

Yakima and Selah Neighbors' Network -MEMBER APPLICATION

GENERAL MEMBER INFORMATION

Primary Member Name:	Date of Birth	
Secondary Member Name:	Date of Birth	
Address:	City	Zip
Home Phone:	Cell Phone:	Cell Ph.
Email:		
Communication Preference: Phone Email Text		

EMERGENCY CONTACT INFORMATION

Name:	Relationship	
Address:	Phone #(s):	Email:
Name:	Relationship	
Address:	Phone # (s):	Email:

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

SERVICES

Please check mark by services you are interested in receiving.

Transportation (appts.,shopping, errands)		Computer/technology
Grocery shopping or errands for you		Visiting
Walking/exercise partner		Check –in calls
Occasional Light yard work		Reading
Minor household repairs/maintenance		Occasional Snow shoveling, (entry way, sidewalk)
Other		

I give permission for YSNN to use photos of me at YSNN events. Yes ____ No ____

YSNN-PO Box 11691

Yakima, WA 98909

www.yesneighbors.org | email: ysnn.wa@gmail.com | PH: 509-853-1917

Thank you for applying for membership with YSNN.

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 *NOTE we will take payment after this is complete. Thank you!

Signature:

