AYSO OFFICIAL GAME CARD

REGION: 223

AGE& DIV:

TEAM NAME:

TEAM COLOR:

HEAD COACH:

ASST COACH:

No.	Print Players Name*	Goals Qtrs Scored Playe 1 2		aye		

*Indicate: GK-goalkeeper; All players on roster must be listed; indicate reason for absence.

_____ Time _____Field _____ Date

Half Score ______ In Favor Of _____

Final Score ______ Winning Team _____

Losing Team ____

Each half Duration of the Game Ball Size Division not to exceed not to exceed U19 45 Min. 90 Min.

U16	40 Min.	80 Min.	No. 5
U14	35 Min.	70 Min.	
U12	30 Min.	60 Min.	No. 4
U10	25 Min.	50 Min.	
U8	20 Min.	40 Min.	No. 3
U6	20 Min.	40 Min.	

* All AYSO games shall be conducted in accordance with the FIFA Laws of the Game * Halftime periods shall be a minimum of 5 & a maximum of 10 minutes

Approximately midway through the first half, and approximately midway through the second half, the referee halts the game, stops his/her watch and notes on the lineup cards those players substituting. Stoppage is made when the ball is out of play, and prior to the appropriate restart (i.e., throw-in, goal kick, 1. corner kick, kick-off, free kick, penalty kick or dropped ball). Additionally, substitutions may be made at halftime and at the start of any overtime periods. Respective coaches of each team may substitute as many players or none during such interruptions, as 2.

long as all players meet the minimum requirements.

 Players substituting must report to the referee or assistant referee..
 Additional substitution is permitted if authorized by the referee in case of injury. If an injured player is replaced, the injured player may not return until the beginning of the next quarter. Only the injured player is credited with a

guarter's play, regardless of the time played. Sideline participation shall be limited only if it is POSITIVE, and INSTRUCTS and ENCOURAGES players. Sideline participation shall be limited to two coaches from each team and they shall be limited to a coaches' area.

Disciplinary action taken:

AYSO OFFICIAL GAME CARD

AGE& DIV:

REGION: 223

TEAM NAME:

TEAM COLOR:

HEAD COACH:

ASST COACH:

No.	Print Players Name*	Goals Scored		Pla	Qtrs Not Played 1 2 3 4			

*Indicate: GK-goalkeeper; All players on roster must be listed; indicate reason for absence.

______ Time ______Field _____ Date

Half Score _____ In Favor Of _____

Final Score _____ Winning Team _____

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Disciplinary action taken:

Referee Signature: _____

Referee Signature:

Losing Team