



**FORM C REFEREE REPORT ON TEMPORARY SUSPENSION (YELLOW CARD)**

Player's Team: \_\_\_\_\_ Player's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Venue: \_\_\_\_\_ Date: \_\_\_\_\_

Playing Position of Player: \_\_\_\_\_ Player's Number: \_\_\_\_\_

Match & Result: \_\_\_\_\_ pts \_\_\_\_\_ pts

Nature of offence *(please list applicable Law Numbers(s) if known and/or short description of the Law)*

Period of the match when incident occurred: 1st Half  2nd Half

Elapsed Time in Half: \_\_\_\_\_

Proximity to the incident: \_\_\_\_\_ (meters)

Score at that time: \_\_\_\_\_ pts \_\_\_\_\_ pts

Was the Player temporarily suspended further to the report of a Touch Judge? Yes  No

If yes, who was the Touch Judge: \_\_\_\_\_

What were the circumstances in which the player was temporarily suspended?

REFEREE'S NAME: \_\_\_\_\_ UNION: \_\_\_\_\_

REFEREE'S SIGNATURE: \_\_\_\_\_ CONTACT PHONE: \_\_\_\_\_

Please complete forward this report within 48 hours to:  
**Kylie Marginson**  
**Community Rugby and Referee Administrator**  
**Auckland Rugby Football Union**

fax: (09) 8495300 e-mail: [kylie.marginson@aucklandrugby.co.nz](mailto:kylie.marginson@aucklandrugby.co.nz)