

This form to be completed and received by:
 Miss Brooke Haggerty
 Competitions Officer
 Hertfordshire Football Association Ltd
 County Ground
 Baldock Road,
 Letchworth
 Herts
 SG6 2EN
WITHIN TWO DAYS AFTER THE MATCH

Hertfordshire Football Association



MATCH REPORT FORM

PLEASE COMPLETE IN BLOCK CAPITALS
 (Write in Ink or Indelible Pencil)
 All sections of this form must be completed in FULL

| | | |
|--------|--------------|---------------|
| DATE: | COMPETITION: | MATCH NUMBER: |
| VENUE: | | |

| | | | |
|--------------------|-----------------------------|---------------------|----------------------|
| Home Club | Result: | Home Club | <input type="text"/> |
| Away Club | | Away Club | <input type="text"/> |
| Score at Half Time | <input type="text"/> | Score at 90 Minutes | <input type="text"/> |
| Extra Time Played | <input type="text"/> YES/NO | | |

If relevant, give details of kicks from the penalty mark:

Home Club Kicks Scored Away Clubs Kicks Scored

| | |
|---|---------------|
| Referee: | Mark (1-100): |
| <i>A Club awarding a Referee a mark of 61 or less must forward a covering letter giving a valid reason for such marking</i> Hertfordshire FA Competitions Rule No. 13 (H) | |

TEAM DETAILS

NOTE: ALL SECTIONS MUST BE COMPLETED IN FULL AND IN BLOCK CAPITALS SO IT IS CLEAR TO READ – FAILURE TO DO SO WILL RESULT IN YOUR CLUB BEING FINED

| No. | Date of Birth of Player | Surname | First Name (In Full) | Goals Scored | Red/Yellow Cards |
|------|-------------------------|---------|----------------------|--------------|------------------|
| GK 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |
| 11 | | | | | |

NOMINATED SUBSTITUTES

| No. | Date of Birth of Player | Surname | First Name (In Full) | Goals Scored | Red/Yellow Cards |
|-----|-------------------------|---------|----------------------|--------------|------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

USED SUBSTITUTES

| No. | Surname | First Name (In Full) | Goals Scored |
|-----|---------|----------------------|--------------|
| | | | |
| | | | |
| | | | |

| | |
|-------|----------------------|
| Name: | Secretary/Manager of |
|-------|----------------------|

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