BALTICON 47 VOLUNTEER REGISTRATION AND RELEASE FORM

FOR STAFF AND VOLUNTEERS — THURSDAY, MAY 23 THROUGH TUESDAY, MAY 28, 2013

Name:		Balticon 47 Badge #		
Email Add	dress:			
Phone #	Other Phone #			
Address:				
Hotel Info:	Hunt Valley Room Number	Other hotel	Rm No.	
	Check In Date:		Check Out Date	
Preferred	Work Areas			
Health cor	nditions or other limitat	tions on the work I can do): 	
Special experience that may be helpful:				
Science F understand	fiction Society, Inc. (a	dso known as BSFS), a for this work. I understa	at Balticon 47 which is produced by the Baltimore non-profit \$501(c)(3) educational organization. I and that no one is authorized by BSFS or Balticon 46	
I have read and understand the Balticon 47 and Baltimore Science Fiction Society rules and regulations.				
I hereby release and forever discharge BSFS, the BALTICON 47 committee and the Marriott Hunt Valley Inn, individually and as a group, and their officers, agents, and volunteers from any and all liability and responsibility should I be injured or hurt while in the performance of the work I have voluntarily undertaken. I affirm that I will not volunteer for any task for which I am not qualified by training or experience to perform.				
I am at least 18 years of age, unless a parent or guardian has signed below.				
[] I am a minor (If checked please have a parent or guardian complete the following)				
I(Please print parent/guardian name		nt/guardian name)	, the parent of guardian of the minor	
	(Please print mino	r's name)	, give my approval to the above agreement.	
Parent/Guardian Signature			Date	
Signature			Date	

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