

# Rapids Baseball Tournaments - Post Game Card

Both teams from each game must hand in this report.  
Please complete and verify the entire form before handing in.

Official Start Time: \_\_\_\_\_

Field (circle one): JV      Varsity

Age: \_\_\_\_\_

Date: \_\_\_\_\_

## Official Score

Visiting Team Name    Score

Signature -Visiting Team Head  
Coach

Home Team Name    Score

Signature - Home Team Head Coach

Umpire Evaluation:      Please circle your response (1 = poor / 3 = fair / 5 = excellent)

Home plate Umpire # \_\_\_\_\_      Attitude:      1    2    3    4    5

Knowledge:      1    2    3    4    5

Appearance:      1    2    3    4    5

Base Umpire # \_\_\_\_\_      Attitude:      1    2    3    4    5

Knowledge:      1    2    3    4    5

Appearance:      1    2    3    4    5

General Comments: