



Old North End Neighborhood iVillage Membership Application

Please share your information and return the completed form to a staff member or mail it to Innovations in Aging Collaborative at 1625 S. Murray Blvd. Colorado Springs CO 80916. The ONEN iVillage will not share any member information and will remain completely confidential.

Name:	Birth Year: Sex:	
Other family members living with you:		
Address:		
Phone Number: Em	ail Address:	
Household Information	Home Information	
Marital Status:	☐ Single Family Home☐ Multiple Family Home	
Household Composition:	☐ Apartment/Condo	
Pets:	☐ Single Level	
Language spoken in home:	☐ Multiple Level	
	□ Other	
Other:	Parking:	
Local Emergency Contact/Caregiver/Friend	Primary Physician:	
Name:	Name:	
Relationship:	Phone Number:	
Phone Number:	Thore Number.	
Address:	Preferred Hospital:	
Email:		
Eman.		

Health and Mobility Information					
 □ Oxygen Equipment □ Use of cane or walker □ Use of wheelchair □ Allergies (please describe) □ Other/Additional Information: □ Impaired Sight □ Impaired Hearing □ Diabetic □ Heart Condition □ Seizure Condition □ Use of cane or walker □ Use of wheelchair □ Allergies (please describe) 	Other/Additional Health and Mobility				
I am interested in receiving the following services:					
Transportation	ces may include but are not limited to: At Home Assistance	Food & Meals			
Volunteer Driver Accompany on transit Handyman Services Snow removal Lawn/garden maintenance Small repairs Air conditioner set up Change car battery Thermostat, smoke detector Change light bulbs Window screens on/off Picture hanging Refrigerator cleaning Holiday setup/take down Other:	Simple mending/sewing Dog walking Pet sitting Plant watering Gift wrapping Companionship Read books Play cards Board games Tea / coffee visit Daily phone check Neighborhood walk	Prepare or deliver meals Grocery shopping Paper Work Bill paying Medical insurance form help Organize personal papers Banking Technical Support Computer e.g. setup Printer troubleshooting Cell/smart phone Email/Social media/internet			

Membership Fees

Individual Membership	\$240 per year (Only \$20 per month!)	
Household Membership	\$360 per year (Only \$30 per month!)	

The Village: The ONEN iVillage is built around the simple idea that neighbors can help take care of other neighbors. By doing so, we reinvigorate a close-knit neighborhood community and help people of all ages and abilities stay in their homes, age in community, and feel comfortable in the Old North End. Membership is open to individuals and families of all ages who reside in the greater Old North End area.

Services: Services members can receive are dependent on the availability of volunteers. Services are provided through our group of neighborhood volunteers. Any services that cannot be provided by volunteers, such as major projects, health care needs, etc., the iVillage will assist members in finding a qualified provider through our vetted list of Age Friendly businesses and vendors.

Membership: Membership runs for a 12-month period from the date a member officially joins the iVillage. The annual fee may be increased as more services are added and the iVillage offerings continue to grow.

Privacy: The iVillage will take all reasonable steps to protect personal information of members. To connect a Member with a vetted vendor, at the Members request, the iVillage may disclose contact and other relevant information.

Reduced Fee Membership: Innovations in Aging Collaborative and the Old North End Neighborhood iVillage are committed to serving all ONEN residents that are in need of help. If you are unable to pay the full membership fee, please call us to discuss a reduced membership rate.

Household

Individual

Membership Type:

== ==						
I would like to be billed:MonthlyAnnually						
If monthly: I would like the ONEN iVillage to charge my credit card monthly						
I would like to have the ONEN iVillage auto withdrawal the amount from my checking						
(Contact Innovations in Aging if you would like to set up auto withdrawal from a checking account)						
Payment Information:						
I would like to pay byCheckCredit Card						
Checks payable to: Innovations in Aging Collaborative						
Credit Card Type:VisaMastercardDiscover						
Name on Card:						
Billing Address:						
Card Number:						
3 Digit Code: Expiration Date:						

MEMBERSHIP AGREEMENT

- **1. TERM** Membership is annual, renewing on the membership anniversary.
- 2. MEMBERSHIP FEES Fees are as determined from time to time by Innovations in Aging Collaborative and ONEN iVillage. Current membership fees are state on this application form. Membership fees do not include charges by third-party providers for activities or services in the a Member may participate.
- **3. ACTIVITIES AND SERVICES** ONEN iVillage acts on behalf of its members and the neighborhood to identify activities and services that may benefit members and communities in which members reside. The ONEN iVillage will make every effort to meet all reasonable requests. The Member understands that the iVillage may not always be able to fulfill every service request.
- 4. LIABILITY AND ASSUMPTION OF RISK ONEN iVillage and Innovations in Aging Collaborative seeks to provide opportunities that may benefit its members, but does not, however, assume any responsibility or liability, either director or indirect, in connection with, relating to, or arising out of activities and services in which members may participate as a result of membership in the ONEN iVillage, or activities or services provided by a third party that is a provider to ONEN iVillage members. The undersigned Member hereby assumes all risk for participating in any such services and/or contracting for or receiving any such services.
- 5. WAIVER, RELEASE, AND INDEMNIFICATION I, the undersigned Member, hereby fully release and discharge Innovations in aging Collaborative, ONEN iVillage, its members, officers, directors and employees from any and all claims, demands, causes of action, administrative claims, liability, damages, claims for attorney's fees, costs and disbursements, or demands of any kind whatsoever, including specifically third parties who may provide or make services available to ONEN iVillage members.

I, the undersigned Member, acknowledge that I have carefully read the foregoing WAIVER, RELEASE AND INDEMNIFICATION and understand that it has binding legal effect and is a waiver of claims and a release of liability.

ACCEPTANCE OF MEMBERSHIP AGREEMENT I, the undersigned Member, have read this

Agreement carefully and hereby agree to the terms of membership stated above. I am pleased

	to become a member of the		
 Prin	t Name	Signature	Date
For office use only: Accepted on behalf of ONEN		Village/Innovations in Aging Collaborative	
	Print Name	Signature	Date