

Baseball Pitch-Count Form

Team: _____

Opposing Team: _____

Date of Contest: _____

Location: _____

KEY:

/ - Ball O - Foul Ball

X - Strike ■ - In Play

STARTING PITCHER #: NAME: TOTAL PITCHES TOTAL INNINGS _____ _____	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80
	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120

RELIEF PITCHER #: NAME: TOTAL PITCHES TOTAL INNINGS _____ _____	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80
	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120

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	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80
	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120

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	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120

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	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120

HOME COACH SIGNATURE: _____

VISITING COACH SIGNATURE: _____