



# SASC Membership Form

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

*Membership is \$20 per person and good for one year.  
Donations are always welcome! Check our website to donate online.  
Donations are tax deductible to the extent of the law.*

219 Elm Street  
Stockbridge, MI 49285  
www.stockbridgeseniors.org

**Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Township:** \_\_\_\_\_

What SASC programs, activities, classes interest you? \_\_\_\_\_

What would you like to see offered at SASC?  
\_\_\_\_\_  
\_\_\_\_\_

**PHOTO RELEASE:** I give SASC permission to use my photo and name for promotional purposes. Initial: \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**\*Email address:** \_\_\_\_\_ For SASC communications **only**.

### EMERGENCY INFORMATION:

**Emergency Contact:** \_\_\_\_\_ **Relation:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Relation:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Optional, requested for grant funding purposes only.**

**Are you a Veteran?** If so, what branch: \_\_\_\_\_

**Ethnicity** (please check one): \_\_\_\_\_ Hispanic \_\_\_\_\_ Non-Hispanic

**Race** (please check all that apply): \_\_\_\_\_ White \_\_\_\_\_ Black/African American

\_\_\_\_\_ American Indian/Alaskan \_\_\_\_\_ Asian/Pacific Islander \_\_\_\_\_ Other Multi-Racial

### NEWSLETTER DELIVERY:

Please mail the newsletter to me. OR  Please \*email me my newsletter.

For Office Use Only:  Renewal  New membership  Member ID given

Date \_\_\_\_\_ **Staff Initials** \_\_\_\_\_

Paid \$ \_\_\_\_\_ Cash or Credit card or Check # \_\_\_\_\_

**Membership Guidelines:**

Stockbridge Area Senior Center (SASC) 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 SASC 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 Stockbridge Area Senior Center, its instructors, agents, employees and anyone affiliated with Stockbridge Area 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 Stockbridge Area Senior Center and will not file a claim or action against the Stockbridge Area Senior Center. This Agreement extends to my successors, heirs, and assigns.

**Signature** \_\_\_\_\_