SHEET DISTRIBUTION
1 x The FA
1 x Opponents
1 x Retained

MATCH ARRANGEMENT FORM



PLEASE COMPLETE IN BLOCK LETTERS
(Please write in ink)

FA SUNDAY CUP / FA WOMEN'S CUP

CLUB:	ı		ı	
DATE OF MATCH:	: ROUND:		MATCH No:	
	EI	RST MATCH	4	
IATCH (Home Team)		v (Away tear	n)	
ICK-OFF TIME				
ENUE				
OLOURS AGREED	SHIRT	SHORTS	SOCKS	GK
HOME TEAM				
AWAY TEAM				
VISITING TEAMS THERE MUST NO	TO TRAIN ON T	HE PITCH TW	L PITCHES MUST A O HOURS PRIOR TO E PITCH PRIOR TO	O TIES AND
			THE LOCATION OF	
	MUST NOT CLA		FORM TO VISITIN BLACK OUTFIT W	
IF A CLASH OF	COLOURS OCCU	RS, THE VISIT	ING TEAM MUST C	CHANGE.
HE ABOVE DETAILS MUS ECEIVED WITHIN SEVEN D			TIFIED TO THE FOOTBALL HOME TEAM.	ASSOCIATION TO
ate	Secretary			Home Tear