

# Preston Community Transport.

This information will help make your trip go smoothly, please complete all sections.

**Group / Organisation Name**

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**Date of your trip**

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**Full address of pick up location**

**Pick up time.**

**Full address of your Destination**

**Full address of return pick up location: if different from above.**

**Return pick up time.**

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**Do you need us to organise a driver for your trip? If "NO", please tell us the name of your driver.**

**Yes  
No.**

**Your Drivers Name:**

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**Number of seated passengers.**  
Please indicate no. of children under 14.

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**Number of passengers using a foldable wheelchair who can transfer to a seat.**

**Number of passengers using a wheelchair which they'll stay in.**

**Dimensions of the wheelchairs - gross weight, height, width and length.**

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**No. of passengers with a 3 wheel, foldable walker.**

**No. of passengers with a 4 wheel, foldable walker.**

**No. of passengers with a shopping trolley.**

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**Name and contact details for the person making this booking.**

**Emergency contact details - someone who is NOT on the trip.**

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**No. of assistance dogs**

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**Any other information about the trip, your passengers, the pick-up or destination etc. which will assist our drivers when planning the trip.**

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**Please E-mail this form as early as possible - but at least one week in advance of your trip to: [redrose@prestonct.org.uk](mailto:redrose@prestonct.org.uk)**

**Alternatively you can complete it, print it out and post to: Group Transport Coordinator. Preston Community Transport. Preston Mobility Centre, 28 Friargate. Preston, PR1 2AU.**

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