



Doubtful Bowling Form
CONFIDENTIAL

RETURN THIS COMPLETED FORM IN CONFIDENCE TO dbartlett@aucklandcricket.co.nz

Bowlers Name:	
Club:	
Match:	
Date:	
Umpire 1 (or COACH)	
Name	
Email	
Mobile	
Comments on the bowlers Action	
Umpire 2	
Name	
Email	
Mobile	
Comments on the bowlers Action	
COMBINED COMMENT FROM BOTH UMPIRES	
Describe Type of bowler	
Describe occasions when doubt occurs	
REPORT DATE	
SIGNATURES Umpire 1: (or COACH)	
SIGNATURES Umpire 2:	

Return to the Club Manager of Auckland Cricket – dbartlett@aucklandcricket.co.nz and copy the Umpires Administrator – dcowie@aucklandcricket.co.nz