

# **CSC Membership Form**

\*PLEASE also READ and SIGN the BACK PAGE\*

512 Washington Street, Chelsea, MI 48118

Tele: (734) 475-9242 Fax: (734) 562-2164 website: www.chelseaseniors.org

Name:	
Date of Birth: Townsh	hip:
What CSC programs/activities/classes interest you?	Memory Care Activities  hbers House/Pet Sitting rden Special Events
Address:	
City: State: Zip: Cell Phone	
*EMAIL address:	For CSC use <b>only</b> .
Optional, requested for grant funding purposes only: Are you a Veteran? If so, what branch:	
EMERGENCY INFORMATION:	
Emergency Contact:	Relation:
Home Phone: Cell Phon	ne:
Emergency Contact:	Relation:
Home Phone: Cell Phon	ne:
NEWSLETTER DELIVERY:  Please MAIL the newsletter to me.  OR  Please *EMAIL me the newsletter.	
For Office Use Only: Renewal New members	ship Member ID given Staff Initials
Paid: Mem\$ PB\$ Cash or Cred	dit card or Check#

### **Membership Guidelines:**

Chelsea Senior Center (CSC) membership is good for twelve months from the date you join or renew. Your membership renewal date is printed above your name on the newsletter mailing label and the check-in screen at CSC will remind you to renew starting 30 days before your membership expires. Membership benefits include newsletters and discounts on programs, classes, and travel. It also lets our funders know that you support your senior center!

### Members' Code of Conduct:

- 1. Help provide a friendly and inclusive environment.
- 2. Be courteous to other seniors, volunteers, visitors, and staff.
- 3. Promote civility through interactions.

By signing below, I support and agree that I will uphold these standards and expectations.

#### **Class Cancellation:**

The senior center reserves the right to cancel classes or programs for any reason including for low enrollment and will provide refunds or credits when applicable.

## **Participation Waiver:**

In consideration of being allowed to enroll and participate in senior center activities, programs, and classes, I agree to personally assume all risks associated in such participation including any sickness, harm, or injury that may result from my participation. I release Chelsea Senior Center, its instructors, agents, employees and anyone affiliated with Chelsea Senior Center, whether paid or unpaid, from liability for any injury or damage to me or my property resulting from my participation. I understand and agree to hold harmless Chelsea Senior Center and will not file a claim or action against the Chelsea Senior Center. This Agreement extends to my successors, heirs, and assigns.

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Pate
PHOTO RELEASE: I give Chelsea Senior Center permission to use my photo and/or name for promotional

Chelsea Senior Center
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