

BROOKSHIRE CENTER

BROOKSHIRE PROPERTIES LLP
RECREATIONAL ACTIVITY RELEASE
Last reviewed 9/5/2006

I _____ of _____
(PLEASE PRINT NAME) (PLEASE PRINT ADDRESS)

in signing this agreement have elected to use the Brookshire Center exercise room and participate in the physical and social activities provided therein.

I am aware there are inherent health, physical, mechanical and other risks in using exercise equipment and participating in fitness programs. I also understand that unanticipated and unexpected dangers may arise during, prior to, or after such activities that could lead to injury, illness, or even death.

I voluntarily and expressly agree to assume ANY and ALL risks of injury to my person and property that may be sustained in connection with the activities occurring in or about the Brookshire Center Exercise Room, including my use of exercise equipment and participation in fitness programs.

I recognize my own responsibility to discuss exercise programs with my own physician to determine appropriate levels of activity, and have done so to determine my appropriate levels. I further agree to abide by any restrictions given me by such physicians related to my activity.

In consideration of the permission granted to me to enter and participate in the above stated and related activities, I hereby for myself, my heirs, administrators, successors, and assigns, agree to release, remise, and discharge Brookshire Properties LLP, together with its officers, management, employees, Fitness Committee members, Brookshire Center Committee members, insurers, agents and their successors, heirs, and personal representative from any and all claims of liability, loss, or damage related to or arising from the use, operation and enjoyment of the Brookshire Center exercise room.

I further understand that I am prohibited from inviting any other person/s to accompany me to the Brookshire Center Exercise Room, using its equipment and participating in its fitness program/s, until that person/s has/have signed this Recreational Activity Liability Release and has received orientation on all equipment.

Resident's signature _____ Date _____

Received by Fitness Committee on _____.