



# Council of Senior Citizens Schoharie County

## The Gathering Place 50 Plus Community Center

Membership Form       New       Renewal

All memberships run for the calendar year – expiring December 31<sup>st</sup>.

Choose Your Membership Type:       Traditional (\$25)

Bronze \$35 (\$25 plus \$10 donation)       Silver \$50 (\$25 plus \$25 donation)

Gold \$100 (\$25 plus \$75 donation)

Your donation supports programming at the Gathering Place. Please note that all donations are tax-deductible.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Is your mailing address the same as above?       Yes       No

If No, what is your mailing address? \_\_\_\_\_

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Emergency Contact:

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Relationship: \_\_\_\_\_

Ethnicity:     Caucasian     African-American     Asian     Other  
(This information is optional and will be used for grant and funding purposes)

Newsletter Delivery Method:     Pick up at Center     Email     Mail

**PLEASE SIGN AND COMPLETE PAGE 3 OF FORM**



# ***Council of Senior Citizens*** ***Schoharie County***

## **Code of Conduct**

The Gathering Place 50 Plus Community Center is a community-based organization dedicated to improving the lives of older people in our community. Participation in the organization's program is subject to the observance of the Center's rules and procedures. *The activities outlined below are strictly prohibited.* Any participant or staff member who violates this Code of Conduct is subject to discipline, up to and including removal from the program.

- Abusive language towards a staff member, volunteer or another participant.
- Reporting to the program while under the influence of drugs or alcohol.
- Bringing onto the Gathering Place 50 Plus Community Center's property dangerous or unauthorized materials such as explosives, firearms, weapons, or other similar items.
- Discourtesy or rudeness to a fellow participant, staff member, or volunteer.
- Verbal, physical, or visual harassment or another participant, staff member, or volunteer.
- Actual or threatened violence toward any individual or group.
- Conduct endangering the life, safety, health, or well-being of others.
- Failure to follow an agency policy or procedures.
- Bullying or taking unfair advantage of any participant.
- Failing to cooperate with an adult supervisor/leader/instructor.
- Abuse of the Center or its contents, including misuse, theft or abuse of the building, equipment, or supplies.
- Abuse or theft or another member's property.
- Use of the building only during established hours of operation, not exceeding closing time without prior authorization of the Executive Director.
- By signing the below, I authorize the Gathering Place 50 Plus Community Center and the Schoharie County Council of Senior Citizens to publish photographs of me, and my name, for use in printed publications and on the website.

The Center welcomes all eligible members, including members with disabilities. Any member or prospective member requiring an accommodation should contact the Executive Director. The Center makes reasonable accommodations for individuals with disabilities unless such accommodations would be an undue burden to the Center. The Center also may exclude an individual if that individual poses a direct threat to the health or safety of others that cannot be mitigated by appropriate modifications in our policies and procedures or by the provision of auxiliary aids that do not pose an undue burden.



# *Council of Senior Citizens*

## *Schoharie County*

I have read and understand the Gathering Place 50 Plus Community Center's Code of Conduct. I agree to abide by the rules described above for as long as I am an active member of the Center and understand that I may be removed as a participant if I violate any of these rules.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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

Witness: \_\_\_\_\_

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

*For Office Use Only:*

Today's Date	Joining for Year 20__	Amount Paid	Received By	New or Renewal	Entered into MySeniorCenter

Additional Notes: