



FISH (FRIENDS IN SERVICE HELPING) RIDER REGISTRATION

THANK YOU to the generosity of our volunteers!

Without them, we would not be able to provide our Senior community with these services!

Name: _____ Date of Birth: _____

Street Address: _____ Male Female

Town: _____ ZIP: _____ Do you have MaineCare? Yes No

Brief directions to your home: _____

Mailing Address (if different from above): _____

Home Phone: _____ E-mail: _____

Cell Phone: _____ Do you live alone? Yes No, I live with: _____

Special Needs (walker, vision, hearing): _____

Can you enter/exit a vehicle unassisted? **Car (low step):** Yes No **Truck (higher step):** Yes No

***NOTE: We cannot provide wheelchair transportation**

Emergency Contact Information

Name: _____ Phone: _____ Relationship: _____

Please note that all registrant information will be kept confidential and used by the FISH Program only.

I understand this is a program using Volunteer drivers who provide their time and mileage to help our community. I have read and agree to the following:

- ✓ I must give **at least four (4) business days notice** to FISH for all requests (one week notice is best)
- ✓ I understand that FISH rides are available during regular weekday hours (not weekend)
- ✓ I will not make requests of drivers beyond the initial purpose of the ride
- ✓ If my plans change or are cancelled, I will contact FISH/The Center immediately
- ✓ I have read and understand the enclosed **Driver and Rider Procedure Sheet**

I waive all claims of any type (including, but not limited to, personal injury) against FISH volunteers for their action or inaction associated with the Center (FISH). In addition to waiving all claims of liability against the above named entities, I indemnify them from any claims of liability from me or on my behalf.

Name (please print): _____ Date: _____

Signature: _____

Please send completed registration form to: The Center, 175 Port Road, Kennebunk, ME 04043

Questions? call 207-967-8514

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