

Council on Aging Program Registration Form
WINTER MINDFULNESS & MEDITATION WITH ERIN
January 6 through March 24, 2026

Winter Mindfulness & Meditation with Erin Laporto is a twelve-week session that is offered in-person at the Boxborough Community Center on Tuesdays at 10 AM, from January 6 through March 24, 2026.

Space is limited. We need to have a minimum of six Boxborough residents to run the class. Participants must register for the full twelve-week session. Registration begins on Tuesday, December 16 for Boxborough residents and if there is room, non-residents may register beginning on Tuesday, December 30.

If class must be canceled due to weather or instructor illness, the instructor or the COA will notify registered participants as soon as possible. There may or may not be accommodations for classes missed due to cancellations.

Secure your spot in the class by bringing this registration form along with your check made payable to the Town of Boxborough to the COA office on the second floor of Town Hall or mail it to Boxborough COA, 29 Middle Road, Boxborough, MA 01719.

MINDFULNESS & MEDITATION
Tuesdays, January 6 through March 24, 2026

Location: Community Center (30 Middle Rd Boxborough)

The class fee is \$48.00. Please make check payable to the Town of Boxborough.

Please provide the following information to complete your registration

Name:	Birthdate:	
Address:		
Phone number:	Email address:	
Circle your preferred contact method:	Phone	Email

Emergency Contact Information

Name:	Phone number:
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Please complete the waiver on the reverse side



Town of Boxborough
RELEASE FROM LIABILITY INDEMNITY
AND HOLD HARMLESS AGREEMENT (required)

I, _____ in consideration of my participation in **Council on Aging Exercise Programs**, I do for RELEASE, acquit, discharge and covenant to hold harmless the Town of Boxborough ("Town"), a municipal corporation of the Commonwealth of Massachusetts, and its successors, departments, officers, employees, servants, attorneys and agents, of and from any and all actions, cause of action, claims, demands, damages, costs, loss of services, expenses and compensation on account of or in any way arising out of, directly or indirectly, all known and unknown personal injuries or property damage which I may now or hereafter have or may acquire, resulting or to result from said participation in the aforementioned activities. Furthermore, I hereby agree to protect the Town and its successors, departments, officers, employees, servants, attorneys and agents from any injury to any party in connection with said participation in the aforementioned activities and to INDEMNIFY, reimburse or make good to the Town or its successors, departments, officers, employees, servants and agency any loss or damage or costs, including attorneys' fees, which the Town or its representatives may have to pay if any litigation arises from said participation in the aforementioned activities. ***If I am signing up for a virtual exercise class, I am responsible for monitoring myself to take breaks and modify exercises at needed.***

Signature: _____

Date: _____

Write or Type your name above

Emergency Authorization (required)

Medical authorization & physical condition identification:

I authorize whatever medical care may be necessary in the event of an emergency. I acknowledge that insurance is not provided by the Town of Boxborough, the Council on Aging, its staff or volunteers for this program. I accept the responsibility for payment of any medical expense.

Signature: _____

Date: _____

Write or Type your name above

Optional Photo Release

I, _____, hereby authorize the Town of Boxborough's Council on Aging to publish photographs taken during programs. I acknowledge that since participation in publications and the town website produced by the Town of Boxborough is voluntary, I will not receive financial compensation. I further agree that participation in any publications and website produced by the Town confers no rights of ownership whatsoever.

Signature: _____

Date: _____

Please return your completed registration form and payment to
Council on Aging, 29 Middle Road, Boxborough.