## DISCLOSURE.

ANTHRO NEW ENGLAND (ANE) 2026 brings together an eclectic group of individuals for a three day celebration of all things anthropomorphic. ANE 2026 is to be held at the WESTIN BOSTON SEAPORT DISTRICT HOTEL, from January 15th 2026, to January 18th 2026, under the auspices of ANTHRO NEW ENGLAND, INC.

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 New England, Inc. nor The Westin 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 their own risk.

## STATEMENT OF PARENTAL CONSENT AND INDEMNIFICATION.

I represent that I am the parent or legal guardian of	and I
hereby provide consent for the above-named minor	to attend ANTHRO NEW ENGLAND 2026
and agree to the terms and conditions as stated bel	low.

I agree to indemnify and hold harmless ANTHRO NEW ENGLAND 2026 ("ANE", "ANE 2026"), Anthro New England, Inc. and The Westin Boston Seaport District Hotel from any claim for personal injuries or other damages or equity arising from the above-named minor's activities at ANE 2026. I agree also to accept full responsibility for the actions and behaviors of the above-named minor at ANE. I also agree that Anthro New England, Inc. bears no responsibility to monitor the whereabouts or activities of the above-named minor, or to convey any messages from myself or from any other party to that above-named minor.

**I understand** that this is a public event, and photos or recordings of the event and event attendees, including the above-named minor, may be taken and used for local media or **ANE** promotions. I release and give consent to the use of these photos or recordings in compliance with all applicable laws.

If the above-named minor is below the age of 14 at 12:01 AM on January 15th, 2026, I also agree to accompany them and provide supervision according to ANE policy during the convention. In the case I am not able to accompany them, I designate \_\_\_\_\_\_ as their adult supervision for the duration of this event; said adult is responsible for the above-named minor. In the event of a medical emergency involving the above-named minor, I give consent for treatment and the provision of medical care and/or emergency service provider transport.

## **PARENT/GUARDIAN:**

Print Name of Adult Supervisor

I have read the above one (1) page Statement of Parental Consent and Indemnification, and state that I have understood it and am voluntarily signing it without any inducement or representation whatsoever from any member of the staff of ANTHRO NEW ENGLAND 2026, Anthro New England, Inc., or The Westin Boston Seaport District Hotel.

Signature (Parent or Guardian):		Date:		
Print Name of Parent/Guardian	Phone (Daytime)	Phone (Evening)		
PARENTAL RELEASE FOR  I have read the above one (1) page St agree that I, the undersigned, will tak	catement of Parental ( ke responsibility for th	Consent and Indemnification	on, and	
duration of ANTHRO NEW ENGLAND  Signature (Adult Supervisor):		Date:	_	

Phone (Daytime)

Phone (Evening)

## TO BE COMPLETED BY NOTARY:

known to me to be the person having been by me first duly the purposes and considerationand correct.	n whose name i sworn an oath, a	s subscribed acknowledge	I to the fo that they	regoing instr had execute	ed the same fo
GIVEN under my hand and	seal of office,	this	day of _		,
		(Day)		(Month)	(Year)
Notary Public in and for		_County, in	the state	e of	
	(County)			(Stat	e)
(Signature of Notary)					
(Name of Notary)					
(Commission Expiration Date)					
				(01)	