

Mansfield Senior Center Registration Form FEBRUARY 2020 CLASSES AND EVENTS

Name: _____ Email: _____

Phone: _____ Address/Town/Zip: _____

DATE	<input checked="" type="checkbox"/>	CLASS/EVENT/TRIP	DETAILS	FEE
MON		QUILTING—10:00AM-4:00PM	FEBRUARY 3 & 24	\$30 EACH
		CARDIO COMBO—9:00-10:00AM	3 CLASSES	\$21.00
		SPARKETTES—10:15-11:45AM	3 CLASSES	\$30.00
		YOGA—1:30-2:30PM	3 CLASSES	\$21.00
TUES		STRENGTH & STABILITY—9:00-10:00AM	4 CLASSES	\$28.00
		POWER OF AGING—10:45-11:45AM	4 CLASSES	\$28.00
WED		GUIDED TAI CHI—9:00-10:00AM	4 CLASSES	\$28.00
		YOGA—11:00AM -12:00PM	3 CLASSES	\$21.00
		BEGIN TAP—1:00-2:00PM	4 CLASSES	\$28.00
THUR		STRENGTH & STABILITY—9:00-10:00AM	4 CLASSES	\$28.00
		CARDIO COMBO—3:15-4:15PM	4 CLASSES	\$28.00
EVENT		CRAFTY CREATIONS—1:00PM	MONDAY, FEBRUARY 10	\$7.00
		FRESH FRIDAY—12:00PM	FRIDAY, FEBRUARY 21	\$7.00
		UConn TAILGATE — 2:00PM	SATURDAY, FEBRUARY 29	\$5.00
TRIPS		MET OPERA—10:30AM	SATURDAY, FEBRUARY 1	
		SHOPPING RUN—1:00PM	TUESDAY, FEBRUARY 11	
		YALE BRITISH ART MUSEUM—9:00AM	TUESDAY, FEBRUARY 18	
		LUNCH BUNCH: THE DUBLINER—11:15AM	WEDNESDAY, FEBRUARY 19	
		SHOPPING RUN—1:00PM	TUESDAY, FEBRUARY 25	
		MET OPERA—10:30AM	SATURDAY, FEBRUARY 29	

CASH

CHECK

CREDIT

TOTAL:

PLEASE NOTE: A signed registration form *and* payment are required to register for classes and activities. Registration forms are available in the newsletter, at the Senior Center and online at www.mansfieldct.gov/seniorregistration. If a class or program is canceled due to inclement weather or lack of an instructor a credit is issued to the participant's account. At the discretion of the Director and under extraordinary circumstances will any other refunds be given. Under no circumstances will cash or check refunds be given to participants.

WAIVER OF PARTICIPANT BY SELF: I hereby agree to release, discharge, and hold harmless the Town of Mansfield, its directors, employees, agents, contractors, and/or volunteers from any and all liability that may occur during either my participation in the above listed recreational activities. I understand that participation in any recreational sport or activity involves risk, and I grant permission to the Town of Mansfield to utilize any medical emergency services it deems necessary to treat any injuries that I may incur. I further understand that the Town does not provide insurance for recreational program participants.

PHOTO RELEASE: I understand that for promotional purposes, the Town MAY videotape and/or take photographs of participants enrolled in recreational activities, classes or programs. I hereby release and permit the Town of Mansfield to utilize for said promotional purposes any photographs and/or videotapes of me engaging in the above listed recreational activities.

Signature: _____ Date: _____