Premier Soccer League of Chicagoland

**Official Match Roster**

Game Date Game Time Start End Game #

Division Field Name/Location

Home Team Away Team

(*check one*) **☐ Home Team Lineup ☐ Visiting Team Lineup**

**\*\*\* UP TO 18 PLAYERS MAXIMUM CAN BE SELECTED FOR THE MATCH ROSTER \*\*\***

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| **PRESENT****(REF SIGN-IN)** | **JERSEY #** | **PLAYER NAME** | **PASS ID#** | **GOALS****1st 2nd****Half Half** | **CARDS****Yellow \*Red** | **\*INJURY** |
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\* Ref. Report Required

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| **PRESENT****(REF SIGN-IN)** | **COACH NAME** | **PASS ID#** |
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| **Final Score: to Winner:** |
| **Game Time Start: End:**  | **Referee:** |
| **MGR Name (PRINT)** | **Assistant Referee 1:** |
| **MGR Signature** | **Assistant Referee 2:** |
| **REFEREE**: Mail COMPLETED REPORT within 24 Hours to: |  **Premier Soccer League 1051 Washington Ct, Bartlett, IL 60103**  |
| Or Scan and email to: | **info@pslchicagoland.com** |