



Gold Coast Champions Cup
International Youth Soccer Tournament

For Player Number per shirt & team sheet	
Team Customer No (as issued by Cup Admin)	

Player Indemnity and Permission Form

One Form per player

To be signed by Player **and** if under 18 years of age by Parent or Legal Guardian

Player Name: _____
Please PRINT

Team Playing For: _____ Age group entered: _____
Please PRINT Please PRINT

I agree to abide by the rules of soccer, compete with the spirit of fair play and abide by the decisions of the tournament organisers. In consideration of acceptance of my entry into the tournament, I hereby waive all and any claims, or cause action which I might be entitled to have against all managers personnel, officials, organisers or any person whatsoever involved in the matches, events or functions conducted as part of the tournament and other competitors who may be liable for any damage in respect of any matter whatsoever arising out of/or incidental to the matches, events or functions being held as part of or in conjunction with the Gold Coast Champions Cup.

I give permission to the Gold Coast Champions Cup Tournament to use my image, sound and/or my name for

- media activities to promote the event/event organisers
- future media activities which would assist with further promoting the event
- the promoting and advertising of players of the Gold Coast Champions Cup

I understand that by giving this permission, the Mudgeeraba Soccer Club – organisers of the Gold Coast Champions Cup can use my image, my sound and/or my name in any way it chooses, for the purposes described above. It may reproduce them in any form, in whole or in part, and distribute them by any medium including Internet, CD-ROM, or other multimedia formats. I understand that I will not be paid for giving this permission.

Player's Signature: _____ Age: _____

If Under 18, Parent/Legal Guardian: _____
Please PRINT

Parent/Legal Guardian Signature: _____

Date: _____
