

NOTE: Rides must be scheduled at least two business days (48 hours) in advance of the appointment time.\*



Non-Emergency Medical and Leisure Transportation

### Primary Contact Information

Name:

Email:

Phone Number:

### Passenger Information

Name:

Address:

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

☐ Yes, I agree to receive text messages from Transit Adventures at the phone number(s) provided above. Messages may include driver status, appointment status, and etc.

Age Range: Under 18 \_\_\_\_ 18-34 \_\_\_\_ 35-64 \_\_\_\_ Over 65 \_\_\_\_

Gender (optional): \_\_\_\_\_

### Responsible Payee Information

Name:

Address:

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

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### Journey Information

Single Trip \_\_\_\_ OR Round Trip \_\_\_\_

Date of Appointment:

Time of Appointment:

Requested Pick Up Time:

Pick Up Address:

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Drop Off Address:

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

### Additional Accommodations and Details

Escort Needed? Yes \_\_\_\_ No \_\_\_\_

Name of Escort (one guest permitted):

\_\_\_\_\_

Will the passenger need assistance at the front door at either destination?

Yes \_\_\_\_ No \_\_\_\_

Will the passenger need the driver to wait? (Note additional wait rate- \$20 per 30 minutes weekday; \$30 weekend/holiday)

Yes \_\_\_\_ No \_\_\_\_

Will the passenger journey require a Transit Adventure attendant to accompany the driver? (Note additional rate for attendant-\$20 weekday; \$30 weekend/holiday)

Yes \_\_\_\_ No \_\_\_\_

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Additional journey details that will enable a successful experience: