

NCISAA Pitch Count Tracking Form

Date of Contest: _____ Mon Tue Wed Thu Fri Sat

Home Team:	Inning	:1	2	3	4	5	6	7	8	9	10	Total Pitches Thrown Today	Exceeded 105 Pitches Due To Finishing At-Bat	Days Of Rest Required			
Pitcher 1																	
Pitcher 2																	
Pitcher 3																	
Pitcher 4																	
Pitcher 5																	
Pitcher 6																	
Pitcher 7																	
Away Team:	Inning	:1	2	3	4	5	6	7	8	9	10	Total Pitches Thrown Today	Exceeded 105 Pitches Due To Finishing At-Bat	Days Of Rest Required			
Pitcher 1																	
Pitcher 2																	
Pitcher 3																	
Pitcher 4																	
Pitcher 5																	
Pitcher 6																	
Pitcher 7																	

- This contest was started and completed on the same day
- This contest was suspended
- This contest was picked up at the point of interruption

Pitches Thrown	Days of Rest
1-30	0
31-45	1
46-60	2
61-75	3
76+	4

Home Team Head Coach Signature _____

Away Team Head Coach Signature _____

This form must be signed by both coaches prior to leaving the facility and kept on file throughout the season.