**RED CARD REPORT – AGE GRADE LEVEL Logo

Description automatically generated**

***(Note: this form is only to be used in the event you are unable locate your game on the Referee app)***

**To be completed and returned to the Disciplinary Department**

**WITHIN 48 HOURS OF THE COMPLETION OF THE MATCH**

**Please ensure ALL ﬁelds are completed**

|  |  |
| --- | --- |
| **Player’s Name:** |  |
| **Player’s Club / School:** |  |
| **Player’s Shirt Number:** |  |
| **Venue:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **League/Competition:** |  | **Date:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Home** | **PTS** | **PTS** | **Away** |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Officials** | **Name** | **Years Refereeing** |
| **Referee** |  |  |
| **AR 1** |  |  |
| **AR2** |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Law Number:** | 9. | **Type of Offence:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Weather Conditions:** |  | | |
| **Ground Conditions:** |  | | |
| **Time Offence:** |  | | |
| **Distance from Offence:** |  | | |
| **Medical Attention Required:** |  | | |
| **Assessor’s name:**  **(If present)** |  | | |
| **Detailed report of incident(s), actions, and behaviours:** | | | | |
|  | | | | |
| Referee name: | |  | Date: | |
| Referee signature: | |  |  | |

|  |
| --- |
| **To be completed by the referee and should be sent to: Rugby Disciplinary Department. Email** [**disciplinarydept@wru.wales**](mailto:disciplinarydept@wru.wales) |