Trading Card Game Registration Form

KONAMI

First Name: | Middle Initial:

Last Name:

Konami Player ID: | DOB: M M / D D / Y Y Y Y

Event Name: | Country:

E-Mail:

By attending this Trading Card Game tournament, I understand and agree that by my signature below, I agree to the use of my photographic likeness, name, information, deck list, which may be included in print, photo, and digital media as part of event coverage. I understand I am not entitled to compensation for this usage, and I agree that this information or images may be used without prior notification. I represent and warrant that I am of the age of majority in my state or province of residence (19 or older in NE and AL, and 18 or older in all other U.S. states) (or, if not, that a parent or legal guardian will sign on my behalf).

Check here to receive information concerning future Konami Trading Card Game tournaments and events. ☐

Signature: _____ Date M M / D D / Y Y Y Y

Self or Parent/Legal Guardian in case of under age of majority

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