



SCOTTISH WELFARE FOOTBALL ASSOCIATION

(Est. 1918)

Home Team	V	Away Team	Venue	Date

No.	Subs	Full Name (Please Print)	ID Number	Postcode	Player's signature (in full)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					

Subs Used	Five Substitutes Allowed From Five Named

Secretary

Signature
Team Name

Referee

Print	
Signature	
Home	Away

Goals

Home Club must phone or text in result after the game to **Stuart Johnstone (Mob: 07795165667)** otherwise a fine of £10.00 will be imposed.

ALL PLAYERS MUST SIGN TEAMLINES. Team sheets are to be returned within 48 hours. **ALL GAMES PLAYED TO A FINISH**

Please send the team sheets and misconduct reports (if applicable) to: **Stuart Johnstone, 6 St Serf 's Place, Tullibody, Clacks, FK10 2RE**