



Senior Transportation Application

860-354-0254

Roxbury Residents over 60 or disabled are eligible

Name: _____

Home Address: _____

Phone Number: _____

Alternate Phone Number (cell): _____

Emergency Contact Person #1: _____

Phone Number: _____

Emergency Contact Person #2: _____

Phone Number: _____

- ⇒ I have read, understand, and agree with the Town of Roxbury - Senior Transportation Policies and Procedures.
- ⇒ I understand that this form will be kept in Town Vehicles in case of emergency.

Signature: _____ **Date:** _____