

REGISTRATION FORM — **THURSDAY, SEPTEMBER 14, 2017**

2017 SENIOR CITIZEN ACTIVITY DAY

UNION LUTHERAN CHURCH, 5500 ROUTE 873, SCHNECKSVILLE

Mail Completed Registration Form to:
North Whitehall Township, Attn: **Jane**
3256 Levans Road, Coplay, PA 18037

DOORS OPEN / Registration Starts at 8:15am
Coffee, Tea, Juice and Doughnuts Served
Events start at 9:00am

SENIOR #1			SENIOR #2		
SENIOR #1 AGE		SENIOR #2 AGE		TOWNSHIP	
ADDRESS					ZIP CODE
TELEPHONE		NO RAIN DATE		Donations Accepted	
EMERGENCY CONTACT INFORMATION					
FIRST NAME and LAST NAME				TELEPHONE	



SIGNATURE



SIGNATURE(s) REQUIRED – SENIOR #1 / SENIOR #2
EVERYONE ATTENDING MUST SIGN THIS FORM.

(Date)

LEHIGH VALLEY HEALTH NETWORK **GIVING FREE FLU SHOTS**

WAIVER STATEMENT

To the best of my knowledge, I am in satisfactory physical condition and fully able to participate in any **Senior Day** activity in which I choose to attend. I am fully aware of the risks and hazards connected with the participation in this event, including physical injury or even death, and hereby elect to voluntarily participate in said event, knowing that the associated physical activity may be hazardous to person or property. I **VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OR LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY, INCLUDING DEATH,** that may be sustained by me, or loss or damage to property owned by me, as a result of participation in any **Senior Day** activity.

COVENANT NOT TO SUE North Whitehall Township, its officers, agents, employees, volunteers and assigns, from and against any and all losses, liability, claims, demands, damages, actions and causes of actions, and expenses including reasonable attorneys' fees, judgments, and amounts, whatsoever arising from or related to any loss, damage or injury, including death, that may be sustained by me, or to any property belonging to me, while participating in physical activity, or while on or upon the premises where the **Senior Day** is being conducted.

I expressly intend that this Waiver of Liability and Hold Harmless Agreement shall be binding upon me, my spouse (if any), my heirs, assigns and personal representatives, and shall be deemed a **RELEASE**,

WAIVER, DISCHARGE, and CONVENTION NOT TO SUE North Whitehall, its officers, agents, employees, volunteers and assigns. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be constructed in accordance with the laws of the Commonwealth of Pennsylvania.

In signing this Waiver of Liability and Hold Harmless Agreement, I acknowledge and represent that I **HAVE READ** this Waiver of Liability and Hold Harmless Agreement, **UNDERSTAND IT AND SIGN IT VOLUNTARILY** as my own free act and deed; no oral representations, statements or inducements, apart from the foregoing written agreement, have been made, and I acknowledge adequate and complete consideration for same through my ability to participate in said **Senior Day**.

I hereby **RELEASE, WAIVE, DISCHARGE, AND**

Ages 60+ are eligible. Events held RAIN OR SHINE....You may play the games as many times as you like, but please take turns with other participants so we have no lines forming for any games. All games will stop at 11:30am or upon completion of your current game, in case of ties, followed by a sit-down lunch.