

Rate my round



TITLE	FIRST NAME	LAST NAME	H'CAP	DATE
COURSE:		EVENT:		
COURSE PAR:	COURSE YARDAGE:	START TIME:	BALL USED:	
WEATHER CONDITIONS DURING MY ROUND?				
MY STATE OF HEALTH ON THE DAY WAS:			SCORE:	

Resources Used

STATS CARD <input type="checkbox"/>	COURSE PLANNER <input type="checkbox"/>	GPS SYSTEM <input type="checkbox"/>	PIN POSITIONS <input type="checkbox"/>	SCORE CARD <input type="checkbox"/>
OWN NOTES <input type="checkbox"/>	CARRIED CLUBS <input type="checkbox"/>	PULL TROLLEY <input type="checkbox"/>	ELECTRIC TROLLEY <input type="checkbox"/>	BUGGY <input type="checkbox"/>
CADDIE	MY RELATIONSHIP WITH CADDIE? <input type="checkbox"/> PARENT <input type="checkbox"/> PARTNER <input type="checkbox"/> RELATIVE <input type="checkbox"/> TEAM MEMBER <input type="checkbox"/> FRIEND <input type="checkbox"/> UNKNOWN			

How would I rate how successfully I executed the following parts of my game (1 = POOR 5 = EXCELLENT)	1	2	3	4	5
PREPARATION BEFORE THE DAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WARM UP ROUTINE BEFORE PLAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MIND SET BEFORE PLAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADAPTING TO DAYS WEATHER CONDITIONS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DRIVER - TO HIT THE FAIRWAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FAIRWAY WOODS/HYBRIDS - TO HIT TARGET	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LONG IRONS - ONTO GREEN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MEDIUM IRONS - ONTO GREEN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SHORT IRONS - ONTO GREEN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
APPROACH SHOTS 100YRDS AND IN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JUDGING PITCHING DISTANCES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHIPPING CLOSE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GREENSIDE BUNKER SHOTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LONG BUNKER SHOTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LOB SHOTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PLAYING FROM AWKWARD LIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LAG PUTTS (LONG PUTTS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SHORT PUTTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
READING GREENS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VISUALISING SHOTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MIND SET ON THE COURSE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STATE CONTROL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SELF TALK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SELF PRAISE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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STAYING IN THE PRESENT	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
CONSISTENT SHOT ROUTINE	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
APPROPRIATE INTAKE OF ENERGY GIVING FOODS 48-24 HOURS BEFORE PLAY	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
APPROPRIATE INTAKE OF LIQUIDS 48-24 HOURS BEFORE PLAY	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
EATING DURING THE ROUND	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
DRINKING DURING THE ROUND	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
ENERGY LEVELS AFTER 18 HOLES	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
MUSCULAR FLEXIBILITY DURING MY ROUND	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
GOOD RANGE OF JOINT MOVEMENT DURING MY ROUND	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
MAINTAINING BALANCE IN MY SWING DURING MY ROUND	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
MIND SET WALKING OFF THE 18TH GREEN	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
STICKING TO MY GAME PLAN?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

WHAT WAS THE STRONGEST PART OF MY GAME?

WHAT WAS THE WEAKEST PART OF MY GAME?

WHAT DO I NEED TO PRACTICE?

WHAT DID I LEARN ON THIS ROUND?

The three best shots of my round were:

SHOT 1

SHOT 2

SHOT 3