Mansfield Senior Center Registration Form DECEMBER 2019 CLASSES AND EVENTS

Name: _	Email:			
Phone:_	:Address/Town/Zip:			
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DATE	V	CLASS/EVENT/TRIP	DETAILS	FEE
Mon		QUILTING—10:00AM-4:00PM	DECEMBER 2 & 16	\$30 EACH
		PERFORMANCE CHORUS—1:00-3:00PM	1 Class	\$7.00
		CARDIO COMBO—9:00-10:00AM	5 Classes	\$35.00
		Sparkettes—10:15-11:45am	5 Classes	\$50.00
		YOGA—1:30-2:30PM	5 Classes	\$35.00
TUES		STRENGTH & STABILITY—9:00-10:00AM	5 Classes	\$35.00
		Power of Aging—10:45-11:45am	2 Classes	\$14.00
WED		Guided Tai Chi—9:00-10:00am	3 Classes	\$21.00
		YOGA—11:00AM -12:00PM	3 Classes	\$21.00
		BEGIN TAP—1:00-2:00PM	3 Classes	\$21.00
THUR		STRENGTH & STABILITY—9:00-10:00AM	4 Classes	\$28.00
		CARDIO COMBO—3:15-4:15PM	4 Classes	\$28.00
		CONVERSATIONAL FRENCH—1:00-2:30PM	4 Classes	\$28.00
EVENT		New Year's Brunch—10:00am	Tuesday, December 31	\$7.00
TRIPS		SHOPPING RUN—1:00PM	Tuesday, December 10	·
		Mystic Seaport—9:00am	THURSDAY, DECEMBER 12	
		COAST GUARD BAND CONCERT—12:45PM	SUNDAY, DECEMBER 15	
		LUNCH BUNCH: THE COURTHOUSE—11:15AM	Tuesday, December 17	
		SHOPPING RUN—1:00PM	Tuesday, December 24	
			10105/11) DECEMBENT	
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:				