The Veterans League - Match Card (2017/18)

Home Team: Away Team:

Home Team Score: ..... Away Team Score: .....

Fixture Date: Kick Off Time: ☐ AM ☐ PM

Reporting Club: Tick if Cup Game: ☐

Tick if Started	Tick if Substitute	Player ID's & names in **FULL,** including all substitutes	Goal(s)	Yellow Card(s)	Red Card
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☐	☐				

*Please report any incidents during the game including reasons for any late starts on the back of this form. For referee performance ratings of 50 or less, a referees ratings report **must** be submitted (the report and marking guidelines are available from the league web site at **ilfl.org**)*

Reporting Manager: ..... Signature: .....

Opposition Man of the Match (FULL Name): .....

Referee's Name: ..... Referee's Performance Rating (1 - 100): .....

WARNING: Incomplete, Inaccurate, Illegible or Late cards will result in an automatic penalty fine!

Results must be reported **on match day** by **text** to the automated ILFL Results Line on **07860 017 425**. Text ***help [your optional email address]*** to **07860 017 425** for detailed instructions on the format of the text message. Completed match cards must be returned by **email** only to **results@ilfl.org** and arrive by no later than 7:00pm **three** days after the match.

Failure to do either may result in automatic fines for each offence

Clear Left

Clear Right

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