

## Transportation Client Statement of Understanding

- I understand that this program is a requested service that I have requested and am voluntarily consenting to travel in a vehicle with approved drivers registered with the program.
- I understand this program will be **MY LAST OPTION** and I will make every effort to have family or friends drive me to my out-of-town medical appointments or make every effort to ensure my appointments are made to accommodate the Health Connections Bus dates and times. I will use this program **ONLY IF NO OPTIONS EXIST.**
- I understand that the drivers do **NOT** have first aid, CPR, or special training in passenger assistance techniques.
- I understand that drivers **DONOT** have access to specially equipped vehicles and I am able to get in and out of the vehicle without assistance. If I do need assistance, I will bring someone along who can help me if I have checked with the driver in advance to ensure there is room.
- I am willing to share rides.
- I understand that appointments need to be booked in compliance with the program driving policy as follows:
  1. Drives should not exceed 10 hours in duration; start to finish.
  2. Departure time should not be before 7am and return time should not be after 6pm.
- I understand that should I be undergoing anesthetic; I will be unable to travel home via the Volunteer Program and will need to make my own arrangements for return transportation.
- I will be responsible for paying for any parking fees required.
- I will be responsible for my own personal items.
- I will not smoke in the vehicle (this also applies to drivers) unless mutually agreeable with the driver.
- The driver is responsible for all in vehicle behaviour and all instructions and safety rules are to be followed.
- I will wear my seatbelt while in the vehicle and should a medical condition prevent this I will carry with me a letter from my physician stating the reasons why I cannot wear a safety device.
- Inappropriate behaviour will not be allowed, (foul language, lack of personal hygiene, etc.)
- I will not impose my religious beliefs or lecture my driver.
- I will not request to make extra stops without consent of the driver.
- I understand that it is important to have a backup plan in place since we cannot guarantee that we can find a driver in every case.
- I understand that I must give a 5-7 day advance notice (or more if possible) for a service request.
- I understand that I must give as much notice as possible when cancelling a ride.
- I will provide my annual household income when applying for trips as required by the program and, agree to pay whatever expenses are required.
- I will report any concerns, problems or complaints to the volunteer coordinator.
- I understand that the transportation service will not be provided should unsafe health or road conditions exist.
- The program reserves the right to refuse service based on a violation of the statement of understanding.

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