



CARQUINEZ VILLAGE

CONNECTING, SUPPORTING, *and* INSPIRING SENIORS

Membership Application Form

Thank you for your interest in becoming a member of Carquinez Village. So that we can meet your needs and understand your expectations, please complete the following information. Feel free to add any details that might help us get to know you better.

All members of a household must fill out and sign their own applications.

Membership Type: Individual Household

Last name _____ First name _____ Middle _____

Street address _____ City _____ Zip _____

Email _____

Home phone _____ Cell _____

Gender _____ Birthdate _____ Are you retired? Yes No

Living status (alone, with spouse, friend, family, etc.) _____

Who else in your household is also submitting an application? _____

How many persons in your household? _____ How many pets (cat, dog, other) _____

Special/notable health conditions _____

Special needs (walker, cane, hearing impaired, low vision, etc.) _____

Are you a smoker? Yes No Are you sensitive to smokers around you? Yes No

Do you have allergies we should be aware of? Yes No Type _____

Is English your primary language? Yes No If no, indicate language _____

Do you have friends/family nearby you consider part of your support system? Yes No

If yes, describe _____

Who should be contacted if an emergency occurs while you are with a Village volunteer or at a Village activity (name, relationship, phone number and other pertinent information).

1. _____

2. _____

List names, emails, phone numbers, and addresses for two local contacts.

1. _____

2. _____

What is your primary interest in joining Carquinez Village? Check all that apply and list others you would like to see on the back.

Home management services,

Cultural educational programs

Transportation services

General support

Making new connections

Others listed on back

Primary care physician contact information _____

Hospital preference in case of emergency _____

What are your hobbies/interests? _____

Are you interested in volunteering to provide services to other members? Yes No

If so, any specific service? _____

Annual membership dues are \$360 for an individual and \$180 for each additional member of the household. All members must be 60 years of age or older with the exception of the partner of the primary member, who can be younger. It is not necessary to submit a dues payment with your application. Dues can be paid by check or credit card and can be paid in full or in quarterly or monthly payments. (Checks are written to Carquinez Village.)

Include my name and phone number in the Member Directory Yes No

Signature _____ Date _____

Thank you for your interest in participating in Carquinez Village. We look forward to a sustainable and satisfying relationship. **When complete, you can mail this to Carquinez Village, P.O. Box 207, Benicia, CA 94510. You can expect a call within ten days to complete your application process.**

SECONDARY APPLICANT DOCUMENTS

The following three documents, which are to be signed, are below:

1. Carquinez Village Membership Agreement
 2. Notice of Privacy and Confidentiality Practices—HIPPA Requirements
 3. Waiver and Release of Liability
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1. CARQUINEZ VILLAGE MEMBERSHIP AGREEMENT

Carquinez Village is a California tax-exempt nonprofit corporation through Faith in Action (a 501c3 of the Internal Revenue Code). Carquinez Village is a community-based network of neighbors in Benicia and the immediate surrounding area.

Services. Carquinez Village delivers volunteer-provided services and programs to paid and enrolled members. All volunteers are required to submit to a background check. For any services that are not available through volunteers such as major home repairs, home inspections, and home health care needs, Carquinez Village will assist members in finding a qualified “for-fee” provider whenever possible.

Fees. The fee for single membership in Carquinez Village is \$360 annually and \$180 annually for additional individuals who are 60 years of age or older in the same household. Other household members may be younger only if they are the spouse or significant other of the member. Membership runs for a 12-month period, commencing from the date upon which Carquinez Village accepts the executed agreement and the appropriate payment. The annual fee may be increased from time to time. Annual membership may be renewed subject to agreement by Carquinez Village and the member and payment of the applicable annual fee. Membership fees cover all volunteer services and programs provided. There may be special events that incur additional charges.

Termination of Agreement. Carquinez Village reserves the right, at its sole discretion, to terminate this agreement at any time if Carquinez Village determines that it is the best interest of Carquinez Village volunteers, other members of the undersigned member. If Carquinez Village terminates the agreement, it will return a portion of the annual fee on a prorated basis from the month of termination. The undersigned member may terminate this agreement at any time by providing written notice to Carquinez Village. If the member terminates this agreement, no portion of the annual fee may be refunded. An exception will be made in the case of death.

As a member of Carquinez Village, I understand that Carquinez 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 intended to imply that Carquinez Village is implicitly accountable for the health and welfare of its members.

Agreement. I certify that I have read and understand this Membership Agreement and wish to become a member of Carquinez Village under the terms of this agreement.

Name _____ Date _____

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2. NOTICE OF PRIVACY AND CONFIDENTIALITY PRACTICES – HIPPA REQUIREMENTS

How We Collect Information About You. Carquinez Village, its staff, and volunteers collect data through a variety of means including, but not limited to, letters, phone calls, emails, and voice mails, in order to gather necessary information to process applications or other requests for assistance and services through our organization.

What We Do Not Do with Your Information. Information about your living situation or medical conditions or financial information is held in strictest confidence whether you provide it to us directly or indirectly in writing, by email or on the phone (including voicemails), on our forms or applications, or in any other manner.

We do not give out, exchange, barter, rent, sell, lend, or disseminate any information about applicants or members who apply for, request, or receive our services that is considered confidential, is restricted by law, or has been specifically restricted by a member in a signed HIPPA consent form.

How We Do Use Your Information. Information is only used as is reasonably necessary to process your application/membership form or to provide you with requested services that may require communication between Carquinez Village and health care providers, service providers, pharmacies, insurance companies, and other providers as necessary.

Limited Right to Use Non-Identifying Personal Information from Letters, Notes, and Other Sources. Any pictures, stories, letters, biographies, correspondence, or thank you notes sent to us become the exclusive property of Carquinez Village. We reserve the right to use non-identifying information about our members for fundraising and promotional purposes that are directly related to our purpose.

Members will not be compensated for use of this information and no identifying information will be used without the member's express advance permission.

Of course, members may specifically request in writing that NO information be used whatsoever for promotional purposes. We respect your right to privacy and assure you that no identifying information of yours will ever be publicly used without your direct consent.

Acknowledgement of Privacy and Confidentiality Practices

Name _____ Date _____

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3. WAIVER AND RELEASE OF LIABILITY

As a member of Carquinez Village, I knowingly and voluntarily enter into this waiver and release of liability and hereby waive any and all rights, claims, or causes of action of any kind arising out of my participation in the services, programs, and activities provided by and/or coordinated through Carquinez Village and its fiscal sponsor, Faith in Action.

I agree to indemnify and hold harmless Carquinez Village against any and all claims, suits, or actions of any kind whatsoever for damages, compensation, injury, or otherwise brought by me or anyone on my behalf.

I acknowledge that Carquinez Village and its directors, officers, volunteers, representatives, and agents are not responsible for errors, omissions, acts, or failures to act of any party or entity conducting a specific event or activity or providing services on behalf of Carquinez Village.

I, the undersigned participant, affirm that I am freely signing this agreement, have read this agreement, understand the content of this agreement, and am aware that this is a release of liability against Carquinez Village and a contract that I am signing voluntarily. Upon execution, this contract is effective and enforceable whether my membership in Carquinez Village is active or not.

Name _____ Date _____
