



# PVTA Rider Registration Form

Service: GA NF CL SD

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Date \_\_\_\_\_ Rider ID # \_\_\_\_\_  
mm/dd/yy

Name \_\_\_\_\_  
First Last

Address \_\_\_\_\_  
Number Street Unit # E-mail

City \_\_\_\_\_ Zip \_\_\_\_\_ Dist. \_\_\_\_\_ Phone \_\_\_\_\_

Year of Birth \_\_\_\_\_ Male  Female  Do you have a disability? Yes  No

Nature of Disability Mob/ Frail W/C COG Vision Other Do You use a mobility aid? W/C Other

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Do you and your wheelchair weigh more than 600 Lbs.? Yes  No

Who should we contact in case of an emergency?  
Name \_\_\_\_\_ Phone \_\_\_\_\_

Do you feel you are able to ride Get About without assistance? Yes  No

Do you have reasons to travel outside the Get About service area?  
(Claremont, La Verne, Pomona, San Dimas) Yes  No

If I am a minor, person under the age of 18, my parent or guardian has read and understood the information above and gives consent to the City of Claremont and Pomona Valley Transportation Authority to obtain my personal information as provided in this application for transit services.

Signature of parent or guardian \_\_\_\_\_ Date \_\_\_\_\_

Name of parent or guardian \_\_\_\_\_  
Please Print

The personal information collected from this registration form will be used only for its intended purpose and will be stored in accordance with federal and state law. Information will not be sold or shared with outside parties.

For Office use only:

Sponsor Nutrition Programs

RC	CC	PDC	CL	LV	PO	SD
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Permanent  Temporary  Expiration Date \_\_\_\_\_  
mm/dd/yy

Notes: \_\_\_\_\_

Completed By: \_\_\_\_\_

**If you have questions about this form, call PVTA at (909) 596-7664**