

# B FLIGHT



Please fax to: **6735-1381**

Match Date: \_\_\_\_\_ Location: \_\_\_\_\_ Match ID: \_\_\_\_\_

HOME TEAM NAME:			AWAY TEAM NAME:		
#	Player Name	Card No (last 4 digit)	#	Player Name	Card No (last 4 digit)
1			1		
2			2		
3			3		
4			4		
5			5		

Player No.	TOUCLIVE Rating		Legs Won	Part / Match Type (No rating limit. Handicap)	Player No.	TOUCLIVE Rating		Legs Won
	START	END				START	END	
				<b>1</b> DOUBLES 501-501-501				
				<b>2</b> DOUBLES 501-Crk-Choice				
				<b>3</b> DOUBLES Half-IT x 3				
				<b>4</b> DOUBLES ShootOut x 3				
				<b>5</b> DOUBLES 701-Crk-Choice				
<b>TOTAL MATCH WON:</b>				<b>Credit Per Team: 30 (\$15.00)</b>	<b>TOTAL MATCH WON:</b>			

### TouchLive Rating Check:

- >Player bust when the difference between Match End Rating & Match Start Rating is 0.36 & above.
- >When a winning team has a bust player, the Match won reversed and awarded to the opposing team.

Captain's Signature \_\_\_\_\_

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