

Robert Merkel Cup Match Day Roster/Score Form

Your Team	Opponent	Location	Date	Time

#	PLAYER NAME	SIN/SO	CIPP # and Club Affiliation	Eligible Spectator Name & Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
	Home Captain, please sign under <u>last listed player</u>			Away Captain, please sign under <u>last listed spectator</u>

Captains' Acknowledgment: As captain, I hereby affirm that this represents the complete record of players in the match described above, that are all compliant with USA rugby eligibility rules and are members in good standing with USA Rugby (CIPP). It is your responsibility to verify the accuracy on this form.

TO BE COMPLETED BY REFEREE:					
Score	<i>Home</i>	<i>Away</i>	Field Properly Marked Goal Post Padding Restraining Barrier	Yes	No
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>			
Tries	<i>Home</i>	<i>Away</i>			
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>			
Game Forfeitt? <i>(Circle)</i> Yes No By Home Away					

NOTES:

Referee:	Signature:	Date:
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