



Softball Area (4-Team) Double Elimination Bracket

Must be received in the State Office by 10 am, April 24.

Site:

Class:

Director:

Area:

Cell Phone:

Email Address:

Winners' Bracket

#1

Date: G1
Time:
#4

#3

Date: G2
Time:
#2

Date:
Time: G4

Date: G6
Time:

Losers' Bracket

Loser 1
Date: G3
Time:
Loser 2

Date: G5
Time:
Loser 4

Date: G7
Time: **Winner**

Loser of 6 if 1st loss