Unionville Milliken Soccer Club
2009 Challenge Cup Tournament
June 6 & 7, 2009

Game Sheet

DIVISION: U- ☐ MALE ☐ FEMALE **DATE:** ☐ SAT JUN 6 ☐ SUN JUN 7 **GAME #** ☐ QF ☐ SF ☐ F

	TEAM NAME (check off your team)	✓	SCORE
HOME:		☐	
AWAY:		☐	

Shirt #	Player's Name	OSA Number	Goals	Cautions (Y)	Ejections (R)

Please fill in your team roster prior to your game then fill in your team name in the "Home" or "Away" space and check off the checkbox on the right of the line with your team name and score. When entering the roster for your team, please be aware that only 14 players are allowed to bench on teams aged U10 and below.

AT START OF GAME, PRESENT THIS SHEET TO REFEREE, AT END OF GAME, RETURN TO FIELD CONVENOR

	NAME	OSA #	SIGNATURE
COACH:			
ASSISTANT:			
MANAGER:			
REFEREE:			
ASST. REF.:			
ASST. REF.:			

PLEASE USE REVERSE SIDE FOR GAME COMMENTS, EXPLANATIONS AND INCIDENT REPORTS.