# Youth - Indoor Soccer

| Fall 2026 - Soccer - Youth | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Division: Don Haskins Recreational Soccer 8/10 | | | | | | | | | | | | | | | |
| Date/Time: 10/10/26 8:15 AM | | Location: Westside Community Flat Field | | | | | | | | | | | | | |
| Referee: | Asst. Referee: | | Asst. Referee: | | | | | Time In: | Scorekeeper: | | | | | | |
| Home Team Name: Team 1 - Alex | | | | Cards | | Personal Score | | Over Time | 1st Half | Team Fouls | | | | | |
| | | | | | | | | | | 1 | 2 | 3 | 4 | 5 | |
| No. | Player Name | ID # | Personal Fouls | Y | R | 1st Half | 1st Half | | 2nd Half | 1 | 2 | 3 | 4 | 5 | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | Total Scores | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | (Signature) | | | | | |
| Away Team Name: Team 2 | | | | Cards | | Personal Score | | Over Time | 1st Half | Team Fouls | | | | | |
| | | | | | | | | | | 1 | 2 | 3 | 4 | 5 | |
| No. | Player Name | ID # | Personal Fouls | Y | R | 1st Half | 1st Half | | 2nd Half | 1 | 2 | 3 | 4 | 5 | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | Total Scores | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | | | | | | |
| | | | 1 2 3 4 5 | 1 2 | 1 | | | | | (Signature) | | | | | |