

FOOTBALL SOUTH COAST MEN'S PREMIERSHIP TRIAL MATCH TEAM SHEET

HOME TEAM: _____

AWAY TEAM: _____

DATE: _____ GRADE: _____

VENUE: _____

#	FFA Number	Players Name	YC/RC	Goals
Substitutions				
FINAL SCORE				
Manager/Secretary				

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Substitutions				
FINAL SCORE				
Manager/Secretary				

Managers are to sign the team sheet at the conclusion of the match after validating the match records are correct.

HOME TEAM OFFICIALS	
1	
2	
3	

AWAY TEAM OFFICIALS	
1	
2	
3	

PLAYERS STOOD DOWN	
FFA #	
FFA #	
FFA #	

PLAYERS STOOD DOWN	
FFA #	
FFA #	
FFA #	

REFEREE (Name): _____

REFEREE (Signature): _____

ASSISTANT REFEREE 1: _____

ASSISTANT REFEREE 2: _____

Team sheets for all sanctioned trial matches must be emailed to bobbym@footballsouthcoast.com inside 48 hours post-match.