

Pascagoula Senior Center
P.O. Drawer 908 * 1912 Live Oak Ave.
Pascagoula, MS 39568
769-8329 or 762-2290
Registration Form

Name _____

Mailing Address _____

City/State/Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

Date of Birth _____

Please give us the name, address and phone number of an emergency contact person:

Name/Relation: _____

Address: _____

City/State/Zip: _____

Phone Number(s): _____

Please indicate primary areas of interest

Please list other programs/activities you would like to see added:

Please make any suggestions for the Senior Center that you would like:

RELEASE OF LIABILITY

- **In consideration of the services and facilities provided by PPRD, its employees, agents, sponsors and officers, I hereby release and forever discharge the aforementioned from any and all liability arising out of my participation in this program.**
- **In case of illness, I authorize a representative of the Pascagoula Parks and Recreation Department to obtain immediate care deemed necessary by licensed medical personnel.**

