



**WEST ORANGE SENIOR PROGRAMS  
FALL SEMESTER 2019 – 12 SESSIONS**



# Zumba Gold

**AT KATZ CIVIC CENTER**

**MONDAYS – 9:30AM TO 10:30AM:**

**9/9; 9/16; 9/23; 10/7; 10/21; 10/28;  
11/4; 11/18; 11/25; 12/2; 12/9; 12/16**

\*Modifications offered for those with limited mobility;  
Verbal cueing provided

**\$40.00 - Twelve Week Program**

Please submit the bottom portion of  
this form with a check payable to:

***The Township of West Orange***

**No later than Thursday, September 5, 2019**

to West Orange Department of Senior Services  
• 66 Main Street • Room 207 • West Orange, NJ 07052

**QUESTIONS? CALL LAURA VAN DYKE  
OR NOELIA PEREZ 973-325-4105**

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9/9; 9/16; 9/23; 10/7; 10/21; 10/28; 11/4; 11/18; 11/25; 12/2; 12/9; 12/16

Please complete and return this portion by Thursday, September 5, 2019 to

**W.O. DEPARTMENT OF SENIOR SERVICES • 66 MAIN STREET • ROOM 207 • WEST ORANGE, NJ 07052 WITH A \$40.00 CHECK PAYABLE TO:**

***The Township of West Orange***



# Zumba Gold

**AT KATZ CIVIC CENTER**

NAME: \_\_\_\_\_ MALE: \_\_\_\_\_ FEMALE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ WORK/CELL PHONE: \_\_\_\_\_ EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

**CONSENT & WAIVER**

I verify that I am in good health and able to participate in recreational activities. I hereby release The Township of West Orange, its employees, agents, representatives, servants, officers, volunteers, affiliates, and vendors from any and all claims or causes of action whatsoever arising out of participation in the above designated program. I understand that I am solely responsible for accidental, medical or dental expenses incurred as a result of participation in the above designated program. In the event of illness or injury to the applicant, I grant the program staff permission to provide emergency medical care. Further, I understand that The Township of West Orange follows a strict "No Refund" policy. Additionally, I give The Township of West Orange permission to use my name and photographic image for any and all promotional uses.

SIGNED: \_\_\_\_\_

Date: \_\_\_\_\_