



# SENIOR CENTER AT FRISCO SQUARE

2019 Membership Form

Staff Use: **New**

**Previous Member**

**Account Name:**

[Redacted]

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender (circle): Female Male Birthdate (MM/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone Numbers: Cell \_\_\_\_\_ Home/Work: \_\_\_\_\_

Email (required for online registration): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

[Redacted]

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to Primary Client: \_\_\_\_\_

Secondary Contact or Number:

Each patron will be required to show a photo ID with proof of residence at the address listed above before they can use the facility or have their membership ID card made. Forms of acceptable ID are: Valid TX Driver's License, TX State ID card, or Water bill. Proof of residence will be required every 12 months.

[Redacted]

- RESIDENT FREE ANNUAL MEMBERSHIP
- NON-RESIDENT ANNUAL MEMBERSHIP \$24 ANNUALLY
- NON-RESIDENT MONTHLY MEMBERSHIP \$2 MONTHLY
- CAREGIVER MEMEBERSHIP FREE WITH STAFF APPROVAL

Name of client who you will be attending with: \_\_\_\_\_

**Monthly Memberships** - Monthly memberships are only available for non-residents. Monthly memberships are non-refundable.

**Annual Membership Passes – Residents are Free/Non-Residents \$24 annually**

Due to the minimal charge to members. Non-Residents membership may be refunded at a prorated amount based on the number of months that have elapsed. If total amount of refund is more than \$15.00 owed.

**Membership Policies**

Membership is a privilege. All members are required to abide by facility rules and policies. Members who do not follow the facility rules may be asked to leave, suspended, or terminated depending on the violation.

**3 Strike Policy** - All members age is required to have a valid Senior Center ID card present when checking into the facility. Members will only be allowed entrance into the facility 3 times without their card, with each entrance allowed incurring a "strike." On the 4<sup>th</sup> occurrence a new ID card must be purchased for \$5 before entrance to the facility.

**PLEASE INITIAL INDICATING YOU HAVE READ AND AGREE TO THE POLICIES STATED ABOVE.**



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RELEASE OF LIABILITY

I, on behalf of myself and/or the individual(s) being registered, agree to allow the registrant to participate in activities directly or indirectly operated, offered, conducted and/or otherwise provided by the City of Frisco (the "City") including, but not limited to, memberships, passes, admissions, classes, programs, special events and/or any other type of activity (hereinafter individually and collectively referred to as the "Activities") and hereby authorize the City, its employees, volunteers, program directors and/or instructors, as duly authorized agent(s) for the registrant, to consent to medical, emergency, surgical and/or dental care, services, examinations and/or any and all other treatments deemed necessary by such professionals and arising out of and/or in conjunction with, directly or indirectly, the Activities. I agree pictures taken of me and/or the registrant during the Activities may be used for any purpose.

For and in consideration of my/our participation in the Activities, I hereby agree to release, acquit, hold harmless forever discharge and waive any and all claims that I/we may have against the City of Frisco, its Council Members, officers, agents, representatives, employees, volunteers, program directors, instructors, members, heirs, legatees, administrators, executors and assigns, in whole or in part, in both their private and public capacities, (hereinafter collectively referred to as "Releasees") from any and all actions, causes of actions, claims, demands, damages, lawsuits, costs, loss of services, expenses and compensation, whether known or unknown, on account of, or in any way arising out of or connected in any manner with my/our participation in the Activities, including, but not limited to, liability, damages, injury (including death), property damage, legal fees and/or costs caused by or related to any negligent or intentional act of any Releasee.

It is further agreed that the execution of this release and acceptance of the same shall not constitute a waiver by the City of Frisco, Texas, and its Releasees, of its/their governmental immunity and/or any other defense it may have at law and/or equity, whether state and/or federal. Acceptance of this release is not to be construed as an admission of any liability whatsoever by any or all of the Releasees.

I further agree to indemnify and defend the Releasees if I am not authorized to sign and legally bind the registrant to the terms of this release or if the person named herein attempts to rescind this release. If any term of the release is deemed void or voidable, it shall not affect the enforceability of anything else in the release.

This Release of Liability Form will be valid and in force and effect for all purposes stated herein for 12 months from the date of execution.

Member's Signature

Date (MM/DD/YYYY)

STAFF USE ONLY

Date Received: \_\_\_/\_\_\_/\_\_\_ Employee Initials: \_\_\_\_\_ Residency Checked?

Amount Paid (if Any): \$\_\_\_\_\_ Check #: \_\_\_\_\_  Cash  Credit Card

Driver's License  Water Bill  Insurance