

LITTLEHAMPTON GAZETTE BOWLS LEAGUE

GAZETTE BOWLS LEAGUE MATCH RESULT FORM

Please e-mail (preferably) the result to the League Secretary.

You may get an answer phone in which case **the names of all skips and the individual rink scores must be given** as well as the callers name and club.

Complete this form (please PRINT names) and send by FIRST CLASS post to the address below to ARRIVE WITHIN 48 HOURS or preferably e-mail to the above e-mail address.

LEAGUE DIVISION	DATE	HOME CLUB	AWAY CLUB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

RINK	1	2	3	4	SCORE
HOME RINK 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
HOME RINK 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
HOME RINK 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
HOME RINK 4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

HOME SHOTS	<input type="text"/>	HOME POINTS	<input type="text"/>
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RINK	1	2	3	4	SCORE
AWAY RINK 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
AWAY RINK 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
AWAY RINK 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
AWAY RINK 4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

AWAY SHOTS	<input type="text"/>	AWAY PONTTS	<input type="text"/>
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NAME	<input type="text"/>
ON BEHALF OF	<input type="text"/>

COMMENTS