

GERRARDS CROSS PARISH COUNCIL

TAXI CONCESSIONARY FARES SCHEME

APPLICATION FORM

Personal Details:

Name _____

Address _____

Gerrards Cross

Bucks. SL9

Date of Birth _____

Telephone Number **01753** _____

This scheme is for residents of Gerrards Cross who are over 60 and have problems getting to:

1. Calcot Medical Centre and Health Clinic or Misbourne Surgery Chalfont St Peter.
2. Gerrards Cross & Chalfont St Peter Hospital
3. A Dentist or Optician in Gerrards Cross or Chalfont St Peter.
4. Wexham Park, Heatherwood, Amersham General, Mount Vernon, High Wycombe Hospitals and Princess Margaret Hospital.
5. To visit an immediate family member at one of the Hospitals in section 4.

The following information is not compulsory but would be helpful to the Parish Council in administering the scheme.

Which transport service have you used in the past? _____

Do you use a mobility aid? _____

Are you Disabled or partially sighted? _____

Do you live alone? _____

Signature of Applicant _____

Date: _____