NOTTINGHAMSHIRE FOOTBALL ASSOCIATION LTD
CHALLENGE SHIELDS COMPETITIONS : SEASON 2008-09

PLEASE COMPLETE ALL SECTIONS OF THIS FORM IN BLOCK CAPITALS

Match No	Date	Round	Age Group	Played At (Ground)

		Full Time	Extra Time	Kicks From Penalty Mark
HOME TEAM				
AWAY TEAM				

HOME TEAM				**AWAY TEAM**			
Shirt Number	Player's Surname	Initials	Goals	Shirt Number	Player's Surname	Initials	Goals
Home Team Substitutes				**Away Team Substitutes**			

TICK SUBSTITUTES IF THEY PLAYED

Referee		Referee's Mark (out of 100)	

I certify that the above is a correct return of the names and positions of the players who participated in the above match

Signed		Team	

THIS FORM, FULLY COMPLETED MUST BE FORWARDED BY POST TO:
NOTTS FA, UNIT 6B, CHETWYND BUSINESS PARK, CHILWELL, NOTTM, NG9 6RZ
OR BY EMAIL TO peter.burton@nottinghamshirefa.com
BY THE DATE STATED ON THE NOTIFICATION OF THE DRAW