



Date: _____

Jeffersontown Senior Citizens Center

A SOCIAL ACTIVITY CLUB FOR ACTIVE & INDEPENDENT ADULTS

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

MEMBERSHIP APPLICATION

Membership dates are July 1-June 30. Fee is \$40.00 per year. (Sorry, no pro-rate if joining mid-year).
Cash or check are only acceptable forms of payment. Checks may be made payable to J.S.C.

Please read participation requirements on back page and sign & date your acknowledgement.

PLEASE NOTE: Members are expected to be fully independent and capable of taking care of all their own needs. If a member becomes incapable of the aforementioned, they may be asked to bring a caregiver to remain with them the entire time they are at JSC. The caregiver will also have to become a JSC member.

JSC reserves the right to revoke membership for any reason, including but not limited to: the inability, in JSC's opinion, to adequately tend to one's own needs, nuisance behavior or inappropriate conduct. In such instance, JSC member may request reimbursement for some or all of their annual membership fee. A determination will be made by JSC administration of how much, if any, refund of annual membership fee is due to JSC member.

NAME:	EMAIL:
STREET ADDRESS:	
CITY, STATE, ZIP:	HOME PHONE:
DATE OF BIRTH:	
Are you a JEFFERSONTOWN resident? circle one: YES or NO	CELL PHONE:

#1 EMERGENCY CONTACT Name:	Relation:
Cell Phone:	OTHER Phone(s):

#2 EMERGENCY CONTACT Name:	Relation:
Cell Phone:	OTHER Phone(s):

EMERGENCY MEDICAL INFO and/or ALLERGIES (drug allergies, serious medical conditions, **ONLY list important information EMS would need to know if you could not speak for yourself**):
PREFERRED HOSPITAL: _____
COVID VACCINATION(S) RECEIVED: _____

PLEASE REVIEW NEXT PAGE AND SIGN/DATE WHERE INDICATED



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Release, Indemnity and Hold Harmless Agreements

General Participation, Physical Activities & Equipment

I am fully aware of and appreciate the general risks associated with participation in typical daily facility activities, day trips and travel, 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.

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.

Covid-19 Acknowledgement and Assumption of Risk and Responsibility

I understand that the Centers for Disease Control and Prevention (CDC) has issued safety guidelines. I certify that I have reviewed these guidelines (available on www.CDC.gov). My participation at JSC is contingent upon the following being true when I am partaking in activities: (1) I am not currently experiencing any symptoms of, undergoing treatment for, or been directed to self-quarantine for Covid-19. (2) I have not come into close contact with anyone I know who is currently infected with, or undergoing treatment for, or who has been directed to self-quarantine, or who has symptoms and is awaiting a test result for Covid-19 within 14 days.

I acknowledge the contagious nature of Covid-19 and voluntarily assume the risk that I may be exposed to Covid-19 by participating in activities at JSC and that such exposure may result in contracting Covid-19. I understand and acknowledge that, at times, I may not be able to maintain the recommended guidelines for social distancing of six feet from other people. JSC members are responsible for their own safety and must show consideration for the safety of other members. I agree to take full responsibility for my own actions, safety and welfare.

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

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