



NORTH WEST COUNTIES Juniors ARL

HOME TEAM

AWAY TEAM



	V	
	1	
	2	
	3	
	4	
	5	
	6	
	7	
	8	
	9	
	10	
	11	
	12	
	13	
	14	
	15	
	16	
	17	
	18	
	19	
	20	

NO CARDS NO PLAY

Please list Home and Away Teams in the boxes provided.
Include full names of all players participating not just initials

DATE		AGE	
SCORE		Group	
Referee:		Signature:	
PRE-MATCH CHECKLIST	CARDS	POST PADS	STUDS
			JEWELLRY

Please Rate how child focussed the experience was 1 Low 10 High

	Rules	Coaching	Touchline behaviour	Facilities post match arrangements	Overall
Home					
Away					

Serious injuries sustained during play

HOME TEAM	
Touchline Manager	
Coach Name	
Coach ID Number	
Signature	

AWAY TEAM	
Touchline Manager	
Coach Name	
Coach ID Number	
Signature	

Team sheets are the responsibility of the home team and must be emailed complete to. teamsheets@nwc-rl.co.uk

Please check guidance notes for team administrators on www.nwc-rl.co.uk .