

# 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 Primary Language \_\_\_\_\_

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

**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 acknowledge that I understand the health risks associated with participation in volunteer-provided transportation and other BVHH services, which include potential exposure to a communicable disease such as COVID-19, a virus that may cause serious illness and may lead to death. I understand and agree that BVHH is not liable for any illness or death that may occur as a result of my participation in BVHH services and activities. As a condition of my participating in BVHH services and activities, I, on behalf of myself and my executors and assigns, release and forever discharge BVHH and its members, volunteers, agents, officers and employees from any claims, demands or damages arising out of or related to my actual or potential exposure to a communicable disease in connection with my provision or acceptance of BVHH services.

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.

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Signature of Member

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Date

### ***Delivery Options***

- Mail sign-up form to **P.O. Box 734, Brisbane, CA 94005.**
- Email [brisbanevillagehelpinghands@gmail.com](mailto:brisbanevillagehelpinghands@gmail.com) or call 415 508-2185 to request a pickup.
- Email your completed sign-up form using the address above.

### ***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***