



Catholic Action Mini-Bus Request Form

Organization Name: _____

Contact Person: _____

Contact Person Phone: _____

Contact person Email: _____

Special Requests:

Trip Details: _____

Date of Trip: _____

Departure Location#1: _____ Time of Departure: _____

Street Number: _____ Street: _____ City: _____ Postal Code: _____

Destination Location: _____

Street Number: _____ Street: _____ City: _____ Postal Code: _____

Return Pick-up Location: _____ Time of Departure: _____

Street Number: _____ Street: _____ City: _____ Postal Code: _____

Return Drop-Off Location: _____

Street Number: _____ Street: _____ City: _____ Postal Code: _____

Number of Passengers (Min 6; Max 21): _____



Agreement:

By signing below: you agree to the terms and conditions of the bus service provided by Catholic Action Montreal. These terms include but are not limited to:

- Catholic Action Montreal is a non-profit organization, and our drivers are qualified volunteers generously donating their time to serve our community.
- Except for the trip coordinator, passengers are not permitted to speak directly to the bus drivers while the bus is in motion.
- Please allow a minimum of 3 business days to receive a response to your bus request as we operate with limited staff and volunteers.
- The drivers will only make **one drop-off location**, and no additional stops for passenger drop-offs are permitted **unless accompanied by a member of your organization**, and submitted in the **special requests** section of the request form.
- All passengers must have their **Medicare Cards** with them upon boarding the bus.
- **Cancellation Policy:** Catholic Action Montreal should be notified at least 3 business days prior to the trip date of any cancellation.
- **PAYMENT:** Catholic Action Montreal will invoice your organization for: (1) the cost of gas for your trip; (2) a \$100 maintenance fee per round trip. Note that if your trip involves an overnight stay, the second trip a few days later to pick you up and drive you home counts as a second round trip. Payment can be made via cheque payable to Catholic Action Montreal or via etransfer to: executivedirector@catholicaction.ca

Organization: _____ agrees to hold Catholic Action Montreal and its volunteer bus drivers harmless and to indemnify same from and against all liability and claims of liability for personal injury, death, property damage, or any other loss or damage which may arise in any manner under, during the outline.

Signature: _____ Date: _____

Please return the two completed forms to: buscoordinator@catholicaction.ca