GRANVILLE DISTRICT SOCCER FOOTBALL ASSOCIATION INC

GDSFA Inc.
2/7 Bream Road,
Ettalong Beach NSW 2257
Phone: (02) 4342 7672
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ABN 87 722 086 347

TEAM SHEET

_____ Vs _____
HOME TEAM VISITING TEAM

DIVISION: _____ REFEREE: _____
PRINT NAME

GRADE: _____ ASSIST REF: _____
PRINT NAME

GROUND: _____ ASSIST REF: _____
PRINT NAME

DATE: _____

SHIRT NO.	Offence Code	HOME TEAM (PRINT NAME)	ID NO.	Sub No.	SHIRT NO.	Offence Code	VISITING TEAM (PRINT NAME)	ID NO.	Sub No.
SUBSTITUTES					SUBSTITUTES				
Manager					Manager				

HOME TEAM: 1/2 Time _____ Score VISITING TEAM: 1/2 Time _____ Score

Full Time _____ Score Full Time _____ Score

Manager's are to sign the Team Sheet at the **END** of the match signifying that all details are correct. Please check scores as no appeals once Team Sheet is received by GDSFA Inc.

REFEREE'S SIGNATURE: _____ NOTE: Replacements to be recorded.

White Copy: GDSFA Blue Copy: GDSRA Yellow Copy: HOME TEAM Green Copy: AWAY TEAM