Grp No Time:	e:		Tuesday		Week:	
Name	Game 1	Game 2	Game 3	Total Points	Position	
Signed:		Signed:				
Grp No Time:		Day:	Tuesday		Week:	
Name	Game 1	Game 2	Game 3	Total Points	Position	
Signed:		Signed:				
Grp No Time:		Day:	Tuesday		Week:	
Name	Game 1	Game 2	Game 3	Total Points	Position	
Signed:		Signed:				