



Disability Action Transport, 189 Airport Road West, Belfast, BT3 9ED
(Tel 028 9029 7870) (Fax 028 9029 7881) (Textphone 028 9029 7882)

Thank you or your enquiry about **DISABILITY ACTION TRANSPORT SERVICE**. I should be grateful if you would complete this form and return it as soon as possible. Terms and Conditions of Hire of Disability Action Coach are available on request. **Any changes made to this booking form after completion must be done so in WRITING.**

APPLICATION FOR COACH BOOKING

Name and Address of Group _____

Name and address of person for all correspondence _____

Telephone _____

Day of Trip _____ Date _____

Day of Return _____ Date _____

Please put the time you will **FIRST NEED** the coach (large groups and multiple pick-up and drop-off points need more time) and this time will **LAST NEED** the coach, as well as arrival and departure time for your group.

OUTWARD JOURNEY :

Coach first needed at : am/pm To arrive at destination at : am/pm

RETURN JOURNEY

Departing at : am/pm Coach last needed at : am/pm

Address of Departure : _____

Destination in full : _____

Number of Passengers : Seated Wheelchairs Total

At least one escort from your organisation must accompany the passengers above.

Name of Escort on Coach : _____

MEALS : WILL MEALS BE PROVIDED FOR THE DRIVER ? : Please indicate below :-

No meals Lunch (between 12.00 – 2.00) Tea (between 5.00 – 7.00)

SIGNED _____ DATE _____