



# St. Albert Men's Soccer League OFFICIAL GAME SHEET



**HOME TEAM IS RESPONSIBLE TO ENSURE THAT BOTH GAME SHEETS ARE DROPPED OFF TO 61 RIEL DRIVE, OR EMAILED TO [margarets@stalbertsoccer.com](mailto:margarets@stalbertsoccer.com) BY THE NEXT BUSINESS DAY.**

**Game Sheet of (Team Name):** \_\_\_\_\_

**Jersey Colour:** \_\_\_\_\_

**Game Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_ **Field:** \_\_\_\_\_

HOME TEAM \_\_\_\_\_  SCORE

AWAY TEAM \_\_\_\_\_  SCORE

<b>Team Officials</b>	1. 2. 3. 4.	<b>Card #</b>	<b>Signature (max 4):</b> <small>(Sign prior to start of game)</small>
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Jersey #	Player Card #	Goals	Yellow Card	Red Card
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
	<b>Trialist Player</b>			
	<b>Trialist Player</b>			
	<b>Trialist Player</b>			
	<b>Trialist Player</b>			
	<b>Trialist Player</b>			

Trialist Players MUST have a separate registration form and their PIC with them to show to the referee

Game sheet must be complete before the start of the game. Player cards (PICs) must be shown to the referees. No additions after the second half.

**Referee is required to send any red card reports to the SASA Office within 24 hours of the game.**

**Referee PRINT:** \_\_\_\_\_ **Associate Refs PRINT:** \_\_\_\_\_