

ABANDONED GAME REPORT

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| --- | --- |
| Home Team  | Away Team  |
|   |   |
| Date of Match:  | Venue:  |
| Time of Abandonment:  | Score at Abandonment:  |
| Weather:  | Pitch Condition:  |

Please put the names of any persons causing the game to be abandoned:

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| --- | --- | --- | --- |
| Full Name | Team | Number | Player/ Coach / Spectator |
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#### Please place a (X) in the box which you consider to be most appropriate

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Number of players involved  | Less than 2 | 3 or 4 | 5 or 6 | 7 or more  |
| Number of club officials involved | None | 1 | 2 | 3 or more  |
| Number of spectators involved | None  | 1 | 2 | 3 or more |

If a Brawl took place please attach an official Brawl report.

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| --- | --- | --- | --- |
| Was the match recorded? |  YES / NO | If Yes, by which club |  |
| Was there a breach of Child Protection legislation? |  YES / NO  |

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| A full description of the abandoned game is as follows (use additional sheets if required) |
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| Referee’s distance from incident:  | Possibility of mistaken identity of any persons named in this report:  |
| Referee’s Name and Society: | Referee’s Signature: |

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| Had any player involved in the game being abandoned, been cautioned earlier in the game: YES/NO If yes please supply details.Name of player. No Team |

This document is to be completed and e-mailed within 72 hours to: Simon Adamson - discipline@yjyarl.co.uk and copied into Donna Simons secretary@yjyarl.co.uk. Where possible clubs being reported should also receive a copy within 72 hours of the game taking place. **If the abandonment is due to injury you do not need to send to discipline.**