Team Age Group Division

Home Team Goals

Away Team Goals

Pitch Name

All Players Played (in Shirt order/Number)

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| --- | --- | --- | --- | --- |
| Shirt No. | First Name | Surname | Goals Scored | Cautions Y/R |
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Goals scored by players marked X. (if more than 1 give number)

Name of Referee Marks Out of 100

Name of Main Opposing Manager/Coach Marks Out of 100

Opposition Team Sheet Available Y/N Opposition Squad List Available Y/N

ID Check against Squad List Carried Out Y/N

Managers Signature Date

Please post this sheet and opponents players list to your league secretary immediately after the match.