



Calgary West Soccer Club

Instruction Sheet

**TO BE USED FOR ICHL GAMES ONLY (or for games where
a game was cancelled and you were not informed)**

PLEASE USE A PEN

Date: _____ (Write the date of the game) _____

Age Group: _____ Age level i.e. U10B _____

Field: _____ (Name of the field that was on your schedule – it will probably be a number

Home Team: _____ Write the team # that was on the schedule, not the name chosen by the team

Away Team: _____ same as above _____

Referee Name (Print): _____

Referee Signature: _____

CWSC Coach

Print: _____ Please make sure that the coach prints his/her name
clearly. _____

CWSC Coach Signature: _____

Referee Liaison Name: _____ Do not let just the coach sign his/her name. Please make sure that the
team actually does have a Referee Liaison. _____

Comments: _____ write down any problems from parents, coaches or
compliments _____

**THIS FORM IS ONLY FOR ICL GAMES. MAKE SURE YOU TAKE IT WITH YOU BECAUSE YOU
WILL NOT BE PAID FOR THE GAME WITHOUT THIS SHEET.**

YOU WILL BE ASKED TO DROP OFF ALL YOUR PAYMENT SHEETS LATER IN MAY.