

Membership Application

Application Instructions

Thank you for your interest in joining Silver Spring Village! As a first step, please fill out this application as completely as possible. You may find questions marked with a red asterisk to be somewhat personal. Responses are optional, but they help us better understand and convey to funders how the Village reflects the broader community in which it operates. Such information is shared only in non-identifiable, aggregate form.

You may mail your completed application to Silver Spring Village, 8700 Georgia Avenue, Suite 306, Silver Spring, MD 20910. If you complete your application electronically, you may send it as a PDF to membership@silverspringvillage.org.

A Village staff member or volunteer will respond to your application as quickly as possible. If you are requesting Full Membership (see the "Membership Types" section below), we will contact you to set up an appointment for a visit at your home prior to finalizing your membership. The visit helps us better understand your needs and desires, and gives you the opportunity ask questions and make your first social contact with experienced villagers.

Membership Types

Associate Membership includes unlimited access to the Village's social, educational, recreational, and cultural events; a discount card for use with local merchants; an online subscription to *Washington Consumers' CHECKBOOK*; an information service about community resources for seniors; access to the Village's listserv; and optional membership in SkyPoint Federal Credit Union. Associate Membership is available to residents of any zip code.

Full Membership includes all the benefits listed above, plus unlimited access to volunteer-provided services. The Village's current menu of services includes transportation, friendly visits or phone calls, minor home repairs, accompanied or unaccompanied errands, home organizing, technology troubleshooting and coaching, medical notetaking, emergency preparedness, support teams, and more. While we do not guarantee availability of any service, we are generally able to fulfill about 90% of all requests. ***Full Membership is available ONLY to residents of zip code 20815 east of Rock Creek Park, 20902 east of Wheaton Regional Park (Kemp Mill), and all of 20901 and 20910.***

Annual Membership Fees

Associate Membership: \$180 (Individual) or \$295 (Couple)

Full Membership: \$380 (Individual) or \$495 (Couple)

For associate members, full payment of the annual fee is due at the time of application. For full members, payment is due following completion of the home visit.

If membership fees are prohibitive and you meet certain income and assets limitations, you may qualify for a reduced-fee membership. Because information about members receiving reduced fees is confidential, you must request a fee reduction application directly from the Village's executive director, Doug Gaddis, by emailing Doug.Gaddis@silverspringvillage.org or by calling 240.833.5582.

Questions? Call 240.833.5580 or email membership@silverspringvillage.org

Membership Type

Associate Individual
Associate Couple

Full Individual
Full Couple

Trial Individual
Trial Couple

First Member Information

Full Name:

Preferred Name or Nickname:

Complete Address:

Email:

Home Phone:

Mobile Phone:

Complete Birthdate (with year):

Gender*: Female Nonbinary Prefer Not To Answer
Male Other

Pronoun*: She/her/hers They/them/theirs
He/him/his Other

Race*: American Indian/Alaska Native Native Hawaiian/Other Pacific Islander
Asian White
Multi-racial Prefer Not To Answer
Other

Ethnicity*: Hispanic Non-Hispanic Prefer Not To Answer

Second Member Information (if applying for a Couple Membership)

Full Name:

Preferred Name or Nickname:

Complete Address:

Email:

Home Phone:

Mobile Phone:

Complete Birthdate (including year):

Gender*: Female Nonbinary Prefer Not To Answer
Male Other

Pronoun*: She/her/hers They/them/theirs
He/him/his Other

Race*: American Indian/Alaska Native Native Hawaiian/Other Pacific Islander
Asian White
Multi-racial Prefer Not To Answer
Other

Ethnicity*: Hispanic Non-Hispanic Prefer Not To Answer

Gender, pronouns, race, and ethnicity responses are optional, but they help us better understand how well the Village reflects the broader community. Data is shared ONLY in non-identifiable, aggregate form.

First Member Employment Information

Currently Work Full-Time	Currently Work Part-Time	Retired
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Career/Profession:

Second Member Employment Information (if applying for a Couple Membership)

Currently Work Full-Time	Currently Work Part-Time	Retired
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Career/Profession:

First Member Income Information

Income*:	Less than \$29,900	\$49,850—\$62,999	Prefer Not To Answer
	\$29,900—\$49,849	\$63,000 or more	

Total First & Second Member Income Information (if applying for a Couple Membership)

Income*:	Less than \$34,200	\$56,950—\$71,999	Prefer Not To Answer
	\$34,200—\$56,949	\$72,000 or more	

Household Information

Type:	Apartment/Condo	Townhouse
	Single-Family Home	

Neighborhood Name:

Year Moved to Silver Spring:

Composition:

Live Alone	Spouse/Partner
Other	

Children or Relatives Living Nearby:

Number/Types of Pets in the Home:

Transportation

Do you drive?	Yes	No
Usual Transportation:	Car	Metro/Bus
	Relative/Friend	Uber/Lyft/Taxi

Communications

Do you have internet access?	Yes	No
How do you prefer to receive Village communications?	Email	U.S. Mail

Washington Consumers' CHECKBOOK Online Subscription

Silver Spring Village offers an *online only* subscription to Washington Consumers' CHECKBOOK as a membership benefit. This resource can help you identify reliable and affordable repair services, stores, health service, personal services, and more. Subscribing is optional.

Do you want to subscribe?	Yes	No
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Email address for subscription (one per household):

Income responses are optional, but they help us better understand how well the Village reflects the broader community. Data is shared ONLY in non-identifiable, aggregate form.

Interests

Please tell us about your interests, hobbies, or special skills:

Volunteer Interests

Many Village members find ways to help their fellow members remain independent and connected by volunteering. Please indicate if you would like to learn about providing the following volunteer services:

Driving Other Members:	Yes	No	Maybe
Friendly Visits/Calls:	Yes	No	Maybe
Errands:	Yes	No	Maybe
Technology Coaching:	Yes	No	Maybe
Household Tasks:	Yes	No	Maybe
Storm Readiness:	Yes	No	Maybe
Gardening/Yardwork:	Yes	No	Maybe
Pet/Plant Care:	Yes	No	Maybe
Village Office Tasks:	Yes	No	Maybe
Neighborhood Ambassador:	Yes	No	Maybe
Social Media Ambassador:	Yes	No	Maybe
Programs/Activities Committee:	Yes	No	Maybe
Membership Committee:	Yes	No	Maybe
Fundraising Committee:	Yes	No	Maybe
Volunteer Committee:	Yes	No	Maybe
Board of Directors:	Yes	No	Maybe

How Did You Learn About the Village?

Broadcast/Print Media	Neighborhood Listserv/Newsletter
Friend/Neighbor	Relative
Live Presentation	Social Media
Healthcare Professional	Other:

Emergency Contacts (please provide at least two)

Name #1:
Relationship to Member:
Daytime Phone:
Evening Phone:
Email:
Street Address:
City/State/Zip Code:

Emergency Contacts (continued)

Name #2:
Relationship to Member:
Daytime Phone:
Evening Phone:
Email:
Street Address:
City/State/Zip Code:

Name #3:
Relationship to Member:
Daytime Phone:
Evening Phone:
Email:
Street Address:
City/State/Zip Code:

Emergency Contact With A Key

Please provide the name and contact information for a friend or neighbor with a key to your home that may be used in an emergency.

Name:
Relationship to Member:
Daytime Phone:
Evening Phone:
Email:
Street Address:
City/State/Zip Code:

First Member Optional Permissions

PHOTO RELEASE*: I grant permission to Silver Spring Village, Inc. to use my likeness, including photographs, video recordings, and audio recordings, in both print and electronic form for Village promotional purposes. I understand that Village events occurring in public spaces carry no expectation of privacy, and that in such cases, my likeness may be used without my specific consent.

Signature:

Date:

DIRECTORY LISTING*: The online Membership Directory is housed in a password-protected section of the Village website accessible only to members. It is a useful tool for making new friends and maximizing the benefits of membership. I grant permission to Silver Spring Village to include my name, address, email, and phone number(s) in the Membership Directory.

Signature:

Date:

First Member Optional Permissions (continued)

INFORMATION SHARING*: In the event a Village staff member notices or is notified of a marked decline in my health or living conditions, I authorize the Executive Director and/or the Director of Volunteer Services to share information with the person(s) listed below.

Signature:

Date:

Name:

Relationship to Member:

Daytime Phone:

Evening Phone:

Email:

Street Address:

City/State/Zip Code:

Second Member Optional Permissions (if applying for a Couple Membership)

PHOTO RELEASE*: I grant permission to Silver Spring Village, Inc. to use my likeness, including photographs, video recordings, and audio recordings, in both print and electronic form for Village promotional purposes. I understand that Village events occurring in public spaces carry no expectation of privacy, and that in such cases, my likeness may be used without my specific consent.

Signature:

Date:

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Signature:

Date:

INFORMATION SHARING*: In the event a Village staff member notices or is notified of a marked decline in my health or living conditions, I authorize the Executive Director and/or the Director of Volunteer Services to share information with the person(s) listed below.

Signature:

Date:

Name:

Relationship to Member:

Daytime Phone:

Evening Phone:

Email:

Street Address:

City/State/Zip Code:

Permissions may be withdrawn at any time by written request to the Village office or be email to operations@silverspringvillage.org

Membership Agreement

Background: Silver Spring Village ("the Village") is a nonprofit organization that enhances the quality of life for residents of Silver Spring by providing members with helpful services; social, educational, cultural, and recreational opportunities; and upon request, recommendations of third-party vendors. The Village strives to ensure the highest possible member satisfaction in the activities and services provided.

Scope of Services Limitations (Full Members): The Village cannot guarantee availability of volunteer services, especially those requested less than seven days in advance. The Village does not substitute for services or facilities designed to support individuals who can no longer live independently. The Village's volunteers may not provide personal care services such as feeding, dressing, and lifting and transferring; nor professionally-licensed services such as medication administration and certain home repairs. The Village reserves the right to deny or discontinue membership for an individual whose needs or expectations it is unable to fulfill.

Agreed-upon services limitations:

Agreement: I understand the above limitations and that the Village is not liable for any injury or other damages that may occur resulting from receipt of volunteer-provided services, participation in Village-sponsored activities, or purchase or use of goods or services from any third-party vendor recommended by the Village. As a condition of membership, I, for myself, my executors, and assigns, further agree to release and forever discharge the Village, and its agents, officers, employees, and volunteers from any claim that I might have myself or that I could bring on another's behalf regarding any damages, demands or actions whatsoever, including those based on negligence, in any manner arising out of membership.

First Member's Signature:

Date:

Second Member's Signature:

Date:

FOR OFFICE USE ONLY:

Membership Type Approved:

Associate Individual

Associate Couple

Full Individual

Full Couple

Trial Associate Individual

Trial Associate Couple

Approver's Signature:

Date: