

Membership Application for Year 2025

Germantown Senior Center

Membership runs from January 1 – December 31 annually

Personal Information

Name: _____ Birthday: _____

Spouse/Partner: _____ Birthday: _____

Mailing Address: _____

City, State, Zip: _____

Home phone: _____ Cell: _____ Work: _____

Email Address: _____

In Case of Emergency

Name: _____ Telephone: _____

Relationship: _____ Email: _____

Interest & Volunteering

Interests and Hobbies: _____

Are you interested in volunteering at the Senior Center? _____ Yes _____ No

Annual Membership Fee Per Person

☐ \$10 per year for German Township or Germantown Residents Check # _____

☐ \$25 per year for Non-Residents

I understand that while participating in the services/programs, I will participate at my own risk. I also agree to and hereby release and forever discharge the Germantown Senior Center therefore, and its employees from or in the any manner arising out of injury or damage which may be sustained in any center program.

Signature: X _____

Date (Membership Expires on December 31st of each year) _____

Mail or drop off completed application along with check made payable to: Germantown Senior Center, 33 N. Cherry St., Germantown, Ohio 45327. We can only accept checks, no cash please. Thank you!