AGE GROUP U___ B/G | THIS TEAM = | Home / Visitor (CIRCLE ONE FOR YOURS)

7 - A - 403
SECTION - AREA - REGION

TIME ___:___ | DATE ___/___/___ | FIELD

YOUR TEAM

Your Team Name | Your Team Number

COACH

Assistant Coach

OFFICIAL LINEUP — UNIFORM COLOR — GAME CARD

All team players must be listed in order by jersey #. If absent, indicate reason.

No.	PRINT PLAYERS NAME	Goals Scored		Qtrs.' Not Played 1	2	3	4
				1	2	3	4
				1	2	3	4
				1	2	3	4
				1	2	3	4
5				1	2	3	4
				1	2	3	4
				1	2	3	4
				1	2	3	4
				1	2	3	4
10				1	2	3	4
				1	2	3	4
				1	2	3	4
				1	2	3	4
				1	2	3	4
15				1	2	3	4
				1	2	3	4
	Total	1st	2nd	1	2	3	4
	Referee			1	2	3	4
	Sign	Final		1	2	3	4

AYSO Participation Guidelines on field & in goal (Check Above)

Age Group	Goal-Keeper	Special Rules	Half, not to exceed	Game, not to exceed	Ball Size	Everyone Plays - Notes
U-19	No restriction	No restriction	45 Min.	90 Min.	5	• **U10-U19** - player must play min. 1/2 of each regular season game, excluding OT & 1/2 of each Select Season or tournament game • **U12** Keepers play max. 2 Q in goal +must play 1 Q on field • **U10** Keeper, only 1 Q in goal, 2Q on field
U-16			40 Min.	80 Min.		
U14			35 Min.	70 Min.		
U-12	2 Qtr + 1 Field	No Slide	30 Min.	60 Min.	4	
U-10	1 Qtr + 2 Field	No Slide	25 Min.	50 Min.		
U-8	None	No Slide, No Head	20 Min.	40 Min.	3	
U-6			10 Min.	20 Min.		

OPPONENT

Opponent Team Name | Opponent Team # | H / A (1 FOR THEM)

FILL SCORES & CIRCLE RESULT

Home Goals	=	Visitor Goals	=	Goal Differ	=

WIN | LOSS | TIE | FORFEIT | - | SHUTOUT

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