JBG SMITH

WAIVER OF LIABILITY

NORTH GLEBE OFFICE
800 North Glebe Road
FITNESS CENTER

In order to qualify to use the exercise and weight training facilities and equipment located at the North Glebe Office Fitness Center, and in consideration thereof, I hereby certify, covenant, and agree to North Glebe Office, L.L.C and JBG/Commercial Management, L.L.C. as follows:

1. I am in good physical condition and able to use the facilities and equipment and to participate in exercises and fitness activities available at the above location. I will do all exercise and participate in all activities at my own pace and at my own risk. I represent that I have no disability, impairment, or ailment preventing me from engaging in active or passive exercise or that will be detrimental to my health, safety or physical condition if I do engage or participate.

2. I understand that North Glebe Office, L.L.C and JBG/Commercial Management, L.L.C. represent that neither they nor any of their employees, personnel or agents has expertise in (a) diagnosing, examining or treating medical conditions of any kind, (b) determining the effect of any specific exercise, (c) prescribing any exercise program, or (d) instructing in the use of any exercise equipment.

3. I understand that in participating in one or more exercises or fitness activities at the facility or in use of the equipment or the facility, there is a possibility of accidental or other physical injury or loss of my personal property. I agree to assume that risk of such injury or loss of property, and to indemnify, defend and hold harmless North Glebe Office, L.L.C and JBG/Commercial Management, L.L.C. and any officers, directors, members, shareholders, partners, employees, personnel, agents, or contractors thereof, from liability for any and all injury, loss, illness, harm or damage resulting from my use of the facility or the equipment, other than that which results from the gross negligence or willful misconduct of North Glebe Office, L.L.C and JBG/Commercial Management, L.L.C.

4. I understand and acknowledge that I am an employee of the Tenant designated below, which is a tenant located at 800 North Glebe Road.

_____ _____

Employee: Name (please print) Employee Signature Date

Datawatch Card #: _____ E-mail address: _____

Please check box that applies: Male □ Female □

This will certify that the employee designated herein is an employee of_____, Tenant.

Tenant: _____ _____

Address & Suite #

By: _____

Title: _____ Phone: _____