

Coshocton High School Athletics

****NOTE TO COACHES: WE MUST HAVE THESE SHEETS IN ORDER TO POST RESULTS ON OUR WEB SITE. YOU ARE RESPONSIBLE TO PROMOTE YOUR PROGRAM. LET'S BE PROMPT!***

To all Athletic Coaches: THESE SHOULD BE TURNED IN TO THE OFFICE THE MORNING AFTER THE CONTEST. THANKS!

Sport: _____ **Level:** _____ **Coach:** _____

Date: _____

Score: We _____ **Them** _____

Opponent: _____

Location of Game: _____

Leading Scorer/Participant (US): _____

Leading Scorer/Participant (THEM): _____

Next Game/Match (Date, Time, Location):

Team's New Record: _____

Any Highlights from the Game (Limited to only Actual Highlights not the entire game):

Any other significant items of interest: