Guelph Soccer Indoor House League Game Sheet

Division (ie GU12) _____ Home/Away Field _____

Team # (ie GU12-1) _____ **Game Date** _____ **Game Time** _____

Opponent # _____

GAME SHEET MUST BE FILED IN & GIVEN TO THE REFEREE PRIOR TO THE GAME

				Cards	
SHIRT #	PLAYER NAME	GOALS	BLUE	YELLOW	RED

COACH Name (PRINT&SIGNATURE) _____

FINAL SCORE [--] FOR _____
(put winning team code number here)

REFEREE Name (PRINT&SIGNATURE) _____