



Name \_\_\_\_\_ ID# \_\_\_\_\_ Team Name \_\_\_\_\_ Acct# \_\_\_\_\_ Game# \_\_\_\_\_

Your Name \_\_\_\_\_

**STANDARD**

Primary Weapon \_\_\_\_\_

Off-Hand Weapon or Shield \_\_\_\_\_

vs. Light ( 0 , ) Armor \_\_\_\_\_ and \_\_\_\_\_

vs. Medium ( , ) Armor \_\_\_\_\_ and \_\_\_\_\_

vs. Heavy ( , + ) Armor \_\_\_\_\_ and \_\_\_\_\_

Backup Weapons \_\_\_\_\_ and \_\_\_\_\_

Strategy

Minute	1st	2nd	3rd	4th	5th	6th on	Desp
Offensive Effort							
Activity Level							
Kill Desire							
Attack Location							
Protect Location							

Armor \_\_\_\_\_

Helm \_\_\_\_\_

Training \_\_\_\_\_

Wish \_\_\_\_\_  
to \_\_\_\_\_  
Fight \_\_\_\_\_

Challenge Strategy \_\_\_\_\_

if Challenged Strategy \_\_\_\_\_

Wish \_\_\_\_\_  
to \_\_\_\_\_  
Avoid \_\_\_\_\_

Offensive Tactic							
Defensive Tactic							



ID# \_\_\_\_\_

Game# \_\_\_\_\_

Your Name \_\_\_\_\_

**CHALLENGE**

Primary Weapon \_\_\_\_\_

Off-Hand Weapon or Shield \_\_\_\_\_

vs. Light ( 0 , ) Armor \_\_\_\_\_ and \_\_\_\_\_

vs. Medium ( , ) Armor \_\_\_\_\_ and \_\_\_\_\_

vs. Heavy ( , + ) Armor \_\_\_\_\_ and \_\_\_\_\_

Backup Weapons \_\_\_\_\_ and \_\_\_\_\_

Strategy

Minute	1st	2nd	3rd	4th	5th	6th on	Desp
Offensive Effort							
Activity Level							
Kill Desire							
Attack Location							
Protect Location							

Armor \_\_\_\_\_

Helm \_\_\_\_\_

Training \_\_\_\_\_

If this side is filled out, please check appropriate box(es) on the front side.

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Offensive Tactic							
Defensive Tactic							

