

**THE MARSHFIELD COUNCIL ON AGING
REGISTRATION FORM**

Date Completed: _____ Email Address: _____

Summer Resident: _____ Home Phone: _____

Date of Birth: _____ Cell Phone: _____

NAME: _____
Last First Middle Initial

STREET ADDRESS: _____
Street Town Zip Code

MAILING ADDRESS: _____
Street Town Zip Code

NAME OF SPOUSE: _____ SPOUSE'S DATE OF BIRTH: _____

EMERGENCY CONTACT #1: _____
Name Relationship

_____ Contact's Home Phone Work Phone Cell Phone
(Must have a different phone # other than applicant's home phone #)

EMERGENCY CONTACT #2: _____
Name Relationship

_____ Contact's Home Phone Work Phone Cell Phone

Please check yes or no on the following:
Would you like to receive the monthly **Newsletter** _____ YES _____ NO
Would you like an **Activities Swipe Card** (used for attendance) _____ YES _____ NO
Are you interested in becoming a **Volunteer**: _____ YES _____ NO
Will you have a need to ride the **Senior Bus**: _____ YES _____ NO

How did you hear about us? Website _____ The LINK _____ Other _____

Please return completed application to: Marshfield Council on Aging, 230 Webster Street
Marshfield, MA 02050

If you have any questions, please contact us at 781-834-5581.

**TOWN OF MARSHFIELD
COUNCIL ON AGING
Marshfield Senior Center**

**FITNESS ACTIVITY/ HEALTH WELLNESS SERVICE/ ACTIVITIES
PERMISSION, RELEASE OF LIABILITY
AND MEDICAL RELEASE FORM**

I, _____ (printed name), hereby expressly consent to my use of the Marshfield Senior Center and/or participate in a fitness and/or activity classes conducted, sponsored or hosted by the Marshfield Senior Center.

I acknowledge that such participation will necessarily involve participation in activities/exercises that may be physically demanding and will subject the participant to stress, anxiety, physical injury and other possible hazards.

I understand that the activity involves inherent risk of injury. I voluntarily agree to expressly assume any and all such risk which may result from the activity, or which are in any way related to my participation in the activity and/or presence at the Marshfield Senior Center including any off-site trips or outside activities. In consideration of the right to participate in the activity, I hereby indemnify, hold harmless and release from any legal liability the Town of Marshfield, its officials, boards and commissions and its employees, staff, agents, instructors and all individuals assisting with the activity for injury or death caused by or resulting from my participation in the activity or in any way connected with my participation in the activity, whether such injury or death was caused by the alleged negligence of the Town of Marshfield, another participant, or any other person or cause.

This agreement will apply for each and every day I engage in the activity without requiring me to sign an additional form for each day or activity. I further agree to defend and indemnify the Town of Marshfield for loss or damage, including any that result from claims or lawsuits for personal injury, death, or personal property damage, relating to my participation in an activity or use of the Town of Marshfield's facilities or equipment. I represent that I am in satisfactory physical condition to participate in the activity. I authorize any person connected with the activity or the Town of Marshfield to administer any and all available first aid to me, as they deem necessary.

I further authorize medical transportation to a medical facility or hospital for treatment necessary for my well being, at my expense. This agreement is governed by the laws of the Commonwealth of Massachusetts, and exclusive jurisdiction shall be in the Commonwealth of Massachusetts. If any part of the

(over)

agreement is determined to be unenforceable, all other parts shall be given full force and effect. The undersigned, (individual, parent or guardian, and minor) acknowledges that she/he is signing this agreement on behalf of (themselves, or a minor) and that the (individual or minor) shall be bound by the terms of the agreement. This agreement shall be binding on the participant's assignees, subrogors, heirs, next of kin, executors and personal representatives.

I HAVE READ AND UNDERSTOOD THIS RELEASE OF LIABILITY AGREEMENT. I VOLUNTARILY AGREE TO ITS TERMS.

Signature of Participant

Date of Birth

Date

Signature of Parent/Legal Guardian (If Participant is under 18) Date

In the Event of an Emergency please contact: (please print)

Name

Phone Number

Photograph and Publicity Release Form

I, _____, give the *Town of Marshfield and/or the Marshfield Council on Aging* permission to use my name, likeness, image, voice, and/or appearance as such may be embodied in any pictures, photos, video recordings, audiotapes, digital images, and the like, taken or made on behalf of *the Town of Marshfield and/or the Marshfield Council on Aging* activities. I agree that the *Town of Marshfield and/or the Marshfield Council on Aging* have complete ownership of such pictures, etc., including the entire copyright, and may use them for any purpose consistent with the *Town of Marshfield and/or the Marshfield Council on Aging* missions. These uses include, but are not limited to illustrations, bulletins, exhibitions, videotapes, reprints, reproductions, publications, advertisements, and any promotional or educational materials in any medium now known or later developed, including the Internet. I acknowledge that I will not receive any compensation, etc for the use of such pictures, etc., and hereby release the *Town of Marshfield and/or the Marshfield Council on Aging* and its agents and assigns from any and all claims which arise out of or are in any way connected with such use.

I have read and understood this consent and release.

I give my consent to the Town of Marshfield and/or the Marshfield Council on Aging to use my name and likeness to promote the Town of Marshfield and/or the Marshfield Council on Aging activities.

Signature

Date

Name (print)

I do not give my consent to the Town of Marshfield and/or the Marshfield Council on Aging to use my name and likeness to promote the Town of Marshfield and/or the Marshfield Council on Aging activities.

