

COMMUNITY CENTER / SENIOR PROGRAM Annual Registration October 1, 2020-September 30, 2021

STREET	CITY	STATE	ZIP
TELEPHONE #:	E-MAI	IL:	
	IMPORTANT: PLE	EASE READ AND SIGN	
By-The-Sea (LBTS), its of responsibilities or liability to in the Program and any act and others acting upon the any caused by the negliger way arising out of or confacility. I have carefully rebelow, expressly agree to I have read and agree to the in this registration to determine the contained in this registration.	ficers, agents, staff, repre- from injuries or damages are ivity on Town property. The eir behalf from responsibility at act or omission of any of to nected to my participation and this release in its entirety be bound by its terms and content of the LBTS liability waiver. I ack ermine eligibility for the propertion is true, complete and a ein change, I hereby acknow	sentatives, executors a ising out of or in any way ereby indemnify and hold y or liability for any injurthose mentioned or other in any activities at the y, fully understand the conditions. Knowledge that the Tow rogram. By signing beloccurate to the best of new in the courage of the courage.	ARMLESS the Town of Lauderdale- and all others from any and all y connected with my participation d harmless all the aforementioned ry and damage to myself including ers acting on their behalf or in any e Town of Lauderdale-By-the-Sea contents thereof and by execution on is relying on my representations ow, I certify that the information my knowledge. Should any of the immediately notify the Town and
update those representati	ons.		



THIS PAGE MUST BE COMPLETED IN ITS ENTIRETY FOR REGISTRATION TO BE COMPLETE

Please mark correct information:				
Ethnicity				
☐ Non-Hispanic	☐ Hispanic			
Race Data				
☐ White				
☐ Black/African American				
Asian				
☐ American Indian/Alaskan Native				
☐ Native Hawaiian or other Pacific Islande	r			
☐ American Indian/Alaskan Native & Whit	e			
☐ Asian & White				
☐ Black/African American & White				
☐ American Indian/Alaskan Native & Black	:/African American			
☐ Other Multi-Race				
mo:				



REGISTRATION INFORMATION

9	\$0 CDGB Eligible (LBTS Residents 62+)			
	\$0 Broward County Resident 60+			
\$0 Town Resident/Part-Time Resident (Minimum 2 months)				
Class	Date			
\$15 Weekly	Non-Resident or Part-Time (Less than 2 months)			
	\$60 Non-Resident			
For official use only. Do not write below this line				