



**THE MAGIC LADIES FC**

PLAYER REGISTRATION DETAILS

FULL NAME: \_\_\_\_\_

ID NUMBER: \_\_\_\_\_

BIRTHDAY: DAY: \_\_\_\_\_ MONTH: \_\_\_\_\_ YEAR: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

EMPLOYED Y/N: \_\_\_\_\_

IF YES, WORK HOURS? (e.g., 8AM – 5PM) \_\_\_\_\_

PREVIOUS CLUB: \_\_\_\_\_

CLUB CONTACT PERSON: \_\_\_\_\_

CLUB CONTACT DETAILS: \_\_\_\_\_

DO YOU HAVE YOUR CLEARANCE? \_\_\_\_\_

ARE YOU FREE TO JOIN THE MAGIC LADIES FC? \_\_\_\_\_

SHIRT SIZE: S M L XL

SHORT SIZE: S M L XL

BOOT SIZE: \_\_\_\_\_

MEDICAL AID:

Do you have Medical Aid cover? If yes, please state Medical Aid & Membership No:

\_\_\_\_\_  
\_\_\_\_\_

LOCO PARENTIS:

I, the undersigned player/parent/guardian of the above-mentioned player hereby consent to him joining the The Magic Ladies Football Team playing in the SAFA Sasol League, hereinafter collectively referred to as the "Team". I further appoint Mr George Dearnaley to act "in loco parentis" for the duration of the players Team contract unless under the care of his parents.



INDEMNITY:

I am aware that neither the Team nor the coach/manager in charge accepts responsibility for any loss, injury, damage or cost, hereinafter collectively referred to as "claims" that the person or property of me/my daughter may sustain whilst engaged in any soccer activity. I hereby waive any right that I or my daughter may have to claim compensation against the Team or any coach/manager in charge, for any such claims whilst engaged in any soccer activity and/or being transported to or from such soccer activity, howsoever arising.

I also hereby indemnify and hold harmless in respect of any liability howsoever arising from my/my daughter's participation in any activity offered by the Team, its representatives, its clients and/or customers, its suppliers and/or agents, venues, sponsor and/or associate/s of the Team including but not limited to its directors, shareholders, servants, employees, agents, suppliers and/or any party related to and/or associated with such named parties.

This indemnity referred to above shall include but not be limited to any loss, damages and/or consequential damages whether direct or otherwise arising from my/my daughter's participation, whether directly and/or indirectly, or intended participation in the activity offered by the Team. Such loss, damages and/or consequential damages referred to above shall include but not be limited to death, injury, damage to or loss of property from, costs, claims, expenses and/or demands.

I consent to the Team using my/my daughter in its marketing material as it sees fit and accept that any intellectual property created with the participation of my/my daughter shall belong to the Team and neither I/my daughter makes any claim to it.

I further agree to abide by the constitutions of the Cape Town Tygerberg Football Association (CTTFA) and the South African Football Association (SAFA).

WARRANTY:

I as player/parent warrant that the information contained herein is true and correct in every respect.

Player/Parent/Guardian: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_