FOOTBALL ASSOCIATION OF IRELAND

CUMANN PEILE NA Heireann

FAI Under 17 Cup

Round:_____

A. _____ V B. _____

(Home Team) (Away Team)

Ground _____

Date _____ at _____ hours

Full Time Score:	Home Team		Away Team	
Score A.E.T.:	Home Team		Away Team	
Penalties:	Home Team		Away Team	

Referee _____

Assistant Referee 1 _____

Assistant Referee 2 _____

Fourth Official _____

PLAYING TIME

90 mins unless otherwise stated

Men's

Youth Cup – ET - 10 mins e/w

U17 Cup – ET - 10 mins e/w

Intermediate Cup - ET - 15 mins e/w

Junior Cup – ET – 10 mins

For other Competitions, please consult Competition Rules

Matches drawn after extra-time shall be decided by kicks from the Penalty mark as per FIFA Penalty Kicks rule.

Players	**HOME TEAM**		**Referee Use Only**			
No.	**Surname**	**First Name**	YC		RC*	Goals

Substitutes								
No.	**Surname**	**First Name**	Replaced	Time	YC		RC*	Goals

*Please provide supplementary report for any expulsions

TECHNICAL STAFF

No.	**Surname**	**First Name**	**Role**
1			Manager/Head Coach
2			
3			
4			
5			
			Doctor

Manager's Signature:

It is IMPERATIVE that this Report is sent to the FAI via email (cupcompetitions@fai.ie) as a scan or clear image immediately after the fixture and no later than 24 hours following the fixture - email is REQUIRED. Please contact the FAI immediately at the above email address if you have issues submitting the report.

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Players	**AWAY TEAM**		**Referee Use Only**			
No.	**Surname**	**First Name**	YC		RC*	Goals

Substitutes								
No.	**Surname**	**First Name**	Replaced	Time	YC		RC*	Goals

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TECHNICAL STAFF			
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