

Mail to: Manalapan Senior Citizen Center 120 Route 522, Manalapan, NJ 07726 Phone (732) 446-8401 Fax (732) 446-2564 Email – seniorcenter@twp.manalapan.nj.us

2023 MEMBERSHIP REGISTRATION

NAME:		
(Last)	(First)	
ADDRESS:		
(City)	(Zip Code)	
EMAIL ADDRESS:		
HOME PHONE	CELL PHONE	
DATE OF BIRTH	MARITAL STATUS	
Registration is open to those 60 years of ag	e or older.	
RACE	sian	
IS PRIMARY LANGUAGE ENGLISH?	□Yes □No If no, what Language?	
TRANSPORTATION Car Public Tra		
LIVES □Alone □Spouse □Relative □C	Other NUMBER IN HOUSEHO	LD:
BELOW POVERTY LEVEL □Yes □ No		
ALLERGIES:		
FRAIL □Yes or □No		
PROSTHETIC DEVICES Hearing Aid	d □Dentures □Walker/Cane □Wheelchair □Glas	sses □None
<u>EMER</u>	RGENCY CONTACT INFORMATION	
NAME	(RELATIONSHIP)	
HOME PHONE	(CELL)	-
MEMBER SIGNATURE	DATE	

TOWNSHIP OF MANALAPAN RELEASE/WAIVER OF LIABILITY

Please	initial classes/activities that you participate in DATE:		
Facebo	ook Live & all Virtual Classes or Activities: Bus Trips		
Yoga_	Strength Training Healthy Bones Tai-Chi		
Gentle	Cardio Art Computers Bingo & Social		
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 my participation in any remote online classes or activities presented under the guidance of the Township of Manalapan Senior Citizen Center is a totally voluntary situation and I assume full responsibility for my participation and agree to hold harmless the instructors and the Township of Manalapan and its employees.		
3.	I understand and agree that it is my responsibility to determine the nature of the trip or activity in whic I am to participate; the degree and level of physical activity that will be necessary in order for me t participate in said activity.		
4.	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.		
5.	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 resolute of being engaged in such activity.		
	ENING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of cy, understand it and sign it voluntarily as my own free act and deed.		
	PARTICIPANT SIGNATURE:		
DATE	:		
	Printed Name		

Address