



Transport For Those Who Need Us

EAST SURREY DIAL-A-RIDE | MEMBERSHIP APPLICATION FORM

Please complete this form in BLOCK CAPITALS. You can either send to us by email, post or register via our website.

Email to : enquiries@east Surreydialaride.org.uk

Post to : The Manager, East Surrey Dial-a-Ride, The Westway, 25 Chaldon Road, Caterham, CR3 5PG

Register Online : At our website www.eastsurreydialaride.org.uk

Title:	First Name:	Middle Name:	Surname:
Address:			
		Post Code:	Date of Birth:
Phone No.:	Mobile:	Email:	

What is the nature of your disability?			
Do you use an electric wheelchair?	YES/NO	Do you use a manual wheelchair?	YES/NO
Do you use a large shopping trolley?	YES/NO	Do you use a walking frame?	YES/NO
Do you have a guide/hearing dog?	YES/NO	Will a carer escort you?	YES/NO

Please provide details of someone we should contact on your behalf in the event of an emergency, e.g a neighbour, friend, relative or carer.		
Name:	Relationship:	Phone No.:
Email:	Address:	

I confirm I have difficulty in using public transport. We no longer request a Membership Fee of £20. However, if you would like to make a donation of any size, it would be gratefully received. Donation £.....
Your signature Date

**This completed form should be returned together with Total payment to:
The Manager, East Surrey Dial-a-Ride, The Westway, 25 Chaldon Road, Caterham, Surrey, CR3 5PG**

Cheques payable to: East Surrey Dial-a-Ride

Bank transfer to: Lloyds Bank | Sort Code: 30-91-72 | Account No.: 02337969 | Account Name: East Surrey Dial-A-Ride

Please consider completing the Gift Aid Form below

It would help East Surrey Dial-a-Ride even more if you completed the form below to enable us to reclaim, from HMRC, tax you have paid on any donations to ESDAR.

You must **not** complete the form if you do not pay UK Income Tax or Capital Gains Tax. If you have any queries on Gift Aid please contact East Surrey Dial-a-Ride by telephoning 07766 234 408.

GIFT AID DECLARATION

I want East Surrey Dial-a-Ride (ESDAR) to treat all donations that I have made in the current and previous 4 Tax Years and all donations I make in future years as Gift Aid donations until further notice.

I understand that the UK Capital Gains/Income Tax that I pay must be at least equal to the Tax reclaimed by ESDAR. I will alert ESDAR if this should alter.

Signed Date

Your Title & Full Name (in BLOCK CAPITALS):

Your Address and Post Code (in BLOCK CAPITALS):

Please print this page, complete the Form and return it to:

The Manager, East Surrey Dial-a-Ride, The Westway, 25 Chaldon Road, Caterham, Surrey CR3 5PG
enquiries@east Surreydialaride.org.uk 01883 349 001 www.eastsurreydialaride.org.uk