Connecticut Interscholastic Athletic Conference Pitch Count Certification Form

Date of Contest -	/	/	/

This form may be used by both teams during a game to help track pitches BUT must be signed and certifed byboth coaches on the home team form after every game at <u>ALL</u> levels of play.

Visiting Team Name -		Home Team Name -					
Visiting Team Pitcher	Inning	Pitches	Cum/Pitch	Home Team Pitcher	Inning	Pitches	Cum/Pitch
	-						

Your signature on this page certifies you are in agreement with the final tally of pitches thrown by all pitchers at this game.

Visitor Coach Name -	Home Coach Name-
Signature -	Signature -

CIAC Pitch Count Certification Form

Instructions

1.	Fill In date and	d Competing school	l names
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Connecting Interpholastic Athletic Conference Prich Count Cerus Cation Form	Date of Contest - 4 / 7 / 18		
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2. Log in the pitchers names, the inning they pitch and pitches thrown per inning for each pitcher

Visiting Team Name - North	eta HIGH	Setto	102	Home Team Name - Sou Tex	4.5		
Visiting Team Pitcher	aring	Pitches	Cum/Pitch	Home Team Pitcher	Inning	Pitches	Cum/Pitch
SMITH	1	35	35	WILLIAMS	1	25	25
SMITH	2	30	65	11	2	25	50
SMITH	3	15	80	11	3	25	75
JOHNSON (RELIEX)	3	30	30	()	4	25	100
JOHNSON	4	35	65	"	5	10	110
JOHABM	5	30	95	THOWAND	4	45	45
HAYES	6	20	20	J. HOWAND	7	15	60)
MAYES	7	20	40)				

3. Keep a cumulative count per pitcher. The cumulative number is the count that must be reported in the CIAC Website for each pitcher.

4. Both Coaches must sign the Home team Form.	

Your signature on this page certifies you are in agreement with the final tally of pitches thrown by all pitchers at this game.

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Home Coach	n Name-
	TORKE
Signature -	9an