

OUT AND ABOUT PENINSULA
Senior Transportation
Phone: 619 223-1640

Sign and return to:
1475 Catalina Blvd.
San Diego, CA 92107

New Member Application

Name _____ Birth Date ____/____/____

Address _____

City / Zip _____

Phone (____) _____ Email address _____

LOCAL EMERGENCY CONTACT- *Required*

Name _____ Address: _____

Phone (____) _____ Email: _____ Relationship _____

The following information is kept confidential and used only for statistical purposes. This has no bearing on your program eligibility.

1. **Are you able to drive?** Yes No

2. **Do you use a walker, cane, wheelchair?** Yes No

If yes, please explain. _____

3. **Do you live alone?** Yes No

4. **Do you have a caregiver that will accompany you on rides?** _____

4. **Medical conditions we should be aware of:** _____

5. **Do you need special assistance?** Yes No

If yes what type? _____

7. **How did you become aware of our program?** _____

8. **What is your primary language?** _____

9. **Have you been vaccinated for Covid-19? (REQUIRED)** _____

This information that I have provided is true and accurate to the best of my knowledge. I verify that I am a Peninsula resident (92106, 92107, 92110 South of I-8) sixty-five or older. I authorize representatives to contact persons whom I have listed in case of emergency. **I, the undersigned, understand and agree to follow the rules for participation in the van and volunteer escort programs. I and anyone entitled to act on my behalf, waive and release the Peninsula Shepherd Center, its Directors, Officers, Employees and Volunteers from any and all claims of liability of any kind arising from my participation in the transportation program. I hereby assume full responsibility for the risk of bodily injury, death, or property damage. I further agree that the foregoing Release and Waiver of Liability and Indemnity Agreement is intended to be as broad and inclusive as is permitted by the law of the State of California, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.**

Please Print Name: _____

Signature: _____ Date: _____