

Town of Andover

Andover Senior Center
36 Bartlet Street
Andover, MA 01810

(978)623-8321

BoomerVenture Registration Form

Name: _____
(Title) (First) (M.I.) (Last)

Date of Birth: _____ Gender: ___M ___F

Home Phone: _____ Cell: Phone: _____

Street Address: _____ Apt. #: _____

City/Town: _____ State: _____ Zip Code: _____

E-mail: _____

Emergency Contact Name: _____ Relationship: _____

Emergency Contact Phone: _____

Are you a: ___Resident ___Non-Resident ___Senior (60+) ___Boomer (mid 40s-mid 60s)

Course #	Course Name/Activity	Fee	Non-Resident Fee*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Non-residents pay an additional \$5.00 per course and \$2.00 per trip
Please make checks payable to: The Town of Andover

I agree to indemnify and hold harmless all staff, instructors, volunteers, and administrators of the Andover Council on Aging/Senior Center/BoomerVenture programs and to absolve them from any and all liability arising from this activity. I am advised that this activity is not covered by insurance of the Town of Andover.

BoomerVenture/Senior Center Trip/Class Policy: Payment must accompany registration. All registrations are considered non-transferable. The Senior Center will issue credit prior to class start date only, valid for one year; no cash refund unless the Senior Center cancels the activity. See Refund Policy for complete credit/refund information. You are required to fill out an annual Medical Form for exercise classes only.

Upon request, the Andover Senior Center will provide auxiliary aides and services to ensure effective communication and participation in BoomerVenture programs and services as specified in the American with Disabilities Act.

Photo Permission: Participants in Senior Center sponsored programs/activities permit the taking of photos and videos of themselves for publication and use, as the Center deems necessary.

Signature: _____ Date: _____

For Office Use Only

Registration #: _____ Registration Clerk: _____ Input Clerk: _____ Input Date: _____