TEAM NAME	OPPONENT

DIVISION	DATE	FIELD	TIME
Premier Division 1A			

PLEASE PRINT OR TYPE

NO.	NAME	PASS NO.

HOME Name / Color						VISITOR Name / Color					
1st. HALF											
2nd. HALF											
FINAL SCORE											

Manager / Coach Name & Signature
Captains Name and Number
REFEREE'S NAME and NUMBER
Referee # 1
Referee # 2

HOME Team

PLAYERS CAUTIONED/SENT OFF		
NO.	REASON	Ejected

VISITING Team

PLAYERS CAUTIONED/SENT OFF		
NO.	REASON	Ejected

Each Team is Allowed TWO Guest Players

Guest Players MUST show Photo ID and a League GUEST PASS

Guest Players Sign Waiver Below

In consideration for being permitted to engage in the Silicon Valley Soccer Assiciation and Affilliated Leagues activities of whatever nature, including, but not limited to, games, events and projects the undersigned member/visitor agrees to indemnify, defend and hold haarmless the Silicon Valley Soccer Association and Affiliated Leagues from and against any and all claims, actions, causes of action, obligations and liabilities for property damage and personal injury to any person, including myself, which are or could be asserted against the Silicon Valley Soccer Association and Affiliated Leagues as a result of any acts or omissions by the undersigned. The undersigned realizes that he or she particiapates in the activities sponsored by the league, including games, at his or her own risk and that the undersigned shall be wholly responsible for any injuries or other damage suffered by him or her due to said participation in the league activities.

Name:	Pass #	Driver's License #
Signature		
Name:	Pass #	Driver's License #
Signature		

SILICON VALLEY SOCCER ASSOCIATION
(408) 733-SVSA www.siliconvalleysoccer.com