

WAIVER AND RELEASE FOR BOSKONE XVIII

THANK YOU for volunteering to work on Boskone XVIII. It is understood that the convention does not pay any salaries or compensation to its volunteers.

In the event of sickness or injury which prevents me from requesting medical attention, the members of the committee or their designated agents may authorize emergency medical treatment in my behalf and they shall not be liable for their actions nor for payment for such treatment.

I hereby waive any rights, causes of action, or claims which I, my heirs, or assigns now have or which may accrue to me in the future as a result of the volunteer work I do at Boskone XVIII and do hereby waive and release Boskone XVIII, its committee, agents, and servants, and the New England Science Fiction Association, Inc. from same.

dated \_\_\_\_\_

FOR PARENT OR GUARDIAN OF MINOR

Having read and understood the above, I authorize my son or daughter to do volunteer work at Boskone XVIII and accept the terms and conditions stated above which are incorporated by reference herein.

date \_\_\_\_\_