**Surrey FA**

**Tournament & Competitions Affiliation form** (Form B)

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**Competition Affiliation 2019/20**

Thank you for expressing an interest in affiliating a competition with Surrey FA (SCFA).

Please be aware that all competitions MUST be sanctioned by the County FA and this form is designed to include all information regarding the running of your competition and should be completed and returned no later than two weeks before the date of your competition.

Submission of this form does not mean the competition is sanctioned and will only be affiliated once payment is made and confirmation from Surrey FA is given.

When filling out the form please ensure you complete only the sections relevant to your competition type. We strongly advise that competitions only include teams that have completed their affiliation.

Once finished please return this form to:

Football Services Department, Surrey County FA, Meadowbank Football Ground, Dorking, RH4 1DX or by email to affiliation@surreyfa.com. If you need any advice on completion please call 01372 373 543.

**Competition Classification**

Please use the table below to determine what ‘type’ of competition you should be affiliating and note that ‘standard league competitions’ (affiliated league wishing to run a league cup etc.) have additional affiliation protocols to complete.

**Affiliation Fees**

**\*Please do not send any money with this form. You will be invoiced in due course\***

|  |  |  |
| --- | --- | --- |
| **Competition Type** | **Description** | **Affiliation Fee** |
| Central Venue Competition | Short term leagues or competitions that take place at one venue with *affiliated teams* | £40 per Competition |
| Central Club Competition | Short term leagues or competitions that take place at one venue with groups that are *not affiliated as teams* (such as turn up and play, intra-mural) | £50 per Competition |
| Little League Competition | Little League format  | £50 per Competition |
| One/Two Day Tournament | Summer tournament etc. | £30 per Tournament |
| Charity Competition | Tournaments raising funds for nominated charities | £10 per Competition |

**Formats**

Traditional league playing formats (5v5 for U7 & U8 for example) can be adapted for each competition but should be made clear on your application. SCFA reserve the right to request changes to formats where they deem appropriate.

**Charity Competitions**

A statement of accounts must be submitted to the County Office within 21 days of completion of the tournament, clearly stating which Charity or Good Cause has benefited. Charity and Good Cause Competitions applies to recognised, structured competitions. One off matches for charitable causes only require an application in writing to bob.dick@surreyfa.com

**Insurance**

Central club and venue leagues must purchase Public Liability Insurance cover if the participating teams do not have their own individual cover. This can be purchased direct from our recommended suppliers, Sportsguard at the time of affiliation, or from your own preferred supplier before starting the affiliation process. The minimum Indemnity Limit required is £10,000,000.

If you are purchasing insurance from an alternative provider please enclose a copy of your 2019/20 cover schedule with this form. Sportsguard Public Liability Insurance is £28.00 per policy.

**Rules**

You must submit the competition rules with this form in order for the competition to be sanctioned. For more information or help with your competition rules, please contact the SCFA office.

**Change of competitions Officials**

Changes to competition personnel, especially in the roles of Secretary, Treasurer and Chairman must be made in writing to bob.dick@surreyfa.com by the Secretary of the Competition. This should include the name, address and date of birth (plus FAN number, if known) of the new official. If the Competition Secretary is changing, the Chairperson must inform the County FA of the new person(s) details.

**Complete the affiliation form overleaf**

**Affiliation forms**

Please ensure you enclose all necessary accompanying documents with this form as outlined below.

**Form B.2 Competitions Affiliation**

|  |  |
| --- | --- |
| **NAME OF COMPETITION:** |  |
| **TYPE OF COMPETITION:****(please indicate)** | **CENTRAL VENUE / CENTRAL CLUB / LITTLE LEAGUE / DAY TOURNAMENT / CHARITY** |
| **VENUE:** |  | **CLOSING DATE FOR APPLICATIONS:** |  |
| **DAY OF PLAY:****(please indicate)** | **MON / TUE / WED / THUR / FRI / SAT / SUN** |
| **DATE(s) OF COMPETITION:** |  |
| **COMPETITION SECRETARY DETAILS** |
| **NAME:** |  |
| **POSTAL ADDRESS:** |  |
|  | **POST CODE:** |  |
| **EMAIL ADDRESS:** |  | **DATE OF BIRTH:** |  |
| **PREFERRED CONTACT NUMBER:** |  |
| **COMPETITION CHAIRPERSON DETAILS** |
| **NAME:** |  |
| **POSTAL ADDRESS:** |  |
|  | **POST CODE:** |  |
| **EMAIL ADDRESS:** |  | **DATE OF BIRTH:** |  |
| **PREFERRED CONTACT NUMBER:** |  |
| **COMPETITION TREASURER DETAILS** |
| **NAME:** |  |
| **POSTAL ADDRESS:** |  |
|  | **POST CODE:** |  |
| **EMAIL ADDRESS:** |  | **DATE OF BIRTH:** |  |
| **PREFERRED CONTACT NUMBER:** |  |
| **COMPETITION WELFARE OFFICER DETAILS (if required)** |
| **NAME:** |  |
| **POSTAL ADDRESS:** |  |
|  | **POST CODE:** |  |
| **EMAIL ADDRESS:** |  | **DATE OF BIRTH:** |  |
| **PREFERRED CONTACT NUMBER:** |  |

**YOU MUST ENCLOSE A COPY OF YOUR COMPETITION RULES WITH THIS FORM**

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| **Competition Declaration**  |
| I hereby undertake to forward to SCFA a countersigned balance sheet for the Competition / Tournament within 21 days of completion of the event. |
|  |  |
| Signed: Hon SecretaryOr Organiser |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Fee** | **QTY** | **Total Due** |
| ***Affiliation Fee (select)*** |  |  |  |
| Central Venue League | £40.00 |  |  |
| Central Club League | £50.00 |  |  |
| Little League | £50.00 |  |  |
| One/Two Day Tournament | £30.00 |  |  |
| Charity Competition | £10.00 |  |  |
| Public Liability Insurance | £28.00 |  |  |
| Benevolent Fund Donation |  £ |  |  |
| **TOTAL** | **£** |

**\*Please do not send any money with this form. You will be invoiced in due course\***

**Office use only**

|  |  |  |  |
| --- | --- | --- | --- |
| Affiliation No | Comp Ref | Receipt No | Date entered |
|  |  |  |  |
| Full Sanction given on (date):  |       |
|  |