



Processed by _____
Sheet # _____
Date in MSC _____

PLEASE PRINT LEGIBLY

Today's Date: _____

Member 1: _____ Member 2: _____

Date of Birth _____ Date of Birth: _____

Mailing Address:

City _____ Zip _____

Home: _____ Home: _____

Cell: _____ Cell: _____

Email 1: _____ Email 2: _____

Emergency Contact: _____

Relationship: _____ Phone: _____

- New Member - Clark County (\$15)
- New Member - Out of County (\$50)
- Renewal - Clark County (\$15)
- Renewal - Out of County (\$50)
- Associate – Special Circumstances (\$15)
(Specific Purpose = Travel Only or Companion to a Member)

I would like to donate to the **USS GOLDEN FUND** to help other Clark County seniors afford memberships, programs and services. **Amount of Gift \$** _____

Payment Method: Cash _____ Check _____ *Payable to USS Credit Card _____

Please send my CENTER PAGE NEWSLETTER to my EMAIL (saves \$)

I HAVE READ THE FOREGOING AGREEMENT AND WAIVER OF LIABILITY (ON BACK OF PAGE) AND VOLUNTARILY EXECUTE THIS DOCUMENT WITH FULL KNOWLEDGE OF ITS CONTENT.

*Member 1 Signature

Date: _____

*Member 2 Signature

Date: _____

*******Liability Waiver: BACK OF PAGE*******

Agreement as to Conduct

As a condition of membership, I agree to comply with all rules, regulations, and policies of United Senior Services (USS) regarding its travel and wellness programs, activities and events and the use of its facilities and equipment. While on USS premises or participating in USS programs, activities and events, I shall conduct myself in a civil and reasonable manner at all times.

As used herein and in the following Waiver of Liability, “facilities” and “premises” shall include not only the principal location of USS but also its satellite facilities and parking lots and areas.

Waiver of Liability

In consideration of my participation in travel and wellness programs, activities and events and use of USS facilities and equipment or while participating in USS programs, activities and events:

- I agree, on behalf of myself, my heirs, executors, administrators, and assigns, that USS, its employees, officers, directors, agents, associates, volunteers and subcontractors, shall not be liable for any damages arising from personal injuries (including death) sustained by me as a result of the use of the equipment or facilities of USS or while participating in USS programs, activities and events.
- I agree to indemnify and hold USS harmless against any and all claims, demands, damages, rights of action, or causes of action, of any person or entity, that may arise from injuries or damages caused by me with respect to the use of the facilities and equipment of USS or while participating in USS programs, activities and events.
- I agree to be held solely responsible for my safety and well-being and understand that USS does not provide supervision or assistance for the use of the facilities and equipment. I understand and acknowledge that the use of equipment and facilities involves risk of serious injury and agree to refrain from using any equipment in a manner inconsistent with its intended design and purpose.
- I agree to be held solely responsible for my safety and well-being and understand that USS does not provide medical care, supervision or assistance during USS activities and travel. I understand and acknowledge that decisions about my physical and mental ability to participate in such activities and travel are personal. I further understand and acknowledge that I may be denied participation by USS staff or USS independent contractors at their sole discretion if there are concerns regarding my safety or well-being.
- I understand and agree that USS is not responsible for personal property that is lost, stolen, or damaged while at the principal location of USS or any satellite location, parking lot or area or while participating in USS programs, activities and events.

***United Senior Services Center Policies and Procedures are available to all members.
Please see any staff person to answer a question or to request a copy.***