KIDSPORTS

Soccer Line-Up Card

slocum

Team _____ Coach _____

School _____ Date _____ Location _____

Boys _____ Girls _____ Grade _____ Division _____

SHIRT NO.	Position	Last Name	First	Goals Scored	Please check names of players who are in the line-up when each quarter begins. 1st	2nd	3rd	4th
	SUB							
	SUB							
	SUB							

NAME PLAYERS NOT PLAYING TODAY REASON

Start Time _____ End _____ Referee _____

Halftime Score _____ In Favor of _____

Final Score _____ Winning Team _____

NAME	#	TEAM	Y/R CARD	REASON
1.				
2.				
3.				

☐ Yes ☐ No Were there any incidents, problems, or disciplinary action taken?
Please use backside to report what happened.

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