BASKETBALL

SPORTS FOR ALL
Ab Jeetega India

SFA Mumbai 2016

*Date : 5th Dec. - 19th Dec.   Venue : D.Y. Patil Sports Academy, Nerul

Gender ☐ Boys ☐ Girls

Age Group ☐ U - 11 ☐ U - 14 ☐ U - 16

In a team all twelve participating players must be from the same school

School Name: _____

School Authority /
Sports Co-ordinator /
Coach:

Name _____   Phone No. _____

Team List	Name	Chest No.
Coach		
Captain		
Player 2		
Player 3		
Player 4		
Player 5		
Player 6		
Player 7		
Player 8		
Player 9		
Player 10		
Player 11		
Player 12		

Signature of School Coach / Principal: _____

For Offical Use Only

Form No.:

Inwards No.:

Date: _____

SFA Rec Stamp

*The final dates will be published on our website – www.sfanow.in by the 10th November 2016.

BASKETBALL

School Name: _____

School Authority /
Sports Co-ordinator / Coach:　Name _____　Phone No. _____

Captain

Last Name _____

First Name _____

Middle Name _____

Participant's
Residential Address: _____
_____
_____

Participant's Email ID: _____

Date of Birth: [Day] [Month] [Year]　Age: _____　SFA ID**:_____

Emergency Contact:　Name: _____　Res: _____
(Parent / Guardian)　Mob: _____

Player - 2

Last Name _____

First Name _____

Middle Name _____

Participant's
Residential Address: _____
_____
_____

Participant's Email ID: _____

Date of Birth: [Day] [Month] [Year]　Age: _____　SFA ID**:_____

Emergency Contact:　Name: _____　Res: _____
(Parent / Guardian)　Mob: _____

Player - 3

Last Name _____

First Name _____

Middle Name _____

Participant's
Residential Address: _____
_____
_____

Participant's Email ID: _____

Date of Birth: [Day] [Month] [Year]　Age: _____　SFA ID**:_____

Emergency Contact:　Name: _____　Res: _____
(Parent / Guardian)　Mob: _____

**Students who participated in SFA Mumbai 2015 can look up their SFA ID on our website www.sfanow.in. New participants will be given their SFA ID at the time of registration. [Contd...]

For Any Query Contact Us:
SFA Events Pvt. Ltd. 1306, Pancharatna, Opera House, Mumbai-400004　|　+91 7045684365/ 66/ 67　|　www.sfanow.in　|　info@sfanow.in

BASKETBALL

Maharashtra State Basketball Association
महाराष्ट्र राज्य बास्केटबॉल संघटना

Player - 4

Last Name _____

First Name _____

Middle Name _____

Participant's Residential Address:
_____
_____
_____

Participant's Email ID: _____

Date of Birth: [Day] [Month] [Year]   **Age:** _____   **SFA ID**:** _____

Emergency Contact: (Parent / Guardian)   Name: _____   Res: _____
Mob: _____

Player - 5

Last Name _____

First Name _____

Middle Name _____

Participant's Residential Address:
_____
_____
_____

Participant's Email ID: _____

Date of Birth: [Day] [Month] [Year]   **Age:** _____   **SFA ID**:** _____

Emergency Contact: (Parent / Guardian)   Name: _____   Res: _____
Mob: _____

Player - 6

Last Name _____

First Name _____

Middle Name _____

Participant's Residential Address:
_____
_____
_____

Participant's Email ID: _____

Date of Birth: [Day] [Month] [Year]   **Age:** _____   **SFA ID**:** _____

Emergency Contact: (Parent / Guardian)   Name: _____   Res: _____
Mob: _____

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BASKETBALL

Under the aegis of:

Maharashtra State Basketball Association
महाराष्ट्र राज्य बास्केटबॉल संघटना

Player - 7

Last Name _____

First Name _____

Middle Name _____

Participant's Residential Address: _____
_____
_____

Participant's Email ID: _____

Date of Birth: Day [____] Month [____] Year [____]   Age: _____   SFA ID**: _____

Emergency Contact: (Parent / Guardian)   Name: _____   Res: _____
Mob: _____

Player - 8

Last Name _____

First Name _____

Middle Name _____

Participant's Residential Address: _____
_____
_____

Participant's Email ID: _____

Date of Birth: Day [____] Month [____] Year [____]   Age: _____   SFA ID**: _____

