## FITNESS CENTER WAIVER

ONE MARKETPOINTE FITNESS CENTER
MANAGED BY: JONES LANG LASALLE AMERICAS, INC. (JLL)
952-426-1567
(Please Print)
Name:
Company Name:
Business Phone:
Home Phone:
Access Card #:
Membership Date:
E-Mail Address:
WAIVER  The undersigned, in consideration of my participation in the activities in the One MarketPointed Fitness Center and the use of the equipment and facilities, does hereby expressly agree that all exercises and treatments and use of all facilities shall be undertaken at the undersigned's sole risk Jones Lang LaSalle Americas, Inc., and OMP Minneapolis Propco 1, LLC, its agents and representatives (hereinafter called "Released Parties") shall not be liable for any claims, demands, injuries, damages, actions, or causes of action, whatsoever to the undersigned or the premises where the same are located, and the undersigned does hereby expressly forever release and discharge the said Released Par-ties, their servants, agents or employees.  My signature below signifies that I have read, understood and accepted the terms and conditions of this release agreement.
Signature:
Date:
* Please return completed forms to Jaycee Wolfe Jaycee Wolfe@am.ill.com