TOURNAMENT REPORT FORM

The Regional Commissioner likes to know how the tournament teams are conducting themselves. This form can be run on back of the roster form, which has the RC's address. ***Please return a copy of this form to the Regional Commissioner at the end of the tournament.***

Name of Tournament_____Date_____

Tournament Director_____Phone Number_____

Players, Coaches, & Spectators (Please check one):

☐ **Behavior was Normal or Typical----no problems reported.**

_____
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_____
_

☐ **Behavior was Poor ----My comments are as follows:**

_____
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_____
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_____
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☐ **Behavior was Exceptional----a Credit to your region----My comments are as follows:**

_____
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_____
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_____
_

Referee Team was (Please check one):

☐ **Qualified** ☐ **Not Qualified** ☐ **Not Applicable**