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| **TEAM SHEET – Central Venue** |
| **Date** | **KO Time** | **Venue** |
| **/ /** | : |  |
| **Age Group** | **League Divisions Name** |
|  |  |
| **League Game** |  | **Cup** |  | **Shield** |  | **Trophy** |  |

**ANY MANAGERS, PLAYERS OR SPECTATORS SHOWING ANY SYMPTOMS OF COVID-19 MUST NOT ATTEND ANY CENTRAL VENUE**

|  |  |  |
| --- | --- | --- |
| **Team Name** | **Score** | **Opposition Team Name** |
|  |  |  |  |
|  | **Players Full Name** | **Goals** | **Parents Name** | **Contact Number** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |   |  |
| **5** |  |  |  |  |
| **6** |  |  |  |  |
| **7** |  |  |  |  |
| **8** |  |  |  |  |
| **9** |  |  |  |  |
| **10** |  |  |  |  |
| **Tick the appropriate box to confirm player squad lists have been exchanged** |
| **Managers Signature** |  | **Tick****Box** |  |
| **Managers Name** |  |

Using **CAPITAL LETTERS** it is your responsibility to correctly complete the team sheet

|  |
| --- |
| **REFEREE NAME** |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  **Age** **Group** |  **Fixture** **Secretary**  | **Contact** **Number** | **Team Sheet****Email Address** | **Playing** **Time** | **Ball** **Size** |
| **U7s Boys** | **Gary Trewick** | **07904 423501** | **u7teamsheet@nfleague.co.uk** | **2 x 20 Minute Halves** | **Size 3** |
| **U8s Boys** | **Gary Trewick** | **07904 423501** | **u8teamsheet@nfleague.co.uk** | **2 x 20 Minute Halves** | **Size 3** |
| **U8s Girls** | **Gary Trewick** | **07904 423501** | **u8girlsteamsheet@nfleague.co.uk** | **2 x 20 Minute Halves** | **Size 3** |
| **U9s Girls** | **Gary Trewick** | **07904 423501** | **u9girlsteamsheet@nfleague.co.uk** | **2 x 20 Minute Halves** | **Size 3** |
| **U10s Girls** | **Gary Trewick** | **07904 423501** | **u10girlsteamsheet@nfleague.co.uk** | **2 x 25 Minute Halves** | **Size 3** |
| **U11s Girls** | **Gary Trewick** | **07904 423501** | **u11girlsteamsheet@nfleague.co.uk** | **2 x 25 Minute Halves** | **Size 4** |

**Please return FULLY completed by MONDAY to the correct Email address ABOVE**

**This is due to the form being used as a track and trace system for the Central Venues**

**TRACK & TRACE**

**Each team is to complete their own team sheet.**

**Next to the players name you must provide the name and contact number of the parent/guardian who has accompanied the player to the venue.**