|  |
| --- |
| **OFFICIAL USE ONLY**  Team Name  Age Group  Venue |

**CLUB REGISTRATION**

**& BOOKING FORM**

**2024**

**PLEASE COMPLETE ALL PAGES OF THIS FORM**

**CLUB REGISTRATION FORM**

**HOW TO MAKE A BOOKING**

1. Contact SCI to check availability at your selected venue. Call us on 01305 768555.
2. Complete the club registration form below in full and return to SCI with the correct team registration fees.
3. You will then be sent an SCI accommodation booking form and SCI group accommodation occupancy forms to complete and you will need to return these with a £40.00 per person accommodation deposit within 3 weeks.
4. Confirmation of your booking and outstanding balance will be sent to you within 10 working days.
5. Please provide an email address to enable certain forms and festival information sheets to be passed on to you whenever possible.
6. No booking will be accepted unless **ALL** parts of this form are completed, signed and returned to SCI.
7. **All teams must provide their county affiliation number to be eligible for the 2024 SCI festivals.**
8. **ALL ACCOMMODATION MUST BE BOOKED WITH/THROUGH SCI. TEAMS WILL NOT BE ACCEPTED UNLESS THIS CONDITION IS ADHERED TO.**

## CLUB REGISTRATION FORM

|  |
| --- |
| FULL CLUB NAME:- |
| COUNTY F.A. FOR WHICH THE CLUB IS AFFILIATED TO FOR 2023/24 SEASON:- |
| COUNTY AFFILIATION NUMBER FOR 2023/24 SEASON:- |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| NAME OF CLUB SECRETARY | |  | | | | |
| ADDRESS OF CLUB SECRETARY | |  | | | | |
| POST CODE |  | | TEL No:- |  | Mob No:- |  |
| EMAIL: |  | | | | | |

I GIVE MY PERMISSION FOR ALL AGE GROUPS FROM OUR CLUB AS INDICATED ON THIS FORM TO PARTICIPATE IN THE 2024 SCI FOOTBALL FESTIVALS:

|  |  |  |  |
| --- | --- | --- | --- |
| SIGNTURE |  | DATE |  |

GROUP LEADER (PLEASE COMPLETE THIS SECTION IF DIFFERENT FROM CLUB SECRETARY)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME OF GROUP LEADER | |  | | | **POSITION IN THE CLUB** | | |  |
| ADDRESS OF GROUP LEADER | |  | | | | | | |
| POST CODE |  | | TEL No:- |  | | Mob No:- |  | |
| EMAIL: |  | | | | | | | |

**CONTACT EMAIL ADDRESS**

PLEASE MAKE SURE YOU HAVE SUPPLIED A CURRENT EMAIL ADDRESS ON THIS BOOKING FORM AS CORRESPONDENCE WILL

NOW BE SENT BY EMAIL FOR THE FESTIVALS. THIS INCLUDES ALL RECEIPTS AND INVOICES.

**VENUES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1ST CHOICE VENUE: |  | 2ND CHOICE VENUE: | |  |
| DATE OF 1ST CHOICE: |  | DATE OF 2ND CHOICE: | |  |
| APPOX TOTAL NUMBER OF PEOPLE IN YOUR GROUP | |  |

**AGE GROUPS**

PLEASE INDICATE THE NUMBER OF TEAMS TO BE ENTERED IN TO EACH AGE GROUP IN THE CORRECT BOX

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| MIXED 5 A-SIDE | U/7’S |  | U/8’S |  |  | |  |  |  |  |  |
| MIXED 7 A-SIDE | U/9’S |  | U/10’S |  |  | |  |  |  |  |  |
| MIXED 9 A-SIDE | U/11’S |  | U/12’S |  |  |
| MIXED 11 A-SIDE | U/13’S |  | U/14’S |  | U/15’S | |  |
| GIRLS 5-A-SIDE | U/7’S |  | U/8’S |  | U/9’S | |  |
| GIRLS 7 A-SIDE | U/10’S |  | U/11’S |  | U/12’S | |  | U/13’S |  | U14’S |  |
| GIRLS 7-A-SIDE | U/15’S |  |
| GIRLS 9 A-SIDE | U/12’S |  | U/13’S |  | U/14’S | |  | U/15’S |  |
| GIRLS 11-A-SIDE | U/14’S |  | U/15’S |  |  | |

