

Amt Paid _____ Mo/Yr _____
Completed Form _____

Lathrup Village TimeBank (LVTB)

Membership Renewal Form

Please **complete both sides** of this form and mail them along with your check to:
Lathrup Village TimeBank, 27580 California Dr. SE, Lathrup Village MI 48076
For more info call Kim 248-424-7455 or Richard 248-569-5610

Any Changes? Yes No **Just fill in your name if no changes since last year. Thanks!**

First Name: _____ Last Name: _____

Address: _____

Home Phone: _____ Mobile Phone: _____

Email: _____

Preferred time: Morning Afternoon Evening Preferred method: Home Phone Mobile Email

Emergency Contact: _____ Relationship to you: _____

Daytime phone: _____ Evening phone: _____

Member's Signature	Printed Name	Date
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Parent/Guardian's Signature if Member is under 18*	Printed Name	Date
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I hereby give my permission for my minor child, named above, to participate in the Lathrup Village TimeBank and to make exchanges with other Lathrup Village TimeBank members.

Required for all members under 18. If this is a Family Membership, EVERY family member must complete and sign a form.

Yearly contribution made payable to Lathrup Village TimeBank (LVTB): _____ \$25 for individual _____ \$40 for family

Omissions or misrepresentation of information on your application may disqualify you from participation in the TimeBank. Affirmative answers to the following questions will not necessarily disqualify an applicant from participation.

Are you currently on probation or parole? YES _____ NO _____

If "yes" please describe the conviction and list the dates of your probation:

Have you ever been arrested, even though there was no formal conviction entered by the Court? YES _____ NO _____

If "yes", for what alleged offense?

Have you ever entered a plea under advisement? YES _____ NO _____

If "yes", for what?

Have you ever been required to register as a sexual offender? YES _____ NO _____

Code of Conduct Agreement

As a Lathrup Village TimeBank (LVTB) member, I agree:

1. To clarify all details* of my time transaction before meeting with my partner.
2. To respect my exchange partner's privacy and confidentiality.
3. To recognize that my TimeBank service is voluntary.
4. To respect my exchange partner's home, property, and valuables.
5. To refrain from smoking in or bringing pets to my exchange partner's home, unless invited to do so.
6. To post and maintain at least one offer in the Community Weaver database (our TimeBank software) with my availability. An exception would be that I am away from home.
7. To the concept that communication is key to a successful time exchange and that it is my responsibility to answer all LVTB phone calls and emails directed to me in a timely manner, the sooner the better and in at least two days.
8. To be notified via email from membership@ourtimebank.net of activity in my Community Weaver account and that it is my responsibility to check my email in a timely manner. When I receive email from membership@ourtimebank.net I will immediately go to the Community Weaver database to look at and respond to the email sent to me by another member.
9. To seek out, via the Community Weaver database, offers from other members that appeal to me.

* When the exchange involves services such as transportation, childcare, eldercare, plumbing, etc., it is the responsibility of the requestor ascertain the giver's competency to his/her level of comfort.

Lathrup Village TimeBank (LVTB) Liability Agreement

The Lathrup Village TimeBank (LVTB) is a community organization that facilitates service exchanges, community network and projects. Each member is responsible for his or her individual exchanges. Prior to the activation of exchange privileges, all members must sign and return this liability agreement. The agreement protects all of us.

Please check off the statements below as you finish reading them:

_____ I understand that, as a TimeBank, we offer neighborly services to each other. Members provide services to the best of their ability and do not guarantee their work. I understand that the LVTB is a coordinating agency and cannot guarantee the performance of anyone who is referred.

_____ I understand that expenses for any materials used will be the responsibility of the recipient, and expenses will be agreed upon before the service is delivered.

_____ I understand that the LVTB cannot be held responsible for any injury to persons or damage to property experienced while involved with the program. The applicant hereby agrees to hold the LVTB as well as its agents harmless from any and all claims or liabilities for any work performed hereunder.

_____ I agree that if I use my personal vehicle in rendering volunteer service through the LVTB, I will, in accordance with Michigan law, arrange to keep in effect adequate and legal automobile liability insurance covering bodily injury and property damage.

_____ I agree that all services I give or receive as a member of LVTB are on a volunteer basis, and that I do not expect to receive or give any money for those services, except if there are related material fees agreed upon in advance (for example, workshop materials or gas money).

_____ I understand that there will be immediate termination of membership of any member who has been found to harass, harm, or interfere with any other LVTB member or the LVTB organization.

_____ I agree to refer any complaints or concerns to LVTB and to refer any disagreements between LVTB members to LVTB.

_____ I certify that the information given on this form is accurate to the best of my knowledge.

Member's Signature

Printed Name

Date