

**Town of Kent Senior Center**  
1 Swifts Lane, Kent, CT 06757

**HEALTH AND WELLNESS PROGRAM WAIVER**

Participant Name: \_\_\_\_\_ Home Phone : \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Program Title: \_\_\_\_\_

**Program Rules:**

- All participants must read and sign the rules and waiver agreement.
- The facility must be left in the same condition as you found it.
- Do not bring any equipment home unless specified for program.
- Be sure that any used equipment is clean before leaving the facility.
- Wear the appropriate clothing & footwear to ensure safety.
- Notify the instructor immediately if you feel any sort of illness or injury.

**Release:**

I understand there are risks of physical injury in participating in physical & exercise activities or programs.

I hereby release the town of Kent, its employees, officials and agents from any and all liability or loss or damage to personal property that, I may experience in connection with activities sponsored by the Kent Senior Center.

*I hereby consent to emergency medical procedures deemed advisable for myself in the event that my family cannot be reached and I have sustained an injury. The Senior Center does not provide accident or hospitalization insurance for participants of its programs. All participants are advised to have adequate personal coverage. Please consider participant's own health, experience, and tolerance for risk before participating in any program. **I also consent to the use of my photo, video, artwork etc. by the Senior Center for flyers, presentations etc.***

I am covered by appropriate medical/accident insurance and I accept full responsibility for any injury that might occur during this program. I will not hold Kent Senior Center or any of their employees responsible for any accidents or injuries which may occur in the course of, prior to the start of, or after the facilitation of the above program.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date