  **![9945921-jugadores-de-tenis-de-mesa-est-n-activos-en-la-silueta[1]]()**

**Grampian Games 2017**

**Friday 26th – Sunday 28th May**

**For athletes with a physical, sensory or learning disability**

**Events:**

**Friday 26th May**

Football – 6.30pm - 8.30pm

Aberdeen Sports Village

Indoor Bowls – 6.30pm – 8.30pm

Garioch Indoor Bowling Centre

**Saturday 27th May**

Boccia – 09:30am – 5pm

Table Tennis – 11:00am – 5pm

*Aberdeen Sports Village\**

Wheelchair Basketball – 10am – 4pm

*Beach Leisure Centre*

**Sunday 28th May**

Swimming – 12:30pm – 4pm

*Inverurie Swimming Pool*

Ten Pin Bowling – 5:30pm – 8:30pm

*Garioch Indoor Bowling\**

To enter please complete the enclosed entry form and code of conduct form and send to: Andrinne Craig, Development Officer – Active Lifestyles, Sport Aberdeen, Broadfold House, Bridge of Don, Aberdeen, AB23 8EE with the correct payment made out to “Grampian Disability Sport” by 12th May 2017.

If you have any queries please contact Claire McDonald, Regional Development Manager on claire.mcdonald@scottishdisabilitysport.com or call 07533056564 .

\* Please note the ASV café opens at 9.30am on Saturday 27th May & the kitchen at Garioch Indoor Bowling is open until 7pm on Sunday 28th May.

   



**Football Tournament for Players with a Physical, Sensory or Learning Disability**

**Friday 26th May**

**6.30pm – 8.30pm**

*Aberdeen Sports Village*

Football teams are invited to attend the AFCCT 5-a-side Football tournament as part of the Grampian Games!

Teams may comprise of up to 8 players and the three substitutes may be used at any time on roll on roll off basis. All players should come prepared with the team strip, shin guards and suitable footwear (Astroturf trainers or normal trainers, No blades or studs will be allowed). Teams should bring at least one set of strips – a change of colour would be ideal, if not a suitable set of bibs. Depending on entries teams may be split into categories, please tick the category that applies to you most.

The entry fee will be £20.00 per team. Cheques should be made payable to “Grampian Disability Sport".

Certified Aberdeen Football Club Community Trust coaches/ officials will be in charge of each match and 5-a-side rules will be applied (see below). Matches will be played indoors on all-weather pitches with 5-a-side goals. Each game will last 10 minutes (this may be subject to change on day) with no half time.

**5 – a- side Rules**

**Teams**

* Teams should bring at least one set of strips per team and where possible a change of colour (bibs or second top).
* Teams will comprise 4 outfield players plus a goalkeeper.
* Squads may have a maximum of 8 players.
* Substitutions can be made on a rolling basis; however these can only take place with the referee’s permission.
* Players who have been substituted may return to the field of play as often as necessary.
* All team members should receive equal playing time where possible.
* Whilst coaches will nominate their teams per section the Organising Committee have the power to move a team to a different division.

**The Ball**

* A size 5 Football will be used.

**Offside**

* There is no offside

**Duration of the Game**

* The duration of games will be decided once all entries have been received (approx 10 mins).
* There will be no half time.
* The team leaders have joint discretion to alter the length of the game in the event of poor weather conditions, pitch conditions or an obvious difference in banding.

**Match Supervisor**

* Officials/Coaches will be appointed to referee each game

**Re-start**

* Play shall be re-centred after a goal has been scored with the opposing team starting at approximately 3 metres away from the ball on their own side of the pitch.

**Equipment**

* All players must wear shin-guards.
* Player must wear footwear suitable to the surface (e.g. metal studs are not permitted).

**Pass back**

* The current pass-back rule will not apply.

**Penalty Kicks**

* Normal rules apply with the kick taken from the penalty mark, which is approximately 6 metres from the goal line.

**Goalkeepers**

* Goalkeepers may only kick the ball from the ground (kicking from hands/bounce or ½ volley is not allowed).
* Goalkeepers should be encouraged to throw the ball out as often as possible.
* Should Goalkeepers leave the penalty box, an in-direct free kick will be awarded.

**Coaches**

* Team coaches will stand on the same side of the field.
* At the end of every game, team coaches should encourage both teams to shake hands.

**Behaviour**

* Team coaches should substitute players displaying unacceptable behaviour.
* It is recommended that a player is substituted immediately on receipt of a yellow card. If two yellow cards are issued to any player in the tournament then the player will miss the following game.
* Please ensure if changing areas are used players are supervised at all times. The use of mobile telephones and other photographic equipment is not permitted in the changing areas.
* Any person taking photographs is required to complete a form on the day at the registration table.
* Please ensure that the enclosed SDS Code of Conduct is signed by head coaches of individual team and that the players are aware of the standards of behaviour required.

