

## Seniors Spark @Shalom Registration Information

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Thank you for your interest in the Seniors Spark Sessions at Shalom Village! All programs are available to seniors and caregivers at no cost! Please complete the form below. All information will remain confidential and will be used to help us **spark** the best possible experience for you.

### Personal Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Home Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

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

Preferred Contact Method (Phone / Email / Mail): \_\_\_\_\_

Gender (Male / Female / Prefer not to say): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_

Do you have any allergies? (No / Yes – please specify): \_\_\_\_\_

### Program Selection – Choose up to 3 programs/activities.

☐ Walkercise

☐ Chair Yoga

☐ Stretch & Strengthen

☐ Caring for the Caregivers Fitness Class

☐ Falls Prevention Program

☐ Health & Hydration Social Meet-Up

☐ Monthly Health Talks

Other or future interests:

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