

**Matawan Borough Recreation Department  
Senior Exercise Program**

**Winter to Spring 2025 Session**

**Tuesday, 2/4/25 - Friday, 5/30/25**

**Tuesdays: Sculpt Yoga**  
**10:00 am - 10:45 am**  
**Teacher: Graham Peddell**

**Wednesdays: Chair Yoga**  
**10:00 am - 11:00 am**  
**Teacher: Danielle Meany**

**Fridays: Strength Yoga**  
**11:00 am - 11:45 am**  
**Teacher: Danielle Meany**

**Must also  
fill out the Hold  
Harmless Form  
attached below!**

**Matawan Residents - no charge**

**Non-Residents Fee:**

**1 class = \$55, 2 classes = \$100, 3 classes = \$145**



**All classes are taught at 201 Broad Street**  
**Please make all checks payable to: Borough of Matawan**  
**Return in person or mail to:**  
**201 Broad Street, Matawan, NJ 07747, c/o Recreation**



**Name:** \_\_\_\_\_

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

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Office use: payment #:** \_\_\_\_\_ **/ cash**



## Borough of Matawan Hold Harmless Form

I understand that I am participating at my own risk. I agree to hold harmless the Borough of Matawan and the instructors Danielle Meany and Graham Peddell for any injury that I may suffer by participating in any of the programs offered in the Borough of Matawan Senior Programs. This means that I am releasing the Borough of Matawan or its authorized agents from any liability for any injury that I suffer as a result of participating in the activities sponsored by the Borough of Matawan. By signing this form, I am voluntarily and freely giving up my rights to sue the Borough of Matawan or its authorized agents. Further, by signing this waiver, I acknowledge that I do so voluntarily and of my own free will. I further acknowledge that I have the capacity to enter into this agreement releasing the Borough of Matawan from its liability. I further understand and agree that my signature on this waiver applies not only to any events listed in the waiver but to any and all events from this forward in which I participate and are sponsored by the Borough of Matawan. By executing this waiver, I release the Borough of Matawan, and/or its agents not only from any items listed in this form but from any activities or events that I participate in, in the future. This includes all classes, presentations, trips, senior citizens club meetings, etc.

\_\_\_\_\_ Initial

### **MEDICAL RELEASE**

I hereby release, waive, and agree to hold harmless the Borough of Matawan, its employees, contractors, associates, departments, or other entities or individuals representing the same, concerning any accidents, illness, or personal injury I may suffer, which might result from my participation in any activity or program offered by the Borough of Matawan. I am aware that it is my responsibility to check with my doctor before beginning any type of activity offered by the Borough of Matawan. The Borough of Matawan has advised me that a physician's approval is strongly recommended before beginning any exercise program that is offered by the Borough of Matawan and I am fully capable of participating in these activities without causing harm to myself or others.

**Print Name:** \_\_\_\_\_

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

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