

PASS SALES RECEIPT

Receipt # 9546478
Payment Date: 03/25/24
Household: 597211

Department of Physical Education, Recreation and Dance
Boston University Fitness and Recreation Center
915 Commonwealth Avenue
Boston, MA 02215
Phone: (617)358-3740
<http://bu.edu/fitrec>

Rohini Gudimetla
244 Kelton St
#16
Boston MA 021344433
rohinig@bu.edu

New Pass Registration: PTIN01 (Monthly Part-time Student Primary Membership)

Pass Holder:	Rohini Gudimetla	<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
Pass Number:	1072425	26.31	26.31	26.31	26.31	0.00
Valid Dates:	03/25/2024 to 03/31/2024					
Installment Billing:	1 Future Bill(s) Totaling \$27.95. Final Cumulative Fees Totaling \$54.26.					

Processed on 03/25/24 @ 11:59P by WWS

Total New Fees	26.31
Discount Applied	0.00
Total New Taxes	0.00
Total Due	26.31
Total Fees Paid	26.31
Total Taxes Paid	0.00
Total Paid	26.31

Household Balance Information

Overall Household Credit Balance Available	0.00
Overall Household Balance Due	0.00

Payment of: 26.31 Made By:VISA/MC WEB Auth: 340776 Card#: xxxxxxxxxxxx3392 With Reference:

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FITREC USER AGREEMENT

Release, Acknowledgment of Risk, and Waiver of Liability for use of the Boston University Fitness and Recreation Center
MUST BE COMPLETED FOR ALL PARTICIPANTS

In consideration of the opportunity to participate in classes, activities, and programs conducted at the Boston University Fitness and Recreation Center and/or other University athletic facilities, and to use equipment located therein, I, the undersigned, an adult, on behalf of myself, my child/children identified hereunder in the signature block if the participant(s) are one or more children of whom I am the parent or legal guardian, and anyone claiming on behalf of me or my child/children, do hereby forever release, hold harmless, agree not to sue, and forever discharge Trustees of Boston University (the "University") and its departments, officers, directors, board members, representatives, agents, and employees from any and all claims, demands, causes of action, judgments, damages, expenses and costs (including attorneys' fees), including but not limited to claims of negligence on account of personal injury, bodily injury, property damage, death or accident of any kind sustained by me and/or my child that arises out of my or my child's use of, presence in, or participation in the Program, whether or not caused by the ordinary negligence of the University, which I may now or hereafter have and which the above-named minor has or hereafter may acquire, either before or after reaching majority, to the maximum extent permitted by law.

I understand, recognize, and acknowledge that certain activities conducted or taking place in the Program Location, including but not limited to the Program, are potentially hazardous and may involve the risk of accident, death, illness, physical or mental injuries, and property damage. I further understand, recognize and acknowledge that such activities, including but not limited to the Program, may not be run or organized by the University. It is my responsibility to ask questions about any aspect of the Program activities that have not been explained to my satisfaction. I hereby voluntarily assume any and all risks, including injury to person and property, related to my participation and/or my child's participation in the Program. I further understand that, notwithstanding precautions taken by the University, sports and fitness activities involve a risk of injury and/or death. I/we are voluntarily participating in these activities and using equipment and machinery with knowledge of the dangers involved, and I/we are voluntarily assuming any and all risks.

I understand, recognize and acknowledge that an inherent risk of exposure to COVID-19 exists in any place where people gather. COVID-19 is an extremely contagious disease that can lead to severe illness and death. I, on behalf of myself, my child, and anyone claiming on behalf of me or my child, hereby voluntarily assume any and all risks, hazards, and dangers arising from or relating in any way to the risk of contracting a communicable disease or illness due to my child's participation in the Program "including, without limitation, exposure to COVID-19 or any other bacteria, virus, or other pathogen capable of causing a communicable disease or illness, whether that exposure occurs before, during, or after the Program, and regardless of how caused or contracted." I, on behalf of myself, my child, and anyone claiming on behalf of me or my child, hereby waive any and all claims and potential claims against the University and its trustees, officers, employees, students and agents "relating to such risks, hazards, and dangers.

In signing this Release, Acknowledgment of Risk, and Waiver of Liability, I hereby acknowledge that I have read this entire document, that I understand its terms, that I have signed it knowingly and voluntarily, and that I intend it to bind me and, as applicable, my child/children and anyone claiming on behalf of me or my child/children.

In the event the program location includes the Boston University Fitness and Recreation Center (FitRec) and any facility operated by the Department of Physical Education, Recreation and Dance, I understand that I must abide by and follow all rules and policies outlined in the FitRec Membership Handbook:

<https://www.bu.edu/fitrec/about/forms-policies/membership-policies-handbook/>

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Participant Name: Rohini Gudimetla Date: 03/25/2024
Signee Name: Rohini Gudimetla