

Request for Transportation



Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
E-Mail Address	

Purpose of trip

Medical appointment
 Shopping
 Other – explain >>>>> _____

Details of trip

Please provide all the information requested

___ Exact date and time of pick up _____

___ Location of pick up: ___ your home address above. Other _____

___ Phone: ___ cell phone above. Other phone at pick up location _____

___ Exact location of destination _____

___ Phone at the destination ___ cell phone above Other _____

___ Is this trip _____ one way _____ round trip

___ How long will you be at the destination location _____

___ Does the drive need to stay and wait _____ Yes _____ No

Of can the drive leave and return for pick up _____ Yes _____ No

___ If the driver leaves, when should they return? _____ elapsed time, example 1 hr

_____ or time of day, example, at 2:00pm

___ Will the pick-up location be _____ the same as the drop off location

A different location: please specify _____

___ Identify any special needs, such as

Mobility: _____ cane _____ walker _____ transport chair

(The Village is not currently able to provide transportation for members in wheelchairs)

Are you able to get into and out of a vehicle on your own _____ Yes _____ No

Can you walk up steps _____ Yes _____ No

**** continued on back ****

Additional Information

Please provide any additional information that you feel will help us provide the best service for you.

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Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
E-Mail Address	

Agreement and Signature

By submitting this application I understand and agree to the guidelines under which the Greater Stomegate Village is providing this transportation.

Name (printed)	
Signature	
Date	

Our Policy

The GSV does not guarantee that transportation will be available at all times for members with special needs or at any specific given time. If a special need cannot be accommodated, the member will be notified within 24 hours.

The GSV Board reserves the right to modify any and all of the transportation guidelines as necessary. Specifically, this may apply to but is not limited to, number of trips per week; maximum number of trips per year, maximum one-way distance of any one trip and purpose of trip.

Thank you for completing this application form. We will now promptly arrange for your transportation. A Village representative will contact you with further information.