

Home Team:....

Date of Match/..../...../

THE SOUTHEND SUNDAY FOOTBALL LEAGUE

TEAM SHEET

TEAM DETAILS TO BE COMPLETED PRE-MATCH. IN BLOCK CAPITALS;

Away Team:

TOP COPY – To the Referee MIDDLE COPY – To your opposition. BOTTOM COPY – To be kept by club for your own records

The following players are registered players of FC						
N O	FIRSTNAME	SURNAME	POSTCODE	Date of Birth	SIGNATURE	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
SUBSTITUTES						
12						
13						
14						
15						
16						
If a players' eligibility is in question they will be required to sign in the box next to their details, to confirm that they played for the above mentioned team. This form will then need to be submitted along with your protest and protest fee in accordance with the						
league rules within 7 days to The League Secretary.						
	Referee:					
Team Colours: Goalkeeper shirt colour:						
PLAYER SIGNED ON THE DAY						
FULL NAME : DATE OF BIRTH:						
SIGNATURE: POST CODE:						
OPPOSITION CLUB OFFICIAL NAME:						
DATE AND TIME.						