STATELINE LEAGUE GAME REPORT

This form must be completed by both teams and presented to the referee at the beginning of the game. (Adopted 3.7.2011)

Date of Game:	Site:	Game #
Time of Game:	Field:	
Age / Division:	Length of Game: 2 x	

HOME CLUB:	TEAM:	FINAL SCORE
Coach's Name:	Telephone:	
Manager's Name:	Telephone:	HOME TEAM

Home Team Caution & Send-off

Yellow	Red	Player #	Player Name	Infraction

VISITING CLUB:	TEAM:	FINAL SCORE
Coach's Name:	Telephone:	
Manager's Name:	Telephone:	VISITING TEAM

Visiting Team Caution & Send-off

Yellow	Red	Player #	Player Name	Infraction

TO BE COMPLETED BY REFEREE

OFFICIALS	TELEPHONE	EMAIL
CENTER:		
AR1:		
AR2:		

Referee Fee Paid at Field: YES NO

Field Conditions:

RULES OF COMPETITION

1) Game Ball	U8: Size 3, U9-U12: Size 4, U13/14: Size 5	
2) Offside	U8: No offside, U9-U14: Offside	
3) Length of Game	U8:	4 x 12 Minute Quarters
	U9/10:	2 x 25 Minute Halves
	U11/12:	2 x 30 Minute Halves
	U13/14:	2 x 35 Minute Halves
4) Number of Players	U8:	4 v 4 (No Keeper)
	U9/10:	5+GK (6 v 6)
	U11/12:	7+GK (8 v 8)
	U13/14:	10+GK (11 v 11)

MAIL THIS FORM WITHIN 48 HOURS TO:

Stateline Game Reports
PO Box 631
Delavan, WI 53115
Fax: 262-728-8131 Email: statelinesoccer@gmail.com

HOME TEAM:

Sportsmanship Grade (Check one for each)

	A	B	C	D	F
Coaches					
Players					
Spectators					

State Issued Coach Pass: YES NO

Coach's License: Y G E D C B A

Check Player Passes: YES NO

Equipment & Uniform Check: YES NO

VISITING TEAM:

Sportsmanship Grade (Check one for each)

	A	B	C	D	F
Coaches					
Players					
Spectators					

State Issued Coach Pass: YES NO

Coach's License: Y G E D C B A

Check Player Passes: YES NO

Equipment & Uniform Check: YES NO

USE BACK SIDE OF SHEET FOR COMMENTS