



**MEMBERSHIP APPLICATION**

Name:

Date of birth:		Phone:
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Name:

Date of birth:		Phone:
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**HOUSEHOLD INFORMATION**

Address:

Email:	Preferred contact method:	
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Pets:	Pets:	
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Full time resident? Y N	Neighborhood:	
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**EMERGENCY CONTACT**

Name:

Address:	Phone:
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City:	State:	ZIP Code:
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Relationship:

**ADDITIONAL CONTACT INFORMATION**

Name of a friend or relative not residing with you:

Address:	Phone:
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**VILLAGE CONNECTIONS PAYMENT PLAN\***

Individual/Social/Household:	Monthly/Yearly Payment:
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**SIGNATURES**

I affirm the accuracy of the information provided on this form. I agree to hold Village Connections, their volunteers, officers, and board members harmless from and against any cost, expense, or damages (including attorney's fees) arising out of or in connection with any claims brought by me, on my behalf, or through me or my insurance carrier(s) relating to Village Connections.

I recognize the need for an annual renewal and Village evaluation, updating of critical information, plus payment of the annual fee. I grant Village Connections permission to contact the above Emergency Contact(s). Having read the above I am pleased to become a Member of Village Connections.

Signature of applicant:	Date:
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Signature of Village Connections Representative:	Date:
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\* Village Connections annual membership dues:

- Social Membership \$125; one or two person household, tax deductible, convertible, no services
- Individual Membership \$500; includes services
- Two Person Household \$750; includes services for both parties

Dues are payable by check, credit card, or ACH. Payments may be made monthly or annually.