**TEAM REGISTRATION FEES**

**£150 PER 5 A-SIDE TEAM £155 PER 7 A-SIDE TEAM £165 PER 9 A-SIDE TEAM**

**£210 PER U/13’S – U/14’S 11 A-SIDE TEAM £240 PER MIXED U/15’S - 11 A-SIDE TEAM**

**£210 PER GIRLS U14’S & U15’S – 11-A-SIDE TEAM**

TEAM REGISTRATION FEES ARE INCLUSIVE OF VAT

|  |  |  |  |
| --- | --- | --- | --- |
| TOTAL NUMBER OF 5 A-SIDE TEAMS |  | @ £150.00 PER TEAM = £ |  |
| TOTAL NUMBER OF 7 A-SIDE TEAMS |  | @ £155.00 PER TEAM = £ |  |
| TOTAL NUMBER OF 9 A-SIDE TEAMS |  | @ £165.00 PER TEAM = £ |  |
| TOTAL NUMBER OF U/13’S – U/14’S 11 A-SIDE TEAMS |  | @ £210.00 PER TEAM = £ |  |
| TOTAL NUMBER OF U/15’S TEAMS |  | @ £240.00 PER TEAM = £ |  |
| TOTAL NUMBER OF GIRLS U/14’S & 15’S – 11-A-SIDE |  | @ £210.00 PER TEAM |  |

**TEAM COLOURS**

(YOU MAY ENTER MORE THAN ONE AGE GROUP IN THE SPACE BELOW IF MORE THAN ONE TEAM PLAYS IN THE SAME COLOURS)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| AGE GROUP(S): |  | SHIRTS: |  | SHORTS: |  |
| AGE GROUP(S): |  | SHIRTS: |  | SHORTS: |  |
| AGE GROUP(S): |  | SHIRTS: |  | SHORTS: |  |
| AGE GROUP(S): |  | SHIRTS: |  | SHORTS: |  |

**LEAGUE DETAILS** (PLEAS INDICATE THE NAME OF THE LEAGUE AND DIVISION THAT EACH TEAM PLAYS IN)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| AGE GROUP(S) |  | NAME OF LEAGUE |  | DIVISION |  |
| AGE GROUP(S) |  | NAME OF LEAGUE |  | DIVISION |  |
| AGE GROUP(S) |  | NAME OF LEAGUE |  | DIVISION |  |
| AGE GROUP(S) |  | NAME OF LEAGUE |  | DIVISION |  |
| AGE GROUP(S) |  | NAME OF LEAGUE |  | DIVISION |  |

**SPECIAL REQUESTS**

PLEASE INFORM US BELOW OF ANY REQUESTS YOUR CLUB MAY HAVE WHICH MAY AFFECT THE FOOTBALL SCHEDULE FOR THE FESTIVAL. WE WILL TRY TO MEET ANY SPECIAL REQUESTS YOU MAKE BUT WE CANNOT GUARANTEE TO DO SO.

|  |
| --- |
|  |
|  |
|  |
|  |

**PAYMENT DETAILS.**

|  |  |  |
| --- | --- | --- |
| WE ENCLOSE A CHEQUE FOR | £ | MADE PAYABLE TO SCI EVENTS LTD. |

**PAYMENT BY BANK TRANSFER (FREE)**

Barclays Bank Weymouth Branch.

Account Name: SCI Events Limited

Account Number:- **03045870**

Sort Code:- **20-26-62**

Reference for Payment:- **Your Team Name & Age Group**

**PAYMENT BY DEBIT CARD.**

Please select type of card for payment.

Visa debit  Mastercard Debit  Maestro Debit

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| CARD NUMBER |  | | ISSUE NUMBER |  |
| VALID FROM |  | | EXPIRY DATE |  |
| LAST 3 DIGITS ON BACK OF CARD | |  | | |
| CARD HOLDERS NAME | |  | | |
| CARD HOLDERS ADDRESS | |  | | |
| POSTCODE | |  | | |

|  |  |  |
| --- | --- | --- |
| PLEASE DEBIT | £ | FROM MY ACCOUNT |

|  |  |  |  |
| --- | --- | --- | --- |
| CARDHOLDER SIGNATURE |  | DATE |  |

**DECLARATION**

My attention has been drawn to and I have read the conditions set out in this enclosed leaflet inside the current SCI brochure/website. I agree on behalf of all persons named on the booking form to abide by these conditions.

I am aware by completing the signature boxes using a computer, will constitute the same terms as conditions as if signed by writing in ink.

|  |  |  |  |
| --- | --- | --- | --- |
| SIGNATURE |  | DATE |  |

**PLEASE SEND THIS FORM TO: SCI EVENTS LIMITED, UNIT A, OXFORD COURT, CAMBRIDGE ROAD, WEYMOUTH, DORSET DT4 9GH TEL:01305 768555**

**Website: www.sci-footballfestivals.co.uk e-mail:** [**admin@sci-footballfestivals.co.uk**](mailto:admin@sci-footballfestivals.co.uk)

**SCI EVENTS Limited Registered Office: SCI EVENTS Limited, Unit A, Oxford Court, Cambridge Road, Weymouth, Dorset DT4 9GH**

**Company Registration Number: 10458193 VAT Number: 273262016**