

ULSTER COUNTY OFFICE FOR THE AGING  
1003 DEVELOPMENT COURT  
KINGSTON NY 12401  
845-340-3456  
Application for Senior Transportation Ridership

Please complete this form and return to the bus driver.

Name \_\_\_\_\_ Date \_\_\_\_\_

Street Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City, State, Zip code \_\_\_\_\_ Birth date \_\_\_\_\_

**Emergency Contact Information Required** Signature \_\_\_\_\_

Emergency Contact #1 Name \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact #2 Name \_\_\_\_\_ Phone \_\_\_\_\_

Approved ridership entitles the participant to one subsidized round trip bus ride per week on the UCAT bus system.

All participants are provided the opportunity to make a contribution, which is used to expand this service.

Contributions are voluntary.

Service will not be denied because of an inability or unwillingness to contribute