

NERO® Legal Release Form
(Print & Complete)
The Live Adventures Company
NERO® International Holding Co., Inc.
P.O. Box 543
Rye NY 10580-0543
(914) 328-9123
www.NeroLarp.com

I, the undersigned, understand that NERO® International Holding Co., Inc. and its affiliates, have taken reasonable steps to minimize all risks to NERO event participants, but are unable to completely guarantee that no injury will come to me.

I understand that there is always the possibility of a slip on rough ground, a fall over obstacles in the darkness, or the occurrence of some other unforeseeable accident. Further, since I may also be participating in mock battles using padded weapons and magical spells, there is a risk of injury from other participants.

I understand the risks involved in participating in the events sponsored by NERO®. I shall make no claim of any description against the organization, its members or its officers, or any company doing business with the organization for any loss or damages suffered in the course of participating.

I confirm that I am in good physical health and do not suffer from any physical disabilities that would inhibit my ability to play or place me in jeopardy. I understand that NERO will do its utmost to understand and work with the needs of disabled individuals and that it is not mandatory for me to engage in mock 'combat' if I do not desire it by wearing a 'page' headband.

I understand that failure to abide by this agreement, the Policies or the Rules of NERO® could result in my expulsion from the organization, as well as in extreme legal action.

NERO® Member Name (Printed)

Parent or Guardian (Printed)

NERO® Member Name (Signature)

Parent or Guardian (Signature)

Today's Date

Emergency Contact Information

Name of Primary Person to Contact: _____

Telephone Number: _____

Name of Secondary Contact: _____

Telephone of Secondary Contact: _____

Medical information we should be aware of (optional): _____
