



Grass Routes Membership Form

Date Membership No

Name

Address

Post code..... Telephone Number..... Date of Birth.....

Concessionary Bus Pass Serial No:

Emergency contact Name and Number

**It is sometimes necessary to substitute our low floor Grass Routes bus for a conventional mini bus. Would boarding be a problem?
If yes please give details**

Wheelchair user? Yes..... No..... (please tick) If yes, Manual or Electric

What will be the purpose of your journey/s?

Health Social Shopping Recreational Others

Any other Special Requests

Invoice Name & Address (if applicable)

**Membership fees £5.00 per Household (one off payment) cheques payable to
Monmouthshire County Council**

Office use only

Processed by..... Date..... Membership Fee £ cash/cheque.....

**Please return completed form to: Miss Stacy Jones Grass Routes Co-ordinator,
Monmouthshire County Council, Environment Directorate, County Hall, Cwmbran,
NP44 2XH. If you need any help filling in the form please call on 0800 085 8015.**