

# USBC LEAGUE STANDING SHEET – 8 OR LESS TEAMS



LEAGUE NAME \_\_\_\_\_

LEAGUE PRESIDENT/OFFICIAL \_\_\_\_\_ TELEPHONE \_\_\_\_\_

LEAGUE SECRETARY \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ASSOCIATION \_\_\_\_\_ WEEK OF \_\_\_\_\_

TEAM STANDINGS	HANDICAP	WON	LOST	%	TOTAL PINS	AVERAGE
1						
2						
3						
4						
5						
6						
7						
8						

SCRATCH	TEAM	SCORE	MALE	SCORE	FEMALE	SCORE
1st High Game						
2nd High Game						
3rd High Game						
1st High Series						
2nd High Series						
3rd High Series						

  

HANDICAP	TEAM	SCORE	MALE	SCORE	FEMALE	SCORE
1st High Game						
2nd High Game						
3rd High Game						
1st High Series						
2nd High Series						
3rd High Series						

On \_\_\_\_\_ (Date) I verified the Prize Fund Account deposited at \_\_\_\_\_ and found it to be correct.

Signature of League President/Official \_\_\_\_\_

## INDIVIDUAL AVERAGES

NAME	TOTAL PINS	TOTAL GAMES	AVERAGE	NAME	TOTAL PINS	TOTAL GAMES	AVERAGE