P:\Enabler 3 Marketing and Communications\Marketing Materials\Logos\Social Media\Twitter_logo_bird_transparent_png.pngP:\Enabler 3 Marketing and Communications\Marketing Materials\Logos\Social Media\Twitter_logo_bird_transparent_png.pngMATCH REPORT FORM

**YOUTH GIRLS U17/18 CUP**

Please complete in BLOCK LETTERS in black font or black ink

**Your Club:**

Icon

Description automatically generated with low confidence

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date:** |  | **Round:** |  | **Venue:** | | **Penalties**  **(If Result)** |
| **Home Team:** |  | | | **Full Time Score** |  |  |
| **Away Team:** |  | | | **Full Time Score** |  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Team Details** | | | | |  |  |  |
| Shirt No. | | Surname | | Forename | Reg JPL Player | Goals | Minute Scored |
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| Own Goals | | | | |  |  |  |
| Nominated Substitutes (These are NOT Repeat Substitutions) | | | | |  |  |  |
| Shirt No | Surname | | Forename | | Reg JPL Player | Goals | Used Y / N |
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| **Referee Name:** | **Marks: /100** |

**If the marks you have awarded are less than 50, we require detailed, constructive comments in the section below.**

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| --- | --- |
| **Signed:** |  |
| **Position:** |  | **Club:** |

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**Please return this completed form to kevin.mighall2@cheshirefa.com** **within 72 hours of the game being played.**

**CheshireFA.com/cups** @CCFACountyCups

**Please return this form completed to:** [**Ray.Pullen@CheshireFA.com**](mailto:Ray.Pullen@CheshireFA.com) **within 72 hours of the game being played.**

**Please return this form completed to:** [**Ray.Pullen@CheshireFA.com**](mailto:Ray.Pullen@CheshireFA.com) **within 72 hours of the game being played.**