



NEWTOWN SENIOR CENTER

Membership Application Form
2023-2024

FOB NUMBER

ALL INFORMATION MUST BE FILLED OUT. PLEASE PRINT



NEW MEMBERSHIP



RENEWAL MEMBERSHIP



CHANGE OF INFORMATION
(ADDRESS, PHONE, ETC)

MR/MRS/MS/MISS

FIRST NAME

LAST NAME

DATE OF BIRTH (DD/MM/YYYY)

MOBILE PHONE

HOME PHONE

ADDRESS

STATE

ZIPCODE

EMAIL ADDRESS

In Case Of Emergency

EMERGENCY CONTACT

RELATIONSHIP

PHONE

LIST OF ANY ALLERGIES OR MEDICAL CONDITIONS WE SHOULD BE AWARE OF:

Membership Information

MEMBERSHIP DUES FOR THE FISCAL YEAR 2023-2024 ARE DUE BY JULY 1, 2023

Membership is open to anyone 55 years of age and up. Your membership entitles you to participate in our programs and activities and to receive all communications from the Newtown Senior Center, including our weekly e-news blast and monthly newsletters. Membership dues and completion of the annual application are due every year on July 1 for all existing and new members. Dues are \$20.00 for Newtown residents and \$25.00 for out of town members. The walk in fee is \$5 per day. Cash or check are accepted. Checks should be made payable to the Town of Newtown. New members will receive a FOB card to scan in for all activities. Replacement cards are available for a \$5.00 fee.

PHOTO RELEASE

I, (print name) _____ hereby authorize Newtown Senior Center to take and use my photograph and/or name for printed or electronic publications related to Senior Center functions and activities, such as, but not limited to, news releases, publications, and the website and Facebook page. Any photographs, prints, and digital reproductions shall be the property of the Senior Center.

Signature: _____ Date: _____

*Please note: Your residential address, email, and phone number will not be disclosed in any publication or website. It will not be given out to any business and/or organizations.

WAIVER OF TOWN LIABILITY

To the fullest extent permitted by law, I, the undersigned, agree that the Town of Newtown, and all of its elected or appointed directors, officers, officials, agents, employees, and members of all of its board and commissions, and the Newtown Senior Center, and all of its directors, officers, officials, agents, employees, organizers, sponsors, and independent contracting staff, are not liable for, responsible for, and do not assume any liability, responsibility or obligation for any/all claims, damages, injuries, obligations, accidental or otherwise including claims arising out of any type of virus bacteria, or any other microorganism that induces or is capable of inducing physical distress, illness or disease, or actions or omissions by other persons which may happen to occur upon the premises of the Newtown Senior Center prior to. Participation is at my own risk. There is no medical coverage.,

Signature: _____ Date: _____

CASH

CHECK / CHECK #

STAFF INITIALS