Revised August 2004

UNIVERSITY INTERSCHOLASTIC LEAGUE

FOOTBALL REPORT BLANK

(Duplicate as Needed)

Fill out two blanks, correctly reporting the names of all players on your team who played in this game. Send one copy to the chairman of your district executive committee and retain one for your files. **Do not file a copy with the UIL**.

Games between HOME: _____ score _____

and VISITOR: _____ score _____

Date _____ Estimated Game Attendance _____

Lineup (use names as listed on eligibility form)

School _____

City _____

Offensive Linemen _____

Receivers _____

Running Backs _____

Quarterbacks _____

Defensive Linemen _____

Linebackers _____

Defensive Backs _____

Specialists _____

Substitutes _____

Names of students representing this school in high school game or games this week other than the varsity game.

1) Comments on game, if any: _____

2) Comments on facilities, police protection, unusual situations: _____

Superintendent's or Principal's Certification: I hereby certify that the above report is correct and all players representing this school in this game were eligible. I further certify that all University Interscholastic League rules were strictly enforced.

_____ _____

Superintendent or Principal High School

Our next game is with _____ Date _____ Site _____