



PREM	PROM	PREM RES	DIRECT	EXEC	CHAIR	COLTS	1ST	2ND	3RD	4TH				WOMEN
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MATCH DETAILS

CLUB SUBMITTING RESULT: _____

**** FAILURE TO SUBMIT BY DUE DATE & TIME = R200 FINE**

HOME TEAM: _____

AWAY TEAM: _____

DATE: _____

VENUE: _____

RESULT: _____

if rain delayed the start or 1st inn:	revised overs per team		
if rain interrupted 2nd inn:	revised overs		revised target
if game cancelled - was the taxi at the field	yes		no

******Refer to Playing regulations E16/F16 for calculations**

TEAM DETAILS & SCORES

TEAM A:										
ID card present	PLAYER DETAILS		Batting	Bowling				Fielding		
	First Name	Surname		Score	Overs	Maidens	Runs	Wickets	Catches	Stumping
TOTAL					WKTS			OVS		

TEAM B:										
ID card present	PLAYER DETAILS		Batting	Bowling				Fielding		
	First Name	Surname		Score	Overs	Maidens	Runs	Wickets	Catches	Stumping
TOTAL					WKTS			OVS		

Home Captain: _____ Name _____ Contact _____

Away Captain: _____ Name _____ Contact _____

Umpire 1: _____ Name _____ Contact _____

Scorer 1: _____ Name _____ Contact _____

Umpire 2: _____ Name _____ Contact _____

Scorer 2: _____ Name _____ Contact _____