

**Seminar XL (Limited Edition)  
Fall Semester  
Academic Year 2008 – 2009  
Student Participant Agreement**

I have read and understood the Seminar XL Policies, which describe the expectations from participants. I commit myself to observing them and to contributing to the fulfillment of the Seminar XL objectives. I will attend at least 80% of the sessions after my enrollment.

Student's name: \_\_\_\_\_ MIT ID#: \_\_\_\_\_

Term Address: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Group joined: \_\_\_\_\_

Group joined: \_\_\_\_\_

Student's signature: \_\_\_\_\_

Date: \_\_\_\_\_

**TO THE STUDENT: Return this completed and signed form immediately to OME in Room 4-113.**