

BADMINTON

*Date: 8th Dec. - 19th Dec.

Venue: D.Y. Patil Sports Academy, Nerul

Under the aegis of:

SFA Mumbai 2016

Gender Boys Girls

U - 11 U - 13 U - 15 U - 17 Age Group *In a team both the participating players must be from the same school

School Name:	
School Authority / Sports Co-ordinator / Coach: Name	Phone No.
Participant - 1 Last Name First Name Middle Name SFA ID**:	Participant - 2 Last Name First Name Middle Name SFA ID**:
Participant's Residential Address:	Participant's Residential Address:
Age: Date of Birth: Day Month Year Age: Date of Birth: Day Month Year Participant's Contact Information:	
Emergency Contact (Parent / Guardian): Name: Mob: Res: E-mail: Page - 1 **Students who participated in SFA Mumbai 2015 can New participants will be given their	
	Date:SFA Rec Stamp in by the 10th November 2016.



BADMINTON Doubles



1. AGE GROUPS, EVENTS AND DRAWS:-

- The SFA Mumbai 2016 Badminton Tournament will be conducted in accordance with the age groups, events and 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 Group	Draw Size (Boys)	Draw Size (Girls)
1	U-11	32	32
2	U-13	32	32
3	U-15	32	32
4	U-17	16	16

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 15 points each up till the Pre Quarter Finals. The Quarter Finals, Semi Finals and Finals will be a best of 3 games of 21 points each.
- A team will be allowed to participate in one age group only.

3. RULES & REGULATIONS:-

- The tournament will be conducted as per the rules & regulations laid down by the BWF and BAI (Badminton World Federation and Badminton Association of India).
- 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
- The participant must report at the venue's main registration desk 45 minutes prior to his/her scheduled match.
- The team has to report 15 minutes prior to his/her scheduled match time at the Badminton registration desk.
- If the team fails to report 7 minutes after the match is announced the opponent will get a walk over.
- The Badminton Tournament schedule will be published on our website www.sfanow.in by the 10th November 2016.
- 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 Badminton. Only non-marking / gum sole shoes will be permitted while playing matches.
- Participants will not be allowed to use their mobile phones in the stipulated playing arena.
- The Tournament Organizing Committee has the right to postpone or cancel the tournament in case of unavoidable circumstances. All schools are requested to co-operate in any such case.
- If any one participant of a team is unable to take part in the tournament even after giving his/her entry that player can be replaced with another player on a special request at least 1 day before the tournament.
- In case of any dispute the decision of the Tournament Organizing Committee will be final and binding.
- 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



BADMINTON Doubles



4. ELIGIBILITY CRITERIA:-

- Teams from schools registered with Sports For All will get first preference for participation.
- The teams will be accommodated on a first come first serve basis.
- 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-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

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:	Day Month Year	
Participant's Contact Inforr	nation:	
Mob:	Res:	
E-mail:		
Emergency Contact (Parer		
	Door	
Mob:	Res:	
Page - 1 **Students who participated in SFA Mumbai 2015 can find their SFA ID on our website www.sfanow.in. [Contd] New students will be given their SFA ID at the time of registration.		
For Offical Use Only		
Form No.:	·	Date:
Inwards No.:		SFA Rec Stamp



Select the Sports you wish to participate i	n:	
Team Sports: Basketball Handball Vol	lleyball Football Throwball	
Hockey Kho Kho Ka	baddi	
Racquet Sports: Tennis (Singles & Doubles) Badminton (Singles & Doubles)	Table Tennis (Singles & Doubles) Squash	
Combat Sports: Karate Judo Boxing Sport Mix Martial Arts	Taekwondo 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 (Tea	am Sports)	
3) In case a Student is participating in both to Handball) then he / she will have to pay Rs	eam and individual sports (For example : he / she is participating in Tennis and s. 500 +all applicable taxes.	
Kindly Note: Payment of the above mentione their respective Sports Category.	ed fees allows a student to participate in all the sports mentioned in	
Page - 2	[Contd]	



RELEASE/WAIVER FORM

In consideration of the acceptance of this application as a participant in the Event, I/w parent and/or legal guardian hereby agree to assume all risks attendant upon the chi the activities and the minor's experience and capabilities and believe the minor to participate in such event. I/We understand that the (a) the activities involve risks and and death ("risks"); (b) these Risks and dangers may be caused by my own actions Event; (c) there may be other risks and social and economic losses either not known and assume all such risks and all responsibility for losses, costs, and damages the chi in the Event	Id while participating in this Event. I/We understand the nature of be qualified, in good health, and in proper physical condition to dangers of serious injury, including permanent disability, paralysis, or inactions, the actions or inactions of others participating in the to us or not readily foreseeable at this time, and I/we fully accept
I/We hereby waive, release and discharge any and all claims for death, personal injury which may hereafter accrue to child/participant, as a result of child/participant participal liability SFA Events Pvt. Ltd. and its members, chapters and/or any of their agents, ser injury, or damages, to persons or property which the child/participant may suffer, while this waiver, release and assumption of risks to be binding on our heirs and assigns of any property damage or injury to any person caused by child/participant while participat this form.	tion in this Event. I/We agree to indemnify and hold harmless from vants, volunteers, or employees by reason of any accident, death, participating in this Event. It is further understood and agreed that the child/participant. I/We agree to assume all responsibilities for
Parent/Guardian's Name:	
Date:	
Parer	nt/Guardian's Signature:













SFA Mumbai 2016	Boy Gin	
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 Infor	mation:	
E	Res:	
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Parent/Guardian's Name:	
Date:	
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