



***Health and wellbeing festival,
including bodymatters 5-a-side
football competition.***

***“BREAKING DOWN BARRIERS
TO ACHIEVE OUR GOALS”***

Date: Friday 10th September 2010

Time: 10.00am – 4.00pm – Registration 9.00am

Venue: St Clements Hospital Sports Field

Please register your interest by completing the attached forms

by Friday 20th August 2010

and return to Mark Beardmore or Andy Harding,
Bodymatters Gym, St Clements Hospital, Foxhall Road,
Ipswich, Suffolk, IP3 8LS.

Or e-mail – mark.beardmore@smhp.nhs.uk

andy.harding@smhp.nhs.uk

warner.duff@smhp.nhs.uk



HEALTH AND WELLBEING **FESTIVAL.**

COMPETITION RULES AND REGULATIONS **Tournament Format**

- Depending on the number of entries there will be three tournaments, Tournament 1, Tournament 2 and Tournament 3, these will be at different levels of ability (**PLEASE CAN YOU PHONE OR EMAIL WHAT YOU THINK YOUR TEAMS ABILITY IS SO WE CAN PUT THEM IN THE RIGHT GROUP**).
- Each team will play in a round robin competition in their tournament.
- Games will last for 10 minutes each with no half time.
- The top two teams in each league after completion of all games will play in a final to be winners of their tournament – so there will be 3 winners overall.
- There will be trophies for each tournament:
 - winner
 - runners up
 - top goal scorer
 - player of the tournament
 - and medals for everyone who takes part.

FOR FURTHER INFORMATION ABOUT THE LEAGUE AND GAMES CONTACT:

Andy Harding, Bodymatters Gym, St Clements Hospital
On 01473 329474 or Warner Duff on 07796778807
Or email

andy.harding@smhp.nhs.uk
warner.duff@smhp.nhs.uk

TO BOOK A STALL OR QUESTIONS FOR THE HEALTH AND WELLBEING FESTIVAL PLEASE CONTACT:

Mark Beardmore, St Clements Hospital on 01473 329467 or 01473 329474
Or e-mail mark.beardmore@smhp.nhs.uk



REGISTRATION FORM

HEALTH AND WELLBEING FESTIVAL

10TH September 2010

Contact name:.....

Organisation:.....

Address:.....

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Contact number:

Contact E-mail:

Number of teams entering:

Team name:..... Kit colour:.....

Team name:..... Kit colour:.....

Team name:..... Kit colour:.....

Team name:..... Kit colour:.....

Team name:..... Kit colour:.....

Please supply team list for each team prior to the event including any special needs/allergy information (see attached sheet)

Please return to:

Warner Duff, Bodymatters Gym,
St Clements Hospital,
Foxhall Road,
Ipswich, IP3 8LS

PHONE- 01473 329474
- 07796778807

NOTE: A confirmation and tournament details will be sent on receipt of your registration.

YOU MUST ALL BRING AND WEAR SHINPADS!!