PRE-MATCH TEAM SHEET

COMPLETE & HAND TO OPPONENTS/REFEREE 10 MINUTES BEFORE K.O.

Your Team	**F.C.**	**Opponents**	**F.C.**
Date of Match	/ / **20**	**Competition**	

Starting Eleven (use BLOCK CAPITALS and ink pen)

Shirt No	Forename	Surname	Matchday Signing?

Substitutes (use BLOCK CAPITALS and ink pen)

I confirm that this team sheet provides an accurate record of the players participating in this fixture

Print name		Sign	

Making matchday signings? Tick player above and collect opposition name and counter signatory below

Print name		Sign	

Pink copy to opponents	White copy to referee	Blue copy to be retained
All parties, please retain copy for at least 28 days in case of protest		