

# Halliford COLTS FC

## 11-A-SIDE PRE-SEASON TOURNAMENT 31<sup>st</sup> AUGUST & 1<sup>st</sup> SEPTEMBER 2024



Thank you for entering our 11-a-side Soccer Tournament. We can't wait to see you there! Attached are more details about the day itself, team registration form, and the rules of play. The registration form must be handed into the control tent at least **30 minutes** before kick-off. Manager's meetings will be held at 9.00AM for AM entries and 1.30PM for PM entries at the control tent.

**Please note all age groups (U12, U13, U14 and U16) will have a maximum of 16 players registered, be mixed gender and there will be Cup and Plate (trophies for winners and runners up).**

### KICK-OFF TIMES FOR FIRST MATCHES IN EACH AGE GROUP ARE AS FOLLOWS:

Saturday AM (First KO 9.30am)  
U12

Sunday AM (First KO 9.30am)  
U14

Saturday PM (First KO 2.00pm)  
U16

Sunday PM (First KO 2.00pm)  
U13

FOOD, DRINK, ICE CREAM AND PHOTOGRAPHER FROM 9.00AM ON THE DAY.



Springwest Academy  
Browells Lane  
Feltham  
TW13 7EF

**PLEASE NOTE NO DOGS ARE ALLOWED AT THE VENUE AT ANY TIME (APART FROM GUIDE DOGS).**

ENTRY PER ADULT £3.00 PAYABLE AT THE GATE. ONE MANAGER AND CHILDREN (U16) ARE FREE. CASH OR CARD PAYMENTS WILL BE AVAILABLE ON ENTRANCE, REFRESHMENTS AND BBQ.

Only alcohol that is purchased on site can be consumed and this must be in the designated bar area (orange netted area). First Aid centre can be found in the Control Tent and there is a defibrillator on site.

Any questions, please email [hcfctournament@yahoo.com](mailto:hcfctournament@yahoo.com).

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## TOURNAMENT TEAM REGISTRATION FORM 2024

TEAM \_\_\_\_\_ AGE GROUP \_\_\_\_\_

TEAM COLOURS \_\_\_\_\_

IF TWO OR MORE TEAMS ARE ENTERED FROM THE SAME CLUB, AT THE SAME AGE GROUP, PLEASE DIFFERENTIATE WITH AN 'A' OR 'B', 'REDS' OR 'BLUES' ETC. ALL AGE GROUPS (U12-15) HAVE A MAXIMUM OF 16 PLAYERS, MIXED GENDER AND THERE IS A CUP AND PLATE.

NO ACADEMY/CENTRE OF EXCELLENCE PLAYERS ARE PERMITTED TO PARTICIPATE AT ANY AGE GROUP UNLESS THEY HAVE BEEN RELEASED FROM THEIR CONTRACT.

### PLAYERS NAME

### DATE OF BIRTH

1) \_\_\_\_\_

\_\_\_\_\_

2) \_\_\_\_\_

\_\_\_\_\_

3) \_\_\_\_\_

\_\_\_\_\_

4) \_\_\_\_\_

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5) \_\_\_\_\_

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6) \_\_\_\_\_

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7) \_\_\_\_\_

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8) \_\_\_\_\_

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9) \_\_\_\_\_

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10) \_\_\_\_\_

\_\_\_\_\_

11) \_\_\_\_\_

\_\_\_\_\_

12) \_\_\_\_\_

\_\_\_\_\_

13) \_\_\_\_\_

\_\_\_\_\_

14) \_\_\_\_\_

\_\_\_\_\_

15) \_\_\_\_\_

\_\_\_\_\_

16) \_\_\_\_\_

\_\_\_\_\_

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I CERTIFY THAT I HAVE CHECKED ALL THE ABOVE INFORMATION AND CAN CONFIRM THAT IT IS CORRECT. I ACCEPT ALL THE RULES OF THE COMPETITION AND I FULLY UNDERSTAND THAT IF I REGISTER OR PLAY AN OVER AGE PLAYER, OR A PLAYER IN MORE THAN ONE TEAM, OR BREAK ANY OTHER RULES, THE TEAM WILL BE IMMEDIATELY DISQUALIFIED FROM THE TOURNAMENT WITHOUT GROUNDS FOR APPEAL:

NAME OF TEAM MANAGER \_\_\_\_\_

SIGNATURE \_\_\_\_\_

THIS FORM MUST BE HANDED INTO THE CONTROL TENT AT LEAST **30 MINUTES** PRIOR TO THE FIRST MATCH IN THE AGE GROUP.

Tournament Rules and Referee details to be updated here shortly