

Red Card Report
(One report per altercation)

Date _____ Time of Game _____ Under _____

Team _____ vs _____ Boys _____

Girls _____

Player #1 _____ Team _____

Reason _____ # of player fouled _____ (if applicable)

Player #2 _____ Team _____

Reason _____ # of player fouled _____ (if applicable)

Player #3 _____ Team _____

Reason _____ # of player fouled _____ (if applicable)

Description of incident: _____

Witnesses or people involved in the altercation: _____

Names and phone number of referees involved: _____

Legend for reason:

- #1 Serious foul play
- #2 Violent conduct
- #3 Spitting at someone
- #4 Deliberate handling of ball to prevent a goal
- #5 Fouling a player with an obvious goal scoring opportunity
- #6 Using offensive, insulting or abusive language
- #7 Receives a second caution in a match

Head Referee to fill out this report. Mail: East Central Cardings, W2778 Breezewood Drive, Appleton, WI 54915 within 24 hours of incident along with the player pass. Photocopy this report and keep one copy for your files.