



Text Team Names & Results by 7.00 pm to 022 498 2559

Canterbury Sunday Soccer League P O Box 5462 Papanui Christchurch 8542

Email card image within 3 days of games completion to admin@canterburysundaysoccer.co.nz

| # | PLAYERS FULL NAME | SUB INFO INFRINGMENT | USE BLOCK LETTERS |
|-----------|-------------------|-------------------------|-------------------------------|
| | | | Date: |
| | | | Club: Score: |
| | | | Opposition: Score: |
| | | | Competition: |
| | | | Venue: |
| | | | Home Club Referee: |
| | | | Signature: |
| | | | Opposition Club Referee: |
| | | | Signature: |
| # | SUBSTITUTES | | or Appointed Referee: |
| | | | Assistant 1: |
| | | | Assistant 2: |
| | | | Score Check: Card Check: |
| | | | Comments: |
| \bigcup | | | |
| Cap | otains No: | | Our seiting Contain Circustum |
| Signature | | | Opposition Captain Signature: |