CITY OF GLENDORA, TRANSPORTATION DIVISION

DIAL-A-RIDE REGISTRATION

PERSONS WITH DISABILITIES (UNDER AGE 62)

If you are under 62 years of age, you must complete the registration form and have it verified by a physician that you are not able to independently use regular fixed route transit (Foothill Transit, Metro, etc.).

GENERAL INFORMATION

Name:

| Phone number: | |
|--|-----------------|
| TO BE FILLED OUT BY YOUR PHYSICIAN | |
| Physician's Information | |
| Name: | _ Phone Number: |
| Business Name: | |
| Business Address: | |
| Please describe what prevents the applicant/patient from using regular | |
| transit service: | |
| | |
| | |
| I CERTIFY THAT I AM A LICENSED PHYSICIAN OF THE STATE OF CALIFORNIA, HAVE | |
| KNOWLEDGE OF THIS APPLICANT/PATIENT, AND RECOMMEND THAT THE APPLICANT/PATIENT IS APPROVED TO USE THE GLENDORA DIAL-A-RIDE SERVICE. | |
| FATIENT 15 APPROVED TO USE THE GLENDORA DIAL-A-RIDE SERVICE. | |
| Physician Signature: | Date: |

Once this form is filled out by your physician, please attach it to your online application.