T C S South Devon Football League _____ Season

DATE...../...../20.....DIVISION.....CUP.....Ground.....

(Enter as appropriate)

.....Versus.....KICK OFF.....

☐ *FULL TIME/AET* ☐ **PENS shoot out only**

RESULT & TEAM SHEET

☐ *FULL TIME/AET* ☐ **PENS shoot out only**

Please Complete in INK & CLEAR CAPITAL LETTERS

Starting line-up **HOME TEAM**

	Surname	Forename	Cards Y/R	Goals
GK				

The SDFL takes Falsifying a team sheet very seriously — own goals

Starting line-up **AWAY TEAM**

	Surname	Forename	Cards Y/R	Goals
GK				

Please think twice whilst completing. — own goals

Surname	Forename	Cards Y/R	Goals

Surname	Forename	Cards Y/R	Goals

CLUB ASS. REFEREE.....

CLUB ASS. REFEREE.....

I confirm that the information entered above in respect of my team is true and correct.

PLEASE ONLY SIGN BELOW AFTER COMPLETION OF THE MATCH

SIGNED by	SIGNED by
Please Print Name Clearly	Please Print Name Clearly

It is the Clubs responsibility to enter all details above this line, not the Referee's

REFEREE SECTION

I confirm that the information above this section regarding Cautions and Substitutes are correct

I Have Issued

☐ Yellow Cards

☐ Red Cards

Club Causing late start _____ (Mark Home or Away) Minutes _____Late

Please Print Name Clearly _____

Signed **Referee** _____

My Match Expenses

Match Fee £___.__

Travel Ex £___.__

Total £___.__