## **Norfolk County FA**



**Team Sheet** (to be completed in BLOCK CAPITALS in black ink)

(H):	V		(A)
Round: Date:	Venue:		
Colours - Shirts:	Shorts:	Socks:	
Goalkeeper Colours:			
Result at end of normal time: (H)	(A) Pens: (H)	(A)	

Competition: \_\_\_\_\_

Shir	t No.	Surname	Forename	Goals
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
Non	ninate	d substitutes	Own Goals	
Shirt No. Used (delete as appropriate)		↓Used (delete as appropriate)		Goals
12		Y/N		
14		Y/N		
15		Y/N		
16		Y/N		
17		Y/N		
Tech	nnical	Area		

Important Notes

Team sheets must be completed fully with names and numbers on the sheet corresponding to numbers worn by named players.

Team Sheets must be exchanged with opponents and the referee at least 20 minutes (30 minutes for Senior Cup) before the advertised kick-off time.

This form must be completed and returned within 24 hours of the match taking place, either scanned or photographed by email to CountyCups@NorfolkFA.com

Y @NorfolkCountyFA	f NorfolkCountyFA	NorfolkCountyFA	NorfolkFA.com
Signed:		/ 30 - Overall co	ntrol
Club:		/ 30 - Judgeme	nt of major decisions
Referee:	Mark: .	/ 40 - Overall de	ecision making

Results must be submitted by text message within one hour of completion of the match. Failure to text the result and complete and return this form will result in a fine of up to £30 in each instance.