



CARLOW & DISTRICT FOOTBALL LEAGUE



REFEREE'S OFFICIAL REPORT FORM CARLOW BRANCH IRISH SOCCER REFEREES SOCIETY

DATE: REFEREE:

(Block letters only)

COMPETITION: KO TIME:

(Block letters only)

HOME TEAM: AWAY TEAM:

(Block letters only)

(Block letters only)

VENUE: FIXTURE DATE:

(Block letters only)

I HAVE TO REPORT THE FOLLOWING INDIVIDUAL -

Name of Individual:

Team:

(Block letters only)

Age Group: Jersey # Time of Foul:

PLEASE TICK APPROPRIATE BOXES AS FOLLOWS :-√

Individual Sent Off Was: Player Manager Other

REASON FOR SEND OFF: (Law 12 FIFA)

- SERIOUS FOUL PLAY
- VIOLENT CONDUCT
- SPIT AT OPPONENT OR ANY OTHER PERSON
- DENIES OPPOSING TEAM A GOAL OR AN OBVIOUS GOALSCORING OPPORTUNITY BY DELIBERATELY HANDLING THE BALL
- DENIES AN OBVIOUS GOALSCORING OPPORTUNITY TO AN OPPONENT MOVING TOWARDS THE PLAYER'S GOAL BY AN OFFENCE PUNISHABLE BY A FREE KICK OR A PENALTY KICK
- USES OFFENSIVE OR INSULTING OR ABUSIVE LANGUAGE AND OR GESTURES
SPECIFIC LANGUAGE OR GESTURE:

DIRECTED AT: OPPONENT TEAMMATE SELF
 REFEREE MANAGER OTHER:

RECEIVES SECOND CAUTION IN SAME MATCH

Referees Signature: Date:

