



Neighbor to Neighbor of South Carolina
PO BOX 3030
Myrtle Beach, SC 29578

Dear Neighbor,

Neighbor to Neighbor of South Carolina inspires in us the desire to help our fellow Neighbors who are homebound due to age, disability, and/or chronic illness in Horry and Georgetown Counties.

All of our drivers are unpaid volunteers who also donate their time, gas, wear and tear on their vehicles, and generosity to provide you or your loved one this service.

If you are happy with our program, consider giving a donation or asking a family member, friend, or fellow neighbor to donate to our 501 c3 non-profit organization. Donors may visit our website at www.gracefullyaging.org or may mail a check to the *Neighbor to Neighbor* program. All donations are tax deductible.



Be sure to complete the entire application including signatures. There will be a delay in processing your application if it is not completed in its entirety. Please return your completed application to:

Neighbor to Neighbor
PO BOX 3030
Myrtle Beach, SC 29578

Staff is available at **(843) 839-0702** to answer your questions. If you have internet access, like us on Facebook at www.Facebook.com/gracefullyaging. We would love to hear from you online too!

Sincerely,

The Neighbor to Neighbor Team

Neighbor to Neighbor PO Box 3030 Myrtle Beach, SC 29578	 	Phone: (843) 839-0702 FAX : (843) 839-0707	
Privacy Act Notice: According to Title 5, U.S.C. § 552a (Privacy Act of 1974) as implemented by the Federal Register, 32 CFR Part 505; Final Rule, protected personal information will not be disclosed from this application to any commercial enterprise or representative thereof or to any individual outside the Neighbor to Neighbor Program. This application will be safeguarded IAW paragraph § 505.2, of subject Federal Register. Obsolete copies will be destroyed. Failure to provide requested information will result in program participation denial. Additional information may be added on a separate sheet of paper.			
Please print and complete all sections. WITNESS SIGNATURE REQUIRED ON INDEMNITY FORM			
Section 1: GENERAL INFORMATION			
Name (First, Middle, Last Name):	Date of Birth: / /	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Age: ____
Street Address:	City:	Zip Code:	
Mailing Address (if different from above):	City:	Zip Code:	
Home Phone: () -	Cell Phone: () -	Email Address:	
Section 2: CONTACT INFORMATION. MUST HAVE 2 DIFFERENT CONTACTS, 1 LOCAL			
1. (First & Last Name) Local Contact	Emergency Number: () -	Relationship to Client:	
Mailing Address	City, State, Zip		
2. (First & Last Name) Different than above	Emergency Number: () -	Relationship to Client:	
Mailing Address	City, State, Zip		
Section 3: DEMOGRAPHIC INFORMATION			
Ethnicity: <input type="checkbox"/> Caucasian <input type="checkbox"/> African American <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Asian <input type="checkbox"/> Undisclosed <input type="checkbox"/> Other _____			
Church OR Organization Affiliation:	Living Situation: Number # of people in your household <u>excluding</u> yourself: _____ Marital Status (Circle): -M -S -D -W		
Do you receive SNAP benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you in the process of applying for SNAP benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No Which branch?		
Are you receiving MediCARE? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you <u>currently</u> receive MediCAID? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you applying for MediCAID? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Section 4: DISABILITY INFORMATION			
Do you claim <u>any disability</u> due to illness, injury, age, congenital malfunction, or other incapacity? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If YES, check all that apply: <input type="checkbox"/> AGE <input type="checkbox"/> MENTAL <input type="checkbox"/> PHYSICAL <input type="checkbox"/> CONGENITAL MALFUNCTION <input type="checkbox"/> OBESITY LOW INCOME <input type="checkbox"/> CHRONIC ILLNESS <input type="checkbox"/> HEARING LOSS <input type="checkbox"/> VISION LOSS <input type="checkbox"/> OTHER:			

SECTION 5: TRANSPORTATION INFORMATION

How often do you anticipate using Neighbor to Neighbor Services? (Circle one of the following)

Weekly

Bi-Monthly

Monthly

Are you severely allergic to animals? Yes No

Do you have a service animal? Yes No

Will the service animal accompany you during transports? Yes No

Why do you need Neighbor to Neighbor?

Will someone escort you on rides? Yes No

(If YES, ALL personal escorts must have a Passenger Release and Indemnification Agreement Form signed and on file in our office BEFORE a ride can be scheduled. Contact our office to have these documents sent to you.)

Can you get in and out of a vehicle without assistance?
 Yes No

Which vehicle types pose mobility **problems** for you?

- NONE Truck
 Small Large

Will you use any of the following **mobility aids** during a ride? Yes No

Briefly describe the weight, flexibility, and foldability of your mobility aids:

Cane _____

Oxygen _____

Walker _____

Wheelchair (We **cannot** transport wheelchairs)

Other _____

What do our volunteers need to know about you to better accommodate your needs? How did you hear about Neighbor to Neighbor?

Do you understand that by signing this application, you certify that: (i) the above information is correct to the best of your knowledge; (ii) you are at least 60 years of age, or at least 21 years of age with a permanent/temporary disability; and (iii) you will inform N2N of any and all changes to the information provided on this form within five (5) calendar days of its occurrence?

Yes No

Do you understand that by signing this application, you give N2N permission to use your contact information as provided herein so that you can obtain volunteer transportation services?

Yes No



Passenger Acknowledgment, Assumption of Risk, Release and Indemnity Agreement

YOU MUST INITIAL EACH BLOCK

**INITIAL EACH
BELOW**

<p>Assumption of Risk: I understand that: (i) my participation in the <i>Neighbor to Neighbor</i> transportation (“N2N”) program is voluntary; (ii) N2N, may restrict or limit destinations; and (iii) N2N, and any and all participating organizations and its employees are not legally required to offer or perform the transport service for me. I understand that these transportation services involve inherent and other risks. I expressly assume all such inherent and other risks and accept responsibility for any property damage and loss, and for any personal injury, illness, disability, emotional distress, and death that I may suffer as a result of my use of the N2N program.</p>	
<p>Waiver and Release: I agree to forever release and discharge (meaning I agree not to sue) N2N, its sponsoring and all participating organizations and/or agencies, individuals who provide funding to or other assistance or otherwise support the N2N program, their successors and assigns as their interests may appear, their officers, directors, agents, volunteers, employees, and their executors, administrators, personal representatives, heirs, beneficiaries, from any and all liability or claims I may have for any property damage and loss, personal injury, emotional injury, illness, disability, and death, related to my participation in the N2N transport program. This release is for any type of claim, including breach of contract, fraud, or any other type of suit that includes losses alleged to be caused by the negligence of N2N to the fullest extent permitted by law.</p>	
<p>Indemnity and Hold Harmless: I agree to defend, indemnify (meaning to pay or reimburse any amount required to be paid, including attorneys’ fees) and hold N2N (and all others specifically referenced in the Waiver and Release portion of this Agreement) harmless from all claims, causes of action, liability, losses, or damages for any property damage, property loss or theft, personal injury, disability, death or other loss brought by or on behalf of me, my successors and/or representatives, my estate, or any other person arising from or relating to my use of the N2N transport program and/or participation in these activities, including any claims that N2N was negligent.</p>	
<p>Acknowledgment of Policies: I acknowledge reading and understanding the N2N rules and regulations relating to my participation in the transportation program, and agree to comply with and abide by those rules and regulations. My failure to follow all such rules and regulations may lead to my termination from participation in the N2N program.</p>	
<p>Additional Provisions: I agree that the substantive laws of South Carolina (but not any law that would apply to the laws of another state) govern this Agreement, and any dispute I have with N2N, and consent to jurisdiction in South Carolina. Any mediation, suit, or proceeding will be entered into only in South Carolina. Any portion of this Agreement deemed unlawful or unenforceable is severable and shall be stricken without effect on the enforceability of the remaining provisions.</p>	

I, _____, the undersigned, have read this Agreement. I understand its contents and I sign it voluntarily. **I intend by this Agreement to assume all hazards and risks, waive all rights to sue and release all liabilities and claims, and indemnify N2N (and all those specifically referenced in the Waiver and Release portion of this Agreement) for any claims arising from my participation in the transportation activities.** I understand that this Agreement has **no expiration date** and remains in effect at all times that I am observing or participating in the transportation activities, and will be binding upon my, my family members, my representatives, my heirs, beneficiaries, assigns, executors, administrators, personal representatives, and estate.

(Participant's Signature)

Date: _____

Participant's Printed Name: _____

PARTICIPANT'S SIGNATURE WITNESSED BY:
(must be 21 years of age or older, and not associated with N2N)

(Witness Signature)

Date: _____

Witnesses' Printed Name: _____

Witness Phone

Witness E-mail Address

FAQ for Neighbor to Neighbor (N2N):

How do I schedule a ride once I've been approved for services?

Passengers must contact *Neighbor to Neighbor* by phone at (843) 839-0702 **at least three (3) full business days** in advance to schedule trip(s). Ex. For a request on Monday, you must schedule the prior Tuesday before 4:00 pm.

Office hours are Monday through Friday, 9:00 am to 4:00 pm. Messages left on the answering machine after 4:00 p.m. and on the weekend are returned the next business day.

Passengers must provide:

- **appointment time**
- **number of passengers**
- **destination address with zip code**
- **telephone number**
- **estimated return trip time**

Medical appointments require, in this order:

- **the group practice name**
- **the doctor's name**
- **complete address of office**
- **phone number**
- **appointment time**

Who is eligible to use Neighbor to Neighbor?

Homebound and ambulatory people 60 and older and homebound and ambulatory individuals with disabilities 21 and older are eligible for N2N's transportation service.

Note: **Neighbor to Neighbor cannot accommodate wheelchairs.** Other assistance equipment such as walkers and canes are acceptable but **must** be known before giving a ride.

For what types of rides can I use Neighbor to Neighbor?

Passengers 60 and over may utilize N2N for non-emergency medical appointments, grocery shopping, pharmacy visits, social service appointments, and other life-sustaining or life-enhancing appointments or events.

Passengers between the ages of 21-59 may utilize N2N for non-emergency medical appointments only.

N2N does not provide rides to the airport, medical rides requiring signing out patients, or Medicaid eligible transports.

Is Neighbor to Neighbor a local organization?

Yes. Neighbor to Neighbor is a 501 c3 nonprofit headquartered in Myrtle Beach and serves Horry and Georgetown Counties.

How much is my driver paid?

Our drivers are all volunteers and are unpaid. They donate their time, gas, wear and tear, and maintenance on their vehicles to provide reliable and safe transportation for all our passengers.

How much is a ride from Neighbor to Neighbor?

It costs N2N donors approximately **\$25 per ride** to provide this service to the community.

While there is no direct charge for rides, donations for rides are strongly encouraged from passengers, family members, friends, church groups, and civic groups. Help us advocate to keep N2N going!

Where would I or a family member donate to Neighbor to Neighbor on my behalf?

Drivers have donation envelopes with them for passengers to donate to our program.

Donors may visit our website at www.gracefullyaging.org to donate or may mail in a check to the *Neighbor to Neighbor* program:

Neighbor to Neighbor
PO BOX 3030
Myrtle Beach, SC 29578

Every donor receives a thank you letter to keep as a record of the donation for tax purposes.

I had a great experience with my volunteer, Neighbor to Neighbor staff, a board member, etc. How do I show my thanks?

We love hearing from you and love receiving letters, cards, phone calls, and messages of great experiences! Please tell us of your great experience to help brighten our days.

How many rides can I have?

While there is no official maximum number of rides, our Mobility Managers report to staff on passengers requesting many rides a month. The reason for this is to keep an eye on passenger needs and to refer passengers as needed to more comprehensive services that may be beyond the help *Neighbor to Neighbor* can provide.

Please remember, if N2N cannot find you a ride, you will be notified 24 hours before the scheduled ride so other arrangements can be made.

How many destinations can I go to on a ride?

Having multiple destinations is not a problem for scheduling; however, the total trip cannot exceed 2 hours. All rides are at the discretion of the volunteer. *Please remember to be mindful of the volunteer and their time.*

How will I be able to identify my N2N driver?

Look for the **N2N** sign on the dashboard of the vehicle and the volunteer's name badge.

How long can my trip be?

Quality of life trips are a maximum of 2 hours. Letters informing passengers of this policy are sent after 2 infractions of this policy. Excessive abuse of this policy will result in a termination from the *Neighbor to Neighbor* program.

Why doesn't my driver give me their number so I can call them for rides and why should I not call my driver for ride requests?

Volunteers are advised during orientation to not give out their personal number to passengers. Drivers will call you before your ride to confirm the ride. If no driver has called 24 hours before your ride, call the office at **(843) 839-0702**.

All ride requests must be made through the main office at **(843) 839-0702**.

The *Neighbor to Neighbor* staff and office volunteers administer and coordinate the ride for you and the volunteer. Having the ride on record and in our software prevents confusion and is necessary for legal reasons, which ultimately protect you, the volunteer, and the agency.

If I call and schedule a ride, is my ride guaranteed?

No. Ride requests are never guaranteed as we are volunteer based. However, **N2N** has provided over 36,000 successful transports. If we find you a volunteer, we have a 96% chance your ride will be fulfilled. If a volunteer has an emergency and cannot fulfill their trip, our office will contact you immediately to help you find a ride.

When are rides available?

N2N provides rides daily, depending on the availability of volunteer drivers. Please note the office is closed on weekends, on all major holidays and **the ride request schedule is adjusted accordingly.**

How far will *Neighbor to Neighbor* go for a ride?

Neighbor to Neighbor volunteers primarily cover local transports from Little River Horry County down to Pawleys Island in Georgetown County. We will work with you to help accommodate your ride as best we can. Please allow us more time to plan for trips over 35 miles. **Please schedule longer distance and rush hour rides as early as possible as there are fewer drivers for these rides.**

What if I need to cancel a scheduled trip?

Call the office immediately at (843) 839-0702. **N2N's** office needs to know so we can tell your

driver as soon as possible that the trip is canceled. The office needs to know why the trip is canceled so there is a record of this cancellation.

What do I do if I have concerns about a driver?

While we do our best to ensure you have the best experience possible, we want you to feel safe letting us know of any concerns you have regarding a driver. Call the office immediately and ask for Sharon Roberson. Give her the name and details of your concern so the information can be processed. Each case is handled delicately and respectfully. Telling us your concerns will never be used against you to stop services from *Neighbor to Neighbor*.

Can a spouse or caregiver accompany me?

Yes and this must be indicated on your application as well as when scheduling your ride.

No passenger under 21 is allowed to be transported.

Note: A separate application must be on file in the office before the ride can be scheduled.

What if I am running late or want to make an unscheduled stop?

Drivers are only responsible for providing transportation to the pre-arranged destinations in the trip request. All additional stops are up to the volunteer, and must be accounted for to N2N staff for insurance purposes.

If you anticipate a stop, for example, to get a prescription after a medical visit, please let staff at *Neighbor to Neighbor* know before we assign your trip.

Excessive Cancellation / No Show Policy:

Repeated cancellations or no shows inconvenience our drivers and staff and impact our ability to serve our other passengers. Repeated cancellations or no shows without merit will result in a suspension or termination of service.

What if I only need a one-way ride?

N2N accommodates one-way ride requests.

How are volunteer drivers chosen?

Each driver has attended orientation, passed a criminal background check, and a driving record check to ensure each passenger is in safe hands.

What is N2N's inclement weather policy?

To ensure the safety of our drivers and passengers, either the driver or the passenger may cancel a ride by calling the office. If the driver is willing to drive in questionable weather, **N2N** will contact the client to confirm that the client still wants the ride. If possible, the **N2N** office will remain open to handle notification of cancellations.