PARTICIPANT HOLD HARMLESS AND ASSUMPTION OF RISK AGREEMENT ***READ BEFORE SIGNING***

Participant Name:		Age:
		n any way in 2/18/13 Terrier Experience m"), I, the undersigned, acknowledge, appreciate
 2. 3. 4. 	significant, including the pote particular rules, equipment, a risk of serious injury does exist I KNOWINGLY AND FREE and unknown, EVEN IF AI RELEASEES, and assume full I willingly agree to comply w for participation. If I obser presence or participation, I was such to the attention of the near I, for myself and on behalf on next of kin, HEREBY RELEBOSTON University and RCP and/or employees (collective demands, losses, and liability DISABILITY OR DEATH property, arising out of or in the serious support of the potential particular rules, and serious injury does not serious injury does exist I know injury does not serious injury does exist I know	ELY ASSUME ALL SUCH RISKS, both known RISING FROM THE NEGLIGENCE OF THE I responsibility for my participation and; ith the stated and customary terms and conditions we any unusual significant hazard during my will remove myself from participation and bring arest official immediately and; f my heirs, assigns, personal representatives and ASE, INDEMNIFY, AND HOLD HARMLESS LLC and each of its officers, officials, agents, ely, "Releasees") from any and all claims, ty arising out of or related to any INJURY, I may suffer, or loss or damage to person or connection with my participation in the Program, THE NEGLIGENCE OF THE RELEASEES, to
Participant Sign	ature	Date
, ,	For parents/guardians of	a participant of minor age ime of registration)
consent and agr heirs, assigns, a from any and a Program as pr	ree to his/her release as provided nd next of kin, I release and agr all liability incident to my mi	an with legal responsibility for this participant, do d above of all the Releasees, and for myself, my ee to indemnify and hold harmless the Releasees nor child's involvement or participation in the SING FROM THE NEGLIGENCE OF THE law.
Parent/Guardian Name (Please Print)		Emergency Phone Number(s)
Parent/Guardian	n Signature	Date