



Halton & District Junior Football League

Respect



Date:	Age Group:	League / Cup (Cup Name and round)
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Team Name:	Match Venue:
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Home Team Name:	Score	Away Team Name:	Score

No:	Player's Name (BLOCK CAPITALS ONLY)	Player's Signature
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
14		
15		
16		
17		
18		

Manager's Name	Fairplay Score - Mark		Match Postponed: Y / N Reason:
	Opposing Team (0-50)	Spectators (0-50)	
Manager's Signature			

FOR OFFICIAL USE ONLY	Date Team Sheet Posted:	Date Team Sheet Received:
	To Be Fined: Y / N	Reason for Fine:
	Date Fine Issued & To Whom:	

REPORT ON MATCH OFFICIAL

Referee's Name	(Marks out of 100)
Date of Match:	Team Name & Age Group:
Result: Home Team Name & Score -	-
Away Team Name & Score -	-
Referee's Signature:	Actual Kick off Time: Fee Paid: £

This form must be returned within 72 hours of the kick off time to the appropriate Team Sheet Co-ordinator: Mini Soccer - Jane White, 25 Barncroft, Norton Cross, Runcorn, WA7 6RJ. 11 a side : Jason Bate, 59 Crofton Road, Runcorn, Cheshire.

FOR OFFICIAL USE ONLY

Checked by Management Committee only:	Signature:	Date:
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