**Grampian Games - FOOTBALL**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TEAM ENTRY FORM:** | **TEAM:** |  | **CONTACT PERSON:** |  |
|  | **TEL NO:** |  | **EMAIL:** |  |
|  | **ADDRESS** |  |
|  |  |  |

**Please tick (√) category:**

     Group A     Senior section – any players over the age of 16 (any disability)

     Group B     Junior section – S1-S6 pupils (any disability)

**Team List**

***Please note a consent form is required for each team member. The team leader/coach can sign the code of conduct on behalf of the team.***

|  |  |  |
| --- | --- | --- |
| **NO** | **NAME** | **D.O.B** |
| **1** |  |  |
| **2** |  |  |
| **3** |  |  |
| **4** |  |  |
| **5** |  |  |
| **6** |  |  |
| **7** |  |  |
| **8** |  |  |

**Please complete the nos. for your team (s) in each category**

|  |  |  |
| --- | --- | --- |
| **Gender** | Male |  |
| Female |  |
| **AGE** | Primary |  |
| Secondary |  |
| 18-24 |  |
| 25-44 |  |
| 45-64 |  |
| 64 plus |  |
| **Disability** | Wheelchair users |  |
| Ambulant participants with a physical disability |  |
| Blind and visually impaired participants |  |
| Deaf & hearing impaired participants |  |
| Participants with a learning disability |  |

**Grampian Games Athlete Code of Conduct - Football**

**Aim: To ensure that all athletes/coaches involved with G.D.S. participate within an agreed philosophy and set of standards.**

**Principle Statement of Ethics**

Sporting integrity is based on the acceptance of rules, fairness, equality, respect for others, moral conduct and a sense of what is right. The goal of G.D.S. is to create a sporting environment where violence, breaking the rules, the abuse of drugs, the lack of fair play and other unethical behaviour are automatically rejected as being irrelevant to the true purpose of sport.

I the athlete/coach agree to the following:

1. to abide by the principle statement on Ethics above
2. practice and play within the spirit of the game
3. help each other to learn new skills
4. compete as a team
5. respect others – coach, officials, other players, team managers, parents who help organise/play the sport
6. do not direct verbal, physical, emotional abuse towards opponents/coaches/umpires/event organisers & other team members
7. treat all others as you would like to be treated, with integrity and respect
8. arrive before the start of each session to ensure adequate preparation and to be punctual on all occasions, where possible provide information in advance if you are ill or unable to attend any session.
9. set a good example at all times in aspects of dress, language, behaviour, and respect of equipment and others.

Signature: ......................................................... Date: ......................................



**GRAMPIAN GAMES CONSENT FORM – for individual participants - Football**

Participant’s Name:………………………………………Male/Female………………..

Age: ..................................................... Name of School: (if applicable) .............................................................................

Parent/Carer’s Name: ...........................................................................................................

Contact No. ............................................ Email: ...................................................................

Will a carer accompany the participant to the session? (Please circle) YES / NO

If no, please give the name of someone we can contact during the time of the session in case of emergencies.

Name: ........................................................................................ Contact No. .....................................................................

Please use the space below to share further information about your disability you feel we may need to know to provide the best sporting experience for you. Please inform if you use a wheelchair or assisted devices.

……………………………………………………………………………………………………………………………………………………………………………………………………………

Please indicate any special medical needs you may have that we should know about e.g. Asthma, Epilepsy

……………………………………………………………………………………………………………………………………………………………………………………………………………

Please indicate any special educational needs you may have you would wish to make us aware of:

…………………………………………………………………………………………………………………………………………………………………………………………………………….

If you use sign language or have a special need relating to communication please state below and elaborate as fully as possible (e.g. do you use Makaton)

……………………………………………………………………………………………………………………………………………………………………………………………………………

Do you consent to receiving first aid/medical treatment? (please circle) YES NO

Photography may be used during the sessions. Images will be used in publications and on our website to publicise our services or celebrate special events. These may also appear in our printed publications, on our website, intranet, social media ie facebook, twitter and on Plasma screens in various council offices. We may also send them to the news media.

Please tick this box if you **DO CONSENT** to the participant being photographed and images used as indicated above **🞏**

Please tick this box if you **DO NOT** wish the participant to be photographed and images used as indicated above **🞏**

Signature ........................................................................ Relationship .................................

Please include your email address if you would like to be added to our emailing list to be the first to hear about new clubs, events and training opportunities.

Email: ................................................................................................................................................................................

*The information given will be treated in confidence and held in accordance with the requirements of the Data Protection Act 1998.*