

**FREEHOLD TOWNSHIP SENIOR CENTER MEMBERSHIP APPLICATION FORM  
4/01/2016 TO 3/31/2017**

\_\_\_\_\_  
LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_ TOWN \_\_\_\_\_ ZIP \_\_\_\_\_  
DAYTIME PHONE# \_\_\_\_\_ EVENING# \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

**THIS PORTION MUST BE COMPLETED  
EMERGENCY INFORMATION**

EMERGENCY CONTACT PERSON \_\_\_\_\_  
PHONE# \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_  
NAME OF DOCTOR \_\_\_\_\_ PHONE # \_\_\_\_\_  
MEDICAL CONDITIONS WE SHOULD BE AWARE OF INCLUDING ANY MENTAL OR  
PHYSICAL CONDITIONS— \_\_\_\_\_

SPECIAL NEEDS WE SHOULD BE AWARE OF INCLUDING ANY MENTAL OR  
PHYSICAL CONDITIONS— \_\_\_\_\_

MEMBERSHIP DUES ARE **\$18.00** PER YEAR PER PERSON

CHECK SHOULD BE MADE PAYABLE TO: **FREEHOLD TOWNSHIP SENIOR CENTER**

I understand that I am participating at my own risk. I agree to hold harmless the Township of Freehold, Senior Center, or authorized agents for any injury that I may suffer by participation in any of the programs offered through the Senior Center. This means that you are releasing the Township of Freehold, the Senior Center, or its authorized agents from any liability for any injury that you may suffer as a result of participation in activities sponsored by the Freehold Township Senior Center. By signing this form, you are voluntarily and freely giving up your right to sue the Township of Freehold, the Senior Center, or its authorized agents. Further, by signing this waiver, you acknowledge that you do so voluntarily and of your own free will. You further acknowledge that you have the capacity to enter into this agreement releasing the Township of Freehold from any liability. You further understand and agree that your signature on this waiver applies not only to any events listed in the waiver but to any and all events from this time forward in which you participate that are sponsored by the Freehold Township Senior Center. By executing this waiver you release the Township of Freehold, the Senior Center, or its agents not only from any items listed in this form but from any activities or events that you participate in, in the future. This includes all classes, lunches, socials, trips, etc.

\_\_\_\_\_  
MEMBER SIGNATURE

\_\_\_\_\_  
DATE

FREEHOLD TOWNSHIP SENIOR CENTER  
MEMBERSHIP INFORMATION SHEET

The Freehold Township Senior Center offers many activities for adults 55 and over.

The activities include exercise classes such as Strong Bones, Yoga, Stretching and Breathing, Aerobics, Pilates and Line Dancing. In all instances these programs are designed with seniors in mind. We encourage our members to observe a class to see if they are able to participate prior to signing up for the class. If you participate in a class you must be a member in good standing. Exercise classes are Free to members.

Professional caterers provide all the food for our programs such as lunches and socials. If a member has a food allergy or special need, and we are not able to accommodate that need we recommend that they provide their own food for the function.

If there is a specific need of an individual when attending any function at the center the staff should be made aware of this need in advance. If the staff at the center is not able to provide services to the senior the caregiver or family member will have to accompany the participating member.

If at any time the center feels that the member cannot participate, the staff will notify that member or family member/caregiver and inform them that they cannot participate in the program(s).

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SIGNATURE

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DATE