

Team Sheet – RADCLIFFE DEAF FC

	Please Tick: 🗆 N 🗆 Chal	North League / lenge Cup / [-			Round:	
YOUR CLUB: HOME/AWAY (Circl	 No hearing aids or cochlear implants are to be worn in any competitions. If found to be wearing prohibited items during area of play - the match may be abandoned and 3-0 win awarded to the opponent team. Referee must be informed and recorded on referee sheet. The Team Sheet must be completed and handed in to the Referee no later than <u>15</u> <u>MINUTES</u> before kick-off. (Expect semi-finals and finals where this will be 30 minutes) For Cup: Roll on/off substitution are not permitted. Using up to five (5) out of seven (7) 							
YOUR TEAM COLOUR KITS:	 For Cept. Kon only on substitution are not permitted. Using up to live (5) but of seven (7) substitutions. For League: Roll on/off substitution are permitted, involving five (5) substitutions, with exception of the League Final. Both teams <u>must</u> text (send text message) Head of Competitions on 07858 132447, stating the final result no later than 8pm; Failure will result in a fine of £5. Match sheet <u>should be</u> scanned or photo taken and saved as an email attachment and sent to <u>headofcompetitions@englanddeaffootball.co.uk</u> by 24 hours after the final whistle of match day; Failure will result in a fine of £10. Both teams: Referee report <u>should be</u> scanned or photo taken and saved as an email attachment and sent to <u>headofcompetitions@englanddeaffootball.co.uk</u> no later than 24 hours after the final whistle of match day; Failure will result in a fine of £10. 							
MATCH DATE: / / / (DD/MM/YYYY) KICK OFF TIME: : HRS <i>(Example 14:30 HRS)</i>								
RADCLIFFE DFC Player's Names (22x)	Registration Number	On the field (Shirts No.)	Subs (√)	Sub Used (√)	Goal (1/2/3)	Own Goal (1 / 2 / 3)	Caution (1/2)	Send Off (1)
ASIFUmayr	110101							
BRADLEYTyler	11002							
EL-MADANI Haitm	11003							
FOWLES Rhys	11018							
FRASER Kyle	11004							
GARTON Reece	11016							
JOHNSON Daniel	11005							
LEWIS Nicholas	11006							
LLOYD Miles	11007							
MCHUGH Jack	11008							
MILLS Paul	11019							
MIRZA Haaris	11009							
MOHAMED Ahmed	11017							
MOUSTAID Samir	11010							
O'CONNOR Ricky	11011							
ORMEROD Aaron	11020							
OSISIAMI Segun	11012							
PATEL Mohsin	11015							
RUSSELL Havery	11013							
TARIQ Kaleem	11022							
WALDRON Havery	11014							
WONG Aaron	11021							
	11023							
	11024							
	11025	+	1					

HALF TIME SCORE: |___ | v |___ | FULL TIME SCORE: |___ | V |___ | EXTRA TIME SCORE: |___ | v |___ | PENALTIES: |___ | V |___ |

HOME SECRETARY SIGNATURE: ______(PRINT NAME) ______

OPPONENT (AWAY) SIGNATURE: ______(PRINT

Referee's Full Name	Level	Parent County	Referee's Signature		