

**Waiver**

**AAPM Exchange Scientist Program**

The following waiver must be signed and dated by any AAPM member wishing to serve as an exchange scientist in accordance with the Guidelines of the program. The waiver must be completed by any Host Institution wishing to host a visiting scientist.

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*The undersigned hereby jointly and severally releases, acquits, forgives, and discharges AAPM, its agents, employees and representatives, including all members of the Exchange Scientist Program Subcommittee, from any and all actions, claims, demands, suits, agreements, judgments, liabilities and proceedings, whether arising in equity or in law, arising from or out of the AAPM Exchange Scientist Program.*

*This release shall remain binding upon all successors in interest and personal representatives of the contracting parties, to the extent permitted by law.*

Signed this (day) \_\_\_\_ of (month) \_\_\_\_\_, (year)20\_\_

Name: \_\_\_\_\_  
Releasor

Address: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

In the presence of: \_\_\_\_\_  
Witness