

## Ride Assist Naperville (RAN) Rider Application and Release

Client Name:						unity OR name:				
Phone Number:	Home:				Email A	Address:				
	Cell:									
Street Address:					City an	d Zip Cod	e:			
Township:					County	<b>/:</b>				
Race and Ethnicity: (optional)					Birthda	ite:				
Are you a veteran?	☐ Yes ☐ No				Do you someo	live with ne?		☐ Yes	□ No	
Will someone accompany you?	☐ Yes ☐ No				If yes, list them and your relationship:					
Do you have any limitations?	□ Cane		Walker □ Wi		neelchair	□ Vision		☐ Hearing	□ Oxygen	
Additional information:										
What best describes your income level? (Circle One)	Household Annual Income									
	1 Person	\$0 - \$18,750		\$18,751 - \$31,200		\$31,201 - \$49,950		\$49,951+		
	2 People		\$0 - \$21,400		\$21,401 - \$35,650			\$35,651 - \$57,050	\$57,050+	
Emergency Contact Info	rmation:									
Name:	Relati				ationship	to you:				
Mailing Address:	City,				y, State, Z	ip:				
Home Phone:	Cell F				Il Phone:	Phone:				
Email Address:	Com				mments:					
CLIENT RELEASE: In consid release Ride Assist Napervill respect to said transportatio arising from this service. My	le and its officers, n and the arrange	directors ment for s	, board mem said transpo	ibers, emp rtation and	loyees, and agree to ho	volunteers ( old harmless	"Relea	sed Parties") from of the Released Pa	all liability with	
Client Printed Name:						Date:	Date:			
Client Signature:						Witness				
	lications will b	•	•		of this con	npleted & s	•	• •		
	e Assist Nape Off		•		•	uite 141 # .m1:00p		Naperville, IL	60563	