



Paratransit / Rural Community Access Registration Form

Paratransit Rider ☐

Rural Community Access Rider ☐

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Registration Number- Office Use Only

All applicants must complete parts A - D. Only complete Part D if children will be riding with you on the bus; Part E if a mandatory attendant is required.

Part A: Personal Information

To be completed by the applicant / guardian

Name: _____

Billing Address: _____

Home #: _____ Cell #: _____

Emergency Contact: _____

Relationship to applicant (or children): _____

Part B: Travelling Information

To be completed by the applicant

Physical Address (Pick Up location): _____

Which primary mobility aid(s) do you use when traveling in the community?

None		Long White Cane		Powered Wheelchair	
Walking Cane		Crutches		Collapsible Walker	
Leg Braces		Interpreter/Intervener		Manual Wheelchair	
Service Animal		Hearing Aid		Walker	
Personal Attendant		Oxygen Tank		Other	
Communication Devices		Prosthesis			

Part C: Additional Information

To be completed by the applicant

Please provide any medical conditions or additional information that may be relevant to this application:

I hereby declare that the information provided above is true and correctly represents my condition

Applicant's Signature

Date

The personal information on this form is collected under the authority of section 33(c) of the Freedom of Information and Protection of Privacy Act and shall be used only for the purpose for which it is collected. If you have any questions about the collection, contact the CABP Coordinator at 780-623-6763.



LAC LA BICHE COUNTY Community ACCESS

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Part D: Names of Children To be completed by the parent / caregiver

FIRST NAME	LAST NAME	BIRTHDATE

Part E: Mandatory Attendant: Personal Information To be completed by the attendant

Name: _____

Address: _____

Home #: _____ Cell #: _____

Emergency Contact: _____

Home #: _____ Cell#: _____

Relationship to applicant: _____

Additional Information To be completed by the attendant

Please provide any additional information that may be relevant to this application:

Signature & Date To be completed by the attendant

I hereby declare that the information provided above is true and correct.

Attendant Signature

Date

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Rider Reminders

It is the Paratransit / Rural Community Access rider's responsibility to:

- Book trips at least one day in advance, same day bookings may not be accommodated.
- Cancel a booking at least one day in advance. No shows will be charged a one-way fee of \$4.00 for urban Paratransit trips; \$8.00 for a rural trip.
- Be ready 10 minutes before your scheduled pick-up time.
- Always follow the Operator's instructions while boarding, riding, and exiting the Community Access Bus. Children not adhering to directions from the driver may be barred from using the service.
- Wheelchair and scooter users must ensure that all parts of the mobility device are in good working condition. (i.e. brakes, seatbelt)
- Wheelchair and scooter users must wear the seatbelt attached to the mobility device, as well as the seatbelt provided by the paratransit securement system.
- Wear appropriate clothes and footwear for the weather.
- All locations must be accessible and be kept free of snow and ice, or service cannot be provided.
- CAPB Operators are not responsible for assisting with parcels, groceries etc.
- Registrants displaying unacceptable behavior that affects other passengers and/or the Operator will be required to always ride with an attendant.
- If a mandatory attendant is required, the registrant will not be able to book any trips for travel without a mandatory attendant. **Part D of this Application must be filled out by the attendant.***

Definition of Mandatory Attendant:** A mentally competent person of legal age (18+ years) who is responsible for the actions and assistance of a registered client that requires assistance due to medical conditions and/or behavioral concern while utilizing the services of the CAPB. ***Mandatory attendants ride free when riding with a registered Paratransit rider.

Completed registration forms can be returned to a Community Access driver, dropped off to the CAPB Coordinator at the Bold Center at 100 8702-91 Ave Lac La Biche, AB T0A 2C0, fax to 780-623-3510, emailed to fcss@lACLbichecounty.com, or mailed to:

FCSS – Paratransit
Lac La Biche County
Box 1679
Lac La Biche, Alberta T0A 2C0