

Booking Form

Contact details	
Please circle:	Mr Mrs Ms Miss
First name:	Surname:
Date of Birth:	Country of Birth:
Address:	
Suburb:	Postcode:
Mobile:	Home phone:
Email:	
Mobility Aids	
Please tick appropriate box below	
None <input type="checkbox"/>	Wheelchair <input type="checkbox"/>
Walking Frame <input type="checkbox"/>	Walking Stick <input type="checkbox"/>
Emergency Contact Information	
First name:	Surname:
Address:	
Suburb:	Postcode:
Mobile:	Home phone:
Email:	
Relationship:	

Ambulance Permission	
I understand that if City of Rockingham staff or volunteers believe I require an Ambulance, due to illness or injury sustained while travelling on the Rockingham Connect, one will be called and the cost will be borne by me.	
Signature	Date

Eligibility criteria (please tick)				
Do you have access to a car? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Can you access public transport? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Do you have a low income or a health care card? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you physically able to enter and exit the bus? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Booking Details:				
Booking type: Casual <input type="checkbox"/> Regular <input type="checkbox"/>				
Please tick boxes below to indicate which service(s) you are interested in				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Autumn Centre <i>Weekly</i> <input type="checkbox"/>	Autumn Centre <i>Weekly</i> <input type="checkbox"/>	Autumn Centre <i>Weekly</i> <input type="checkbox"/>	Rockingham Shopping Centre <i>Weekly</i> <input type="checkbox"/>	Autumn Centre <i>Weekly</i> <input type="checkbox"/>
Social Connection Luncheon <i>Monthly</i> <input type="checkbox"/>	Spud Shed <i>Fortnightly</i> <input type="checkbox"/>	Safety Bay Library <i>Fortnightly</i> <input type="checkbox"/>	Rockingham Shopping Centre <i>Fortnightly</i> <input type="checkbox"/>	Bunnings <i>Monthly</i> <input type="checkbox"/>
		Warnbro Shopping Centre <i>Fortnightly</i> <input type="checkbox"/>		
Declaration				
I declare that the information provided in this application is true and correct. I understand that I must be physically able to enter and exit the Rockingham Connect bus unaided, utilising the step and hand rails provided.				
Signature			Date	

A confirmation letter will be sent to you once your booking has been completed.

Please note each service is subject to availability. Cancellation of a service must be communicated to the Project Officer Community Transport by 12 noon the day prior to the scheduled service.

Bookings must be made 24 hours in advance, and must be communicated to the Project Officer Community Transport on (08) 9528 8562.