

Syme 55+ Seniors' Centre 2024 Membership Application & Renewal

Tag Number (add all letters & digits): X_____

 ☐ Membership Renewal ☐ New Member ☐ \$30.00 Membership Fee 	☐ Charitable donation of \$(income tax receipt issued)
First Name:	Last Name:
Date of Birth: mm/dd/yyyy	Phone:
Cell Phone:	Email Address:
Address:	
Apt: City:	Postal Code:
☐ By checking this box, you are consenting to receive occasional communications via email regarding our services.	
	☐ Would you like to volunteer?
☐ I would like to receive the quarterly newsletter by mail 4 times per year at a cost of \$25.00.	
☐ The Syme 55+ Seniors' Centre DOES NOT have my permission to use my photograph to promote the Centre in our newsletter, on our website, or on our Facebook page. I understand the Centre is not responsible for content on third party sites (social media) or un-official pictures taken and posted by members or visitors to the centre	
Emergency Contact:	
Name:	
Phone:	Relationship:
I recognize that a risk of injury may be involved in the participation in the Syme55+ Centre programs/activities. I hereby willingly assume such risk of injury or health risk and assume full responsibility during and after my participation in the program/activities. The George S. Syme Seniors' Centre of York, staff, volunteers and Instructors cannot be responsible for risk willingly assumed, and I hereby release and forever discharge the Syme55+ Centre Corporation, staff, volunteers and instructors for all actions, damages, claims and demands whatsoever arising by reason of participation in all program/activities. I have read this and agree	
Signature:	Date:
FOR OFFICE USE ONLY	
Membership Fee: \$30.00	\$12.00 Newsletter Subscription: