AREA G LEAGUE SUBSTITUTION SHEET

Division: _____ Team No: _____ Date: _____ Time: _____ Location: _____

Timekeeper: _____ Phone: _____
Please Print

Site Official: _____ Phone: _____

Jersey No.	Player Full Name	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32	34	36	38	40	First Half Total Out	
02																							**C**
03																							**O**
04																							**A**
05																							**C**
06																							**H**
07																							
08																							**R**
09																							**E**
10																							**V**
11																							**I**
12																							**E**
13																							**W**
14																							
15																							**a**
16																							**t**
17																							
18																							**Half**

<u>No player shall be out more than 40 minutes per game.</u>

Jersey Game No.	Player Full Name	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32	34	36	38	40	Second Half Total Out	Total
02																							
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