

OAKLAND SENIOR CENTER
20 Lawlor Drive, Oakland, NJ 07436
201-405-7731

ENROLLMENT FORM

Name: _____ Date: _____

Address: _____

Telephone: (Home) _____ (Cell) _____

Birth Date: _____ Email: _____

Do you want to receive emails? Y or N

Do you use Facebook? YES/NO Are you following Oakland on Facebook? YES/NO

Car (Model/License #): _____

Interests (Place checkmark next to all that apply):

CLASSES

- ☐ Art (Painting/Drawing)
- ☐ Fitness for Arthritis
- ☐ Chair Yoga
- ☐ Fit for Life
- ☐ Sit, Stand & More
- ☐ Tai Chi Chih
- ☐ Yoga
- ☐ Zumba

ACTIVITIES

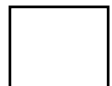
- ☐ Cards/Game
- ☐ Coloring
- ☐ Line Dancing
- ☐ Movies
- ☐ Trips

Other: _____

LOCAL EMERGENCY CONTACT

Name: _____ Relationship: _____

Telephone: _____ Cell / Home (Circle One)



For Office Use

[illegible]