HOW TO FILL OUT GAME CARDS

Game Card

NORTH REDONDO AYSO REGION 17 — EST 1971

DIVISION __12UG__ TEAM # __6__

TEAM NAME __Redondolona__

TEAM COLORS __Red__

HEAD COACH __Alex Morgan__

ASS'T COACH __Adam Odnoder__

ALL PLAYERS (EVEN IF ABSENT OR INJURED) **MUST** BE LISTED IN UNIFORM ORDER

No.	PRINT PLAYER'S FIRST & LAST NAMES	Half 1st	Half 2nd	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2	ALICE GALLERIA						
4	JANET ARTESIA						
5	HOLLY RIPLEY						
6	RACHEL VAIL						
7	ANNA INGLEWOOD						
8	MELISSA FELTON						
9	MADISON LINCOLN						
10	KATHY JEFFERSON						
11	LISA ADAMS						
12	JONI WASHINGTON						
13	CINDY LAWNDALE						
14	AMY ANDERSON						

GOALS SCORED / QUARTERS NOT PLAYED

Indicate G - Goalkeeper (10U only), X - Quarter that player sits out, L - Quarter that player was late, left the field early, or was unable to play due to injury

DATE __03/11/2023__ TIME __1:30 PM__ FIELD __Washington__

HALFTIME SCORE _____ IN FAVOR OF TEAM # _____

FINAL SCORE _____ WINNING TEAM # _____

REFEREES: Rate Sportsmanship and sign back of card   LOSING TEAM # _____

TEAM & COACH INFO:

1) Division: please include division number (ie, 10, 12, or 14) and also the gender (B for boys, G for girls)
2) Team #: please indicate your correct team number (this info should be on your roster or schedule)
3) Team Name / Colors: include your team's name & primary color of jersey
4) Head Coach & Assistant Coach: please include only the coaches that are certified to coach

PLAYER INFO:

1) Jersey #: Please list all players by **numerical jersey order** and **NOT** by name (alphabetical) order
2) If there are jersey numbers you don't have a player for, skip the number (for example, #3 in the example is skipped)
3) **ALL REGISTERED PLAYERS ON TEAM MUST BE LISTED, EVEN IF THEY ARE ABSENT OR INJURED** (note that every game card should be identical other than the date&time and possibly field)
4) Please print players's first **AND** last names

GOALS SCORED / QTRS NOT PLAYED:

1) Please do **NOT** mark up anything in this area, this will be filled out by the Referees

DATE / TIME / FIELD:

1) Please enter the date and time the game is scheduled to be played
2) Please enter the name of the field the game is scheduled to be played on