"/> Pitcher's Line <input type="checkbox"/> Leadoffs <input type="checkbox"/> M:F ratio <input type="checkbox"/>	<input type="checkbox"/> Devotional attendance <input type="checkbox"/> Sign completed score sheets <input type="checkbox"/> Dispose of garbage <input type="checkbox"/> Report game score 416-293-0949 <input type="checkbox"/>



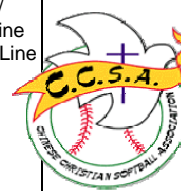
Incidents: _____

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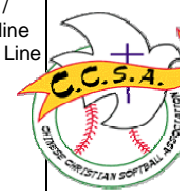
Incidents: _____

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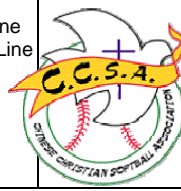
Incidents: _____

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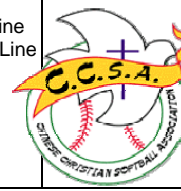
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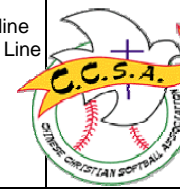
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Incidents: _____

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