



Sacramento Adult Soccer Association

Official Lineup Form



Home Team Name: _____
 Team Color: _____
 Manager _____

Away Team Name: _____
 Team Color: _____
 Manager _____

No.	PLAYERS NAME	Number	C/E
1			
2			
3			
4			
5			
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18			
19			
20			

No.	PLAYERS NAME	Number	C/E
1			
2			
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Date: _____ Time: _____ Halftime Score: _____ Final Score: _____ Referee's Name: _____
 Disciplinary Action Taken: _____ AR1 Name: _____
 _____ AR2 Name: _____
