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| --- | --- | --- | --- |
| **Match Date** | Click here to enter a date | **Venue** | Click here to enter club |
| **Type of match** | Select | **Competition**  | Click here to enter text |
| **Was a video made?** | Select  | **Video made by** | Click here to enter club |

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| **Player’s name** | Click here to enter name | **Position** | Select | No. | Enter number |
| **Players Club** | Click here to enter club | **Players School** | Click here to enter text |

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| **Match result:** |
| Home team | Click here to enter text | Score | Click here to enter score | Team |  |
| Away team | Click here to enter text | Score | Click here to enter score | Team |  |

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| --- | --- |
| **Nature of offence:** | Select an offence |

|  |  |  |  |
| --- | --- | --- | --- |
| **Officials** | **Name** | **Email Address** | **Society** |
| Referee | Click here to enter text | Click here to enter text | Enter text |
| A/R 1 | Click here to enter text. | Click here to enter text | Enter text |
| A/R 2 | Click here to enter text | Click here to enter text | Enter text |

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| **Weather conditions and state of the pitch** |
| Click here to enter text |

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| **General pattern of play/temper of game, any other red or yellow cards during the match:** |
| Click here to enter text |

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| --- | --- | --- | --- |
| **Time of Incident** | Click here to enter text | Half | Select |
| **Score at Time of Incident** | Home | Click here to enter text | Away | Click here to enter text |
| **Position on the Field** |  |

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| **Details of any injuries sustained to person(s) involved in the incident**  |
| Click here to enter text. |

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| **Proximity of Referee/AR to incident including clarity of view of incident** |
| Click here to enter text. |

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| **Details of the Incident**Include detailed description of the incident, e.g. force of any punch, any medical attention needed, any apology received, immediate reaction of other players |
| Click here to enter text. |

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| --- | --- | --- | --- |
| **Signature of Match Official****IN ALL CASES – DIGITAL SIGNATURE ACCEPTABLE** | Click here to enter text. | **Date** | Click here to enter a date |
| **Email Address:** | Click here to enter text. | **Tel:** | Click here to enter text. |

The report must be sent to the relevant club Discipline Secretary AND the CB Youth Discipline Secretary at youth-discipline@kent-rugby.org

**The report must be received not later than 48hrs following the match.**