



Worcestershire Football Association Limited - Match Report Form

Unit 6 Brindley Court, Gresley Road, Worcester. WR4 9FD
 Tel: 01905 827137 E-mail: info@worcestershirefa.com

BOTH CLUBS MUST COMPLETE THIS FORM – HOME CLUB TO RETURN FORM TO WFA

PLEASE COMPLETE IN BLOCK LETTERS IN INK OR INDELIBLE PENCIL

Name of Cup Competition _____

Date: _____ Played at: _____

DETAILS

| HOME TEAM NAME = | | | |
|------------------|---------|-----------|-------|
| Shirt No | Surname | Forenames | Goals |
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DETAILS

| AWAY TEAM NAME = | | | |
|------------------|---------|-----------|-------|
| Shirt No | Surname | Forenames | Goals |
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NOMINATED SUBSTITUTES

| Shirt No | Surname | Forenames | Goals |
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CIRCLE THE SHIRT NUMBER OF ANY SUBS USED

NOMINATED SUBSTITUTES

| Shirt No | Surname | Forenames | Goals |
|----------|---------|-----------|-------|
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CIRCLE THE SHIRT NUMBER OF ANY SUBS USED

| TO BE COMPLETED BY REFEREE | | | |
|---------------------------------|------|-----------------|---------------------|
| | HOME | AWAY | |
| H/T SCORE | | | NETS |
| FULL TIME SCORE | | | CORNER FLAGS |
| PENALTY KICKS AFTER NORMAL TIME | | | ASSISTANT REFEREE/S |
| | | | SHIRTS NUMBERED |
| OFFICIAL TIME OF KICK OFF | | | |
| ACTUAL TIME OF KICK OFF | | | |
| REASON FOR LATE KICK OFF | | | |
| CAUTION - HOME | | CAUTION - AWAY | |
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| SENT OFF - HOME | | SENT OFF - AWAY | |
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Signed Home Team Secretary

.....Visiting Team Secretary

Referee (Print)

Referee (Signature)

This form is to be completed by **BOTH TEAMS** and received by the Company Secretary from the **HOME TEAM** within two clear days of the match (Sunday not included). **BOTH TEAMS** are responsible for completing and forwarding a separate **Assessment of Referee Form** to be received by the Company Secretary within two clear days of the match (Sunday not included).