



Please Email:

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TOTAL MATCH WON:

Match Date: Location: HOME TEAM NAME:					Match ID:								
						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 TOUCHLIVE Rating Leg		Legs	Part / Match Type			Player TOUCHLIVE Rati			ng	g Legs			
No.	START	END	Won	(No rating		limit.	Handicap)	No.	START	END)	Won	
				A			BLES						
				1 7		701-70	01-701						
				2			BLES						
					C	CRI-CRI-CRI							
				3 s		2		BLES					
						Shoot Out x 3							
				4			S FREEZE						

701-701-701

DOUBLES

701-CRI-Choice

>01 Games: Open In/Master Out

TOTAL MATCH WON:

>Freeze 01: Open In/Master Out; Bull 50/50

TouchLive Rating Check:

>Player bust when the difference between Match End Rating & Match Start Rating is 0.31 & above. >When a winning team has a bust player, the Match won reversed and awarded to the opposing team.

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Captain's Signature	Captain's Signature