

# SEISA SOFTBALL SCORE SHEET

Junior / Intermediate / Senior

Grade:

Date:

Start Time:

..... Vs .....

FIELDING			POS	UNI	PLAYERS	BAT	1	2	3	4	5	6	7	8	9	BATTING							
PO	A	E														AB	H	R	SAC	BB	RB1	SB	SO
						1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
						2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
						3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
						4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
						5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
						6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
						7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
						8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
						9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
TOTALS					INNINGS TOTAL	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
					PROGRESS TOTAL																		

PITCHERS	INN	H	SO	BB	WP	ER

PITCHERS	INN	H	SO	BB	WP	ER

SCORER	
UMPIRES	
UMPIRES SIG	

SIGNATURE	
SCHOOL	
SIGNATURE	
SCHOOL	

Results to be phoned (or SMS) to Luke Soulos (0417 512 174) on the day of competition and a copy of this result sheet faxed to (03) 9810 4190 on the following Monday.

**SEISA Game Checklist**

Observation Focus	Indicate whether the ground/venue is safe or potentially unsafe for play <b>(YES or NO)</b>	Is further testing needed to assess ground/venue as being safe for play? <b>(YES or NO)</b>	Is maintenance required before ground/venue can be rated as being safe for play <b>(YES or NO)</b>	
Grass Cover				
Surface evenness				
Ground hardness/ Shock absorbency				
Playing surface/ Grip or slip				
Physical hazards				
Change rooms & Toilets	Open and Accessible?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Clear from debris?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Weather conditions	Safe for game to commence?	YES <input type="checkbox"/> NO <input type="checkbox"/>		
<b>Fit/Not fit for Play Recommendation</b>	The venue/ground is currently <b>Fit for play /Not fit</b> for play (circle rating)			
<b>Signed Home Coach</b>	<b>Signed Away Coach</b>			