



NATIONAL LEAGUE CONFERENCE REFEREE REPORT

This report must be completed, signed and submitted to the proper authority by the Game Referee.

Team _____	Score	Team _____	Score
Jersey Color _____		Jersey Color _____	

Age Group _____	Division _____
Date of Game: _____	Scheduled time: _____
Field Name: _____	Actual kick off: _____
City: _____	End of game: _____
Field Number: _____	Score at half time: _____

REFEREE: _____	Grade: _____	Phone:() _____	Email _____
Sr. Assist. Ref: _____	Grade: _____	Phone: () _____	Email _____
Jr. Assist. Ref: _____	Grade: _____	Phone:() _____	Email _____

This Report (with Team Line Up Cards) is to be submitted to the Local Site Coordinator or host team at the conclusion of the match. The Conference Supplementary Report Form must be emailed to mfrankland@usyouthsoccer.org if any SEND OFFS occurs or to explain any unusual circumstances.

Serious injuries during the game.

Team	Number	Name	Nature of Injury

Players cautioned during the game.

Team	Number	Name	Type of Misconduct

Players/Coach sent off the field—Player passes should NOT be retained after the game .

Team	Number	Name	Type of Misconduct

Referee Signature: _____ Phone #: _____

Conference Referee Report (with Team Line Up Cards) is to be submitted to the Local Site Coordinator or host team at conclusion of match. Local Site Coordinator or Host Team representative shall submit match scores, Game Reports and Line-up cards via the **SportsForms Game Score Reporting** at <https://www.sportsforms.club/usys-national-league.html>