MACFOOTZLTS02







Cross if Red Cards were issued:	
Cross if Yellow Cards were issued:	
Cross if NO Duty Officer present:	

Signature Box for disputes:

ZONE LEAGUE OFFICIAL TEAM SHEET Z F League 00 Prem Res COVID Referee: _____ Comp: Connolly Park Ground: Assistant Referees: Round: Scheduled Date: 7/11/2020 Date: ____ /____/___ Signature of Match Referee: Time: 1:00:00 PM Home Team: Hamilton Azzurri JSC Visiting Team: Mayfield United SFC REF B M Given Name Surname G.S. Y Y R B = Borrowed Player M = Multi Registered Player) Goals RESULT: Home Team______ RESULT: Visiting Team______) Goals Players Serving Suspension INTERCHANGE or SUBSTITUTE PLAYERS **Home Team Officials** Given Name Surname Y Y R COACH MANAGER **TEAM OFFICIAL TEAM OFFICIAL** I Certify that the Player's names appearing on this sheet are Registered Members of the Club and that the recorded match result is correct. Official—Home Team Official—Visiting Team Name:___ Signature:_____ Signature: Signature Box for disputes:

Visiting Team: Mayfield United SFC

No.	Given Name	Surname	REF	В	М	Team	G.S.	Υ	Υ	R		
											B = Borrowed Player	
											M = Multi Registered Pla	ayer
											Players Serving Suspension	
		INTERCHANGE or SUBST	TUTE	PLAY	'ERS							
											Visiting Team Officials Gi	iven Name
											COACH	
											MANAGER	
											TEAM OFFICIAL	
											TEAM OFFICIAL	
		<u> </u>	ľ	NOTE	: The		N	1acqı	uarie	Foot	led or delivered to:	

Lakelands 2282

Surname

Y Y R

To be received no later than 72 hours after the completion of the FIXTURE.

Referees Remarks:		