



Rapp at Home Friend Registration Form

We are pleased to have you register with Rapp at Home! We help our friends thrive as they age in their own homes by providing activities and services. Whether you need services, want to volunteer, want to meet your neighbors, want to participate in our activities, or just want to support our work, we hope you'll register with us in making Rappahannock a better place to live—it's free!

We provide services that include transportation; help finding caregivers (including Certified Nursing Assistants) and medical equipment; grocery and prescription pick-up; respite support for family caregivers; free Medical Alert devices and reflective emergency address signs, and installation; coordinating calls, meals, and other services for seniors who are ill; tech support and free iPad use; home safety inspections and small repairs and more.

Regular monthly activities include book club; Life Stories writing class; fitness and balance classes; country, village, and nature preserve walks; Conversations on Aging led by a retired psychologist; movies; games; lectures; arts and crafts demonstrations; and special events including presentations/discussions on topics with community-wide interest.

Please complete the information below; if you have any questions please contact us at 540-937-4663.

Please select which type of Friend you are registering as

_____ Household includes 2 people living in the same household

_____ Individual includes 1 person

General Information

Salutation _____

First Name _____

Nickname _____

Middle Initial _____

Last Name _____

Birthday (Month/ Day/ Year) ____/____/____

Home Phone _____

Mobile Phone _____

Email Address _____

Spouse/partner name _____

If this is a Household registration, please complete this section for the second person

First Name _____

Last Name _____

Birthday (Month/ Day/ Year) ____/____/____

Home Phone _____

Mobile Phone _____

Email Address _____

Mailing Address

Address 1 (street address or PO box)

Address 2 (apartment number) _____

City/Town _____

State _____ Zip Code _____

Physical Address (if different than mailing address)

Address 1 (street address, not a PO box)

Address 2 (apartment number) _____

City/Town _____

State _____ Zip Code _____

Additional Information

Rapp at Home general emails (please check your preference)

☐ I want to receive emails

☐ Do not send general emails

Newsletter (please check your preference)

☐ I would like to receive the newsletter by mail

☐ I will download the newsletter from the website

Emergency Contact Name _____

Relationship _____

Phone Number _____

Email Address _____

If you donate to Rapp at Home, are you be willing to be listed as a donor in our publications or on our web site?

☐ Yes

☐ No

Do you want to be listed in Rapp at Home's printed and online Directory?

☐ Yes

☐ No

Terms of Use and Privacy

International privacy regulations require that we obtain your explicit consent for the storage and usage of your personal data as listed below. For detailed information, you can request a copy of our Privacy Policy.

By checking 'I Agree' below, you certify that you agree with the Privacy Policy and agree to allow your personal information to be stored and processed in the USA by Club Express on behalf of Rapp at Home; to receive transactional messages (such as confirmation notices) sent by Club Express on behalf of Rapp at Home; and to share your personal information with third parties to conduct official village business (such as required for credit card processing for donations). Please note that, in accordance with the Privacy Terms, your information will not be sold or distributed to anyone other than as noted.

☐ I Agree Signature _____

Rapp At Home Inc. is a non-profit 501(c)(3) corporation founded by residents of Rappahannock County in 2015. Contact us at info@rappathome.org or 540-937-4663

Thank you for registering as a Friend of Rapp at Home. Please mail this form to Rapp at Home at PO Box 193, Washington, VA 22747