MATCH SHEET
(COMPLETE ALL SECTIONS & PLEASE PRINT CLEARLY)

DIVISION   1A 1B 2A 2B 3A 3B 3C 4 5 6 7 CUP
(PLEASE CIRCLE)

DATE	/	/ **2023**	KICK-OFF TIME		AM / PM	GROUND	

	SCORE				
HOME TEAM IS RESPONSIBLE TO PROVIDE FULL-TIME MATCH RESULT VIA UPLOAD TO CSL WEBSITE by 6:00PM FINES WILL APPLY FOR NON-COMPLIANCE	HALF TIME	FULL TIME	EXTRA TIME HALF TIME	EXTRA TIME FULL TIME	PENALTIES
HOME TEAM					
AWAY TEAM					

PLAYERS OF (CLUB NAME)

MYFOOTBALL REGISTRATION NO.	SHIRT NO.	FSA PLAYER	FIRST NAME	SURNAME	STARTING	SUB	ON / OFF	GOALS	CAUTION/ SEND-OFF	BEST & FAIREST 3 / 2 / 1

GROUND STEWARD (Must be present All Divisions):		CAUTION/ SEND OFF		VISIBLE TO REFEREE	

TEAM COACH OR CLUB REPRESENTATIVE			**REFEREE**	
FULL NAME		CAUTION/ SEND OFF	FULL NAME	
SIGNATURE			SIGNATURE	

SEND OFFS (DETAILS IF REQUIRED)			**PLAYER INJURIES**		
SHIRT No.	CLUB	OFFENCE	SHIRT No.	CLUB	DESCRIPTION OF INJURY

REFEREE TO INCLUDE AN INCIDENT REPORT FOR ANY SERIOUS INCIDENT(S) AND SUCH A REPORT MUST BE LODGED TO FSA WITHIN 48 HOURS OF INCIDENT(S) VIA JOTFORM

WHEN FULLY COMPLETED: -   REFEREE TO FORWARD TO: SCAN/CLEARLY PHOTOGRAPH AND EMAIL TO: collegiatesoccerleague@gmail.com
Please name the email with the following convention: Div1A – TeamA vs TeamB
- HOME AND AWAY TEAMS TO EACH TAKE A PHOTO OF THE MATCH SHEET & UPLOAD TO CSL WEBSITE WHEN INPUTTING MATCH DATA.

Note: Only 17 players can be listed to play. Any additional names must be crossed out prior to kick-off.
Divisions 1A, 1B, 2A, 2B, 3A and Cup matches: 4 substitutions per team. Divisions 3B,3C,4,5,6,7: Interchange with 17 players maximum.