Emergency Contact: (Parent / Guardian)   Name: _____   Res: _____
Mob: _____

Player - 9

Last Name _____

First Name _____

Middle Name _____

Participant's Residential Address: _____
_____
_____

Participant's Email ID: _____

Date of Birth: Day [____] Month [____] Year [____]   Age: _____   SFA ID**: _____

Emergency Contact: (Parent / Guardian)   Name: _____   Res: _____
Mob: _____

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Under the aegis of:

Maharashtra State Basketball Association
महाराष्ट्र राज्य बास्केटबॉल संघटना

Player - 10

Last Name
_____

First Name
_____

Middle Name
_____

Participant's
Residential Address:
_____
_____
_____

Participant's Email ID: _____

Date of Birth: [Day] [Month] [Year]   Age: _____   SFA ID**:_____

Emergency Contact: Name: _____   Res: _____
(Parent / Guardian)   Mob: _____

Player - 11

Last Name
_____

First Name
_____

Middle Name
_____

Participant's
Residential Address:
_____
_____
_____

Participant's Email ID: _____

Date of Birth: [Day] [Month] [Year]   Age: _____   SFA ID**:_____

Emergency Contact: Name: _____   Res: _____
(Parent / Guardian)   Mob: _____

Player - 12

Last Name
_____

First Name
_____

Middle Name
_____

Participant's
Residential Address:
_____
_____
_____

Participant's Email ID: _____

Date of Birth: [Day] [Month] [Year]   Age: _____   SFA ID**:_____

Emergency Contact: Name: _____   Res: _____
(Parent / Guardian)   Mob: _____

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BASKETBALL

1. AGE GROUPS, EVENTS & DRAWS:-

• The SFA Mumbai 2016 Judo Tournament will be conducted in accordance with the age groups, events & weight categories mentioned in the table below.
• Entries will be accommodated basis the eligibility criteria set out in the point 4.

Age Groups, Events & Draws				
Sr. No.	Age Groups	Players Per Squad	Draw Size (Boys)	Draw Size (Girls)
1	U-11	12	32	32
2	U-14	12	32	32
3	U-16	12	32	32

2. TOURNAMENT FORMAT:-

• A knockout tournament will be played across all age groups and event categories for both, Boys and Girls which may be subject to change.
• A team will have 5 on field players with 7 substitutes.
• Matches will be of 40 minutes duration, with a 2 minute interval after the first and third quarter and a 5 minute interval at halftime.
• A player can play in more than one age category but not in different teams within the same age category.

3. RULES & REGULATIONS:-

• Every participant must carry his/her school ID along with age proof at all times during the tournament. No participant will be allowed to play his/her match if they do not have their school ID along with valid age proof (Adhar Card preferred)
• The participant must report at the venues main registration desk 45 minutes prior to his/her scheduled match.
• The team has to report 15 minutes prior to their scheduled match time at the Basketball registration desk.
• If any team fails to report 7 minutes after their match is announced their opponents will get a walkover.
• If any participant is found over age or with any manipulation in his/her documents, the entire team will be disqualified without any kind of prior intimation.
• Participants must wear appropriate apparel for the sport of Basketball.
• The Tournament Organizing Committee has the right to postpone or cancel the tournament in the case of unavoidable circumstances. All schools are requested to co-operate in any such case.
• In case of any dispute the decision of the Tournament Organizing Committee will be final and binding.
• Participants will not be allowed to use their mobile phones in the stipulated playing arena.
• For any kind of further details of the tournament the School Authority / Parent / Participant can contact us on our info lines or email us on the following:
  - +91 7045684365/66/67
  - info@sfanow.in

4. ELIGIBILITY CRITERIA:-

• Teams from schools registered with Sports For All will get first preference for participation.
• All team entries will be evaluated on the basis of their performance in DSO/Association/State or any tournaments in the period 1st January 2015 to 25th October 2016.
• Incomplete details in the entry forms or any manipulation in the entries will not be accepted by the Tournament Organizing Committee.
• The below mentioned age criteria will be considered:

Age Groups & Cut Off Dates	
Age Groups	Cut off Date
U-11	Born on or After 1st January 2006
U-14	Born on or After 1st January 2003
U-16	Born on or After 1st January 2001

5. TOURNAMENT ORGANIZING COMMITTEE:-

• Tournament Director.
• Tournament Referee.
• SFA Representative.