



Buckeye Senior Program

Registration Form

Date _____

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip Code _____

Date of Birth _____ Gender _____ Phone Number _____

Email address: _____

Would you like to be emailed our monthly newsletter and special announcements? Yes No

Veteran: No Yes Female Head of Household: No Yes

Emergency Contact Information: Name _____

Relationship _____ Phone Number _____

Current Medical/Health Conditions: _____

UNDER 60-Eligibility

Are you disabled (Receiving SSD/SSI): No Yes If yes, please explain: _____

Are you the spouse of someone 60+: No Yes

Race:

- White
- Native American
- Asian
- Black
- Hawaiian/Pacific Islander
- Other

Ethnicity:

- Hispanic
- Non-Hispanic
- Other

Marital Status:

- Married
- Divorced
- Never Married
- Widowed
- Separated

Monthly Household Income: Under \$300 \$300-499 \$500-699 \$700-899
 \$900-1,499 \$1,500 or more Decline to answer

Number of Persons in your household: _____

Household Composition: Lives Alone Lives with Spouse Lives with Extended Family
 Lives with Non-Family Multi-Generational



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Registration Form

Determine your Nutritional Health		
<ul style="list-style-type: none"> • Read the statements below • Circle the number under “Yes” in the first column for those that apply to you • For each “Yes” answer, score the number in the box. • Total your nutrition score 	Yes	No
I (or someone close to me) have an illness or condition that has caused me to change the amount and/or kind of food that I eat?	2	
I eat fewer than two meals per day.	3	
I eat few fruits and vegetables per day.	2	
I eat or drink few milk products (e.g. milk, yogurt, cheese) a day.	2	
I drink less than 5 (8-oz.) cups of fluid a day (e.g. water, tea, juice).	2	
I have three or more drinks of beer, wine, or liquor almost every day.	2	
I have tooth or mouth problems that make it hard for me to eat.	2	
I don't always have the money to buy the food I need.	4	
I eat alone most of the time.	1	
I take 3 or more different prescribed over-the-counter drugs per day.	1	
Without wanting to, I have lost or gained 10 pounds in the last six months.	2	
I am not always physically able to shop, cook, and/or feed myself.	2	
Social Risk Has difficulty getting outside home unless transportation provided	0	
Risk Lacks other outside activities	0	
Total		

If your score is...

0-2	Good! Re-check your nutritional score in six months.
3-5	You are at <u>MODERATE</u> nutritional risk. See what can be done to improve your eating habits and lifestyle. Your office on aging, senior nutrition program, senior citizens center, or health department can help.
6 or more	You are at <u>HIGH</u> nutritional risk. Bring this checklist the next time you see your doctor, dietitian, or other qualified health or social services professional. Talk to him or her about any problems you may have. Ask for help to improve your nutritional health.

Remember – that warning signs suggest risk, but do not represent diagnosis of any condition.

Participant Signature: _____ **Date:** _____



Buckeye Senior Program

Policies Agreement

Policies & Procedures:

I acknowledge that I will abide by the Buckeye Senior Program policies and procedures. A copy of the policies and procedures is available upon request, or to view at the Senior Center. I understand and acknowledge that the City of Buckeye has the right, without prior notice, to modify, amend or terminate any program policies and procedures.

Initial here _____

Courtesy Guidelines and General Conduct:

I agree to abide by the Senior Center Guidelines. Failure to abide by these guidelines may result the loss of my privilege to attend the Senior Center and/or participate in any programs and/or activities.

Initial here _____

Problem Solving/Grievance Procedure

I acknowledge that I have received the Buckeye Senior Program Problem Solving/Grievance Procedure and I understand the procedure should I feel I have not been treated fairly or equitably.

Initial here _____

COVID-19 Release, Waiver of Liability, and Indemnity Agreement:

The undersigned has read the foregoing COVID-19 Release, Waiver of Liability, and Indemnity Agreement and requests use of the Facilities. By signing below, the undersigned agrees to each and every term of the COVID-19 Release, Waiver of Liability, and Indemnity Agreement.

