



REFEREE 24-HOUR SEND OFF REPORT

Sacramento Adult Soccer League

Mail to: Jon Amador
 2430 Tyrolean Way
 Sacramento, CA
 95821

Please use one report for each player sent off.

LEAGUE/COMPETITION Sacramento Adult Soccer League

LEVEL OF COMPETITION GAME DATE TIME

FIELD CITY OF

HOME TEAM VISITING TEAM

1ST HALF SCORE: HOME VISITING **O.T.** 1ST HALF SCORE: HOME VISITING

2ND HALF SCORE: HOME VISITING **O.T.** 2ND HALF SCORE: HOME VISITING

FINAL SCORE: HOME VISITING

PLAYER'S (LAST/FIRST NAME) ID # (LAST 4 DIGITS) TEAM/CLUB

PLAYER WAS SENT OFF AT GAME MINUTE

REASON FOR THE SEND-OFF:

- (**SFP**) SERIOUS FOUL PLAY (**VC**) VIOLENT CONDUCT (**S**) SPITTING
- (**DGH**) DENYING A GOAL-SCORING OPPORTUNITY BY DELIBERATELY HANDLING THE BALL
- (**DGF**) DENYING A GOAL-SCORING OPPORTUNITY BY COMMITTING AN OFFENSE PUNISHABLE WITH A FREE-KICK OR PENALTY-KICK
- (**AL**) OFFENSIVE, INSULTING OR ABUSIVE LANGUAGE (**2Y**) SECOND CAUTION

DESCRIPTION:

REFEREE	GRADE	PHONE
AR1	GRADE	PHONE
AR2	GRADE	PHONE

REFEREE MUST SEND COPIES OF THIS REPORT **WITHIN 24 HOURS** AS FOLLOWS:
 ONE COPY TO SASL (PLAYER'S ID ENCLOSED) - EMAIL COPY TO reports@saslsoccer.org