

## Group Booking Form

### Group Info

Group Name: \_\_\_\_\_  
Group Contact: \_\_\_\_\_  
Contact Tel: \_\_\_\_\_

### Journey Info

Date of Hire: \_\_\_\_\_ Time of Escort Pick-up: \_\_\_\_\_  
1<sup>st</sup> Pick-up location: \_\_\_\_\_  
Destination(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Return Pick-up Time: \_\_\_\_\_

Do you require a driver? Y  N  If no, Drivers Name: \_\_\_\_\_

### Passenger Info

No. Of Passengers: \_\_\_\_\_

Passenger Names (Escort must be 1<sup>st</sup> Pick-up):

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

Total No. Of Wheelchair Users\*: \_\_\_\_\_  
(NB Max 16 without Wheelchairs)

No. Of Manual Wheelchairs: \_\_\_\_\_

No. Of Powered Wheelchairs: \_\_\_\_\_

No. Of Wheelchair Transfers: \_\_\_\_\_

**\* Seats will need to be removed for wheelchair users. If you require more info about seat removals please contact the office.**

Passenger Lift Required: Yes  No  Walking Aids: \_\_\_\_\_ Rollators: \_\_\_\_\_  
(Quantity)  
 Zimmer Frames: \_\_\_\_\_  
 Walking Sticks: \_\_\_\_\_

No. Of passengers between 4-12 years of age: \_\_\_\_\_

**Declaration**

I can confirm I have read & understood the terms and conditions of vehicle hire outlined in the DART Transport Services policy document. By signing below I agree to abide by the terms and conditions of the same.

I accept that the organisation named above will be responsible for the payment of an insurance excess or repair in the event of a DART vehicle being damaged in an own fault incident.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**For completion by the Driver**

<b>Start KMs/Miles</b> (From odometer)	
<b>Finish Kms/Miles</b> (From odometer)	
<b>Total Kms/Miles</b> (subtract Finish from Start)	
Mileage will be chargeable per mile. All due care and attention should be taken when filling in the above boxes as invoices issued using the above data cannot be amended – all entries will be checked.	

DART Vehicles returned late, unusable or in an unfit condition will incur a £25.00 Fine.

**Office Use Only**

Driver:

Vehicle Reg: