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| **Date** | **Cup Name** | **Sat / Sun** | **Ground** |
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| **Home Team** | **Away Team** |
| **Shirt No.** | **First Initial** | **Surname** | **Goals** | **Shirt No.** | **First Initial** | **Surname** | **Goals** |
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| **Home Team Subs (tick if used)** | **Away Team Subs (tick if used)** |
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| **Half-Time Score** | **Full Time Score** | **Score after extra-time** | **Score on Penalties** |
|  |  |  |  |
| **Referee Name** | **Referee mark out of 100** |
|  |  |
| **Name of Home Team Manager / Coach** | **Name of Away Team Manager /Coach** |
|  |  |
| **Home Team Manager / Coach Signature** | **Away Team Manager /Coach Signature** |
|  |  |

**This Team sheet has been completed by the home team / away team (delete as appropriate)**

**Please send this within 72 hours of the fixture to** **cupcompetitions@nottinghamshirefa.com**