REFEREE'S GAME RECORD

CBYSA Soccer League

Game No. _____

Age: _____ Boys / Girls Date: _____ Time: _____ Field: _____

	Home Team				Away Team			
Name								
Color								
Captains	No.				No.			
Score	First Half		Second Half		First Half		Second Half	
	Overtime		Final Score		Overtime		Final score	
Cautions and Ejections	Min	C/E	No.	Reason	Min	C/E	No.	Reason

Playing Time

U - 6 10 min. quarters

U - 7/8 12 min. quarters

U - 9/10 25 min. halves

U - 11/12 30 min. halves

U - 13/14 35 min. halves

U - 15/16 40 min. halves

U - 17/19 45 min. halves

Kick-off by: Home/Away

N
W + E
S

Linesman_____ Fee _____

Linesman_____

Detach this part and retain if for your records Paid _____

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