



Score Sheet

MY TEAM	OUR OPPOSITION
NAME: _____	NAME: _____
Goals Scored: ✓	Goals Scored: ✓
HALF- TIME SCORE (number of goals scored) <input data-bbox="655 1055 780 1140" type="text"/>	HALF- TIME SCORE (number of goals scored) <input data-bbox="1257 1055 1382 1140" type="text"/>
Goals Scored: ✓	Goals Scored: ✓
2 nd HALF- TIME SCORE (number of goals scored) <input data-bbox="663 1536 788 1621" type="text"/>	2 nd HALF- TIME SCORE (number of goals scored) <input data-bbox="1270 1536 1394 1621" type="text"/>
FULL- TIME SCORE (total number of goals scored) <input data-bbox="663 1688 788 1774" type="text"/>	FULL- TIME SCORE (total number of goals scored) <input data-bbox="1270 1688 1394 1774" type="text"/>
WINNING TEAM _____	