

SQUASH

*Date: 2nd Dec. - 6th Dec. Venue: D.Y. Patil Sports Academy, Nerul

Gender

Boys Girls

U-9 U-11 U-13 U-15 U-17 Age Group



School Name:		
School Authority / Sports Co-ordinator / Coach:	Name Phone No.	
Name of the Participant:	Last Name	
	First Name	
	Middle Name	
	SFA ID**:	
Participant's Residential Address:		
Date of Birth:	Day Month Year Age:	
Participant's Contact Information: Mob: Res: E-mail:		
	it / Guardian):	
	Res:	
Page - 1 **Students who participated in SFA Mumbai 2015 can look up their SFA ID on our website www.sfanow.in. [Contd] New participants will be given their SFA ID at the time of registration.		
	For Offical Use Only	
Form No.: Inwards No.:	Date	e: SFA Rec Stamp
	ed on our website – www.sfanow.in by the 10th November 2016.	of A Nec Stallip



SQUASH



AGE GROUPS, EVENTS & DRAWS:-

- The SFA Mumbai 2016 Squash Tournament will be conducted in accordance with the age groups, events & draw size mentioned in the table below.
- Student entries will be accommodated basis the eligibility criteria set out in Point 4.

Age Groups, Events & Draws				
Sr. No.	Age Groups	Draw Size (Boys)	Draw Size (Girls)	
1	U-9	32	32	
2	U-11	32	32	
3	U-13	32	32	
4	U-15	32	32	
5	U-17	32	32	

2. TOURNAMENT FORMAT:-

- A knockout tournament will be played across all age groups and event categories for both, Boys and Girls.
- The matches will be a best of 3 games of 11 points each up till the Pre Quarter Finals. The Quarter Finals, Semi Finals and Finals will be a best of 5 games of 11 points each.
- Each participant can participate in one age category only.

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)
- Every participant must report at the venue's main registration desk 45 minutes prior to their scheduled match.
- The participant must report 15 minutes prior to his/her scheduled match time at the Squash registration desk.
- If the participant fails to report 7 minutes after the match is announced the opponent will get a walk over.
- The Squash Tournament schedule will be published on our website www.sfanow.in 30 days prior to SFA Mumbai
- Any participant found over age or with any manipulation in his/her documents, will be disqualified without any kind of prior intimation.
- Participants must wear appropriate apparel for the sport of Squash. Only non-marking / gum sole shoes will be permitted while playing matches.
- All participants must get their own kit & equipment.
- 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.
- It is compulsory for a participant to wear an eye guard during his/her match.
- 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



SQUASH



4. ELIGIBILITY CRITERIA:-

- Students from schools registered with Sports For All will get first preference for participation.
- First preference will be given to District, State and National ranked players. Remaining vacant slots will be allocated on a first come first serve basis.
- Participants ranking from the period 1st January 2015 up to 25th October 2016 will be considered.
- Incomplete details in the entry forms or any manipulations 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 Dates	
U-9	Born on or After 1st January 2008	
U-11	Born on or After 1st January 2006	
U-13	Born on or After 1st January 2004	
U-15	Born on or After 1st January 2002	
U-17	Born on or After 1st January 2000	

5. TOURNAMENT ORGANIZING COMMITTEE:-

- Tournament Director.
- Tournament Referee.
- SFA Representative.









Gender Boy Girl

PARENT/GUARDIAN CONSENT FORM

SFA Mumbai 2016		
School Name: School Authority /		
Sports Co-ordinator / Coach:	Name Phone No.	
Name of the Participant:	Last Name	
	First Name	
	Middle Name	
SFA ID**:		
Participant's		_
Residential Address:		
Date of Birth:	Age:	
	Day Month Year	
Participant's Contact Information:		
Mob:	Res:	
E-mail:		
Emergency Contact (Parel	nt / Guardian):	
Name:		
E-mail:		
Mob:	Res:	
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PARENT/GUARDIAN CONSENT FORM

Select the Sports you wish to participate in:		
	/olleyball	
Racquet Sports: Tennis (Singles & Doubles) Table Tennis (Singles & Doubles) Badminton (Singles & Doubles) Squash		
Combat Sports: Karate Judo Boxing Sport Mix Martial Ar	☐ Taekwondo ts ☐ Fencing	
Target Sports: Shooting Archery		
Aquatics: Swimming Water Polo		
Individual Sports:		
Carrom	Chess	
Athletics	Gymnastics	
In the event that a school does not register students will still be allowed to participate by paying:		
1) Rs. 300 +all applicable taxes/ student (Individual Sports, Target Sports, Racquet Sports, Combat Sports and Aquatics)		
2) Rs. 200+ all applicable taxes/ student (Team Sports)		
3) In case a Student is participating in both team and individual sports (For example : he / she is participating in Tennis and Handball) then he / she will have to pay Rs. 500 +all applicable taxes.		
Kindly Note: Payment of the above mention their respective Sports Category.	ned fees allows a student to participate in all the sports mentioned in	
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PARENT/GUARDIAN CONSENT FORM

RELEASE/WAIVER FORM

parent and/or legal guardian hereby agree to assume all risks attendant up the activities and the minor's experience and capabilities and believe the participate in such event. I/We understand that the (a) the activities involve and death ("risks"); (b) these Risks and dangers may be caused by my ow Event; (c) there may be other risks and social and economic losses either i	Event, I/we, Mr.————————————————————————————————————
which may hereafter accrue to child/participant, as a result of child/participar liability SFA Events Pvt. Ltd. and its members, chapters and/or any of their a injury, or damages, to persons or property which the child/participant may su this waiver, release and assumption of risks to be binding on our heirs and	ersonal injury, or property damage which the child/participant may have, or not participation in this Event. I/We agree to indemnify and hold harmless from agents, servants, volunteers, or employees by reason of any accident, death, uffer, while participating in this Event. It is further understood and agreed that assigns of the child/participant. I/We agree to assume all responsibilities for ille participating in this Event. I/We have read and understood the contents of
Parent/Guardian's Name:	
Date:	
	Parent/Guardian's Signature:









