



THE ATHENS VILLAGE/RETIRED SENIOR VOLUNTEER PROGRAM

RIDER AGREEMENT

RIDER INFORMATION

Last name:		First:			
Street address:		Cellphone no. ()	Home phone no.: ()	Age:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F
City:		ZIP Code:			
Instructions for getting to your home or pick-up point					

Referred to ride service by (please check one box):

TAV Friend Family RSVP Other

Do you need special assistance to get into or out of the car? If yes, what? Will you be accompanied by a caregiver or assistant?

PICK-UP INFORMATION

What color is the house?	Easy to see from the road?	What color is the mailbox? Is it easy to see from the road?	Is the driveway curvy/long/other consideration?
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I understand that the driver is a trained RSVP volunteer, and does not represent a paid taxi service. I understand that no money will exchange hands for this service. However, I may make a donation to the RSVP/TAV project. Details are in the project user manual

I waive all claims arising out of the transport whether caused by negligence, breach of contract or otherwise, and whether for bodily injury, property damage or loss or otherwise, that I may ever have against The Athens Village or RSVP, its successors and assigns, and its officers, directors, agents (e.g., volunteers), and employees, and their executors, administrators and heirs.

I have received a copy of the manual for The Village Shuttle project or read the information on line and understand my rights and responsibilities as a rider.

The information below is important IF the rider's car is being used, NOT the driver's car

Name of rider's insurance company	Subscriber's name:	Group no.:	Policy no.:
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Rider's relationship to subscriber: Self Spouse Child Other

IN CASE OF EMERGENCY

Name of local friend or relative (not living at same address):	Relationship to rider:	Home phone no.: ()	Work phone no.: ()
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The above information is true to the best of my knowledge.

Rider's signature

Date