

# CROWN POINTE

## HEALTH CLUB RELEASE

I, \_\_\_\_\_ (print full name), for myself and my heirs, administrators, executors, successors and assigns, hereby agree to fully release, remise and discharge Massachusetts Mutual Life Insurance Company and Owner's managers, officers, employees, agents, affiliated companies and their agents from any and all occurrences which shall result in bodily injury, disease, death or property damage and/or property loss, and any and all claims, demands, actions and causes of action relating thereto, arising directly or indirectly out of or in the course of my use of Owner's property known as the Health Club located on the first floor of the Crown Pointe office building located at 1050 Crown Pointe Parkway, in Atlanta, Georgia. I understand use of the lockers is limited to the time I am physically using the club and facilities. I understand items left in lockers or locker rooms will be removed to the building's lost and found.

This Release is given in consideration of the permission granted to me to enter and use the Health Club. I understand that the Health Club is for the exclusive use of Crown Pointe Tenants and their employees and recognize the potential dangers inherent in all exercise facilities. I agree to abide by the rules of the facility.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Company

\_\_\_\_\_  
Security Access Card Number

(Please fax to CB Richard Ellis, Inc. Management Office 770/551-5771 or return to CB Richard Ellis, Inc. Management office at 1040 Crown Pointe Parkway, Suite 100.)

**Health Club Hours**  
**Monday thru Friday: 5am to 9pm**  
**Saturday and Sunday: Closed**



