



Castle Rock Senior Activity Center
2024 MEMBERSHIP APPLICATION
\$40 Annual Membership Fee

Check One: New Member Renewal

PLEASE PRINT CLEARLY

Last Name _____ First Name _____ Nickname _____

Mailing Address _____ Apt or Unit # _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

Email Address _____ Date of Birth _____

Male Female Single Married Spouse Name _____

Communicating with You

We still use our "Rockin' Seniors" monthly newsletter as our main source of communication, but we use other methods as well; there are times we need to reach out to members between newsletter issues. Please take a moment and tell us your preferences.

"Rockin' Seniors" Newsletter: Send it in the mail Will pick-up at Center Email it to me
You can have it sent by email (earliest way to get it) and also receive a physical copy in the mail or picking it up – check the boxes

We send out a weekly email to our members, we will use the email above but you may also provide others.

Do you text on your cell phone? Yes No Do you use Facebook/Instagram/Twitter? Yes No
Please like or follow

In Case of Emergency

It is important that we have a local contact (family member or friend) in case there is an emergency of some kind.

Contact Name _____ Relationship _____ Email _____

Home Phone _____ Cell Phone _____ Work Phone _____

Address _____ City _____ State _____ Zip code _____

Do you live alone? Yes No Health information we should know _____

Signature Required

WAIVER AND RELEASE OF LIABILITY: I understand that participating the activities, services, and sports leagues, and accepting transportation provided to and from such activities (collectively "Activities") offered by the Castle Rock Senior Activity Center (CRSAC) may have an element of hazard or inherent danger, and further may be an test of a person's physical abilities. I understand that my participation in the Activities could cause serious injury, potential death, or property damage. Understanding the potential risks, I assume the risks of participating in Activities and I waive and release the CRSAC and any of its directors, employees, and volunteers (collectively "agents") for any damages that I may incur from participating or attending the Activities, unless my damages occur as a result of gross negligence or wanton misconduct of CRSAC or its agents. I also agree to indemnify and hold CRSAC and its agents harmless from any claims or liabilities made against them as a result of my actions or any action taken by another on my behalf.

I certify that I have read and understand this Waiver and Release of Liability, I understand I am giving up substantial rights by signing this waiver and release, and my waiver is voluntary. I also agree that my photograph may be taken while participating and such photographs may be used in publications and for promotional purposes, and I will not receive any compensation. As a member of CRSAC, I will adhere to the "Code of Conduct" as set forth in the Center's Bylaws.

Signature of applicant _____ Date ____ / ____ / ____

See back page for more ways to get involved

Getting Involved

One of the ways to get the most out of your membership at the Castle Rock Senior Activity Center is to volunteer or serve in some way. You'll make friends, get to know the staff, and have a voice in the workings of your Senior Center. Please fill out the information below so that we can best help you get involved.

Volunteer Opportunities:

- Drivers (Shuttle, Specials or Events) using CRSAC vehicles
- Kitchen Help (VOA, Potlucks & Social Events)
- Special Event Help (Craft Show, Expo)
- Proofreading of Newsletter/Mailings
- Front Desk Receptionist
- Set Up for Programs (Table and Chairs)
- Connect and Care Caller
- Fundraising/Donation Caller
- Other: _____

Volunteer Opportunities using Personal Vehicle:

- Meals on Wheels Driver
- Pastry Pick-up
- Facilities (Hauling and/or Minor Repairs)
- Hot Lunch Program Driver

We are always seeking new committee members for standing committees of the Board of Directors. Please check below if you are interested in serving in any of these committee areas.

- Activities
- Fundraising
- Membership/Outreach
- Transportation
- Budget and Finance
- Sports

Sometimes we are looking for individuals with particular backgrounds. Please tell us your experience.

Occupation _____
Hobbies and other interests _____

Communicating with Family Members

Don't your family members want to know what kinds of things you may be doing at your Senior Center? If you can provide email addresses, we will send out occasional updates about the happenings here, maybe with your picture. Even if you don't email, they probably do, so please ask them for their exact email addresses.

Family Member _____ Relationship _____ Email _____

Family Member _____ Relationship _____ Email _____

FOR OFFICE USE ONLY

Date _____ Payment Processed by _____
Amount Paid \$ _____ Cash Check Credit Card
Date Entered In System _____ Entered by _____ Renewal Date _____