White- LEAGUE COPY Blue- CLUB COPY Yellow- OPPONENTS COPY

Lancashire & Cheshire
Amateur Football League Team Sheet

Team Sheet for ..... FC

Date ..... Actual kick-off time .....

Reason for late kick-off .....

Division ..... **/Cup** ..... (delete as necessary

Home Club				Goals
Away Club				Goals
Team Colours	Shirts	Shorts	Socks	Goalkeeper Jersey

Shirt No. (Please Insert)	Captain: Surname (Block Capitals)	First Name (Block Capitals)	Starter	**Sanction** SB: Sin Bin C: Caution SO: Sent Off M: Misc	Goals Scored
				Own goals scored by opponents	

To be completed by the Referee Safety Checks

- First aid kit ☐
- Touchline clear of obstacles ☐
- Corner posts 5ft min ☐
- Corner flags ☐
- Goal nets secured ☐
- Goal posts safe ☐
- Adequate markings ☐
- 3 match balls min ☐
- Captains Respect arm bands ☐
- Pre match Respect procedure carried out by referee ☐
- Confirmation by phone of the fixture minimum 3 days with all relevant Information ☐
- Enclosed pitch ☐

	Referee Fee.....
Name	
Signature	

	Manager
Name	
Signature	

Referee's Report .....

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Completed form to be posted by the referee to the league no later than two days from the date of the match