

OFFICIAL LINEUP CARD

REGION	_ AGE GROUP	TEAM #	DATE
TEAM NAME		OPPOSING TEAM	
COACH'S NAME		_ ASST. COACH'S NAME	

All team players must be listed in order by Jersey #. If absent, indicate reason.

	in players must be listed in order b	Goals			"Qtrs." Not Played			
No.	PRINT PLAYERS NAME	Sco	ored	1	2	3	4	

Age Group	Each Half, not to exceed	Duration of the Game, not to exceed	Ball Size
U-19	45 Minutes	90 Minutes	
U-16	40 Minutes	80 Minutes	Size 5
U-14	35 Minutes	70 Minutes	
U-12	30 Minutes	60 Minutes	Size 4
U-10	25 Minutes	50 Minutes	Size 4
U-8	20 Minutes	40 Minutes	Size 3
U-6	20 Minutes (10 min recommended)	40 Minutes (20 min recommended)	SIZE 3

Reorder #CS004-7 REV 4/04

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All AYSO games shall be conducted in accordance with the current FIFA Laws of the Game and decisions of the International Board in effect at a date specified by the area director for his/her area (approximately the time of team formation for a given season), with the exceptions detailed in the AYSO National Rules and Regulations.

Referee Game Report

Home Team/C	Colors			Visiting Team/Colors
			avor Of	Final Score Winning Team
				rall Conduct & Sporting Behavior
F	xcellent	Normal	Poor	Additional comments:
Players:	xcellerit	Normal	-001	
Coaches:	_			
Spectators:	_	_		
•	_	_	J	Phone/amail:
Referee Name				Phone/email:
1st AR (Please				Phone/email:
2nd AR (Pleas	e Print):			Phone/email:
•		ed repo	rt ma	minary Incident Report y be required – Check with your local Administrator, ries / Additional Comments: Please include names and player numbers.
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Signatui	res only	v needed	if addit	ional information is included in the Preliminary Incident Report
Referee's S	Signatur	e:		
1st Assistan	ıt Refer	ee's Sign	ature:	
2 nd Assistar	nt Refer	ree's Sign	nature:	
Reorder #C	S004-7	7		REV 4/0
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for his/her area (approximately the time of team formation for a given season), with the exceptions detailed in the AYSO National Rules and Regulations.

Referee Game Report ___ Field _____

___ Visiting Team/Colors ____

Home Team/Colors ____

Halftime Score		In Favor Of		Final Score	Winning Team	
Overall Conduct & Sporting Behavior						
	Excellent	Normal	Poor	Additional comments:		
Players:						
Coaches:						
Spectators	: 🗅					
Referee Na	ame (Print):			Phone/	email:	
1st AR (Ple	ase Print):			Phone/	email:	
2nd AR (Ple	ase Print):			Phone/	email:	
-	ini y Action	T. Organic	sant inju	no / Additional Comments : 1 co.	e include names and player numbers.	

Signatures only needed if additional information is included in the Preliminary Incident Report

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1st Assistant Referee's Signature: _ 2nd Assistant Referee's Signature: __

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