** EMSA PLAY OFF Game Sheet For:**

 **Date: Game #: Div.: Field: K.O.:**

**Home Team: Score: Away Team: Score:**

**Match Official Instructions**

Upon conclusion of the game, the Match Official will complete the game sheets and hand them to the EMSA Representative.

**To be completed by the referee:**

1. Referee Assistants names:
	1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

or club provided AR’s: \_\_\_

1. Game delay (if any) caused by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Protest lodged?:

\_\_\_YES \_\_\_ NO

If yes by whom:

4. Field conditions:

a) Markings: \_\_\_ POOR \_\_\_GOOD

b) Grass: \_\_\_ LONG \_\_\_ SHORT

5. Is referee attaching reports?

\_\_\_ YES \_\_\_NO

6. Were player cards checked?

\_\_\_ YES \_\_\_NO

7. Was a team official removed from this game?

\_\_\_YES \_\_\_NO

If yes, who (name & team):

8. Was a special incident report forwarded to EMSA?

\_\_\_ YES \_\_\_ NO

Your Name

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Your Signature

Your OS #

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| # | **Player's Name** | **OS #** | **DOB Y/M/D** | **G** | **Y** | **R** |
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I certify that all the above players are properly registered with the District Association

# Initial:

I certify I have checked the player cards of the opposing team initial:

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| --- | --- | --- | --- |
| **Position** | **Name** | **OS #** | **Signature** |

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Revised Nov 2017