

# MEMPHIS SHELBY SOCCER FEDERATION MATCH REPORT

**Team Manager Complete this Section (except Final Score):**

**(Provide Team Roster and Laminated Player cards to Referee)**

**Final Score**

**Home Team:** \_\_\_\_\_ **Coach Name:** \_\_\_\_\_

**Visiting Team:** \_\_\_\_\_ **Coach Name:** \_\_\_\_\_

(Circle Appropriate Information)

**Month:** February   March   April   May   June   August   September   October   November   December

**Day:** 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

**Field:** 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17    **Small Sided:** A B C D

**Scheduled time:** 6 pm 6:30 pm 7:00 pm 7:15 pm 7:30 pm 8:00 pm Other \_\_\_\_\_

Referee Fees: (each team pays)	<u>Age</u>	<u>Referee</u>	<u>Assistant Referee</u>
	U10	\$19	
	U11/12	\$22	
	U12	\$22	\$31
	U13/14	\$26	\$35
	HS (40 min half)	\$27.50	\$39
	HS (45 min half)	\$32.50	\$55

**Referee Complete this Section:**

Referee \_\_\_\_\_ AR1 \_\_\_\_\_ AR2 \_\_\_\_\_

**Players cautioned during the game (yellow card):**

Players' Name:	Team:	Type of Misconduct:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Players sent off the field (red card):**

Players' Name:	Team:	Type of Misconduct:
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Injuries during the game:**

Players' Name:	Team:	Type of Injury:
_____	_____	_____
_____	_____	_____

All yellow and red cards, injuries or unusual situation must be reported to Tennessee Soccer MSSF within 24 hours after completion of the game by the Referee. Send to Brady Robinson using SOTN report format at bn48@charter.net.

Place Match Report only in mailbox marked for MSSF at the MRSC lower fields.