



# MALTA FOOTBALL ASSOCIATION

## Official Match Sheet

<b>Date:</b>		<b>Team:</b>						
<i>Distribute to Venue Director or Match Officials sixty (60) minutes prior to Kick-off time</i>								
No.	Surname	First Name	COMET ID	Date of Birth				
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### Substitutes

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<b>Captain Signature</b>	<b>No.</b>							

### Technical Staff

Surname	First Name	ID No.	Function
			Coach
			Assistant Coach
			GK Coach
			Club Doctor
			Physiotherapist / Masseur
			Physical Trainer
			Kit Manager
			Team Manager
			Club Official
<b>Captain Signature</b>	<b>No.</b>		