

SportTech IQ Skill Challenge Report

Date: _____ Start Time: _____ End Time: _____ Location: _____

Field Condition (Artificial, Smooth, Rough) _____

Wind: (Calm, Up to 10 mph, Over 10 mph) _____

Weather: (Sunny, Rainy, Indoor) _____

Issues: _____

Suggestions: _____

Name: _____

Signature: _____