

GOVERNMENT ON NATIONAL CAPITAL TERRITORY OF DELHI
DIRECTORATE OF EDUCATION: SPORTS BRANCH
CHHATRASAL STADIUM: MODEL TOWN: DELHI-110009

No. DE-41/Sports/2016/ 25215-25264 Dated : 4th February, 2016

To

The Heads of All Schools,
Directorate of Education,
Delhi / New Delhi

Sub:- Organization of Inter-Zonal Table Tennis Team Championship (U-19 Yrs. Boys & Girls) 2015-16. At Thyagraj Stadium, New Delhi.

Sir / Madam,

Sports Branch, Directorate of Education, Govt. of NCT of Delhi will conduct Inter-Zonal Table Tennis Team Championship 2015-16 (for U-19 Yrs. Boys & Girls) on 16th & 17th February, 2016, as per schedule given below at Thyagraj Stadium, Near I.N.A. Metro Station.

Scheduled For Inter Zonal Table Tennis Team Championship 2015-16 (U-19 Yrs Boys & Girls)

S.No.	Age Group	Date & Time	Eligibility Criteria
01	U-19 (Boys)	16.02.2016 at 10.00 AM	For U-19 Years should be born on or after 1.1.1997 and Student of upto 12 th Class
02	U-19 (Girls)	17.02.2016 at 10.00 AM	

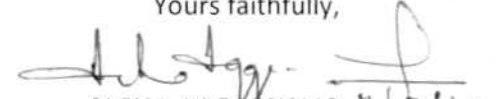
General Instructions to Teams:

1. List with performa of the players of the team should be submitted before the match to the In-charge having all particulars (Name, Father's Name, School, Class, Admn. No. and DOB) of the player as per school record. **No team will allow to play without submitting proforma and school identity card.**
2. All the matches will be played according to the Rules of the SGFI.
3. Team captains must report to the Referee's Table 15 minutes before the match, the captains shall decide by toss the choice of their teams.
4. The order of play shall be as follows:-
Best of three games upto pre-quarter and Best of Five Games from Quarters onward.
Order of play for girls A Vs. X, B Vs. Y, Doubles then reverse and for Boys A,B, C and X,Y,Z.
5. Players can take time out for one minute once in the entire match.
6. Decision of Tournament Committee shall be final in all matters connected with the Championship.

7. For any further inquiry please call Ms. Madhu Diwan (9311244330), & Sh. Lokesh (9911120053).

NOTE : After Final, Prize Distribution at 2.30 p.m. on 17th February, 2016. The cash prize will be given to the players only.

Yours faithfully,


(ASHA AGGARWAL) 17/2/16
Deputy Director of Education (Sports)

Copy forwarded to the:-

1. All RDE's
2. All District DDEs
3. All ADEs
4. All EOs
5. All SPEs
6. PS to Director of Education
7. Guard File
9. O.S. (IT) with the request to place the circular on website.

ENTRY FORM (TABLE TENNIS)

(Age Group - U-19 yrs (BOYS & GIRLS))

Zone No. : _____

Name of player : _____

Father's Name : _____

Mother's Name : _____

Sex (Male / Female) : _____

Date of Birth (in figure) : _____

(In words) _____

Class in which studying : _____

School Name : _____

Student's I.D. : _____

Permanent Address : _____

Contact No. : _____

Recent colour
photograph

(To be attested by
Head of the School)

I hereby certify that the particulars given above are true. Any false information will lead to cancellation of my candidature.

(Signature of player)

Dated :- _____

Name & Signature of the Head of the School with Seal.