

RMDA HOME TEAM: \_\_\_\_\_ AWAY TEAM: \_\_\_\_\_ LOCATION: \_\_\_\_\_ DIVISION: B A AA MASTERS WEEK: \_\_\_\_\_

T E A M	RMDA NUMBER	PLAYER NAME  (First and Last)	TEAM (HOME CHALKS)		DOUBLES (AWAY CHALKS 1 - HOME CHALKS 2)				SINGLES (AWAY CHALKS 1/3 - HOME CHALKS 2/4)				
			LINE- UP	OUT	LINE- UP	OUT	OUT	OUT	LINE- UP	OUT	OUT	OUT	
				DARTS						DARTS	DARTS	DARTS	
H O M E													
CAPTAIN'S SIGNATURE: _____			TEAM WINS <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		DOUBLES WINS <input type="checkbox"/> <input type="checkbox"/>				SINGLES WINS <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				TOTAL POINTS WON: _____
A W A Y													
CAPTAIN'S SIGNATURE: _____			TEAM WINS <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		DOUBLES WINS <input type="checkbox"/> <input type="checkbox"/>				SINGLES WINS <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				TOTAL POINTS WON: _____

Exceptional Play: Below, RMDA # Full Name and Exceptional Play scored

RMDA Number	Name	Exceptional Play	RMDA Number	Name	Exceptional Play

Home team must email a picture of the scoresheet to [stats@rmda.org](mailto:stats@rmda.org) immediately following the match.