

ADJFL MATCH DAY TEAM SHEET

THIS SHEET MUST BE FILLED IN AND PRESENTED TO OPPOSITION MANAGER ALONG WITH TEAM SQUAD ID SHEET AND THEN MUST BE HANDED TO THE REFEREE PRIOR TO KO.

Team Name: _____

Shirt Number	Players Full Name (Block Capitals)
SUBSTITUTES	

Team Managers Name: _____

OPPOSITION MANAGERS MAY TAKE A PHOTO OF THIS SHEET – UNDER NO CIRCUMSTANCES MUST THIS BE PUBLISHED ON ANY SOCIAL MEDIA OR MESSAGE GROUPS

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