

Brookfield Senior Center Membership Application

7/1/18-6/30/19

RESIDENT: \$0 _____

NONRESIDENT: \$20 _____ NONRESIDENT – TRIP ONLY: \$0 (no newsletter) _____

Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone No: _____ Cell: _____

Email: _____ Birth date: _____

Person to contact in case of emergency: _____

Relationship: _____

Phone: _____ Work: _____ Cell: _____

Signature: _____ Date: _____

How would you like to receive the Newsletter? (check one):

Email (this is the quickest) _____

I will pick up at the Center (thank you for saving us the cost of postage) _____

Postal Mail _____

*Mail to: Brookfield Senior Center, 100 Pocono Road, Brookfield, CT 06804
(Please make checks payable to Town of Brookfield)*

Your scan card is to be used each time you visit the Center.

Please turn over



Brookfield Senior Center
Personal Conduct

The Brookfield Senior Center is a facility where people age 60 and older meet to participate in social, educational and other activities in order to enhance and enrich their lives. It is necessary to establish standards of behavior.

Everyone has the right to expect others to act respectfully towards them and each is responsible to act respectfully towards others. Courtesy will be shown to all persons at all times. Personal problems between individuals should not be addressed at the Center. Discrimination towards any person for any reason will not be tolerated. Town of Brookfield employees should be treated with respect and courtesy.

If any senior does not adhere to this policy, the Director of the Senior Center will determine if any action is to be taken to prevent recurrence.

*Everyone is responsible for maintaining the premises in a neat and orderly fashion and for cleaning up after themselves. **Please leave the room in the same manner that you found it.***

Participation Waiver

Being of full age and in consideration of my participation in this activity, I do hereby release and forever discharge the Town Of Brookfield, their agents and employees, their representatives, successors, and assignees from all claims arising out of any and all personal injuries, damages, expenses, and any loss or damage whatsoever resulting or which may result from participation in these programs, including but not limited to: Trips and travel, Zumba Gold, Yoga, Line dancing, Tai Chi, Functional Strength and Balance, Walking and hiking programs, Low Impact Aerobics, Strength Training, and Muscle Sculpt classes.

May we use your photo in advertising, on our website or in Social Media? Yes _____ No _____

I have read and agree to follow the Brookfield Senior Center Policy of Personal Conduct and the Participation Waiver.

Signature: _____ *Date:* _____