Pegasus AC Soccer Club

Game sheet for:

Date:	
Game no.:	
Division:	Co-ed Women
Field:	Quarry Sportsplex 1 2
Game time:	

Home Team:	**Score:**		**Away Team:**	**Score:**	

Player no.	Player's Name	Goals	Yellow	Red

Referee instructions: At the end of the game, complete all game sheets. Give one each to the teams, and send the third to the league.

Pegasus AC Soccer Club

Kingston, ON

613.544.1796

Email: pacadult@gmail.com

Instructions to Team Officials: Please provide three (3) copies of the game sheet to the refereee at least 15 minutes before kick-off time.

Position:	**Name:**	**Signature:**

Suspended Players: