# Markham Soccer Club
## Game Sheet

**Field:** _____ **Referee:** _____

**Date:** _____ **Time:** _____ **Age Group:** _____

| HOME | | | | | | VISITORS | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **Sponsor:** | | | | | | **Sponsor:** | | | | | |
| **Colour:** | | **Team #** | | | | **Colour:** | | **Team #** | | | |
| **No.** | **Full Name** | **Abs** | **Y** | **R** | **Goals** | **No.** | **Full Name** | **Abs** | **Y** | **R** | **Goals** |
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| **CALLED UP PLAYERS** | | | | | | | | | | | |
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**SUBSTITUTIONS**

| Period | Player Numbers | | | | | Period | Player Numbers | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | 1 | | | | | |
| 2 | | | | | | 2 | | | | | |
| 3 | | | | | | 3 | | | | | |
| 4 | | | | | | 4 | | | | | |
| 5 | | | | | | 5 | | | | | |
| 6 | | | | | | 6 | | | | | |

**Coach's Signature:** _____ **FINAL SCORE** _____ **Coach's Signature:** _____

| | **Coaches' Names** | |
|---|---|---|

**DISCIPLINE - CARDS** Check appropriate column (Y for Yellow, R for Red) next to player no. & name above and provide details below.

| No. | Offense | No. | Offense |
|---|---|---|---|
| | | | |

**COMMENTS** (continue on reverse side):

**Attention Referees:** Please complete this game sheet and return to the MSC office at Mount Joy within 24 hours.