



MEMBER APPLICATION

GENERAL MEMBER INFORMATION

Name:	Date of Birth	
Name:	Date of Birth	
Address:	City	Zip
Home Phone:	Cell Phone:	
Email:		
Communication Preference: Phone	Email	Text

EMERGENCY CONTACT INFORMATION

Name:	Relationship	
Address:	Phone No(s):	Email:
Name:	Relationship	
Address:	Phone No(s):	Email:

**Membership Fees: Individual \$300/yr; Household (2) \$400/yr
Payable by cash, credit card or check to YSNN**

YSNN MEMBER BENEFITS
Services from our list
Invitations to social events
Invitations to educational events
Website articles and information
Preferred service provider list
Being a volunteer

We will be adding services as we grow.

SERVICES			
Put check mark by services you are interested in receiving: If you do not yet need these services, would you be willing to volunteer to offer these services: Put a "V" by services for which you are willing to volunteer.			
Transportation (appts., shopping, errands)		Computer/technology	
Grocery shopping or errands for you		Visiting/check-in calls	
Referrals to local providers		Reading	
Light yard work		Snow shoveling	
Minor household repairs/maintenance		Walking/exercise partner	
Emergency pet care		Light housekeeping	
Other:		Other:	
How did you hear about Yakima and Selah Neighbors' Network?			
Do you have a pet?		What kind?	How Many?
Are you a smoker?			
Are there any current health needs or chronic conditions that would be helpful for us to know? If yes, please describe.			
I give permission for YSNN to use photos of me at YSNN events for promotional purposes.			
Signature:			

After your application is received, an interview or home visit will be scheduled during which we will discuss member services and benefits, review the member handbook and answer any questions you might have. Confirmation of membership will be made after the interview or home visit.

For more information contact YSNN:
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