

MATCH REPORT

ORL/MR



This report must be supplied by the HOME TEAM for each Match played under International Laws of the Game in which a team of an Affiliated Club and Local League participates. For "A" Grade matches, only 17 players may be listed.

DIVISION: _____ **LOCAL LEAGUE:** _____ **DATE:** ____/____/____
GRADE: _____ **VENUE:** _____ **TIME:** _____
REFEREE: _____ **TOUGH JUDGES:** _____

HOME TEAM NAME		FAO		T		G		FG		Player ID/Signature	
Coach		Player Details		T		G		FG		Player ID/Signature	
1											
2											
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17											
18											
19											

AWAY TEAM NAME		FAO		T		G		FG		Player ID/Signature	
Coach		Player Details		T		G		FG		Player ID/Signature	
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TRIES: _____ **PTS:** _____ **GOALS:** _____ **PTS:** _____
FIELD GOALS: _____ **PTS:** _____ **TOTAL POINTS:** _____

FULL TIME SCORE SUMMARY

TRIES: _____ **PTS:** _____ **GOALS:** _____ **PTS:** _____
FIELD GOALS: _____ **PTS:** _____ **TOTAL POINTS:** _____

WE CERTIFY THAT THE FOLLOWING WERE CHECKED & COMPLY WITH THE QRL RULES (✓ EACH BOX)

(If any do not comply with the QRL rules, Referee must place "X" in relevant box)

- HOME TEAM LOGO ON JERSEYS
- AWAY TEAM LOGO ON SHORTS
- HOME TEAM REP. SIGNATURE _____
- AWAY TEAM REP. SIGNATURE _____
- LOGO ON ALL FOOTBALLS USED
- REFEREE SIGNATURE _____

NB: If any of the above boxes are marked "X", the Local League must immediately take action to investigate and notify the relevant QRL Division.

SEND OFF / SIN BIN / OFFICIALS BEHAVIOUR COMPLAINTS - SUMMARY

When all details have been completed on conclusion of match **HOME TEAM MUST** • Retain Pink copy • Hand Blue copy to Away Team • Forward Original and Green Copy to Local League Secretary (Upon receipt Local League Secretary to forward Original to QRL Division Manager)