Anthro Northwest 2018 PARENTAL CONSENT FOR MINOR ATTENDEES

This form is required for minors who are not attending with a parent and who will not have a parent present when checking in.

<u>Disclosure</u>: Anthro Northwest 2018 is a convention of anthropomorphic art enthusiasts that is to be held primarily at the Renaissance Hotel in Seattle, WA. In attendance will be hundreds of individuals from all parts of the world. Membership is open to all interested parties and there is no process by which members are screened or otherwise evaluated prior to admission. Neither Anthro Northwest, nor the Renaissance Hotel nor its partner venues bear any responsibility whatsoever for the conduct or actions of any individual convention attendee. Every attendee is understood to be present at the convention solely at his or her own risk.

Statement of Parental Consent and Indemnification:

| "I represent that I am the parent or le | egal guardian of | , and I hereby |
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| provide consent for the above-name conditions as stated below. | ned minor to attend Anthro North | west 2018 and agree to the terms and |
| The Crowne Plaza Hotel from any above-named minor's activities at actions and behaviors of the above- | claim for personal injuries or otl Anthro Northwest 2018. I agree named minor at Anthro Northwest he whereabouts or activities of the | issance Hotel, GameWorks Seattle, and her damages or equity arising from the also to accept full responsibility for the 2018. I agree also that Anthro Northweste above-named minor, or to convey any |
| understood it and am voluntarily si | igning it without any inducement thwest 2018, Anthro Northwest, (| and Indemnification, and state that I have or representation whatsoever from any GameWorks Seattle, The Crowne Plaza |
| SIGNATURE (Parent or guardian):_ | | Date: |
| Print name of parent or guardian | Phone (daytime) | Phone (evening) |
| | | |
| | subscribed to the foregoing instrument cuted the same for the purposes and c | , known , and having been by me first duly sworn an consideration therein expressed, and that the |
| GIVEN under my hand and seal of office | e, this day of | , 20 |
| Notary Public in and for | County, in the state | of |
| (Signature of Notary) | _ | |
| (Name of Notary) | _ | |
| (Commission Expiration Date) | _ (Se | al) |