



Northampton
Neighbors

Engaging in place

Membership Registration Form

Anyone can become a member of Northampton Neighbors and engage in our programs. Members ages 55+ who live in Northampton, Florence, and Leeds can receive services.

☐ I am registering as an individual

☐ I am registering with another household member.

Your Information

Name _____

Nickname _____ Date of Birth _____

Home Address

Address _____ Apt # _____

City _____ State _____ Zip Code _____

Mailing Address (if different from Street Address)

Address _____ City _____

State _____ Zip Code _____

Email Address _____

Phone Number: Landline _____

Phone Number: Mobile _____

Northampton Ward (circle one)

1A 1B 2A 2B 3A 3B 4A 4B 5A 5B 6A 6B 7A 7B

I don't know Other _____

Emergency Contact

Name _____

Relationship _____

Phone Number: Landline _____

Phone Number: Mobile _____

Schedule a Welcome Visit

A welcome visit from Northampton Neighbors is when we learn a bit more about you and hopefully answer any questions you may have about Northampton Neighbors. It is necessary before you can receive services from NN's volunteer team.

☐ Yes, Please contact me ☐ No, not at this time

Pioneer Valley Memory Care Initiative (PVMCI)

PVMCI serves older adults living with memory loss, dementia, and Alzheimer's disease and their family caregivers who reside in Northampton, Florence, and Leeds.

☐ I am currently enrolled in PVMCI ☐ Please tell me more about PVMCI

More Information

Please let us know if you'd like to learn more about the following (check all that apply):

- ☐ Receiving help ☐ Offering help
☐ Attending my Neighborhood Circle
☐ Leading or participating in an Interest Group.

Have a question or something to share? Tell us:



Spoken Language

Do you speak a language other than English at home? If so, what language?

I would like to ☐ receive interpreter services ☐ offer interpreter services

**NN request the following so that our programs relate to our membership.
NN respects your privacy and your choice to provide this information.**

I identify my gender as:

- ☐ Female
☐ Male
☐ Nonbinary
☐ I prefer to self- describe: _____

I identify as a member of the LGBTQ community.

☐ yes ☐ no

What racial and ethnic categories describe you?

- ☐ American Indian, Alaska Native or Indigenous ☐ Asian
☐ African ☐ Afro-Caribbean ☐ Black
☐ Hispanic, Latino/a/x or Spanish ☐ Middle Eastern or North African
☐ Pacific Islander or Native Hawaiian ☐ White
☐ I prefer to self-describe or to further describe my racial and ethnic identities:

Please skip to NN Membership Agreement on page 6 if you are the only member of your household registering for NN membership.



Other Household Member

Please indicate relationship to primary household member.

☐ spouse ☐ partner ☐ child ☐ other _____

Name _____

Nickname _____ Date of Birth _____

Email Address _____

Phone Number: Landline _____

Phone Number: Mobile _____

COVID-19 Vaccination Status

Date of your last COVID-19 Vaccine ____/____/____

(enter 00/00/000 if you have not received COVID-19 vax)

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☐

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☐

African

☐

Afro-Caribbean

☐

Black

☐

Hispanic, Latino/a/x or Spanish

☐

Middle Eastern or North African

☐

Pacific Islander or Native Hawaiian

☐

White

☐

I prefer to self-describe or to further describe my racial and ethnic identities:



NN Membership Agreement

Relationship with Third-Party Providers: Members will contract directly with and be billed for services by any third-party providers. NN will not under any circumstances assume any direct or indirect responsibility or liability in connection with services contracted for by its members with third-party providers recommended by NN.

Fees: Membership in Northampton Neighbors is free. Our goal is to remain self-supporting through donations, grants, and volunteer services. Members are encouraged to support us with sustaining tax- deductible donations, which are our primary source of income.

Privacy Policy: NN will take all reasonable steps to protect the personal information of its members. NN reserves the right to communicate with members' contacts or other appropriate people, as determined by NN, when health or safety needs require it.

NN reserves the right to take photos at activities, events and meetings of people and groups associated with NN and to use those photos for promotional or marketing purposes unless you have expressly informed us that you do not want your likeness used in this way.

Termination of Agreement: NN or the member signed below may terminate this Agreement at any time if they determine, in their discretion, that it is in the best interest of NN, its volunteers, other members, or the undersigned member.

Undertakings of Member

- 1) I accept the terms of this Agreement and am committed to NN's mission as a member-driven non-profit organization to provide access to support services and programs assisting seniors who want to live independent, engaged lives at home.
- 2) I hereby release NN and its representatives from and indemnify them against all responsibility of liability for services rendered to me/us by any third-party providers, NN employees or NN volunteers.



3) I agree to hold NN and its representatives harmless from, and reimburse them for, any costs, expenses or damages (including reasonable attorney's fees) arising in connection with any and all claims brought by or through me, including but not limited to claims brought by my insurance carrier.

This agreement is entered into between NN and the applicant for as long as the undersigned is current in all undertakings under this Agreement. I have read the Agreement carefully and I am pleased to become a member of Northampton Neighbors under the terms and conditions described above.

Signatures

Please sign and mail this completed form to:

Northampton Neighbors

PO Box 231 Northampton, MA 01061

(413) 341-0160

Signature of Primary Member

Date

Signature of Other Household Member (if applicable)

Date

Please volunteer with Northampton Neighbors

There is always lots to do! From stuffing envelopes, watering plants, neighborly visits and driving neighbors around town. You choose when it works for you to help out.

Would you like a Volunteer Application? ☐ Yes ☐ No

Please Consider Donating to NN

There is no membership fee for Northampton Neighbors. Therefore, we depend solely on the generosity of those who contribute to our mission of enabling older adults in our community to remain independent and engaged as they grow older.

Northampton Neighbors (NN) is a 501(c)(3) organization. Your tax-deductible donation is greatly appreciated. Contribute at northamptonneighbors.org or mail a check to Northampton Neighbors PO Box 231 Northampton, MA 01061

