



# Tennessee State Soccer Association State League Match Report

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**Division:** 1 / 2 / 3 (circle)    **Gender:** M / F (circle)    **Date:** \_\_\_\_\_    **Age:** \_\_\_\_\_  
**Location:** \_\_\_\_\_    **Weather:** \_\_\_\_\_    **Time:** \_\_\_\_:\_\_\_\_ AM / PM (circle)

Home Team: _____		Score: _____
<u>Yellow</u>	<u>Red</u>	<u>Cautioned/Ejected Player</u>
		1)
		2)
		3)
		4)
		5)
		<u>Unusual Situation</u>

Away Team: _____		Score: _____
<u>Yellow</u>	<u>Red</u>	<u>Cautioned/Ejected Player</u>
		1)
		2)
		3)
		4)
		5)
		<u>Unusual Situation</u>

<u>Yes</u>	<u>No</u>	<u>Game Day Check List</u>
		State Approved Roster?
		Player Cards?
		12U-15U had FREE Subs?
		D1 16U-19U had limited Subs and if more than 18 on roster were clearly scratched from the game day roster as non play.

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**Game Day Signatures**  
Home Coach/Manager: \_\_\_\_\_  
Please Print Name: \_\_\_\_\_

**Game Day Signatures**  
Away Coach/Manager: \_\_\_\_\_  
Please Print Name: \_\_\_\_\_

**Referee Section ONLY**

**Field Dimension:** Length-\_\_\_\_\_ yds. Width-\_\_\_\_\_ yds. (Please pace or estimate)

<u>Signature</u>	<u>Please Print Name</u>
Center Referee: _____	_____
Assistant Referee: _____	_____
Assistant Referee: _____	_____

***(Instructions)***

The completed game packet is due the next business day following the completion of the match. It is the responsibility of the **HOME TEAM MANAGER** to enter the score and any yellow/red cards into the system. The completed Match report with ALL listed signatures and a copy of Home and Away Team Rosters. Incomplete Match Reports will be sent back to the Home Team Manager for correction.

The Match Result will be posted as they are entered and if not entered, they will be posted by Tuesday.

**Submit Match Reports to:** [bflanagan@tnsoccer.org](mailto:bflanagan@tnsoccer.org) or [chewlett@tnsoccer.org](mailto:chewlett@tnsoccer.org)