To submit by the **HOME TEAM** within 3 working days of the fixture to rachel.carter@northumberlandfa.com

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| Match Details  |
| Cup Name |   | Match Number  |  | Match Date |  |
| **Home Team** |  | **Away Team** |  |

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| Team Sheet  |
| Shirt No | Home | Away | Shirt No |
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| Result |  |  | Result |

**Please indicate with a tick any player who appears as a substitute**

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| Home Signature |  | Away Signature |  |
| **Referee Name** |  | **Home Ref Mark** | **/100**  | **Away Ref Mark** | **/100** |

Ref Marking Guide: 100 Faultless, 90 Excellent, 80 Very Good, 70 Good, 60 Average, 40 Poor, 30 Very Poor, Under 30 unacceptable