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

No. DE- 41/2017/Sports/ 11926-11975

Dated:- 23-10-17

CIRCULAR

Sub: - Inter Zonal Gymnastic competition 2017-18 in Under-14, 17 & 19 years (Boys & Girls) for Delhi school students.

Sports Branch, Directorate of Education, Govt. of NCT of Delhi intends to organize <u>Inter</u> Zonal Gymnastic competition 2017-18 in Under-14, 17 & 19 years (Boys & Girls) for Delhi school students w.e.f. 30.10.2017 onwards at 9.30 A.M. as per detail given below:

S. No.	Date	Group	Event	Venue
1.	30.10.17	Artistic Girls (U-14years)	All Apparatus VT, F.Ex., BB, UB	SBV, Moti Nagar
2.	31.10.17	Artistic Girls (U-17 & 19 years)	do	do
3.	01.11.17	Rhythmic (all categories) & Acrobatic Boys (U-19 years)	All Apparatus	do
4.	02.11.17	Artistic Boys (U-14 years)	do	SBV, Subhash Nagar
5.	03.11.17	Artistic Boys (U-17 years)	do	do
6.	04.11.17	Artistic Boys (U-19 years)	do	do

The Head of the School should send the duly attested entry of their school students in the enclosed prescribed proforma at Annexure-I, at SBV, Moti Nagar, New Delhi till 28.10.2017. The players will have to report in the proper playing kit. For further information, please contact Smt. Sushila Choudhary (9711373764) and Shri Parminder (9911327417).

Note:

- (i) The students of Kendriya Vidyalaya are not eligible to participate in the selection trial.
- (ii) The copy of birth certificate of the student, issued by Municipal Authority, is to be enclosed. The birth of the child should have been registered by the Municipal authority within one year of the birth of the student. In case it is not so, then the student will have to furnish details of his educational qualification from nursery onwards in the proforma enclosed at Annexure-II.
- (iii) In case of need, a student might have to undergo medical examination for age verification from the Govt. hospital.
- (iv) All players should have mandatory AADHAAR Number.
- (v) All the participants should be in their proper kit.
- (vi) A player can participate in only one age category in that particular year.
- (vii) In case of any dispute, protest can be lodged with protest fees of Rs.500/-, within one hour of completion of the bout. No request would be allowed after the stipulated time.

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Instructions:

- 1. No Gymnast / Team will be allowed on the apparatus without Coach / PET.
- 2. Gymnast should participate in the competition at their own risk.
- Boys & Girls in Under-14, 17 & 19 years category should be evaluated as under SGFI latest code of points.
- A Gymnast can opt only in one event i.e. either in Acrobatic, Rhythmic or Artistic. Once Gymnast is selected in one event, then he/she will not be allowed in another event. This will be strictly observed during the tournament.
- In Rhythmic Gymnastic, the team will consist of only 3 Gymnasts and each Gymnast can participate in 4 apparatus.
- The Gymnast has to submit D-1, D-2 forms before 24 hours of commencement of competitions positively.
- 7. Competition-III will be organized in both section, if need arise.

Dy. Director of Education (Sports)

Copy forwarded to the:-

- 1. All Spl. DEs
- 2. All Addl. DEs
- 3. All RDEs
- 4. All DDEs
- 5. All ADEs
- 6. All EOs
- 7. All SPEs
- 8. All HOSs
- 9. PS to Secy. (Edn.)
- 10. PS to Director (Edn.)
- 11. Concerned persons as mentioned in the circular.
- 12. OS (IT) with the request to place the circular on website.

ENTRY FORM

INTER ZONAL GYMNASTIC COMPETITION 2017-18

FROM 30.10.2017 TO 04.11.2017

UNDER - 14, 17 & 19 YEARS {BOYS & GIRLS}

Name of the School/ Institution:

Age Group: -

(Boys/Girls)

Events: - Rhythmic / Artistic / Acrobatic Gymnastics

Note: The entry forms must be submitted separately for boys and girls group wise, please read the given instruction carefully.

Name of the Participant	Father's Name	Class	Date of Birth

Note:-Before signing the entry forms please verify the details of the participant as per official record of your School.

Name & Signature of the Team Coach/In-charge Contact No.

Name & Signature of the Head of the School with Seal

ANNEXURE-II

Name of the student :

Date of Birth :

Class	Name and complete address of the school	Admn. No.	Year of study
Nursery/LKG			
KG/UKG			
Ι			
II			
III			
IV			
V			
VI			
VII			
VIII			
IX			
X			
XI			
XII			
	Nursery/LKG KG/UKG I II III IV V V VI VI VII VII IX X X	school Nursery/LKG KG/UKG I II II IV V VI VII VII X XI	school Nursery/LKG KG/UKG I I II II II IV V VI VI VII IX X XI

Details of educational qualifications :

(Signature of student/Parent)