



AirBadminton National Tournaments - Report

This form is to be filled in by all Member Associations benefiting from the **AirBadminton National Tournaments - BWF Equipment Support** no later than **2 weeks** after the tournament.

* Required

General Information

1. Member Association *

2. Name of Person Completing the Form *

3. Position in the Association

4. Email

Next

* Required

Tournament Details

5. Name of Tournament *

6. Type of Tournament *

- National Championship/Open
- Regional Tournament
- International Tournament
- Junior Tournament
- National Beach Games (multi-sport)
- Other

7. Tournament Start Date *



8. Tournament End Date *



9. Duration of the tournament (in Days) *

10. Tournament Location *

Insert exact name of location and city.

11. Playing Surface *

Sand

Grass

Clay

Hard

Other

12. Tournament Events *

You may select more than one

Mixed Team Relay

Men's Triples

Women's Triples

Men's Doubles

Women's Doubles

Other

13. Number of Players Entered *

Indicate as follows (example): 66 (33 male and 33 female players)

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Weather Information

14. Average Temperature for the duration of the tournament *

- Below 20° Celsius
- Between 20° to 25° Celsius
- Between 25° to 30° Celsius
- Between 30° to 35° Celsius
- Above 35° Celsius

15. Did the Wind Impact the Matches? *

- Yes, all the time
- Yes, on some occasions
- No

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16. Wind Impact *

	Negligible	Slight	Moderate	Strong	Extreme
How was the wind impact on the matches?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. What did you do to mitigate the effect of the wind?

Enter your answer

18. Did it rain during the Tournament? *

- Yes
- No

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19. Rain *

	Negligible	Slight	Moderate	Strong	Extreme
How did the rain impact the matches?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20. Anything else you want to add about the weather?

Enter your answer

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Technical Reporting

This section can be completed with the help of the Referee of Tournament

21. Tournament Format

- Knockout
- Group Play + Knockout
- Group Play
- Mix format depending on events played
- Other

22. Name of Referee *

Enter your answer

23. Email Address of Referee *

Enter your answer

24. Were there any Deputy Referee(s)? *

Yes

No

25. Number of Umpires *

Enter your answer

26. Number of Line Judges *

Enter your answer

27. Was there any training provided for the TOs before the tournament? *

Yes

No

28. In terms of knowledge and application of the Rules, how well did the TOs perform? *

	Below Average	Average	Very Good	Excellent	Exceptional
Referee(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Umpires	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assistant Umpires	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Line Judges	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. Anything else you want to add regarding the TOs?

Enter your answer

Others

30. Did you live stream the tournament?

- Yes
- No
- Partly

31. Insert link of the live stream below:

Enter your answer

32. Anything else you want to add? *

Enter your answer

33. What other challenges, not mentioned already, have you encountered before, during and after the tournament? *

Enter your answer

Please kindly submit at least 10 high-res image to airbadminton@bwf.sport after submitting the online reporting form.