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**LONDON FOOTBALL TOURNAMENT ASSOCIATION**

**TEAM APPLICATION & AGREEMENT FORM**

**Tournament Date:** 27/05/2025 -----29/05/2025
**Location:** Enfield College Sports Centre EN3 7GB
**Arrival Time:** 9:00 AM
**Kick-Off:** 9:30 AM
**End Time:** 4:00 PM

**SECTION 1: CLUB & TEAM INFORMATION**

* **Club Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Team Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Age Group:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Coach/Manager Full Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Coach/Manager Phone Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Coach/Manager Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 2: PLAYER INFORMATION**

*Maximum of 9 players per team (6 starting, 3 substitutes).*

| **No.** | **Player Full Name,** | **Date of Birth,** | **Parent/Guardian Name (If U18)** |
| --- | --- | --- | --- |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
| 8 |  |  |  |
| 9 |  |  |  |

**SECTION 3: TERMS & CONDITIONS**

Please read and confirm the following:

☐ I confirm that all players listed are eligible to play in the stated age group.

☐ I understand that each team must have a minimum of 6 and a maximum of 9 players.

☐ I agree that once submitted, changes to player names must be communicated in writing at least 48 hours before the event to thelondonfta@gmail.com or Lucas.santos@thelondonfta.com

☐ I understand that substitutes cannot be shared between teams unless to complete a full team (by LFTA approval only).

☐ I accept that LFTA reserves the right to remove any player, team, or spectator for conduct deemed unsafe, abusive, or inappropriate.

☐ I confirm all players are physically fit and take part at their own risk.

☐ **I acknowledge that The London Football Tournament Association (LFTA), its organisers, and affiliates accept no liability for any injuries, accidents, or medical conditions sustained during the tournament. All participants engage at their own risk, and teams are encouraged to have their own insurance cover where appropriate.**

☐ I understand that LFTA is not liable for any personal property lost, stolen, or damaged during the event.

**SECTION 4: PHOTO & VIDEO CONSENT**

LFTA may capture photos and videos for promotional use.

☐ I give consent for players listed to be photographed and recorded during the tournament.

☐ I do **not** give consent for players to be photographed or recorded.

(*Note: If "no" is selected, we will provide identifiers (e.g., wristbands) to ensure these players are not filmed/photographed.*)

**SECTION 5: DATA PRIVACY & COMMUNICATIONS**

☐ I consent to the London FTA storing this data securely in accordance with GDPR regulations.

☐ I agree to receive occasional updates about future LFTA tournaments and events.

☐ I confirm that all details provided in this form are accurate to the best of my

knowledge.

**SIGNATURE & DATE**

By signing this form, I confirm my understanding and agreement to all terms above:

**Coach/Manager Name (Print):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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