



## Membership Form: Group Transport.

Please supply **all** this information. Section 19 Transport is **only** available to **Not For Profit** groups and organisations.

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**Name of Group /  
Organisation**

**Street Address**

**Post code**

**Invoice Address  
(if different)**

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**Contact Name.  
(authorised to  
make bookings).**

**Phone Number**

**Mobile Number**

**e-mail address**

**Emergency  
Contact Name &  
Number.**

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**Please confirm      Yes      No  
your group is  
Not For Profit**

**Please describe  
your group and  
it's activities.  
(e.g. Youth,  
Residents  
social, Support  
Group etc.)**

**Please describe      Older People  
your groups      Disabled People  
defining      Young People  
characteristics:      Ethnic Minority  
Other**

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**Please return to:**

**[redrose@prestonct.org.uk](mailto:redrose@prestonct.org.uk).**

**Preston Community Transport. Preston Mobility Centre. 28  
Friargate, Preston. PR1 2AU. 01772 204667.**