Team Name

☐ CHECK IF NO ID (ADMIN ONLY)

TRADING CARD GAME Registration Form - 3 vs 3 Team Duel

KONAMI

First Name | Middle Name(s)

Last Name(s)

CARD GAME ID | Date of Birth M M / D D / Y Y Y Y

Event Name | Country of Residence

E-Mail

Check here if you wish to receive information from KONAMI about future prizing, events, and promotions ☐

I am voluntarily attending this TRADING CARD GAME tournament and assume all risks that it may involve. I understand that KONAMI, the tournament organizer, and their agents assume no responsibility to supervise or provide care for participants. By attending this tournament, I agree to the use of my photographic likeness, name, information and Deck list, in print, photo, livestream, 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 and images may be used without further notice. 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).

Player A

Please check if this is your first Yu-Gi-Oh! Championship Series (YCS) ☐

Signature

Date M M / D D / Y Y Y Y

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

☐ CHECK IF NO ID (ADMIN ONLY)

TRADING CARD GAME Registration Form - 3 vs 3 Team Duel

KONAMI

First Name | Middle Name(s)

Last Name(s)

CARD GAME ID | Date of Birth M M / D D / Y Y Y Y

Event Name | Country of Residence

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Player B

Please check if this is your first Yu-Gi-Oh! Championship Series (YCS) ☐

Signature

Date M M / D D / Y Y Y Y

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

☐ CHECK IF NO ID (ADMIN ONLY)

TRADING CARD GAME Registration Form - 3 vs 3 Team Duel

KONAMI

First Name | Middle Name(s)

Last Name(s)

CARD GAME ID | Date of Birth M M / D D / Y Y Y Y

Event Name | Country of Residence

E-Mail

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Player C

Please check if this is your first Yu-Gi-Oh! Championship Series (YCS) ☐

Signature

Date M M / D D / Y Y Y Y

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