

**FREEHOLD TOWNSHIP SENIOR CENTER MEMBERSHIP APPLICATION FORM**  
**4/1/2020 TO 3/31/2021**

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 \_\_\_\_\_  
\_\_\_\_\_

MEMBERSHIP DUES ARE **\$20.00** PER YEAR PER PERSON  
CHECK SHOULD BE MADE PAYABLE TO: **FREEHOLD TOWNSHIP SENIOR CENTER**

I have read the Freehold Township Senior Center 2020/2021 membership information sheet and agree to abide by the Freehold Township Senior Center's policies.

I also 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