

BROADLANDS ASSOCIATION, INC.
TENANT – FITNESS CENTER AGREEMENT

Fitness Center Location: 43360 Rickenbacker Square • 5:00am-11:00pm Daily

INSTRUCTIONS: HOA needs copy of AOS & Lease. Pay online at broadlandshoa.org/amenities/fitness-center then email this form to info@broadlandshoa.com. HOA staff will respond with instructions.

TENANT NAME: _____ TENANT PHONE: _____

PROPERTY ADDRESS: _____

EMAIL(S) OF ADULT TENANTS: _____

RECORDED OWNER: _____ OWNER PHONE #: _____

This application form **MUST BE SIGNED BY ALL TENANTS OF OWNERS' PROPERTY** who may wish to use the Broadlands Association, Inc. Fitness Center when fitness center privileges are transferred from the owner to a tenant upon completion of the Absentee Owner Statement form. Owner must be in good standing for tenant(s) to be granted access. The access fee is \$25.00 per Fob, or if using Bluetooth, \$25 for entire household. Fitness Members may not allow other individuals to use their Fob/Bluetooth to allow others to accompany them into the Fitness Center unless listed below. Additionally, propping the doors or opening doors for individuals asking for access to the facility is prohibited. Failure to comply with all Fitness Center rules will result in suspension of privileges at the discretion of Broadlands Association. If your access fob has been lost or stolen, immediately notify the Broadlands Association office. Owners and their Tenants will be responsible and charged for any damage made to Broadlands Association property by members or person's entering with the Tenant's access fob.

| OCCUPANT NAME(S) <i>(Proof of occupancy required)</i> | *DATE OF BIRTH <i>(13-17 must be with adult member)</i> | SELECT Fob or Bluetooth <i>(must be 18+)</i> | Member Initials | DATE | Fob # <i>(Office Use Only)</i> |
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Parent or legal Guardian who wish for their children ages 13-17 to obtain access to the Fitness Center By signing this document you are authorizing your child to utilize the Fitness Center and equipment therein. Children must remain under your supervision at all times and you are assuming all risks as stated below. All occupants age 18 or older who intend to use the Fitness Center must sign an agreement before receiving access fobs.

WAIVER AND ASSUMPTION OF RISK FOR USE OF FITNESS CENTER:

I, the undersigned, realize that participation in any activity involves risks of injury and/or abnormal responses, including but not limited to, soft tissue or muscle strains/sprains, heat stress, head and spine and related musculoskeletal trauma, abnormal blood pressure, fainting, chest discomfort, heart attack, or even death. I also recognize that there are many other risks of injury, including serious disabling injuries, that may arise due to participation in any activity and that it is not possible to specifically list each and every individual injury risk. I further understand that these injuries and losses might result not only from my actions, but the actions, inactions or negligence of other persons. I also acknowledge and understand that Broadlands Association does not provide security for its Fitness Center and agree that I am responsible for my safety while using the Fitness Center. I assume all risks associated with any injury or loss related to my use of the Fitness Center. I further release, waive, and hold harmless Broadlands Association, Inc. and its officers, directors, employees, agents, and volunteers from all claims by me for any liability, injury, loss, damage in any way related to my use of the Fitness Center. I intend for this waiver and release to also apply to any next of kin, relatives, heirs, beneficiaries or assigns who might pursue any legal action on my behalf or in connection with any injury to me. Any Tenant who possesses an access fob may not allow any other individual to use that access fob to gain access to the facility and any violation of this rule will result in a suspension of privileges. I received a copy of the Broadlands Fitness Center Rules and agree to abide by those rules and further agree that my right to use the Fitness Center may be suspended if I violate those rules.

I have read this document carefully and I understand it and am signing it voluntarily. I also certify that as a parent/guardian of any person under the age of 18, I consent to his/her agreement to be bound by each of the terms and conditions of this document.

SIGNATURE: _____ DATE _____

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OFFICE USE

ABSENTEE OWNER'S STATEMENT ON FILE: **LEASE EXPIRATION:** _____ / _____ / _____

Date Received: _____ PayPal or other _____ \$ _____ Activated

Notes: _____