



**YWCA Greater Newburyport
Encore Registration Form**

ENCORE PARTICIPANT INFORMATION		
First Name:	Last Name:	
Street Address:	Emergency Contact/Phone:	
City:	State:	
DOB:	Email address:	
Primary Phone Number:	Secondary Phone #:	
How did you learn about Encore:	Where did you receive treatment: Hospital name/Doctors name:	
Age at Diagnosis:	Date of Diagnosis:	
Diagnosis: i.e. Type/Stage/Grade:		
Household Income: \$25K - \$49K ___ \$50K - \$79K ___ \$80K - \$100K ___	Low income: ___ \$50K - \$79K ___ \$100+ ___	Health Insurance: Y ___ N ___ Private: _____ Medicare: _____
YWCA Greater Newburyport Encore Program: Terms and Conditions		
<p>Medical Clearance Form: This certifies that the above named patient is in my care and I have examined him/her and determined that he/she is able to engage in physical exercise in accordance with the Encore Program including gentle land exercise and exercise in the warm water pool.</p> <p>Doctors signature: _____ Date: _____</p>		
<p>Photo Clearance Form: I acknowledge that from time to time the YWCA Greater Newburyport takes pictures of its members to include in its own publications and for promotional materials. Unless, signed below, I give my permission to the YWCA Greater Newburyport to use any photographs or photographs of myself and/or my family members in YWCA Greater Newburyport publications and promotional materials.</p> <p>_____ Date: _____</p>		
<p>I decline to allow the YWCA Greater Newburyport to use any pictures of myself or my family members in publications and promotional materials. _____</p>		
<p>Waiver of Liability: My signature below indicates that I read the YWCA Greater Newburyport Waiver of Liability and accept all terms and conditions:</p> <p>Participant Signature: _____ Date: _____</p>		
<p>Class days/times: Tuesday: 11:45–12:15 Land Class: Group Exercise room Tuesday: 12:20 – 1:00 pm Water Class: Warm Water Pool Tues/Thurs: 6:15 -7:00 pm Water Class: Warm Water Pool</p> <p>MASKS ARE REQUIRED AT ALL TIMES FOR ALL PROGRAMS</p>	<p>YWCA Encore is available to those who have experienced cancer at any point in their lives.</p> <p>Contact: Ilene Harnch-Grady Health & Wellness Director, Encore Lead Director (978) 465-9922 #13/igrady@ywcanewburyport.org</p>	

