



Jeffersonstown Senior Citizens Center

A SOCIAL ACTIVITY CLUB FOR ACTIVE & INDEPENDENT ADULTS

10631 Watterson Trail
Jeffersonstown, KY 40299
(502) 267-9112

Date: _____

MEMBERSHIP APPLICATION

NAME:	DATE OF BIRTH:
STREET ADDRESS:	
CITY, STATE, ZIP:	ARE YOU A RESIDENT OF JEFFERSONTOWN Please circle one: YES or NO
HOME PHONE:	
CELL PHONE:	
EMAIL:	

#1 EMERGENCY CONTACT:	CELL PHONE #:
Relation:	OTHER DAYTIME PHONE #:

#2 EMERGENCY CONTACT:	CELL PHONE #:
Relation:	OTHER DAYTIME PHONE #:

EMERGENCY MEDICAL INFO and/or ALLERGIES (drug allergies, serious medical conditions, <u>anything EMS would need to know if you could not speak for yourself</u>): PREFERRED HOSPITAL:

PLEASE REVIEW NEXT PAGE AND SIGN/DATE WHERE INDICATED



**Jeffersontown Senior Citizens Center
10631 Watterson Trail
Jeffersontown, KY 40299**

Release, Indemnity and Hold Harmless Agreements

Physical Activities Equipment & General Participation

I am fully aware of and appreciate the risks associated with participation in physical activities, including, but not limited to the following listed activities and equipment: aerobic exercise, exercise classes, walking in Armstrong Recreation Center, line dancing, personal use exercise equipment including stationary bikes, hand weights, gym equipment, treadmills, cardio fit equipment and all other equipment used by me. I understand that I am solely responsible to decide whether I am physically capable to undertake any activities.

I further represent that I have not relied upon any training, demonstrations or other aid in the use of the above-mentioned equipment and/or physical activities from the City of Jeffersontown, Kentucky, its agents, servants and/or employees, including but not limited to Jeffersontown Senior Citizens Center.

For and in consideration of the use of this equipment and participation in all physical activities, the undersigned hereby releases, relinquishes and covenants not to bring legal suit against the City of Jeffersontown, Kentucky, its agents, servants, and/or employees as the result of any injuries and/or claims arising out of said use of the here in above named equipment and physical activities.

I further agree to hold said City of Jeffersontown, Kentucky, its agents, servants and/or employees harmless from and against any claims, suits, causes of action, awards or judgments arising out of said equipment and physical activities, and to indemnify it for all costs and expenses, of any kind or character.

This release is binding on my heirs, successors, assigns and personal representatives and me.

PRINT NAME: _____

SIGNATURE: _____ **TODAY'S DATE:** _____

Social Media Notification & Participation

I understand that Jeffersontown Senior Citizens Center and its members may participate in social media sites, which may include Facebook and similar outlets recognized to be social media. I understand that there may be social media postings, which may include images of individuals who are visiting and/or participating in activities at Jeffersontown Senior Citizens Center. I hereby acknowledge that my image(s) may be captured during public activities at Jeffersontown Senior Citizens Center and give permission for such images to be used.

This release is binding on my heirs, successors, assigns and personal representatives and me.

PRINT NAME: _____

SIGNATURE: _____ **TODAY'S DATE:** _____

THIS IS A RELEASE