

PLAY CRICKET INDIA

PARENTAL / GUARDIAN CONSENT FORM

■ ■ This form must be completed, signed and brought to the first match day by players under 18 years of age. Without this form, the player will not be permitted to participate.

SECTION 1 — PLAYER DETAILS

FULL NAME (as registered on PCI website)

PCI PLAYER ID

DATE OF BIRTH

PLAYING ROLE

Batsman

Bowler

All-Rounder

SECTION 2 — PARENT / GUARDIAN DETAILS

FULL NAME OF PARENT / GUARDIAN

RELATIONSHIP TO PLAYER (e.g. Father, Mother, Guardian)

CONTACT NUMBER

WHATSAPP NUMBER (if different)

SECTION 3 — CONSENT DECLARATION

- I confirm that the above-named player is my child / ward and that the information provided is accurate.
- I give permission for the player to participate in Play Cricket India (PCI) match days held in Visakhapatnam, Andhra Pradesh and other places in the future phase.
- I consent to PCI using the player's name, PCI Player ID, and match footage (photographs and video) on PCI platforms including YouTube, Instagram, Facebook, and the PCI website.
- I understand that PCI is not liable for any injury sustained during participation, and that all reasonable safety precautions will be taken.
- I agree to the PCI Terms, Conditions & Privacy Policy as published on the PCI website (playcricketindia.com).

SECTION 4 — SIGNATURE

DATE

SIGNATURE OF PARENT / GUARDIAN

PLACE

Play Cricket India · Visakhapatnam, Andhra Pradesh · playcricketindia.com · contact@playcricketindia.com
Please submit this form to the PCI representative on your first match day. Keep a copy for your records.