

Membership Application Form for Year 2024

Membership Dues: \$25.00

15 Saunders Street Fredericton, NB E3B 1M9

Membership: Renewal

	New	

## Please **PRINT CLEARLY** and fill in ALL information

MEMBER INFORMATION						
Last Name:	First Name:					
	Postal Code:					
	)Cell phone: ( )					
Email address:						

EMERGENCY CONTACT INFORMATION						
Name:						
Contact Phone #:						

Would you like to help by Volunteering? Front Desk 🗌 Fundraising Events 🗆

## WAIVER

In consideration, and as a condition of my use of the facilities and my participation in the activities and programs available at the Stepping Stone Senior Centre Inc. (SSSC), I do hereby waive, release and forever discharge SSSC and its respective officers, directors, employees and program facilitators from any and all responsibility and liability for injuries or damages resulting from any use or participation by me.

I understand and acknowledge that no element of care-giving services is available at Stepping Stone Senior Centre or provided as part of any of its programs or activities.

I voluntarily sign this waiver and release liability on behalf of myself and my personal representatives, heirs and next of kin.

Signature:
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Date:		/	/	
	day	month	year	

All information will remain confidential. The Senior Centre will not share or release any personal information with businesses, telemarketers, individuals, etc.)