



Play on the Pitch 2016: Team Disclosure Form

**EACH MEMBER OF THE TEAM MUST SIGN THIS FORM PRIOR TO THE EVENT.
ANY PERSON WHO DOES NOT SIGN THIS FORM WILL NOT BE PERMITTED TO PARTICIPATE IN THE EVENT**

I, the undersigned, confirm that:

1. I am medically fit to participate in the Play on the Pitch 2016 event (“**Event**”) and I enter entirely at my own risk.
2. I accept that Sunderland Association Football Club Limited (“**SAFC**”) are not responsible or liable for my death, or personal injury, suffered at the Event except when such death or personal injury is caused by SAFC’s negligence.
3. I agree to indemnify SAFC against any losses or claims SAFC suffers or incurs in respect of any personal injury to, or death of, any person during the Event which is caused by my acts, omissions or negligence.
4. I accept that Sunderland Association Football Club Limited are not responsible or liable for any personal property lost, stolen or damaged during the Event, except where such is caused by SAFC’s negligence.
5. I agree to indemnify SAFC against any losses or claims SAFC suffers or incurs in respect of any loss or theft of, or damage to, personal property which occurs during the Event which is caused due to my acts, omissions or negligence.
6. I will comply with the Ground Regulations relating to the Stadium of Light (copy of such attached herewith) and observe all requests by Sunderland AFC.
7. I will leave the facilities including the changing rooms and bar facilities in the same order as was found upon arrival. I agree to inform Sunderland AFC staff immediately in the event of any damage or breakage caused and acknowledge that I will be responsible for and shall duly repay Sunderland AFC the cost of such damage.
8. I accept that if I enter any restricted areas of the Stadium of Light that I may be asked to leave the premises.
9. I confirm that the allergies I have disclosed below (including food and medical allergies) are, to the best of my knowledge, a complete list of my allergies

TO BE RETURNED AS SOON AS POSSIBLE, AND PRIOR TO THE EVENT

By signing below I confirm/agree to the above:

NAME OF TEAM: _____ TEAM COLOURS: _____

NAME	CONTACT DETAILS	MEDICAL CONDITIONS	ALLERGIES (INCLUDING TO FOOD)	SIGNATURE

Please Return to: Commercial Team, Sunderland AFC, Academy of Light, Sunderland, SR5 1SU
Telephone: 0871 911 1555 Email: hospitality@safc.com

