

# THE SURRIDGE GLOUCESTERSHIRE COUNTY FOOTBALL LEAGUE



## MATCH RESULT FORM



Season .....

**COMPETITION (Please place X in the appropriate Competition Box below)**

Premier Division	
League Cup	

HOME CLUB.....

GOALS.....

AWAY CLUB.....

GOALS.....

MATCH DATE.....

PLAYED.....WON.....DRAWN.....LOST...FOR.....AGAINST.....POINTS.....

	REG No.	FORNAME	SURNAME	GOALS SCORER	SEASONS TOTAL	CAUTIONED OR DISMISSED MARK C / D
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						

**SUBSTITUTES WHO PLAYED**

12						
14						
15						

(Please indicate if substitutes are used):      **Mark**      Fee Paid      Mileage Exp.      Total      Signed

REFEREE.....

ASSISTANT..... N/A

ASSISTANT..... N/A

PROGRAMME .....

ATTENDANCE.....

SPORTSMANSHIP CUP.      We award our opponents.....marks (To be awarded on a scale 1 – 5)

SIGNED.....SECRETARY DATE.....

FOOTBALL CLUB.....

**TO BE POSTED TO THE LEAGUE REGISTRATION SECRETARY WITHIN 4 DAYS OF THE MATCH BEING PLAYED. FAILURE TO DO SO A FINE OF £10-00 WILL BE IMPOSED**