



**EagleMUNC VII Participation Form  
Medical, Liability, and Photo Release for Guardian**

I, \_\_\_\_\_, as parent or legal guardian of \_\_\_\_\_, give my child, permission to participate in the EagleMUNC VII conference at the Westin Copley Place Hotel (from March 22nd to March 24th, 2019), and in any related conference activities (e.g., EagleMUNC Academy, Admissions Tours, Simulation, and/or Midnight Crises) that may take place at the Westin Copley Place Hotel or on Boston College's campus during or prior to this time period. I hereby agree to waive any claims against EagleMUNC VII, EagleMUNC, Inc., the Westin Copley Place Hotel, and all associated staff and team members working. I release, discharge, indemnify and hold harmless EagleMUNC, the Westin Copley Place Hotel, and any persons associated with these organizations, against any claims of liability, injury (including illness, bodily harm, and death), property theft, damage, loss, or expenses which may arise out of or relate to traveling to, participating in, and/or returning from the EagleMUNC VII 2019 Conference.

I understand the activities involved with the EagleMUNC VII conference and give my permission for my child's full participation. I hereby authorize and hold accountable my child's faculty advisor as the responsible party during and while traveling to and from the conference. I further understand and acknowledge that my child is required to abide by the federal, state, and municipal laws in Boston, Massachusetts. Any student found breaking these laws will be disciplined according to said laws of Boston, Massachusetts and, based on the severity of the infraction, my child may be disqualified from the conference and required to immediately return home at his/her own expense. Any alcohol or drug usage is expressly forbidden. I understand that while my child is a guest at the Westin Copley Place Hotel, he/she is responsible for abiding by all hotel policies and rules. At no point may my child leave the hotel unaccompanied and/or without direct permission from his/her faculty advisor.

Additionally, any student(s) caught breaking the Westin Copley Place Hotel's noise policy will be disciplined according to the policies stated by the Westin. I also understand my child must comply with EagleMUNC VII's hotel policy; as such, he/she may not leave his/her room during designated quiet hours except in matters of immediate emergency or unless engaged in an activity associated with the 40-hour Simulation, facilitated by EagleMUNC VII staff. I understand that I, as guardian, will be responsible for the compensation of any damages or losses incurred by my child throughout his/her stay at the Westin Copley Place Hotel.

Additionally, I acknowledge that as the guardian of said student, I will send all medication necessary to last the duration of the conference and ensure that the student and/or faculty advisor can sufficiently and effectively distribute any necessary medication.

In the event of an emergency or medical need, I give permission for medical treatment to be administered by a licensed professional. I understand I am responsible for informing my



child's faculty advisor of any and all preexisting conditions that could affect the health of the student while attending the EagleMUNC VII conference. I also agree to pay all costs associated with treatment.

If a medical emergency (illness, accident, or injury) were to occur, I understand that I have provided permission for my student to be treated by the best available means. I will not hold responsible EagleMUNC or the Westin Copley Place Hotel for any complications arising from said treatment.

I give my consent for my child to be photographed, videotaped, and/or interviewed by EagleMUNC VII staffers and associates during regular conference activities. I give irrevocable and unrestricted rights to use and publish said photographs, videos, and interviews for editorial, advertising, and media purposes by EagleMUNC, Inc. I hereby release EagleMUNC and its staffers from all claims and liability relating to said photographs, videos, and interviews.

Phone number where I may be reached: \_\_\_\_\_

In case the above number cannot be reached, I authorize EagleMUNC VII staff and representatives to phone the following number to notify them of any incidents.

Phone number: \_\_\_\_\_

Relationship to Delegate: \_\_\_\_\_

I HAVE READ AND UNDERSTAND THIS PERMISSION FORM AND UNDERSTAND THAT EAGLEMUNC AND THE WESTIN COPLEY PLACE HOTEL ARE RELEASED FROM ALL LIABILITY INVOLVED WITH THE CONFERENCE AND TRANSPORTATION TO AND FROM THE CONFERENCE. I ALSO UNDERSTAND THAT IN THE EVENT OF EMERGENCY OR MEDICAL NEED, I HAVE GIVEN MY PERMISSION TO HAVE MY CHILD RECEIVE MEDICAL TREATMENT BY THE BEST MEANS AVAILABLE. ADDITIONALLY, DELEGATE AND PARENTS/GUARDIAN HAVE READ AND UNDERSTAND THE TERMS AND CONDITIONS FORM ATTACHED HERETO. THIS IS A LEGALLY BINDING CONTRACT. ASK TO HAVE EACH TERM YOU DO NOT UNDERSTAND FULLY EXPLAINED TO YOU SO THAT YOU UNDERSTAND THE AGREEMENT YOU ARE MAKING.

\_\_\_\_\_  
(Parent or Guardian Signature) (Date)

\_\_\_\_\_  
(Parent or Guardian Signature) (Date)



### EagleMUNC VII Delegate Agreement

I, \_\_\_\_\_, acknowledge and understand that I must always follow the instructions of Faculty Advisor. I also understand that I must abide by federal, state, and municipal laws while I attend the EagleMUNC VII conference at the Westin Copley Place Hotel in Boston, Massachusetts (from March 22nd to March 24th, 2019), and any activities that may take place on Boston College Campus before or during that time period. Additionally, I will abide by all rules set forth by the staff members of the EagleMUNC VII conference. If I violate said rules, I understand that I will be disciplined accordingly by police, hotel staff, or EagleMUNC staff. I understand that some infractions may lead to immediate disqualification and expulsion from the conference, based on the discretion of the Secretariat, Secretary-General, hotel staff, or, in certain cases, the police. I promise to participate to the fullest extent possible in the activities associated with EagleMUNC VII.

I understand I am to stay in my room after curfew and leaving the room unaccompanied by my Faculty Advisor will result in disciplinary action and I may be dismissed from the conference. I understand that alcohol and/or drug usage is strictly forbidden in all cases and if found in possession of or using alcohol and/or drugs, I will be immediately ejected from the EagleMUNC conference and disqualified from future participation in the conference. In addition, I will abide by the rules set forth by the Westin Copley Place Hotel concerning noise restrictions. If I engage in a noise violation, I understand I will be disciplined according to the policies set forth by the Westin Copley Place Hotel.

I understand that my Faculty Advisor is responsible for my well-being this weekend and will obey the rules and/or instructions he/she may enforce in addition to the rules already laid out by EagleMUNC VII or the Westin Copley Place Hotel. If I am in need of immediate assistance, I know that I have the right to seek help from both my Faculty Advisor and any EagleMUNC VII staff. Any troubles that may arise will be dealt with swiftly and safely since the safety of the delegate is one of EagleMUNC VII's primary and most important concerns.

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(Signature of Delegate Attending)

(Date)

As legal guardian to the above delegate, I understand that it is my responsibility to read this contract with my child and explain any and all clauses that are unfamiliar to the delegate. By signing this contract, I acknowledge that I have explained in full to my child all clauses of this waiver and understand that my child is expected to fulfill all obligations set forth in the waiver.

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(Parent or Guardian Signature)

(Date)