



**NERO HOUSTON**  
14515 Briar Forest Drive, Suite 522  
Houston, TX 77077  
www.nerohouston.com

**Member ID #:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Approver:** \_\_\_\_\_

# MEMBERSHIP & LEGAL RELEASE FORM

**Name:** \_\_\_\_\_ **Membership Type:** New / Renewal / Transfer

**Address:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**City, State / Zip:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Phone Number:** ( ) - \_\_\_\_\_ **Email:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Contact #:** ( ) - \_\_\_\_\_

**Medical Conditions / Special Needs:** \_\_\_\_\_

I, the undersigned, understand that NERO® 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 at this convention module event.

Since I may be participating in mock battles using padded weapons and cloth spell packets, there is a risk of injury through accident from other participants.

I understand the risks involved in participating in the events sponsored by the New England Roleplaying Organization. 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 to do so, which I can indicate by wearing a 'page' headband.

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

\_\_\_\_\_  
**Name (Print)**

\_\_\_\_\_  
**Name (Sign)**

\_\_\_\_\_  
**Date**