

# Applicants for Seniors (60+)

## C-Tran Registration Form

*\*Please Print Neatly\**



### Client's Primary Address:

### Client Information:

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_

Apartment: \_\_\_\_\_

City: \_\_\_\_\_

State: NC Zip Code: \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_

Work Phone (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

### Demographics:

Gender \_\_\_\_\_ Date of Birth: \_\_\_\_\_

(F/M)

(Month/Day/Year)

Do you require any of the following (circle Yes or No)

Assistant: YES NO Wheelchair: YES NO

Walker: YES NO Oxygen: YES NO

Service Animal: YES NO Other: \_\_\_\_\_

### Emergency Contact Information:

Emergency Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone (DAY) (\_\_\_\_) \_\_\_\_\_

Phone (NIGHT) (\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_

**NOTE: This form should be completed at the Cary Senior Center located at 120 Maury O' Dell Place; Cary, NC 27513. For questions, please call (919) 469-4081.**

**\*IF YOU NEEDED TO RESERVE YOUR INITIAL RIDE & SCHEDULE FOR PICK-UP, CALL (919) 481-2020, Dial Option #3.**

### TO BE COMPLETED BY STAFF ONLY:

#### Verified:

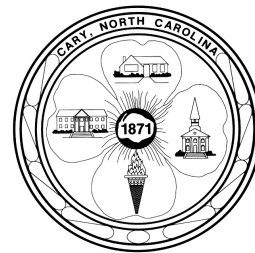
Citizenship Verified on Cary GIS  \_\_\_\_\_

Age  \_\_\_\_\_ Staff \_\_\_\_\_ Mailed \_\_\_\_\_

Form Faxed To C-Tran &  Staff \_\_\_\_\_

Date: \_\_\_\_\_

Staff: \_\_\_\_\_ Date: \_\_\_\_\_



# TOWN of CARY

[www.townofcary.org](http://www.townofcary.org)

### FOR OFFICE USE ONLY:

Additional Notes:

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