

2022 SENIOR MEMBERSHIP FORM

BROOKFIELD SENIOR COMMUNITY CENTER

ALL RESIDENTS AND NON-RESIDENTS MUST COMPLETE THIS FORM AND RETURN IT TO BE A CURRENT MEMBER from **January 1 - December 31, 2022**.

LAST NAME	FIRST NAME	PHONE	BIRTH DATE
STREET ADDRESS		CITY	STATE ZIP
CITY OF BROOKFIELD RESIDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO		EMAIL _____	
EMERGENCY CONTACT PERSON _____		PHONE _____	

I, the undersigned, do hereby agree to allow the individual named herein to participate in activities at the Brookfield Senior Community Center. I am aware of and understand that there may be potential risks inherent with participation in any recreation activity, and that the City of Brookfield does not provide accident insurance and cannot assume responsibility for injury to any participants in its recreation programs. I further understand the program eligibility requirements and cancellation, transfer, and refund policies as stated in the Department Brochure.

SIGNATURE: X _____ DATE _____

THERE IS A **\$12.00 USER FEE** FOR ALL **NON-RESIDENTS** WHO WISH TO PARTICIPATE AND RECEIVE THE 2022 NEWSLETTERS. **IF YOU ARE A NON-RESIDENT**, PLEASE INCLUDE THIS AMOUNT WITH YOUR REGISTRATION FORM. Checks should be made out to Brookfield Parks, Recreation and Forestry. The fee and registration form can be mailed in or dropped off at 2000 N. Calhoun Road, Brookfield, WI 53005.

Office use only - Non-resident fee paid (\$12.00): _____ Yes _____ No Date: _____ Rec'd by: _____
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