Signature

Date

Name (print)



Join online at www.marshfieldcoaboosters.org

MARSHFIELD COA BOOSTERS, INC.

2022 Membership Application

It's time for current Boosters to renew their membership and for other to consider joining the Marshfield COA Boosters. Membership is yearly, from January 1, 2022 through December 31, 2022. Payment received after December 1, 2021 is considered payment for the following year. Membership dues are part of the reason the Marshfield Senior Center is more than just a good center but a truly GREAT senior center. Please look at the back of this application and read what membership dues and donations have provided this year. Learn about the Giving Tree, our new web site and email addresses to connect with the Boosters. Booster funds are used only for items not covered by the Town of Marshfield Council on Aging annual budget.

Please print clearly

NAME _____

MAILING ADDRESS _____

Town _____ State _____ ZIP _____

Street Address (if different) _____

Phone _____ Cell _____

EMAIL _____

(Please give us your e mail address. Your information will not be shared & confidentiality will be respected. E mails save on cost of individual mailing to communicate with you about Booster activities. We limit the number of messages sent during the year)

INDIVIDUAL annual membership	\$10.00	\$ _____
FAMILY annual membership	\$15.00	\$ _____
PATRON annual membership	\$25.00	\$ _____
ANGEL status	\$100.00	\$ _____
SPONSOR status	\$250.00	\$ _____
BENEFACTOR status	\$500.00	\$ _____
ADDITIONAL DONATION		\$ _____
TOTAL		\$ _____

Please make your check payable to the Marshfield COA Boosters and mail it with this form to P O Box 165, Marshfield, MA 02050 or drop it off at the Senior Center in the mailbox in the lobby.

We want to hear from Boosters who will contribute even more than financial support—we need your time and talents working as a special projects or fundraising volunteer as well as serving on our board of directors.

Check this box if you will help with special projects or fundraising

Check this box if interested in becoming a Board Member

Tell us about interests, talents or skills you're willing to share with us _____

“What a challenging year this has been—for our community, you personally, our beloved Senior Center and the Boosters. The COVID-19 Pandemic has had a financial impact on many, socialization has been restricted and our generation has experienced excessive health strains.” These words opened our Booster membership renewal appeal letter last year—we could not have imagined they would be still appropriate a year later. We are very hopeful, with the vaccine and booster, to return to normal activities but the new variants present challenges. We are proud of our Senior Center and the loyal staff who have never stopped working to provide needed social services as well as creative delivery of programs and also the construction crew and committee members who have worked to make the addition rise like a beacon of hope from the ground to a strikingly beautiful two-story structure that is nearing completion.

The Boosters have special challenges as well. Because of COVID, our biggest fundraising activity (The Annual Fall Craft Fair) was cancelled and Boosterfest, our annual meeting, was held on ZOOM—not doable for a make your own sundae event. However, the need for financial support to the Center from the Boosters continued—expenses incurred for both ongoing expenses and new requests for financial support related to the addition.

This year alone, your membership donation provided the following for our Senior Center:

- Funding, via advertising, for our monthly newsletter - *The Link* and Subscription to Netflix.
- Annual cost for hosting *Club Express*, a web site that connects seniors with volunteers.
- Gift cards for Annual Volunteer Recognition in lieu of the appreciation luncheon.
- Over \$10,000 for beautification of our Outdoor Recreation Park including several durable outdoor benches and foundations and trash receptacles as well as other items needed to complete this project.
- \$20,000 for needed interior painting of rooms and replacement of carpeting in the main building to make a seamless transition into our addition.

We need to replenish our coffers as the opening of the addition will bring more seniors, new programs, expansion of current activities and all the hidden expenses and surprises that come with a new location. Membership dues are our largest source of funding. Booster Membership suffered a decline in both 2020 and 2021 coming in about \$2,000 lower than 2019. We are so proud and grateful to our loyal members and their support has encouraged the Booster Board to continue with their efforts. ***That is why it is more important than ever for you to renew your 2022 membership*** and even consider upgrading your level of support.

There is so much news to share with our membership:

- The Boosters now have their own **web site**, thanks to the generosity of the Cook Family. Visit www.marshfieldcoaboosters.org to visit our web pages, learn what is new, enjoy pictures of past events, and even renew your membership online—we still have paper membership renewal on the backside of this page.
- We are introducing the **Giving Tree**, a sculptural permanent installation on a wall in the new Lobby. It's a cast bronze tree trunk topped with a canopy of metallic commemorative leaves, that can be purchased and engraved with your name and message to show support for the Center, or to honor a family member or friend. The multicolored leaves range in donations of \$100, \$250, \$500 & \$1,000. Become a key supporter of the newly expanded Senior Center - purchase a leaf and have up to 4 lines of as many as 20 characters each engraved on it. The website has a full explanation and order forms are available at the lobby desk in the Senior Center and also next to the Giving Tree when the expansion is opened.
- We have **email addresses** and you can reach us with general questions about the boosters organization at info@marshfieldcoaboosters.org or get answers to membership questions at join@marshfieldcoaboosters.org

The Marshfield COA Boosters Inc. are a tax exempt 501©3 organization and contributions are tax deductible as allowed by law assuring donors of income tax deductibility of their contributions.

Watch our web site for news about the soft opening and Grand OPEN House for our addition coming SOON!!

THANK YOU ALL FOR YOUR CONTINUED SUPPORT OF THE BOOSTERS AND THE MARSHFIELD SENIOR CENTER