** N.R.M.F.A. PLAYER GAME SHEET**

DIVISION: \_\_\_\_\_ PLAYED AT:

DATE: GAME #:

TEAM: OPPONENT:

|  |  |
| --- | --- |
| **FINAL SCORE:** | **FINAL SCORE:** |

**OVER-WEIGHT EXCEPTIONS**

|  |  |  |  |
| --- | --- | --- | --- |
|  | NAME | NUMBER | GAME POSITION |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
| 8 |  |  |  |
| 9 |  |  |  |

Please make sure that all areas of this sheet are completedaccurately.

Please email by Sunday evening or hand in to the Convener for your area or at the game who will see that they get to Tuesday's meeting.

Text the final score to **905 682-2733**

Scores not handed in cannot be counted.

As Head Coach I understand the N.R.M.F.A. fair-play rule and the N.R.M.F.A. weight restriction policy. I agree to follow these rules in all N.R.M.F.A. games, and follow the instructions of the N.R.M.F.A. game convener. I understand that violations of the N.R.M.F.A. rules will be directed to the N.R.M.F.A. executive and rules committee and sanctions may then follow.

Head Coach: Signature:

**NRMFA PLAYER ELIGABILITY GAME SHEET**

|  |  |  |  |
| --- | --- | --- | --- |
|  | LAST NAME | FIRST NAME | PLAYER NUMBER |
| 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 |  |  |  |

**Game sheets must be completed accurately and exchanged between the two head coaches. Failure to do so may result in disciplinary action by the NRMFA executive and rules committee.**