Initial here _____

Internet Rules, Policy, and Unacceptable Use:

I acknowledge that I have read the City of Buckeye Senior Center Program Internet Rules Policy above. The use of City of Buckeye Electronic Communications Resources constitutes acceptance of the Internet Policy and its requirements. The City of Buckeye reserves the right to change this policy at any time. Failure to follow these above mentioned policies may cause me to lose my Electronic Communications Resources privileges throughout all divisions of the Community Services Department.

Initial here _____

Trips:

I understand that while on any active adult excursions, I must abide by all establishment procedures. I must not leave the site without the knowledge of the chaperon, and I must try to be in the company of another participant while on the trip.

Initial here _____

Release of Information:

I authorize the City of Buckeye Community Services Department to release necessary information to necessary police representatives if the need for a welfare check arises, and to funding agencies such as the Area Agency on Aging for audit purposes.

Initial here _____



Buckeye Senior Program

Media Release:

The City of Buckeye is permissible (unless indicated otherwise by the participant) to record ones likeness and/or voice for use by television, film, radio, social media, or print media to further the aims of the Community Services Department programs in related campaigns and magazine articles, booklets, posters and in other ways they may see fit.

Initial here _____

I HEREBY ACCEPT:

I/We hereby acknowledge that I have read The City of Buckeye Community Services/ Senior Center *Policies and Procedures, Courtesy Guidelines, Grievance Procedure, Covid-19 Polices, Internet Rules, Trips, Release of Information, and Media Release* and release and forever discharge the City of Buckeye, and Arizona municipal corporation, its elected and appointed officials, directors, boards, commissions, agents, representatives, servants and employees, and any and all other persons, firms or corporations who are or might be liable from any and all claims of any kind or character which I/we have or may have against them due to my participation, in a City of Buckeye senior & recreation programs, events, trips and transportation. The waiver includes all damages, losses, costs, expenses, and injuries that allegedly occur during the course of socialization program. In that regards, I /we consent indemnity, defend and hold harmless to the fullest extent permitted by law the foregoing persons and entities from any loss or damages, including reasonable attorney's fees and litigation expenses, which may be incurred by them in the event any such claims are asserted against them or any of them. I/we understand that medical claims are my/our responsibility. I understand and acknowledge that the City of Buckeye has the right, without prior notice, to modify, amend, or terminate any program polices and procedures.

Printed Name: _____

Date: _____

Signature: _____



Buckeye Senior Program

201 East Centre Avenue, Buckeye, AZ 85326
(623) 349-6600 Fax: (623)349-6611
buckeyeaz.gov/seniors

On behalf of the City of Buckeye Community Services Department, we would like to welcome you to the **Buckeye Senior Program**. The Senior Program, in partnership with Area Agency on Aging, is committed to providing the best possible service and increasing the overall quality of life of its participants. The information provided in this pamphlet was put together in an effort to better serve new participants. Anytime you have questions or require additional services, please feel free to speak to one of the Community Services Department staff. Thank you!

Hours of Operation: Monday through Friday 8a.m.-5p.m., except holidays

What We Do, aka Newsletter: We provide a monthly newsletter where participants may learn about our outings, lunch menu, activities, and special events for the Senior Program. Newsletters are available at the Senior Center and on our website buckeyeaz.gov/seniors.

Meal Program: We offer a lunch program for all participants. Lunch is served from 11:30a.m.-12:30p.m. each operating day. Menus are posted monthly in the newsletter. The suggested contribution/donation for meals is \$3.00 for participants. There is a \$5 meal fee for all other guests and visitors.

Home Delivered Meal Program: Home delivered meals are provided to participants that are unable to prepare adequate, nutritious meals for themselves. Please call (623) 349-6600 for more information.

Activities/Programs: Scheduled activities and special events are open to all participants. Special events occur once a month and often have a theme.

