

Gwent County Football Association



CUP COMPETITIONS MATCH REPORT SHEET

Competitions Secretary: G. PHILLIPS, 12 Strathview, Pentwynmawr, Newbridge, Gwent. NP11 4HT
Tel: 01495 247 394 / Mobile 7779 247 958 / email: g.phillips8@sky.com

Competition:

Name of Club Submitting Report:

Home Club:

Visiting Club:

Date of Match:

Kick Off Time:

Score Home Club:

Visiting Club

Referee:

Marks (1-10)

Referees Fee:

Referees Expenses:

TEAM

Shirt No.	Surname (Block Capitals)	First Name (Block Capitals)	Comet No.	C = Caution SO = Sent Off	Goals Scored	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
NOMINATED SUBSTITUTES					Number of Player Replaced	Goals Scored
12.						
13/17						
14.						
15.						
16.						

Name of Club Member
in Charge of Team:

**THIS FORM TO BE COMPLETED AND RETURNED TO THE COMPETITIONS SECRETARY
AT THE ABOVE ADDRESS WITHIN TWO DAYS OF THE MATCH BEING PLAYED.**