

REGISTRATION FORM FALL 2023

Seniors' Centre Without Walls (SCWW) Saskatchewan

1. Your first and last name: _____
2. Your Mailing Address and postal code:

3. Your Phone number you use for the program: _____

For the program classes, will you use (please circle all that apply)

- a) Cell phone b) Land line c) Hands free phone d) iPad or another device e) External speaker on your phone

4. Email Address if you have one: _____

***NOTE: Your handouts and paperwork will come to you by email. ***Do you need accommodations to get printed paper copies and not email copies? Yes No

5. For Our Birthday Announcements: What is the month _____ and day _____ of your birthday
6. Do you have needs that might affect your participation? Hearing Impairment Vision (need large print) Other: **Please tell us how SCWW can best accommodate you:**
- 7.

How did you hear about this program A)Radio ad b) newspaper c) poster d) media release e) word of mouth f) social media g) other _____ Name of the source where you heard of this program _____

We will give you a phone call at the start time for the classes

If you do not want the phone call at class time -- please phone in yourself at class time and we will not phone you.

____I will phone in myself at class time. Do not phone me.

.Can you volunteer facilitate any classes this fall? Yes No

Can you do a presentation Yes No What topic?

If you are a Social Worker or other person making a referral include your

Name _____, Phone number _____

email _____ Place of work _____

On Occasion we will share your email and mailing address with other professional partner programs that need it to contact you for registration purposes or to send you handouts. If you **do not want your address shared with these organizations sign: _____.

Friendly phone call program:

1. Would you like to volunteer to make friendly phone calls to other lonely seniors in Saskatchewan?

Yes No

If yes, how many hours could you commit per week: a) 1 b) 2 c) 3 d) 4

Questions Phone Ronda: 306. 631-4357 (phone calls only no texts)

**Email this form to:
Scwwsask2019@gmail.com
Or
Mail a paper copy to
SCWW
Box 182 Willowbunch, SK
S0H 5K0
Or Phone Ronda to fill it out over the phone
306. 631-4357**

We are making personalized thank you cards to send to our guest speakers with all of our names on it. Please print or write your first name below mine for the cards.

Ronda