

In accordance with League Rule 11(A) The completed match sheet is to be sent or delivered to:
The Match Secretary: Mr Adrian Flynn, 3 Garlands Croft, Keresley End, Coventry, CV7 8RE

DATE: _____ AGE GROUP: _____ DIVISION: _____ CUP ROUND: _____

MATCH PLAYED AT: _____

HOME TEAM:	FINAL SCORE	H	A
AWAY TEAM:			

SCORERS	HOME TEAM Players Names (In Full)		AWAY TEAM Players Names (In Full)	SCORERS
		1		
		2		
		3		
		4		
		5		
		6		
		7		
		8		
		9		
		10		
		11		

SUBSTITUTES
Please put an X in the box between the names & numbers of any substitute that played in the match

		12		
		13		
		14		
		15		
		16		

IMPORTANT: To be completed and signed by both Teams Officials
(any discrepancies with the following statements should be noted overleaf)

I, the undersigned, as an Authorised Official of my Team, confirm that I have read and understood the following statements and that the contents of this Match Sheet are a true and accurate record of this Match:-

- a) I confirm that my Team's Players named on this Match Sheet are registered under League Rule 8 Qualification of Players.
- b) I am satisfied that the opposition Players named on this Match Sheet are those shown on our opponents Players' ID cards.
- c) I acknowledge that in accordance with Rule 10(G)(iv) the Match Sheet must be completed and submitted to the referee not later than ten minutes before start of the match.
- d) If this Match is a Cup Tie, it is the Teams' responsibility to ensure that all players playing in this Match are eligible to do so under Knock-Out Cup Competition Rules (I) (J) & (K) and as such are not 'Cup Tied'.

Home Official signature _____ Away Official Signature _____

Referee's Use Only:	Was the match confirmed as per League Rules..... YES / NO
	Kick-Off Time _____ Reason If Late Kick-off: _____
Comments _____	
Referee's Name (please print) _____ B.C.F.A. No. _____ Signature _____	

PLEASE NOTE: Referees should not be made aware of the assessment marks awarded by either team

Assessment of Referee

<u>Home Team Mark</u> Our Club Awards an Overall Mark out		Out of 100
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Home Team Signature

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Assessment of Referee

<u>Away Team Mark</u> Our Club Awards an Overall Mark out		Out of 100
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Away Team Signature

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Teams awarding marks of 50 or less must detail in writing to Referee's Appointment Secretary their reasons for the low assessment within 7 days of the fixture, as required under League Rule 13 I (i).

TO BE COMPLETED BY THE AWAY TEAM OFFICIAL

If match was NOT confirmed as per league rules, please give details below: