



Fitness and Recreation Center

**Boston University Ballroom Dance Club  
Terrier Dance Competition 2008  
Saturday, February 16, 2008  
Sunday, February 17, 2008**

This form must be completed and signed by all. Please have all waivers ready when registering on Sunday.

**Informed Consent Waiver**

I understand that I will be undergoing physical exertion while participating in the Boston University Terrier Dance Competition 2008(the “program”) on Saturday, February 16, 2008, and/or Sunday, February 17, 2008, and realize that there are possibilities of injury or other complications associated with exercise. I certify that I am physically fit enough to take part in this program. In exchange for my participation in this program, I agree to assume this risk and to waive and release all claims and causes of action that I have acquired against Boston University, its Trustees, and their officers, employees, or agents thereof for injury, loss, or damage arising from ordinary negligence which I may suffer at, or which are in any way connected with, this program.

Name \_\_\_\_\_  
(Please print clearly)

Signature \_\_\_\_\_

Email \_\_\_\_\_ Phone # \_\_\_\_\_

University/College/Organization \_\_\_\_\_

Date \_\_\_\_\_