

Brisbane Village Helping Hands Member Sign-up

BRISBANE VILLAGE
Helping Hands



Member Information (please print clearly):

Name: _____

Birth date: _____ Gender: F M Other

Retired: Yes No

Address: _____

Telephone(s): _____

Email: _____

Do you prefer to be contacted by phone or email? _____

Emergency Contact Information:

Primary Contact: _____ Relationship to you: _____

Email: _____ Telephone Number: _____

Secondary Contact: _____ Relationship to you: _____

Email: _____ Telephone number: _____

I live:

alone with spouse/partner with other family with friend(s)/roommate(s)

Services: Brisbane Village Helping Hands provides services through its corps of neighborhood Volunteers. All Volunteers submit to a background screening.

Dues: Membership dues are \$20.00 per year, and will be used to defray the operating costs of BVHH, such as liability insurance. This fee may be waived in cases of hardship.

Termination of Agreement: The undersigned Member may terminate this agreement at any time by providing written notice to a Village Coordinator. The Village reserves the right, in its sole discretion, to terminate this agreement, at any time, if the Village determines that it is in the best interests of the Village, its Volunteers, other Members or the undersigned Member.

Privacy: The Village will take all reasonable steps to protect the personal information of its Members. However, where concerns regarding a Member's health or safety arise, the Village reserves the right to contact the individual(s) listed as non-member contacts or other appropriate people, as determined by the Village.

Waiver of Liability: I acknowledge that Brisbane Village Helping Hands has not undertaken any duty or responsibility for my safety and I

(1) assume full responsibility for all risk of bodily injury, death, disability, and property damages as a result of participating in any Village activities,

(2) release and discharge any and all Village Members, Volunteers, Coordinators, Officer and Directors from any and all responsibility or liability for any loss, injury, damage or expense arising out of any and all activities of Village Members or Volunteers, and

(3) agree to hold any and all Village Members, Volunteers, Coordinators, Officers and Directors harmless from and against any cost, expenses or damages (including without limitation, reasonable attorney's fees) arising in conjunction with any and all claims brought by or through me, my heirs and assigns, or my insurance carrier.

I understand that the Village is not a provider of emergency services or health care services, is not a health care administrator, and does not employ licensed health professionals or social workers. This Agreement is not meant to create any special relationship giving rise to a duty to aid or protect between myself and the Village.

I have read the above carefully, and I am pleased to become a member of Brisbane Village Helping Hands under the terms and conditions described above.

Signature of Member

Date

Delivery Options

- Mail sign-up form and dues payment (\$20 per member – make check out to **BVHH**) to **P.O. Box 734, Brisbane, CA 94005**.
- Email brisbanevillagehelpinghands@gmail.com or call 415 508-2185 to request a pickup.
- Email your completed sign-up form using the address above; deliver dues separately.

What's Next?

You will be notified via phone or email after your sign-up form and dues payment have been received. We will review the information you've provided, follow up with any questions, if necessary, and provide you with simple instructions about requesting services, how to communicate with us in the event of plan changes, how to make use of the BVHH website resources, etc.

We look forward to having you as a Member of Brisbane Village Helping Hands!