Register now and start travelling

and minormation you give	e us is confidential	
Title		
Surname		
First Name/s		
Known as		
Date of Birth		
Address		
Landline		
Mobile		
Email		
Bus Pass No. (if applicable))	
DO YOU USE ANY WHEN TRAVELLIN Wheelchair Walking Aid	OF THE FOLLOWING G? Shopping Trolley Guide Dog	
Carer		
Other (please specify)		
Other (please specify)	telephone number of a friend o case of an emergency	 r
Other (please specify) Please give the name and		r
Other (please specify) Please give the name and relative we can contact in a Blue Badge Holder? This leaflet, with our	case of an emergency	r

PLEASE SEND THIS FORM WITH YOUR £20 ANNUAL FEE OR CALL US TO PAY OVER THE PHONE

Two people from the same address can join for $\mathfrak{L}35$.

Please see Terms and Conditions for further details and charges.

GREEN COMMUNITY TRAVEL LTD

The Yard, 390 North Road, Yate South Gloucestershire, BS37 7LW

I apply to register with Green Community
Travel Ltd and agree to abide by their
terms and conditions

		and conditions.	,
Signature			
Date			
We'd be g	rateful if	you could comp	lete the
informatio	n to help	us monitor our	policy.
		r the effectiveness of spolicy (tick box whe	
What gende	(if any) do	you identify with?	
or prefer not	to say		
I consider m	yself disab	led	
What is your	ethnicity?		
(tick box whe	ere approp	riate)	
White		Black	
Asian		Chinese	
Other			

Please use this space below to note anything else you think we may need to know: