



EMERYVILLE SENIOR CENTER 2020 PARTICIPANT REGISTRATION FORM

\$25.00 Annual Membership Fee

ALL INFORMATION PROVIDED IS CONFIDENTIAL
AND WILL BE USED FOR STATISTICAL REPORTING ONLY

NEW MEMBER APPLICATION

Scan Card # _____
(office use only)

Emeryville Senior Center • 4321 Salem Street, Emeryville, CA 94608 • (510) 596-3730

Participant Information (Please Print)

First Name:		MI:	Last Name:	
Date of Birth: ____/____/19____		Home Phone: (____) ____-____		Cell Phone: (____) ____-____
E-Mail:			<input type="checkbox"/> Check if you would like to receive our monthly newsletter, "The LINK" by e-mail.	
Address:			Do you live alone? <input type="checkbox"/> Yes <input type="checkbox"/> No	
City:		State:	ZIP Code:	
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Transgender: female-to-male <input type="checkbox"/> Genderqueer/Gender Non-binary <input type="checkbox"/> Transgender: male-to-female <input type="checkbox"/> Not listed. Please specify: _____ <input type="checkbox"/> Declined/Not Stated				
What was your sex at birth? (check only one) <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Declined/Not Stated				
How do you describe your sexual orientation or sexual identity? (check only one)				
<input type="checkbox"/> Straight/Heterosexual <input type="checkbox"/> Bisexual <input type="checkbox"/> Gay/Lesbian/Same-Gender Loving <input type="checkbox"/> Not listed. Please specify: _____ <input type="checkbox"/> Declined/Not Stated				
Ethnicity: (check only one) <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> NOT Hispanic/Latino <input type="checkbox"/> Unknown				
Race: (check only one)		<i>Asian:</i>		<i>Hawaiian/Other Pacific Islander:</i>
<input type="checkbox"/> African American <input type="checkbox"/> American Indian /Alaska Native <input type="checkbox"/> Caucasian <input type="checkbox"/> Multiple Race <input type="checkbox"/> Declined to State		<input type="checkbox"/> Asian Indian <input type="checkbox"/> Cambodian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino		<input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Laotian <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian
				<input type="checkbox"/> Guamanian <input type="checkbox"/> Hawaiian <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander
Emergency Contact:		Name:		
		Relation:		Phone: (____) ____-____
		Doctor's Name:		Doctor's Phone: (____) ____-____
Hospital Facility (medical/surgical care):				

ANNUAL FEE OF \$25.00 PER PERSON. (EXPIRES ONE YEAR FROM DATE OF REGISTRATION.)

Payment form: <input type="checkbox"/> Cash (select one) <input type="checkbox"/> Credit from Trip Account (if available) <input type="checkbox"/> Check/Money Order # _____ <input type="checkbox"/> Credit Card: (check one) VISA AMEX Master		<input type="checkbox"/> Check this box if you are low-income and would qualify to have your membership fee waived.
(Only complete credit card information if applying by mail. Otherwise, leave blank.)		

_____ staff initials for approval

Card Number:	Expiration: ____/____
Payment Signature:.....	Date: _____
	CCID#: _____

PLEASE COMPLETE BOTH SIDES OF APPLICATION. (OVER)

Are you interested in volunteering at the Senior Center?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Volunteer Interests:	<input type="checkbox"/> Special Events	<input type="checkbox"/> Meal Program
	<input type="checkbox"/> Greeter	<input type="checkbox"/> Other: _____
Do you receive Supplemental Security Income (SSI)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you do not receive SSI, is your income:		
Over \$851.00 per month for an individual?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Over \$1,141.00 per month for a couple?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you considered low income?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Without assistance, you (the applicant/client) are NOT able to perform: <i>(Please check all that apply)</i>		
<input type="checkbox"/> Eating	<input type="checkbox"/> Getting in and out of bed	<input type="checkbox"/> Preparing meals
<input type="checkbox"/> Dressing	<input type="checkbox"/> Using a telephone	<input type="checkbox"/> Shopping for personal items
<input type="checkbox"/> Bathing	<input type="checkbox"/> Managing medication	<input type="checkbox"/> Doing light housework
<input type="checkbox"/> Toileting	<input type="checkbox"/> Managing money	<input type="checkbox"/> Transportation
<input type="checkbox"/> Walking		
_____ # (ADL)		_____ # (IADL)

Photo Release: I acknowledge that the City of Emeryville takes photographs and videotapes of its activities and events for publicity purposes and authorize the use of my image by the City for such purposes. I understand I will not be compensated for use of such photos or videos.

<input type="checkbox"/> Yes	The Emeryville Senior Center has my permission to use photos of me engaged in a Senior Center Activity.
<input type="checkbox"/> No	Please do not use photos of me in Emeryville Senior Center activities for any publication.

CITY OF EMERYVILLE WAIVER AND CONSENT AGREEMENT IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THIS CITY ACTIVITY OR USE OF ANY CITY FACILITIES IN CONNECTION WITH THIS ACTIVITY, THE UNDERSIGNED AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE THE CITY OF EMERYVILLE, ITS EMPLOYEES, OFFICERS AND AGENTS (hereinafter referred to as "Releasees") from all liability to the undersigned, his or her personal representatives, assigns, heirs, and next of kin for any loss, damage, or claim therefore on account of injury to the person or property of the undersigned, whether caused by any negligent act or omission, including gross negligence and/or willful disregard, of the Releasees or otherwise while the undersigned is participating in the City activity or using any City facilities in connection with such activity.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND HOLD HARMLESS the Releasees from all liability, claims, demands, causes of action, charges, expenses, and attorney fees (including attorney fees to establish the Releasees' right to indemnify or incurred on appeal) resulting from involvement in this activity whether caused by any negligent act or omission of the release or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES AND ACCEPTS FULL RESPONSIBILITY FOR ANY AND ALL LOSS, BODILY INJURY, DEATH OR PORPERTY DAMAGE while upon City property or participating in the activity or using any City facilities and equipment whether caused by any negligent act or omission of Releasees or otherwise. The undersigned expressly agrees that the foregoing release and waiver, indemnify agreement and assumption of risk are intended to be as broad and inclusive as permitted by California law and that if any portion thereof be held invalid, notwithstanding, the balance shall continue in full legal force and effect.

I hereby acknowledge that I have read the foregoing and that I am aware of the legal consequences of this agreement, including that it prevents me from suing the City or its employees, agents, or officers if I am injured or damaged for any reason because of participation in this activity. I further acknowledge that no oral representations, statements or inducements have been made to me.

Signature Required:	Date:
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THANK YOU!

For Office Use Only:	Card _____	Mailing _____	Registration Date: _____/_____/_____
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CITY OF EMERYVILLE

INCORPORATED 1896

EMERYVILLE SENIOR CENTER CODES OF CONDUCT

WELCOME

The City of Emeryville is dedicated to promoting a dignified, healthful quality of life for older adults by advocating for vital services, providing opportunities to develop meaningful fellowship, offering lifelong learning activities, being an accessible and trusted community resource.

Welcome to the City of Emeryville Senior Center. The Emeryville Senior Center is committed to serving the residents of Emeryville, as well as those of surrounding cities. Participation in Senior Center activities is limited to its members. Membership will be granted upon request to all adults age fifty (50) years and older.

We hope you will find our Center a friendly and safe place where you can come to participate in a variety of leisure activities, enrichment classes, socialize with others and find intellectual stimulation in addition to a number of helpful services. Staff and volunteers are always available to assist you at any time.

To help ensure a supportive setting for all who attend, the following Codes of Conduct were recommended by the City Manager and adopted by Commission on Aging on January 13, 2010 to ensure a warm and supportive environment for all who participate at the Center. We hope these rules will allow Center participants to feel at ease, create an enjoyable atmosphere for all, as well as protect the facility we all enjoy using.

Members and Guests are asked to:

- 1.** The Senior Center will uphold all state laws and local ordinances with regard to public behavior.
- 2.** Please treat others with courtesy and respect. Members and guests are expected to be considerate of others. Members and guests are to be treated with kindness, courtesy, and respect. Take a moment to say hello to others or introduce your self to a "newcomer." The Senior Center's operation is dependent on volunteers and we encourage you to join our volunteer family. Volunteers should always be treated respectfully.
- 3.** Members shall be engaged in activities associated with the use of the Senior Center while on the premises. Members not participating in scheduled programs and activities may be asked to leave the premises.

- 4.** Service Animals may enter the Senior Center and they must be restrained and with their companion or owner at all times. Animals may not be left unattended outside the Center.

- 5.** Refrain from using abusive, obscene, threatening, harassing, insulting, or suggestive language. Avoid making derogatory comments, slurs, or epithets. Discourteous treatment of other members, guest and staff will not be tolerated. Should you at any time be made to feel uncomfortable by the language or behavior of others, please immediately notify a member of the Senior Center staff or the Senior Center Manager.

- 6.** The Senior Center does not provide sleeping accommodations. Lying out-stretched on furniture or on the floor is not allowed.

- 7.** Refrain from engaging in (or threatening) physical violence, assault, or battery, including but not limited to unwanted/unsolicited harmful touching by the use of hands, arms, feet, or legs which may include pushing, kicking, biting, spitting, and punching. Acts of retaliation against another member, making him/her experience feelings of fear or uneasiness are prohibited.

- 8.** To protect and enhance the life of our facility and furnishings please take care when enjoying your food and beverages in the bar and billiards room.

- 9.** Please be considerate of others while using equipment. Keep feet off of chairs, tables, counters, and treat furnishings, facilities, and equipment with care. Reclining or sleeping on the furniture is prohibited.

- 10.** To circulate a petition or survey, sell tickets for an organization or event, or take pictures in the Center, you must have the approval of the Senior Center Manager. Conduct unrelated to Senior Center sponsored activities may be prohibited in the facility so do not engage in questionable conduct and seek guidance or permission of the Senior Center Manager before undertaking.

11. Solicitation is prohibited (e.g., panhandling, etc.). Under no circumstances are members or staff to be asked for money.

12. Lock bicycles outside in the rack (if available) or in a place that does not block the entrance or any ramp.

13. The Senior Center offers a part-time Senior Case Manager to provide information and outreach services to members of the Center, as well as their family members. The Case Manager is also available to provide Case Management services but only to Emeryville residents.

14. Weapons are not allowed on or around the premises.

15. Individuals must be able to care for themselves while partaking in Center activities. Senior Center staff cannot provide personal care and will determine if members are required to be accompanied by a care attendant while at the Senior Center. Individuals needing assistance (memory impairment, incontinence, persons using mobility devices unable to use restrooms independently, etc.) may participate in Center activities with the aid of a care attendant. The care attendant is required to remain on the premises for the duration of the visit at the Senior Center. Care attendants meeting the eligibility criteria (50 and older) are encouraged to participate in Center activities.

16. Members and guests are expected to maintain an acceptable standard of personal hygiene. Infested clothing or personal effects or unpleasant body odor, which may offend other patrons of the Center, is unacceptable.

17. People under the influence of illegal drugs or alcohol will be asked to leave the Senior Center.

18. Members are to refrain from using the public restrooms and/or other public areas at the Senior Center to maintain or take care of personal hygiene (e.g., shaving, sink bath, etc.).

19. Members are to refrain from using the Center's electrical outlets to charge non-essential electrical equipment (e.g., cell phones, etc.).

20. Smoking is prohibited inside any area of the Senior Center and within 25 feet of any entry way, window, or vent to the Senior Center per Emeryville Municipal Code Sections 5-29.04 and 5-29.11.

21. Drinking of alcoholic beverages, which may include spirits, liquor, wine, beer and every liquid or solid containing alcohol by volume and which is fit for beverage purposes either alone or when diluted, mixed or combined with other substances is prohibited at the Senior Center, except as authorized by a permit issued by the Emeryville Police Department.

22. Members using the equipment and services available in the computer room must adhere to the Computer Room Guidelines.

23. Leaving or stowing shopping carts and/or other personal possessions at the Center is NOT ALLOWED. Members are permitted to bring privately-owned carts to the Center for participation in the Brown Bag Program, Craft Classes, and Dance Classes. Neither the Center nor the City of Emeryville is responsible for lost or stolen property and reserves the right to dispose of abandoned property.

24. Members possessing electronic devices (e.g., cell phones, pagers, etc.) are asked to turn them to mute or vibrate when participating in classes, programs, and activities. All members receiving incoming calls must take calls outside, away from classrooms, and at a location away from Center activity.

Violations to any of the rules described above may be grounds for a verbal or written warning, suspension or expulsion depending upon the seriousness of the offense. The following procedures maybe used to address such issues:

First Incident: Verbal admonishment and/or being requested to leave premises by Senior Center Manager or staff to be documented in member's file.

Second Incident: Written warning and/or request to leave premises from Senior Center Manager to member with copy to be placed in file.

Third Incident: Suspension (up to 1-3 months and/or permanent expulsion, depending upon severity of the offense) from Center documented by letter to member.

Depending on the nature and severity of the offense, staff reserves the right to enforce immediate suspension or take appropriate measure(s) (e.g., contact police).

Senior Center members who return to the Center before the suspension is fulfilled will be asked to leave by Senior Center staff. If this approach is unsuccessful, the local police may be called to protect the safety and welfare of others. A suspended or expelled individual will have the right to ask for an appeal through the City Manager. The suspension or expulsion will be maintained during the appeal period.



CITY OF EMERYVILLE

INCORPORATED 1896

EMERYVILLE SENIOR CENTER CODES OF CONDUCT

ACKNOWLEDGEMENT OF RECEIPT AND UNDERSTANDING OF THE CODE OF CONDUCT

THE UNDERSIGNED HEREBY ACKNOWLEDGES RECEIPT OF THE Emeryville Senior Center Code of Conduct and do hereby acknowledge that I have read the foregoing and that I am aware of the consequences of this agreement. I further acknowledge that no oral representations, statements or inducements have been made to me.

Print Name:	
Signature Required:	Date: