

# RIVER CITY YOUTH SOCCER LEAGUE MATCH REPORT FORM

MATCH DATE: \_\_\_/\_\_\_/\_\_\_ TIME: \_\_\_\_\_ FIELD: \_\_\_\_\_

AGE GROUP: UNDER \_\_\_\_\_  BOYS  GIRLS

HOME TEAM: \_\_\_\_\_ CLUB: \_\_\_\_\_

VISITING TEAM: \_\_\_\_\_ CLUB: \_\_\_\_\_

FINAL SCORE: HOME \_\_\_\_\_ VISITORS \_\_\_\_\_

FIELD PROBLEMS: (circle) unavailable / delayed / missing flags / nets / poor lines / too wet / Other:  
**Send to club manager (home team)**

PROBLEMS WITH OTHER TEAMS: (circle) no show / late / too rough / rude coach / rude parents / bad language / Other: **Send to both club managers.**

PROBLEMS WITH REFEREES: (circle) Less than three / uniform / officiating / rules / control / too young / Other: **Send to League Referee Coordinator.**

OTHER PROBLEMS:

YOUR NAME: \_\_\_\_\_ (PRINT)

COACH  PARENT  REFEREE  OTHER

PHONE: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

RETURN OR FAX THIS TO APPROPRIATE PERSON AS LISTED ABOVE  
WITHIN 24 HOURS

MATCH REPORT FORMS MAY BE USED TO WRITE UP A  
COACH, REFEREE OR A SPECTATOR.