TOWNSHIP OF MANALAPAN

SENIOR CITIZEN CENTER

211 Route 522 • Manalapan, NJ 07726 • 732-446-8401 • Fax 732-446-2564

Website: www.mtnj.org Email: seniorcenter@mtnj.org

<u>Director</u> Elaine McNamara



To be filled in by staff:	
Amount Due: Receipt #:	_
Waiver Completed:	_(√)

Registration at Manalapan Senior Center and Covered Bridge Clubhouse begins Wednesday, July 10th 9:00 AM

Address:	
TONY HILL INN "MAGIC MOMENTS" IACKENSACK, NJ Lunch served family style	\$47
Pickup at: Municipal Complex (9:45 AM) Covered Bridge Clubhouse (10:00 AM)	
ANCASTER, PA . MILLER'S SMORGASBORD & BAKERY . AMERICAN MUSIC THEATRE "OVATION"	\$59
Pickup at:Covered Bridge Clubhouse (9:00 AM)Municipal Complex (9:15 AM)	
	ANCASTER, PA . MILLER'S SMORGASBORD & BAKERY AMERICAN MUSIC THEATRE "OVATION" Pickup at: Covered Bridge Clubhouse (9:00 AM)

2019 TOWNSHIP OF MANALAPAN RELEASE/WAIVER OF LIABILITY

- 1. I understand and agree that my participation in the activity of the Manalapan Township Senior Citizen Center or bus trips sponsored by Manalapan Township listed above will present certain risks and hazards depending on the specific nature of the activity or trip involved.
- 2. I understand and agree that it is my responsibility to determine the nature of the trip or activity in which I am to participate; the degree and level of physical activity that will be necessary in order for me to participate in said activity.
- 3. I am fully aware of the risks, hazards and level of physical activity required to participate in the above listed activity and I hereby represent to the Township of Manalapan Senior Citizen Center or bus trips sponsored by Manalapan Township that I am physically able to fully engage and fully participate in this activity.
- 4. I understand and agree that neither the Township of Manalapan nor the Manalapan Township Senior Citizen Center or bus trips sponsored by Manalapan Township requires me to participate in this activity. I voluntarily assume full responsibility for any risks of loss, personal property damage that may be sustained by me, or any loss of damage to property owned by me, as a result of being engaged in such activity.

IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability, understand it and sign it voluntarily as my own free act and deed.

INITIAL ONLY TRIPS THAT YOU ARE ATTENDING!!!		PARTICIPANT:
8/29/19 STONY HILL INN	Initials:	(Print Name)
10/02/19 MILLER'S & AMT	Initials:	(Print Name)
Signature:		
Date: Address: Emergency contact Information:		
Name: Phone:	Relatio	n: