GEORGETOWN VILLAGE, INC. Membership Information Form



Yes, I want to be an Individu	ial Member at a cost of \$600	per year
Yes, We want to be Househo	old Members at a cost of \$90	0 per year
Social Membership (All bu		
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Full Name Member 1		D.O.B
(Please Print Clearly		
•		Cell Phone
		_00112110110
Full Name Member 2		D.O.B
(Please Print Clearly)		
•	C	Cell Phone
Street Address		Apt/Unit #
City & State	Zip	Home Phone
Other Dhone Numbers we can re	ach way and	
Other Phone Numbers we can re	ach you on:	
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<u>Privacy</u> : Georgetown (GV) will take all reasonable steps to protect the personal information of its Members. However, where concerns regarding a Member's health or safety arise, GV reserves the right		
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to contact the individual(s) listed	by the Member as the emerg	gency contact(s).
Emergency Contact Information		
•		
		ationship
Address	City & State	Zip
	<u> </u>	
Cell Phone	Email Address	
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<u>Waiver of Liability:</u> I understand that Georgetown Village (GV) services are provided by volunteers, not professionals. I agree to indemnify and hold GV harmless for any loss, expense or personal injury arising from activities of its employees or volunteers including, but not limited to, automobile accidents involving volunteer drivers; medical note-taking or recordings or reporting errors by GV volunteers; and in cases of hospital visitations, any accidents, injuries or reporting errors. I further waive all liability against GV for injury due to accident, negligence or breach of privacy. This waiver applies to any action brought by myself, my heirs and assigns, or my insurance company. Furthermore, I release GV from all responsibility or liability stemming from the conduct of professional or other service providers it may recommend as the GV is not affiliated with and does not have any oversight of these third party professional or other service providers.

We would love to have you get involved-please check any/all that interest you: Please check or initial Groups or Activities that you are interested in participating in: Gardening ____Book Club Walking ____ Dinner Out ____Theater ____Yoga ____ Exercise _____ Movies _____ Monthly Coffee/Tea ____ Evening/Weekend activities _____ Bridge/Cards Brain Games Docent-Led Museum Trips. Tell us your ideas: Volunteering and/or Serving on Committees with Georgetown Village: Member 1 _____ I would like to join a committee: Membership Recruitment & Services Volunteers Development Communications ___Special Events___Healthcare___Office Administrative Help Member 2 I would like to join a committee: ___Membership Recruitment & Services_____Volunteers___Development____Communications ___Special Events____Healthcare____Office Administrative Help Our Volunteers: Georgetown Village (GV) offers an array of services to our Members. Most services are provided by volunteers who contribute their time to assist their neighbors. All volunteers attend a mandatory training program and submit to a criminal background check. Transportation volunteers have an additional background check processed by the Department of Motor Vehicles. For medical note-taking, GV educates volunteers using the Medical Note-Taking Manual for Note Takers developed by Iona and Northwest Neighbors Village in 2015. For Friendly Companion hospital visitation, GV educates volunteers using the Friendly Companion Manual developed by Iona and GV in 2016. However, volunteers do not have medical training and are not permitted to offer medical care or advice. GV is not a provider of emergency or professional health care services and does not employ licensed healthcare professionals. In an emergency, a volunteer will call 911 and remain with the Member until qualified medical care is obtained.

PLEASE COMPLETE AND RETURN THIS FORM Lynn Golub-Rofrano, Executive Director Georgetown Village, Inc. P.O. Box 3563 Washington, D.C. 20027

Signature

Signature

Date

Date

Note: GV is a 501(c)(3) organization only Social Membership dues are partially tax deductible by law, as no goods or services are received. GV Tax Id # is 80-0641867 Members must be 55 years of age or older.

Member 1-Print Name

Member 2-Print Name