



Please fax to: **6735-1381**Email: **league_sg@dartslive.cm**

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			
6			6			
7			7			
8			8			

Player No.	Game Stats	Legs Won	Part / Match Type / HCP X01 – OI/OO		Player No.	Game Stats	Legs Won
				SINGLES 301-301-301 SINGLES 501-501-501 DOUBLES 701-701-701			
			2	DOUBLES 501-CRI-501 DOUBLES			
			ယ	701-CRI-701 DOUBLES 501-CRI-Choice			
				DOUBLES 701-CRI-Choice			
				SINGLES 501-CRI-Choice			
			4	TRIOS 701-CRI-Choice			
тот	TOTAL MATCH WON:		No pl	ayer repeats within each part	тоти	AL MATCH WON:	

Japtain's Signature	
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Captain's	Signature	
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Please fax within 1 working day to : 6735-1381

Match Date:	Location:	Match ID:

Special Award DARTSLIVE CARD will be given to the Player with the highest no. of hits in each Division. i.e. by Division, not by Rating or Flight.

HOME TEAM NAME:						
	No. of Hits					
Player's Name	HAT TRICK	TON 80	3-A-BED	WHITE HORSE	3-IN- THE- BLACK	

AWAY TEAM NAME:						
	No. of Hits					
Player's Name	HAT TRICK	TON 80	3-A-BED	WHITE HORSE	3-IN- THE- BLACK	

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Home Captain's Signature	Away Captain's Signature
TOTAL Captain's Cignature	Away Captain's Cignature