## SUSSEX RFU

## **Match Results Card**

7	COMPETITION: Bob Rogers Cup / Sussex Bowl / Sussex Vase / Sussex Shield / Sussex Plate (Circle as appropriate)			
	HOME TEA	AM: AWAY TEAM:		
			HOME	AWAY
	DATE:	ROUND: SCOR	±:[	
	TEAM LIST	T: CLUB:		
MATCH		NAME : (SURNAME / Christian Name)	Indicate Front Row Replacement	Indicate Red/Yellow Card (Y/ R)
	1			
	2			
	3			
	4 5			
P	6			
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	13			
	14 15			
•	16			
	17 18			
	19			
	20			
	21			
	22			
P	REFEREE'S	PRIN SIGNATURE: NAME		
	HOME TEAM			
	SIGNATURE:	1 13114		
	AWAY TEAM	I IXIIV		
	SIGNATURE:	NAME	Ξ-	

This Match Card is designed to be used for all Matches played in the **Sussex Knockout Competitions**. A blank copy should be printed out by each participating team prior to the Match and filled in with the details of the Match and the team selected. The card should be handed to the Referee at least half an hour before the start of the Match. After the Match the Referee should fill in the score and sign the Card along with an Official from each Club. **Results to be phoned in by 6pm Sunday.** 

Senior to 01424-423614 or text 07903322782 Junior to 01273-566011or text 07860638092

The completed Match Card for each team should then be:

(SENIOR CUP) -: POSTED TO: 189 St. Helens Road, Hastings, East Sussex TN342EA to arrive no later than first post on the Wednesday following the Match. Alternatively it may be E-MAILED TO: kennichols2@sky.com no later than the Wednesday following the Match.

(JUNIOR CUP) -: POSTED TO: 6, Wayside, Westdene, Brighton, East Sussex BN1 5HL to arrive no later than first post on the Wednesday following the Match. Alternatively it may be FAXED TO: 01273 566011 or E-MAILED TO: mr@railex.demon.co.uk no later than the Wednesday following the Match.