## GOLF CHANNEL HEALTH & FITNESS CENTER RELEASE OF LIABILITY AND CONSENT

In consideration of the opportunity to use the Golf Channel Fitness Center facilities (the "CENTER"), I hereby assume all risks of injury, illness, death or other loss arising from or in any way relating to my use of the CENTER.

I hereby release, agree not to sue, and forever discharge GOLF CHANNEL, NBC UNIVERSAL, INC., and any of their respective branches, divisions, parents, sister companies or subsidiaries, or any of such parties present or former officers, directors, shareholders, trustees, employees, agents, representatives, or contractors, of and from any and all manner of claims, demands, actions, causes of action, liability, damages, claims for punitive or liquidated damages, claims for attorney's fees, costs and disbursements, individual or class action claims, and demands of any kind whatsoever, I have or might have against them or any of them, whether known or unknown, in law or equity, contract or tort, arising out of or in any way relating to my use of the CENTER and/or loss of personal property, however originating or existing. This release shall be binding upon my heirs, personal representatives, administrators, executors, and assigns.

I understand that this release includes, without limitation, all injuries which may occur as a result of the following: (a) my use of CENTER amenities and equipment in the CENTER,; (b) the malfunctioning of any equipment; (c); and (c) my slipping and/or falling while in or on the CENTER's premises.

I understand use of the CENTER may result in injury is strictly voluntary, is not required of Golf Channel employees, and I may discontinue my participation at anytime. I further understand that Golf Channel may revoke my privileges to use the CENTER in its sole discretion. I agree to be bound by and obey all the rules and policies of the CENTER.

I understand at any time I may review this Release of Liability and Consent by requesting a copy from Golf Channel. I agree if any portion of this form is held invalid, the remainder of this form will continue in full legal force and effect.

I have carefully read this Release of Liability and Consent and fully understand its terms. I sign it voluntarily with full knowledge of its legal significance and understand that I have the right to have my attorney review it.

I am 18 years of	of age or older.		
Signature: Print Name: Date:		_	