



Round	Opponent's Number & Name	W	L	Your Score	Opponent's Score	Plus/Minus Pt. Spread	Opponent's Signature
1 1st 2nd	<input type="text"/>						
2 1st 2nd	<input type="text"/>				cumulative		
3 1st 2nd	<input type="text"/>				cumulative		
4 1st 2nd	<input type="text"/>				cumulative		
5 1st 2nd	<input type="text"/>				cumulative		
6 1st 2nd	<input type="text"/>				cumulative		
7 1st 2nd	<input type="text"/>				cumulative		
8 1st 2nd	<input type="text"/>				cumulative		
9 1st 2nd	<input type="text"/>				cumulative		
10 1st 2nd	<input type="text"/>				cumulative		
11 1st 2nd	<input type="text"/>				cumulative		
12 1st 2nd	<input type="text"/>				cumulative		

*This scorecard is provided solely for your convenience in keeping track of your record.
It is not an official document and should not be submitted to the Director for checking.*