

Downtown Community Center

Seniors

The Center is closed on July 4—6 and August 25 to September 1. The Downtown Community Center is at 120 Warren Street between Greenwich and West Streets. Copies and other info are available at www.manhattanyouth.org.

First name _____ Last name _____
Address _____
City, state and zip _____
Home phone _____ Cell/other phones _____
Email _____
 female male Birthdate _____
 Special needs (please describe) _____
 Health restrictions (please describe) _____
 Allergies (please describe) _____
 Previous participant in a Manhattan Youth or Downtown Community Center program _____

Emergency Contacts

| Name | Relationship | Cell phone |
|-------|--------------|------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Legal Consents Please read, initial and sign the following legal consents.

_____ I certify that I have permission from my doctor to use the pool.

_____ I certify that I have permission from my doctor to use the steam room.

I give permission to Manhattan Youth to take me to a hospital emergency room or doctor to obtain medical treatment if necessary. I understand that the highest priority of Manhattan Youth is the safety and well-being of participants and staff. From time-to-time there may be situations or circumstances which, in the opinion of the Program Directors, are not safe, nor are they suitable for the well-being of the users and staff. Therefore, I recognize that Manhattan Youth reserves the right to make decisions about enrollment and participation in Downtown Community Center activities and programs. If I am asked to leave a program, Manhattan Youth will refund a prorated share of the unused fees. I give permission to be photographed or otherwise recorded during activities, and for any such photographs to be displayed by Manhattan Youth in any medium (newsletters, web sites, etc.), whether now or hereafter known or developed.

Signature _____ Date _____

Program Fees and Contributions

Our program fees and contributions are charged on a monthly basis. You may cancel at any time by either returning your bill or contacting our registrar, Mona Lombardi: mona@manhattanyouth.org or 212-766-1104 x 227.

Senior Program—no charge. To help cover costs I want to make a: monthly contribution \$ _____
 \$1000 contribution \$500 contribution \$100 contribution other contribution \$ _____
Total enclosed amount \$ _____

Please return this completed form with a check made out to Manhattan Youth to:

Downtown Community Center
120 Warren St.
New York, NY 10007

MANHATTAN YOUTH
DOWNTOWN COMMUNITY CENTER