

GEORGIA HIGH SCHOOL ASSOCIATION - SOCCER GAME CARD

Host School _____ Opponent _____

	Please type or print: PLAYER NAME (Last, Initial)	No.	GOALS SCORED			Cautions	Ejection
			1 st Half	2 nd Half	OT		
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21							
22							

BOYS _____ GIRLS _____

Game Date _____

HOST SCHOOL:
Coach _____

Jersey Color _____

OPPONENT:
Coach _____

Jersey Color _____

NOTE: Make copies of this Form as necessary. It is Suggested copies be made on cardstock paper.

REFEREE: Mail a written Report on a GHSA "Game Report Form" of all Red Cards Issued. Do NOT mail this game card.

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