NORFOLK UNITED SOCCER CLUB
7542 Granby Street
Norfolk VA 23505
Phone: 757-588-3294 Fax: 757-588-2328
Website: www.norfolkunited.org

NORFOLK UNITED SOCCER CLUB SEASON SUMMARY

POST SEASON REPORT

COACHES: Please complete and submit to the Director of Coaching or NUSC Office at the end of each season. Validate all the team information, as well as, the results of your team in league (regular season), tournaments, and other competition (if applicable). Provide comments as necessary.

Program: (Recreation/Advanced/Select): _____

Team Name: _____ Age Group: U- ____ Boys: ____ Girls: ____

Coach: _____ E-mail Address: _____

Home Phone: _____ Cell Phone: _____ Other: _____

Assistant Coach: _____ E-Mail Address: _____

Home Phone: _____ Cell Phone: _____ Other: _____

Manager: _____ E-Mail Address: _____

Home Phone: _____ Cell Phone: _____ Other: _____

Division: _____ Season (Fall/Spring): _____ Year: _____

Final Division Standing: _____ Wins: _____ Losses: _____ Ties: _____

Note: List your goals first in the score (i.e., in a win and 2-3 in a loss) and list names of carded players.

DATE	OPPONENT	SCORE	CAUTIONS/EJECTIONS	COMMENTS

Season Highlights:

COACH S SIGNATURE: _____ DATE: _____