



**PITTSBURGH ROLEPLAYING ORGANIZATION (PRO)  
ACCIDENT WAIVER / RELEASE OF LIABILITY AND MEDICAL INFORMATION  
ADULT PARTICIPANT**

**SECTION I – RELEASE OF MEDICAL AND LEGAL LIABILITY / ACCIDENT WAIVER**

I hereby assume all of the risks of participating and/or volunteering in events and activities held, planned, and/or sponsored by the Pittsburgh Roleplaying Organization. I acknowledge that these events and activities are an extreme test of a person's physical and mental limits and carry with them the potential for accident, serious injury, disability, property/personal loss, and/or death. Risks include but are not limited to those caused by terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, and actions of persons including but not limited to participants, volunteers, spectators, staff, agents, and employees of the organization and organizers of the events. These risks pertain not only to athletes and participants but also are present for all other persons attending events. I acknowledge that the Pittsburgh Roleplaying Organization and those persons operating on behalf of the organization have taken reasonable precautions to mitigate the risks associated with these events, and I accept that inherent risks nevertheless exist in participating in said events and activities.

I certify that I am physically fit, have sufficiently trained for participation, and have not been advised by a qualified medical professional to refrain from these types of activities. I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident, and/or illness during events. I understand that in the event of injury, accident, and/or illness during events my personal medical insurance will be the primary form of coverage, and I will be responsible for any and all medical expenses, co-pays, etc., incurred.

I acknowledge that this Release of Legal and Medical Liability / Accident Waiver form will be used by the organizers of events in which I participate and that it will govern my actions and responsibilities at said events. Such actions and responsibilities shall include but not be limited to the following:

I will comply with all local, state, and federal laws.

I will conform to and observe the rules, regulations, and policies of the organization and those of the PRO LARP rules systems, safety guidelines, and Member Code of Conduct.

I understand that I am entering into an intense roleplay environment and I will not participate in any activity that I do not feel I have adequately prepared for.

I will not bring to events blades more than 3 inches in length, firearms, explosives, other weapons, alcohol, or illegal drugs and will refrain from the use or consumption of these items during events.

Unless I submit to an officer of the organization a written and signed request stating the opposite, I will allow the organization to photograph and/or videotape me participating in events without compensation or expressed permission and to use those images and footage in any and all ways the organization deems appropriate and for as long as it deems necessary.

In consideration of my application and permission to participate in events, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release, and Discharge from any and all liability for accidents, personal injury, disability, death, property damage, property theft, or actions of any kind that may hereafter occur to me at events or during my traveling to and from events, the following entities or persons:

The Pittsburgh Roleplaying Organization  
The Commonwealth of Pennsylvania  
Pittsburgh Roleplaying Organization Chapters, and its Affiliates

Their directors, officers, agents, staff, employees, volunteers, representatives, and organizers of the events; (B) Indemnify and hold harmless the entities or persons mentioned from any and all liabilities or claims made as a result of participation in these events, whether caused by the negligence of releases or otherwise.

I understand that if by any action, intentional or otherwise, I violate any element of this agreement, it could result in my expulsion as a member of and from events held by the organization and in extreme circumstances could be subject to legal action.

The Release of Legal and Medical Liability / Accident Waiver form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

**SECTION II - MEDICAL INFORMATION**

Does the participant have any medical conditions that the Pittsburgh Roleplaying Organization needs to know about to ensure the participant's safety in the event medical treatment is needed? This includes allergies (including bee stings), adverse reactions to any medical drugs, asthma, diabetes, fainting spells, heart trouble, convulsions, bleeding disorders, etc.

[ ] No [ ] Yes (Please Explain)

The Pittsburgh Roleplaying Organization requires those who have medical conditions that require special medication (e.g., EpiPen, inhalers) to carry their special medication on his/her person at all times.

**SECTION III – CONSENT AND PERSONAL INFORMATION**

Participant's Personal Information	Participant's Emergency Contact Information
Name:	Name:
Address:	Address:
Phone Number:	Phone Number:
Date of Birth:	Relationship:
Email Address:	
<input type="checkbox"/> I would like to receive newsletters and other updates from PRO.	
Home Chapter:	

By my signature, I confirm that I have read this release, understand its terms, and agree to its provisions from the time of this signature until the last day of the 2019 calendar year. I understand that this form affects my legal rights.

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_