

# ROCKHAMPTON 8 BALL ASSOCIATION Inc

## Weekly Score Sheet

To be placed in the Association's security box at either the Post Office Hotel or Allenstown Hotel by 6pm on the Thursday latest or incur penalties.

Registrar: Angela Gill 0405 115 375

Secretary: Paul Philips Ph 0422 271 237

Home Team: \_\_\_\_\_

Away Team: \_\_\_\_\_

Grade: \_\_\_\_\_

Date: \_\_\_\_\_

### Doubles

Break	Points	v	Points	Break
<input type="checkbox"/> 1	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 2	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 3	_____	v	_____	<input type="checkbox"/>

### Singles

<input type="checkbox"/> 1	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 2	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 3	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 4	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 5	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 6	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 7	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 8	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 9	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 10	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 11	_____	v	_____	<input type="checkbox"/>
<input type="checkbox"/> 12	_____	v	_____	<input type="checkbox"/>

Total: \_\_\_\_\_

Total: \_\_\_\_\_

Captain's Name & Ph No.

Captain's Name & Ph No.

Signature

Signature

Playing fees of \$15.00 must accompany this score sheet or penalties will be incurred

New Registrations

De-registrations