



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

Name: \_\_\_\_\_ Date \_\_\_\_\_

Preferred Name for Nametag: \_\_\_\_\_ Birth Date (Month/Day/Year): \_\_\_\_\_

HomePhone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Jeffersontown Resident: Yes / No (circle one)

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**Primary Emergency Contact**

**Secondary Emergency Contact**

<b>Name:</b>	
<b>Relation:</b>	
<b>Address:</b>	
<b>City:</b>	
<b>State:</b>	
<b>Zip:</b>	
<b>Home Phone:</b>	
<b>Work Phone:</b>	
<b>Cell Phone:</b>	

<b>Name:</b>	
<b>Relation:</b>	
<b>Address:</b>	
<b>City:</b>	
<b>State:</b>	
<b>Zip:</b>	
<b>Home Phone:</b>	
<b>Work Phone:</b>	
<b>Cell Phone:</b>	

**Emergency Medical Information**

**Medical Conditions:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Current Medication List:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**List of Allergies:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Preferred Hospital:** \_\_\_\_\_



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**Release, Indemnity and Hold Harmless Agreement**

**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**