From: Organising Secretary, Public Officers’ Welfare Council  
To: Supervising Officers i/c Ministries/Departments

FOOT-5 FESTIVAL 2023

The Public Officers’ Welfare Council (POWC) is proposing to organise a Foot-5 Festival for male and female Public Officers during the month of May/June 2023.

2. The Foot-5 Festival will be organised in four different categories as follows:
   a) Men Civil Service Foot-5 Festival;
   b) Ladies Civil Service Foot-5 Festival;
   c) Men Disciplined Forces Foot-5 Festival; and
   d) Ladies Disciplined Forces Foot-5 Festival

3. The Festival will be played on a pool league cum knock-out system.

4. The exact date and venue for the holding of the Festival will be communicated to participating teams in due course. Participating teams should make their own arrangement for transport as well as release of players/officials from their respective Ministry/Department for training purposes and official matches. Only one team per category per Ministry or Department will be allowed to participate. No merging will be allowed between Ministries/Departments.

5. Ministries/Departments willing to participate in the above Festival are requested to fill in the Participation Form at Annex A and submit same together with relevant documents to the Organising Secretary, Public Officers’ Welfare Council, 12th Floor, SICOM Building 2, Corner Chevreaux and Reverend Jean Lebrun Streets, Port Louis, by Friday 21 April 2023 at latest.

6. The Participation Form should be endorsed by the Supervising Officer and should bear the seal of the participating Ministry/Department. In case of non-compliance, the participation form will not be considered by the POWC.

7. Team Managers will have to attend a meeting and the drawing of lots which will be scheduled at the POWC on a date to be communicated to you in due course. The System of Play and the Rules and Regulations of the Festival will be communicated to Team Managers on the same day. Each player will have to present his/her National Identity Card to the Organising Committee for verification on the day of the Festival. The POWC reserves the right to cancel the Foot-5 Festival in case of any unforeseen circumstance.

8. It would be appreciated if you could arrange for the contents of this Circular Letter be brought to the attention of Public Officers serving in your Ministry/Department.

9. This Circular has also been posted on the website of the POWC: http://powc.govmu.org

S. B nondhoo  
Organising Secretary

Copy to: Presidents of Staff Welfare Associations
Foot-5 Festival 2023

Participation Form (Please tick as appropriate)

Men □  Ladies □

Ministry/Department: .................................................................

Address: ....................................................................................

Jerseys: Colour 1 ................................................................. Colour 2 .................................................................

Team Manager: ................................................................. Tel: ................................................................. Mobile: .................................................................

Email Address: ........................................................................

Sports Coach: ................................................................. Tel: ................................................................. Mobile: .................................................................

Email Address: ........................................................................

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N.B:
(1) We, the undersigned, acknowledge having taken cognizance of the rules and regulations of the POWC Foot 5 Festival and undertake to comply with.
(2) We certify that the players mentioned above are Public Officers and the information submitted is true.
(3) Any protest arising on the day shall be dealt and resolved on spot.
(4) We understand that the decision of the Public Officers’ Welfare Council shall be final and binding.

Name of Team Manager: ___________________________ Signature: _______________ Date: ________ Contact No: ___________________________

Name of Human Resource Officer: ___________________________ Signature: _______________ Date: ________ Contact No: ___________________________

Name of Supervising Officer: ___________________________ Signature: _______________ Date: ________ Contact No: ___________________________