 **SUFFOLK BADMINTON ASSOCIATION**

 **JUNIOR COUNTY CHAMPIONSHIPS**

 **UNDER 14 YEARS**

 **SUNDAY 21st SEPTEMBER 2025**

**VENUE – Ipswich School Sports Centre, The Street, Rushmere St Andrew, Ipswich IP5 1DE**

The tournament is open to players who were born in, resident in or attend school in Suffolk, or by previously representing Suffolk at Junior Level. To qualify for U14, competitors must have been born in **2012** or later**.**

The preliminary rounds of all events will be played in groups. (Minimum group size of 4). The singles second round will be split into 2 knockouts with the top 2 finishing positions in the groups moving into the main draw and all remaining players moving into a consolation knockout draw. Players will have minimum 3 matches per event (entry numbers permitting).

ENTRY – can be made on line through tournament software using the following link

[Suffolk County Junior Restricted 2025-26 | BADMINTON England](https://be.tournamentsoftware.com/tournament/2FC43D4C-5DF7-4E3B-87F9-0BEEC8E65FF5)

**Or** by completing this form and sending it by email to the address below and making payment by bank transfer to Suffolk Badminton Sort Code 20-98-07 Account 70401668

**AARON HEARD** aaron.gary.heard@hotmail.com  **(Tel Mob 07824 812327)**

An entry must be provided for each competitor please

**NOTE: -**Players will be notified of the tournament details such as start times by email or telephone. Please ensure that a parents email address and telephone number is supplied for all players under 18 years of age.

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Please enter me for the following events for which I enclose my entry fees

 **Under 14** **2025-26** Own Initials Partners Name Fee per player

 OPEN SINGLES x x x x x x x x x £6

 GIRLS SINGLES x x x x x x x x x £6

 OPEN DOUBLES £5

 GIRLS DOUBLES £5

 MIXED DOUBLES £5

NAME . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Date of Birth . . . . . . . . . . . . . . . . . .

ADDRESS . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Telephone No . . . . . . . . . . . . . . . . .

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I attend . . . . . . . . . . . . . . . . . . . . . . School. I am a member of . . . . . .. . . . . . . . . Badminton Club

**Please indicate Payment by** Cheque Bank Transfer ON Line