

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

Director
Elaine McNamara



To be filled in by staff:

Amount Due: _____
Receipt #: _____
Waiver Completed: _____ (√)

**Registration at Manalapan Senior Center and Covered Bridge Clubhouse
begins Thursday, March 19th at 9:00 AM**

Are you a Manalapan Township Resident and member of the Manalapan Senior Center?

Yes No (If no, you will need to register first)

Name: _____ Address: _____

Phone Number: _____

____ Thurs. 06/11/20 Axelrod Theatre, Deal, NJ "Grease" \$68
All Seasons II, Freehold, NJ Breakfast Buffet prior to show

Breakfast Buffet includes: Assorted Danish & Pastries, Bagels, Scrambled Eggs, Home Fries,
French Toast, Pancakes, Bacon, Sausage & Fresh Fruit, Coffee & Tea

Pickup at:

____ Covered Bridge Clubhouse (10:00 AM)
____ Municipal Complex (10:15 AM)

Seating preferences: _____

Food Allergies: _____

____ Thurs. 7/16/20 Surflight Theatre, Beach Haven, NJ "Legally Blonde" \$52
Lunch: Parker's Garage, Beach Haven, NJ

*All Entrees are served with Arugula Salad, Rolls, side of kettle chips

Choice of:

- ____ **Chicken Sandwich** w/ Bacon, Lettuce, Tomato with Romesco Sauce (has nuts) on Ciabatta Roll
- ____ **Blackened Shrimp Wedge Salad** Blue Cheese, Radish & Roasted Tomato
- ____ **Short Rib Grilled Cheese** with Pickled Peppers & Garlic Aioli
- ____ **Crab Cake Sandwich** with Caper Aioli on a Brioche Bun
- ____ **Grain Salad** with Avocado & Pickled Vegetables

Dessert, Coffee, Tea, Iced Tea & Soda

Pickup at:

____ Covered Bridge Clubhouse (9:45 AM)
____ Municipal Complex (9:45 AM)

Seating preferences: _____

Food Allergies: _____

PLEASE COMPLETE WAIVER ON THE REVERSE

2020 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.
5. I understand that tickets are not transferable and that if I cancel my trip a refund will be issued only if my vacated seat is sold to a registered member of the Manalapan Senior Center who is on the waiting list.

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:

06/11/20 Axelrod Theatre

Initials: _____

 (Print Name)

7/16/20 Surflight Theatre

Initials: _____

 (Print Name)

Signature: _____

Date: _____ **Address:** _____

Emergency contact Information:

Name: _____ **Phone:** _____ **Relation:** _____