

# MINNESOTA RUGBY UNION MATCH REPORT CARD

Referee \_\_\_\_\_ Date \_\_\_\_\_ Total Miles (rt) \_\_\_\_\_

Location \_\_\_\_\_ **Gender** (circle one): Male Female

Home Team \_\_\_\_\_ Visiting Team \_\_\_\_\_

**Field Conditions** *Goal Post Pads: Yes No Restraining Ropes: Yes No Markings Acceptable: Yes No Regulation Size: Yes No*

Jersey Conditions - Home Club - Numbered: Yes No Jersey Condition: Good Fair Poor

Jersey Conditions - Visiting Club - Numbered: Yes No Jersey Condition: Good Fair Poor

Score	1 <sup>st</sup> half	2 <sup>nd</sup> half	Total	Tries
Home				
Visitor				

A Side # of Minutes: \_\_\_\_\_

B Side # of Minutes: \_\_\_\_\_

**Disciplinary Action** (additional information on back if necessary)

<u>Club</u>	<u>Name</u>	<u>CIPP #</u>	<u>Offense</u>	<u>Severity Rating</u> (1 low-10 high)	<u>Yellow/Red</u>

**Signature below verifies that those playing in the match at any time have individual insurance and are CIPP registered.**

**Home Team** \_\_\_\_\_

**Visiting Team** \_\_\_\_\_

Name (print): \_\_\_\_\_

Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

(Please attach your player CIPP registered club roster from the USA Rugby web site: [www.usarugby.org](http://www.usarugby.org) )

**Match report can be mailed to Tammy Cowan, 4122 Dight Ave, Minneapolis, MN 55406 or Fax to Terpy 763-416-0823**