Game-Con Cosplay Contest Registration Form

Event Name: Game-Con

Event Date: 1:00 PM, 2 August 2025

Location: MCX **Participant Information** Full Name: ______ Phone Number: _____ Email Address: ______ Cosplay Category (Select one) ☐ Anime ☐ Superhero ☐ Sci-Fi ☐ Video Game Character Please briefly describe your character and costume: Photo & Media Waiver By signing below, I agree to allow event organizers and affiliated media representatives to photograph and/or record my image and costume for use in promotional materials, including but not limited to social media, websites, flyers, and future event advertising. I understand that these images may be used without compensation and become the property of the event organizers. Signature: _____ Date: ____ If under 18, parent/guardian signature is required: Parent/Guardian Name: ______ Signature: ______ Phone Number:

Please return this form to the registration table by 12:45 pm on 2 August 2025 or submit online by 30 July 2025. Thank you for participating and good luck in the contest!