



Membership Form: Individual Transport.

Please supply **all** this information. It is a legal requirement that every passenger on our vehicles is a member of the organisation.

Full Name & Title

Street Address

Post code

Phone Number

Mobile Number

Gender

Male

Female

Date of birth

**Emergency Contact
Name**

**Contact Phone
Number(s)**

Relationship to you

Do you own or have easy access to a car? **Yes**
No

Do you find it difficult to use public transport?
Please tell us why.

Do you consider yourself to have a disability? **Yes**
No

The Disability Discrimination Act defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long term effect on their ability to carry out normal, everyday activities.

Which of our door-to-door transport services are you interested in?

Dial-A-Ride (Shopping etc.).
Day Trips. e.g. Bury Market.
Community Car Schemes.

What is it you want to do?

What is your cultural and ethnic origin?

Prefer not to say

check here

Please return by e-mail to: redrose@prestonct.org.uk.
Or post to: Preston Community Transport. Preston Mobility Centre. 28 Friargate, Preston. PR1 2AU. (01772 204667)