Trips/Outings: We plan monthly outings to various locations throughout Arizona. We vary them every month to appeal to multiple interests. These trips are open to all participants. Destinations, registration dates, and fees are posted in newsletter.

Exercise Programs/Fitness Equipment: Low impact exercise programs are available year round. More vigorous programs are offered as scheduling permits. Fitness equipment is available while our doors are open and should be used at the participants own risk.

Senior Program Site Council: The Buckeye Senior Program Site Council meets once a month. Any questions, requests, issues, or concerns regarding the program may be brought to the Site Council officers for consideration for the next meeting's agenda. Participants are voting members and are encouraged to attend. Refer to the monthly newsletter for meeting dates.

Courtesy Guidelines and Grievance Procedures: The City of Buckeye Senior Program Courtesy Guidelines and Grievance Policies are posted in the Senior Center, are attached to this packet, and are available upon request. Any questions, comments, concerns, or suggestions regarding these guidelines and procedures can be addressed with staff or brought to the Site Council.

Transportation: We provide a morning bus route to the Senior Program for individuals lacking transportation. The route picks participants up from their homes in the morning and returns them in the afternoon. Seats are limited, inquire with staff for further information. We also have a medical route to take participants to and from medical appointments. This route has a set schedule and limited capacity. Please ask staff for further information.



Buckeye Senior Program

Courtesy Guidelines and General Conduct

As a member or visitor to the Buckeye Senior Center/Program, the participants and staff request that you abide by the following courtesy guidelines and general conduct while attending or visiting the Buckeye Senior Center/Program. If you have comments, suggestions, complaints or compliments, please contact the Buckeye Senior Center Staff. Thank You!

- Take PRIDE in your center! Please assist us in keeping OUR center clean.
- Please be respectful to other participants' personal space & property.
- Please do not use offensive/vulgar language or gestures toward participants and staff.
- Harassment, sexual, racial or other, telling sexist or racial type jokes, or making racial or ethnic slurs will not be tolerated.
- Participants under the influence of alcohol or illegal drugs will be removed from the center immediately.
- Physical confrontations will not be tolerated. Participants and visitors engaging in such acts will be removed from the Buckeye Senior Center/Program immediately.
- Program equipment, materials, food, and all other items are for the benefit and use of all participants attending the Senior Center/Program. Please respect and share these items.
- Equipment, materials, and all other items should not be removed from the Senior Center unless approval has been granted by staff.
- Refreshments and snacks (i.e. coffee, pastries, and peanut butter) are for the enjoyment of the senior program participants. Please use cleanliness and courtesy.
- Community Services is here for your benefit. If you need assistance, please ask the staff.
- All tables & chairs are on a first come first serve basis. Please refrain from saving spaces & chairs.
- Please no soliciting or borrowing of money from senior center participants, guests or staff within the senior center.

City of Buckeye Management/Staff reserves the right to modify, revise or make changes to these guidelines at any time to promote and ensure the wellbeing and safety of its staff, participants, guests and property.



Buckeye Senior Program

Problem Solving/Grievance Procedure

Any person seeking assistance or services through the Buckeye Community Services Senior Program who feels he/she has not been treated fairly or equitably may file a grievance.

Steps:

1. Discuss your concerns with the Senior Center Manager to try to reach a satisfactory solution. This needs to be done within ten (10) calendar days after experiencing the problem. The Manager will document and date this discussion and provide you with a copy of written documentation.
2. If the problem was not resolved to your satisfaction, you may present your concern verbally or in writing to the Community Services Director. This must be done within ten (10) calendar days of the date of the written documentation provided to you by the Senior Center Manager.

In a verbal contact, the Director will document and date the discussion and provide you with a copy of the written documentation within ten (10) calendar days. If your concern was submitted in writing, the Director will respond in writing with his/her decision within ten (10) calendar days of receipt of your written communication.

3. If you continue to feel that the problem has not been resolved to your satisfaction, you may present your concern, grievance, or appeal in writing to the Assistant City Manager within ten (10) calendar days of the Director's written and dated documentation/response.

The Assistant City Manager will respond to you in writing and provide his/her decision within ten (10) calendar days of receipt of your written communication.

If the concern/grievance/appeal is in regards to services funded by Area Agency on Aging, Region One, the following steps are available to you.

4. If the problem has not been resolved to your satisfaction, you may present your concern, grievance, or appeal in writing to Area Agency on Aging, Region One. This must be received within ten (10) calendar days of the date of the Assistant City Manager's written response. Area Agency on Aging will review the grievance for resolution. A written response will be provided to you within ten (10) days of receiving the written request.



Buckeye Senior Program

COVID-19 Release, Waiver of Liability, and Indemnity Agreement

In consideration of permission to use City of Buckeye's ("City") facilities, buildings, equipment, parks, recreational areas, pools and amenities (collectively, City "Facilities"), **I acknowledge and affirm on behalf of myself, and on behalf of any of my participating children, that:**

- I/We shall not visit or utilize the Facilities if experiencing symptoms of COVID-19, including, without limitation, fever, cough, or shortness of breath, or have a suspected or diagnosed case of COVID-19.
- To the fullest extent allowed by law, I/We agree to comply with all federal, state, and local laws, rules, regulations, executive, and/or emergency orders, and to follow the protocols as directed by the Centers for Disease Control and Prevention and the Arizona Department of Health Services, arising from, addressing, or related to COVID-19.
- I/We acknowledge that the City has taken steps to implement federal and state guidance for COVID-19. Due to the nature of the Facilities, physical distancing of six (6) feet may not be possible. The undersigned fully understands and appreciates both the known and potential dangers of use of the Facilities and acknowledges that despite the City's efforts to mitigate such dangers, use of Facilities may result in exposure to COVID-19, which could result in quarantine, serious illness, disability and/or death.

Release and Waiver of Liability. The undersigned, on his or her behalf and on behalf of participating children, hereby releases, waives, discharges and covenants not to sue the City, its officers, employees, volunteers, and any of its agents from all liability to the undersigned and such participating children and all personal representatives, assigns, heirs, and/or successors of the undersigned or such participating children whether caused by negligence, active or passive, of the City or otherwise while the undersigned or such participating children are in, upon, or about the Facilities or participating in any City program or event at the Facilities.

Indemnity. The undersigned agrees to indemnify and hold harmless the City from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of the undersigned's use, or his or her participating children's use, of the Facilities and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing COVID-19 Release, Waiver of Liability, and Indemnity Agreement is intended to be as broad and inclusive as is permitted by the law of the State of Arizona and that if any portion of the agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.



Buckeye Senior Program

Internet Rules, Policy, and Unacceptable Use

The internet is a global information network which is not regulated by any local, state, federal, or international authority. Materials found on the internet may contain information that is controversial, offensive, disturbing, erroneous, or illegal. Users who access the internet at the City of Buckeye Senior Center are required to conduct themselves in an ethical and legal manner, and to adhere to the conditions set forth below.

The following activities are unacceptable and are prohibited with respect to the Resources. Activities that fall into the category of unacceptable and prohibited use include:

- *Discrimination*- Users will not send discriminatory messages based on race, age, disabilities, gender, sexual orientation, or religious or political beliefs or other basis that is protected under applicable law.
- *Fraudulent Offers*- Users will not make fraudulent offers of products, items or services originating from any City electronic resource.
- *Harassment*- Electronic Communications Resources will not be used for conducting personal attacks on others to include harassment or threats or defamation of character.
- *Insensitive Language*- Users must not send messages or communications containing offensive, derogatory or abusive language.
- *Intellectual Property Infringement*- Users must not infringe the copyright or other intellectual property rights of third parties.
- *Objectionable Material*- Users are prohibited from sending or accessing pornography and/or sexually explicit content.
- *Personal Gain*- Electronic Communications Resources may not be used for personal financial gain.
- *Profanity*- Users may not use profanity in their electronic communications.
- *Unlawful Activities*- Users must not engage in illegal or wrongful conduct.