



# Hanover DASH Registration Form

02/27/20

Applicants must be Hanover County residents and provide proof that they are aged 60 or older, or have a disability. Acceptable documentation is listed below. Information provided is for agency use only.

To apply, complete this form and attach proof of residency and qualifications. Print all information clearly.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Telephone Number: (H) \_\_\_\_\_ (C) \_\_\_\_\_

E-mail: \_\_\_\_\_ Race/Ethnic background (Optional): \_\_\_\_\_

Veteran YES / NO \_\_\_\_\_ How did you hear about the program? \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

Emergency Contact Address \_\_\_\_\_

Emergency Contact Email \_\_\_\_\_

### Proof of Qualifications

Please check the appropriate box and attach the documents required in both Section A AND Section B.

**Section A** – Proof of Hanover County Address listed above. Check one of the following and include a copy of it with this form.

- Copy of a utility bill
- Copy of your Voter Card
- Copy of lease or other official document with your name and address

**Section B** — Proof of Qualification - Check one qualification and include a copy of the required documentation with this form.

- Aged 60 or older:
  - Copy of your valid Virginia driver’s license or Virginia issued photo ID
  - Photocopy of your birth certificate
- Disabled:
  - Copy of a doctor’s letter (Letter must include projected length of disability if short term)
  - Social Security statement
  - Medicare card (Red, White and Blue Card)

**Mobility Aides** - Do you use any of the following when traveling in a vehicle:

- Wheelchair
- Scooter
- Hoveround Walker
- Other: \_\_\_\_\_

### Consent to Share Information

By signing below, I consent to have my contact information shared with approved transportation providers.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Fax completed form and documentation to 804-365-4299 or mail to: Hanover County Department of Community Resources, HanoverDASH, 12310 Washington Highway Ashland, VA 23005**

*Hanover County is committed to ensuring that no person is excluded from participation in, or denied the benefits of its transit services on the basis of race, color or national origin, as protected by Title VI of the Civil Rights Act of 1964.*

*For additional information on Hanover County’s nondiscrimination policies and procedures, or to file a complaint, please visit the website at [www.HanoverDASH](http://www.HanoverDASH) or contact Lisa Adkins, PO Box 470 Hanover, VA 23069.*