



# OFA County Cup Team Sheet & Result Card

Team Name:

|             |  |            |  |
|-------------|--|------------|--|
| Competition |  | Age Group  |  |
| Home Club   |  | Match No   |  |
| Away Club   |  | Match Date |  |

| No | PLAYER'S FULL NAME | GOALS SCORED |  |  | HALF TIME SCORE         |
|----|--------------------|--------------|--|--|-------------------------|
|    |                    |              |  |  | HOME:                   |
|    |                    |              |  |  | AWAY:                   |
|    |                    |              |  |  | FULL TIME SCORE         |
|    |                    |              |  |  | HOME:                   |
|    |                    |              |  |  | AWAY:                   |
|    |                    |              |  |  | AET or PENALTY KICKS    |
|    |                    |              |  |  | HOME:                   |
|    |                    |              |  |  | AWAY:                   |
|    |                    |              |  |  | REFEREE NAME            |
|    |                    |              |  |  |                         |
|    |                    |              |  |  | REFEREE MARK            |
|    | Sub:               |              |  |  | /100                    |
|    | Sub:               |              |  |  | OWN GOALS               |
|    | Sub:               |              |  |  |                         |
|    | Sub:               |              |  |  | CLUB OFFICIAL SIGNATURE |
|    | Sub:               |              |  |  |                         |

|  |                                     |
|--|-------------------------------------|
|  | KIT COLOURS<br>(Shirt/Shorts/Socks) |
|  |                                     |

|  |  |
|--|--|
|  | GOALKEEPER COLOURS<br>(Shirt/Shorts/Socks) |
|  |  |

|  |   |
|--|---|
|  | TEAM BENCH OFFICIALS<br>(PLEASE STATE ROLE) |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |

## OFA Guidance Notes

1. All team sheets must be submitted at least 15 minutes before the scheduled kick off time.
  2. Please state full name, including forename and surname, of each individual.
  3. Shirt Numbers must be clearly marked on team sheet.
  4. Clearly mark your captain with ©.
  5. Please indicate what colour shirt your goalkeeper is to wear.
  6. All Team Bench Officials must be listed on this team sheet.
  7. Copy to Match Officials & Opponents.
  8. Copy to be retained.
  9. Please retain your copy for at least 28 days.
- Email completed form to - [Cups@OxfordshireFA.com](mailto:Cups@OxfordshireFA.com) within 2 working days of the Fixture. (Typed, Scanned or Photo will be accepted)