



OCSL 7v7 Score Sheet/Cedula



Team Name: _____ Opposing Team: _____
 Coach Name: _____ Asst. Coach: _____
 Week #: _____ Date: _____ Field: _____ Phone Number: _____

	PLAYER NAME (FIRST & LAST) <small>(NOMBRE COMPLETE DEL JUGADOR)</small>	JERSEY # <small>(PLAYERA #)</small>	FIRMA DEL JUGADOR <small>PLAYER SIGNATURE</small>	RED CARD <small>(EXPULSADO)</small>	GOALS <small>(GOLES)</small>	AMONESTADO
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

Home Coach Signature: _____
(Casa)

Date: _____
Fecha

Final Score: _____
(Resultado Final)

Visitor Coach Signature: _____
(Oponente)

Date: _____
Fecha

Final Score: _____
(Resultado Final)

Referee Name: _____
(Arbitro)

Phone: _____
(Teléfono)