

Team Sheet – RADCLIFFE DEAF FC

Please Tick: North League / South League / Community League /

Challenge Cup / Plate Cup / FA Disability Cup /

Round: _____

YOUR CLUB: HOME/AWAY (Circle as apply)

OPPONENT: _____

YOUR TEAM COLOUR KITS: _____

MATCH DATE: |_|_|/|_|_|/|_|_|_|_|
(DD/MM/YYYY)

KICK OFF TIME: |_|_|:|_|_| HRS
(Example 14:30 HRS)

1. 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.**
2. The Team Sheet must be completed and handed in to the Referee no later than **15 MINUTES** before kick-off. (Expect semi-finals and finals where this will be 30 minutes)
3. For Cup: Roll on/off substitution are **not permitted**. Using up to five (5) out of seven (7) substitutions.
4. For League: Roll on/off substitution are permitted, involving five (5) substitutions, with exception of the League Final.
5. Both teams **must** 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.
6. Match sheet **should be** scanned or photo taken and saved as an email attachment and sent to headofcompetitions@englanddeaffootball.co.uk by **24 hours after the final whistle of match day**; Failure will result in a fine of £10.
7. Both teams: Referee report **should be** scanned or photo taken and saved as an email attachment and sent to headofcompetitions@englanddeaffootball.co.uk no later than **24 hours after the final whistle of match day**; Failure will result in a fine of £10.

RADCLIFFE DFC Player's Names (23x)	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)
ASIF Umayr	110101							
BRADLEY Tyler	11002							
BRINDLEY Jacob	11023							
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							
	11024							
	11025							

HALF TIME SCORE: |_|_|v|_|_| FULL TIME SCORE: |_|_|v|_|_|

EXTRA TIME SCORE: |_|_|v|_|_| PENALTIES: |_|_|v|_|_|

HOME SECRETARY SIGNATURE: _____ (PRINT NAME) _____

OPPONENT (AWAY) SIGNATURE: _____ (PRINT NAME) _____

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