

Little League of the Islips

Game Score Sheet

Your Division:

Your Team:

Today's Game Date:

Field Number:

Regularly Scheduled Game: Yes No

If this is a make-up game
Date of original game

HOME TEAM

VISITING TEAM

Team Name:

Team Name:

SCORE:

SCORE:

Innings Completed:

Opposing Manager signature:

<u>YOUR ROSTER</u> First <u>AND</u> Last Name	Innings Played	Pitch Count	Last Pitched	Not Present	Pool Player
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					

Based on today's game, select the two best players from the opposing team and one from your team

Home Team Player(s) Name	Uniform #	Away Team Player(s) Name	Uniform #