

**55 West Monroe
Bike Park Waiver Form**

First Name:		M.I.:	Last Name:
Home Address:			Home Phone:
City:	State:	Zip:	Work Phone:
Company Name:			Suite Number:
Email:	Gender:		Kastle Key Card Number:

I, understand, have requested that you, JOHN HANCOCK LIFE INSURANCE COMPANY (the "Owner", permit me to use the bicycle parking areas ("Parking Areas") located on the 5th floor and also located at the dock level at 55 West Monroe, Chicago, Illinois (the "Building"). I agree as follows:

1. I will use the Parking Area only for purposes of parking my bicycle therein in accordance with the rules and regulations established by JOHN HANCOCK LIFE INSURANCE COMPANY, from time to time. I will not permit any other person to exercise my right to use the Parking Area, or permit any other person to exercise my right to use my access card providing access thereto.
2. I understand that my use of the Parking Area is at my sole risk and agree that I will bear the sole risk of injury to my person and/or damage or theft of my property (including, without limitation, my bicycle). I agree that, in the event of injury, I will be responsible for obtaining medical aid, at my sole expense.
3. I, on behalf of myself, my family, and my heirs and representatives, do hereby fully and forever release, absolve and discharge you, and your officers, directors, shareholders, employees, representatives, contractors, member, partners, beneficiaries, trustees and agents (including, without limitation, Managing Agent, and its officers, directors, shareholders, employees, representatives, contractors, members, partners, beneficiaries, trustees and agents), and the successors and assigns of the foregoing (the "Releasees"), individually and collectively, from and against any and all Claims that I have, or in the future may have, arising out of or relating to my use of the Parking Area. "Claims" means any and all claims, causes of actions, rights and subrogation, suits, losses, liabilities, damages, costs and expenses (including, without limitation, attorney's fees and expenses) of every kind whatsoever, whether past or present, contingent or otherwise, matured or unmatured, known, unknown, punitive, direct or indirect, actual or consequential, arising at law, in equity or otherwise. Notwithstanding anything to the contrary contained herein, nothing contained in this Agreement shall exculpate any of the Releasees from its own negligence or willful misconduct.
4. I acknowledge that I have been given an opportunity to read this Agreement at my leisure and to ask questions about it. I agree that I have either consulted with an attorney about this Agreement or have elected not to consult with an attorney about it.
5. I agree that you may revoke my Parking Area privileges if I violate the rules and regulations governing the Parking Area, and lose any and all privileges for usage of the Building Bike Room.
6. I agree that I may only park my bicycle in the designated Parking Area for 24 hours. After the 24 hour period, my bike will become property of 55 West Monroe.

I have read and fully understand the Bike Park Waiver Form.

Signature _____ Date _____