SWANSEA SENIOR LEAGUE FOOTBALL LEAGUE U15/U16 U15/16
CUP COMPETITION MATCH REPORT SHEET

To be completed in **BLOCK capitals**

Cup ..... **Round** .....
Cup name and Round.

Played at:..... **on**.....

	Final Score	

1. .....

2. .....

3. .....

4. .....

5. .....

6. .....

7. .....

8. .....

9. .....

10. .....

11. .....

12. ..... ☐

14. ..... ☐

15. ..... ☐

16. ..... ☐

17. ..... ☐

Please tick the boxes above if that substitute plays.

Signed..... **in my capacity of** .....

for:.....**A.F.C.**

TO BE COMPLETED AND (AT LEAST 10 MINUTES PRIOR TO THE SCHEDULED K.O. TIME)
The Club Official must enter and fill in all the details including the **final score** and return fully completed to the

Hon General Secretary:-**Mr. J. Cornelius, 23 Highbury Close, Cwmbwrla, Swansea. SA5 8BJ.**
e-mail:connie9252@gmail.com