



Monroe Senior Transportation Program Application



This program is provided by the East County Senior Center and is partially funded by a grant from The City of Monroe. All information is confidential, is for the use of the senior center, and will not be shared with others.

Name: _____

Address: _____

(All riders must live within the city limits of Monroe and must be 60+ years of age or 18+ and disabled)

Telephone: _____ Email: _____

Do you currently use the services of DART or TAP? Yes No

How old are you? _____ Are you disabled? Yes No

Do you use a walker? Yes No

Do you use a wheelchair? Yes No

Can you shop or go to the doctor alone? Yes No

Do you have a caregiver? Yes No

If yes, will he or she go with you on your trips? Yes No

Have you read and agree to abide by the guidelines on the reverse side? Yes No

Name and phone number of emergency contact:

Signature of applicant _____

Date: _____