

North Salop Wheelers Community Bus Project

BOOKING FORM

Name of organisation \_\_\_\_\_

Date(s) transport required \_\_\_\_\_

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Point for collection of passengers \_\_\_\_\_

Number of seats required \_\_\_\_\_

Number of wheelchair passengers (please indicate if they can transfer to a seat in the bus) \_\_\_\_\_

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**N.B. Any passenger who normally has a carer must have that carer with them on the trip.**

Destination \_\_\_\_\_

Time of arrival at destination \_\_\_\_\_

Deposit per trip (£10.00 non-returnable) \_\_\_\_\_

Name, address, telephone number(s) (landline and/or mobile) and email address of booking person and also person in charge of trip:

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Signature and contact number of person booking or in charge of trip.

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**Please send your deposit to the following address:-**

**The Bungalow, Post Office Lane, Whixall SY13 2QU**

**or Faster Payments to North Salop Wheelers Community Bus Project  
Sort Code 77-66-74 Account number 02003060 Reference:- Booking**