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The Donald Heiter Community Center  
100 North 5<sup>th</sup> Street  
Lewisburg, PA 17837  
Phone: (570) 524-5000  
Fax: (570) 524-5085  
[www.donaldheiter.org](http://www.donaldheiter.org)  
Email: heiter@dejazzd.com

Sponsored by:  
Union County United Way



## Waiver of Liability: (Adult)

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

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

Class Name: \_\_\_\_\_

### Waiver of Liability:

I understand that during participation The Donald Heiter Community Center staff, volunteers, and affiliates will do everything they can to keep me safe, however accidents do happen. In case of an accident I will not hold The Donald Heiter Community Center, its staff, volunteers, and its affiliates responsible for any harm that might come to me. I understand if something should happen to me that the staff and volunteers will use their best judgment in responding. I understand that these responses might include calling for emergency medical services, emergency medical treatment, going to the emergency room or going to the doctors office. I understand that I am responsible to pay for any expenses associated with these treatments. I give my permission for The Donald Heiter Community Center staff, volunteers and affiliates to use whatever means necessary to treat me in case of an emergency. I also understand that the Donald L. Heiter Community Center reserves the right to ask me not to return if I fail to follow the rules of the Center or the program/ class.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

*Your contribution is tax deductible. (501 (c)(3) IRS EIN#23-2756465) The official registration and financial information of DONALD HEITER COMMUNITY CENTER may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania, 1 (800) 732-0999. Registration does not imply endorsement*