



Tiger Hills Minor Softball Official Game Report

Date: _____

Location: _____

Age Category: *(circle one)* U11 East U11 West U13 East U13 West U15 U17/U19

HOME TEAM

Home Score

Name of Pitcher	Jersey #	# of Innings

Coach/Mgr: _____

Signature:

VISITING TEAM

Visitor's Score

Name of Pitcher	Jersey #	# of Innings

Coach/Mgr: _____

Signature:

UMPIRE INFORMATION

Name: _____

Level: *(circle one)* 1 2 3 4 5

Signature:

Email or text of picture of this game report to the applicable registrar within 24 hours of the end of the game.

**EAST REGISTRAR- email to tigerhillsregistrar@gmail.com
WEST REGISTRAR - text to 204-526-5392**