

BOLTON OVER 35s VETERANS FOOTBALL LEAGUE

CUP / DIV VENUE

DATE OF GAME LATE KICK OFF: YES / NO
RESPONSIBLE:- HOME / AWAY / BOTH

HOME TEAM

Score
[]

 AWAY TEAM

Score
[]

Goals	Home Team	Away Ream	Goals

[]

 REFEREE'S MARK 1 - 10

[]

[]

 SPORTSMANSHIP 1 - 10

[]

HOME SECRETARY
.....

AWAY SECRETARY
.....

REFEREE (NAME)

MATCH BALL YES / NO CORNER FLAGS YES / NO

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Please Note – Rule 23

Player names must be filled in before the match starts and the card completed with scores and scorers at the end of the game.

A photograph of the completed card must be sent by

WhatsApp  to the Registration Secretary

AAMAR AHMED 07976 365317

by 6.30pm (9.00pm for mid-week games) on the day of the match or a fine of £10 will be imposed.

The paper copy of the match card
must be handed in at the League Meeting.

Please use the space below to assist the Press Secretary
to produce the weekly report.

REPORT

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