



NATIONAL CONFERENCE LEAGUE OFFICIAL TEAM SHEET

HOME TEAM:					VENUE:		AWAY TEAM:				
Player's Full Name	T	G	FG	PTS		Player's Full Name	T	G	FG	PTS	
					1						
					2						
					3						
					4						
					5						
					6						
					7						
					8						
					9						
					10						
					11						
					12						
					13						
					14 SUB						
					15 SUB						
					16 SUB						
					17 SUB						
					TEAM TOTALS						
					Head Coach						
					Assistant Coach						
					Physio						
					Water Carrier						
					Water Carrier						
					Game Day Manager						
					Match 1st Aider						
					Covid Officer						
Game Date		Kick-Off Time		Half-Time Score	Full-Time Score	Home Team, Man of the Match		Away Team, Man of the Match			
				-	-						
Disciplinary Report		Player (Name & Number)			Time	Team	Nature of Offence				
Sin Bin	Dismissal										
Sin Bin	Dismissal										
Sin Bin	Dismissal										
Sin Bin	Dismissal										
Sin Bin	Dismissal										
Sin Bin	Dismissal										
Serious Injury Report:		Player (Name & Number)			Team	Nature of Injury					
Team Sheet Authorisation		Name (Print)			Signature		Position/Role at Club				
Home Team Representative:											
Away Team Representative:											
Referee:											
Touch Judge 1:											
Touch Judge 2											

Time (Mins)	Home Scorers (Details)				Away Scorers (Details)				Progressive Score
	T	G	FG		T	G	FG		
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Total				Total				FINAL SCORE	-

GAME BREAKER:	

Both pages to be completed no later than **TWO HOURS** after the game is finished and emailed/faxed to:

- ALAN SMITH E: competitions@rfl.uk.com F:
- TREVOR HUNT: E: Trevorhunt123@hotmail.com F: 01942 275512
- TONY JOHNSON E: tonyjohnson17@hotmail.com
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