

## TOLMIE VOLUNTEER DRIVER REGISTRATION FORM – CAR POOLING

### Personal Details

Surname:

First Name:

Postal Address:

Town:

Post Code:

Preferred Contact Number:

Email:

Other Contact Number/s:

### Emergency Contact:

Name:

Home Address:

Home Phone Number:

Mobile Phone Number:

### Other Information

Drivers Licence Number:

Expiry date:

Licence Type (eg: Heavy Duty, Restricted):

Car Make and Model:

Do you own this car: Yes No (please circle)

If No – Who owns car

Car Registration Number:

Car Registered: Yes No (please circle) Expiry Date:

Comprehensively Insured: Yes No (please circle)

Name of Insurance Company:

Expiry Date:

Name:.....

I wish to become involved in the **Tolmie Offers A Seat to Town (TOAST)** program where I will make available a "Spare Seat" in the vehicle I am driving, for other Tolmie residents with the purpose of providing transport into Mansfield.

The "Spare Seat" will be made available as follows:

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Time Depart Tolmie							
Time Depart Mansfield							

**Time and location of Pick-up.**

The time of departure from Tolmie and the pick-up point will be negotiated with the person requesting the "Spare Seat".

The time of departure from Mansfield (or negotiated town/district) and the pick-up point will be negotiated with the person requesting the "Spare Seat".

**Driver Conditions:**

- I understand the conditions pertaining to the TOAST program and agree to abide by those conditions
- I am willing to participating in this program and commit to being ALCOHOL and DRUG free at all times whilst driving.
- I am prepared to carry more than 1 passenger if the required seats are available in my vehicle.
- I am willing to provide a copy of my driving record over the last 5 years from VicRoads if and when required.
- I am willing to provide a current Police Check or undergo a Police Check.
- I am aware and accept that my photo may be used in any media coverage of this project.

**Privacy Statement**

*You privacy is important to us and we will only collect personal information that is necessary for this program to function effectively. The information you have provided will assist us process your application and enable us to best accommodate your travel needs. We may use the information to provide you with other opportunities to travel should they occur. Wherever possible we will use the data and not identify the individual. Information collected will be stored in a secure place and be only available to the TOAST Coordinator for the purposes of administering the TOAST program. All information will be collected in compliance with the Information Privacy Act 2000 and the Information Privacy Principles contained in that Act*

Signature:.....Date...../...../.....

Please Print Name:.....

## TOLMIE “SPARE SEATS” APPLICATION FORM – CAR POOLING

I wish to make an application to access transport into Mansfield (or other destinations if available) as part of the **Tolmie Offers A Seat to Town (TOAST)** program. I am aware that the TOAST program is based on Tolmie residents offering a “Spare Seat” in their vehicle when they travel into Mansfield (or other destinations as advised).

I agree to abide by the conditions of the program and will sign a “Car Pool Disclaimer” prior to my acceptance of the “Spare Seat” and will adhere to the “TOAST Travel conditions”. I also give approval for any photos I am in, to be used in the any media or promotional material.

Personal Details	
Surname:	First Name:
Postal Address:	
Town:	Post Code:
Preferred Contact Number:	
Email :	
Other Contact Numbers:	Mobile Phone:

Emergency Contact	
Name:	
Home Address:	
Home Phone Number:	Mobile Phone Number:

### How often will you use the service?

My best guess is that I would like to access a “Spare Seat”: (Please tick)

More than once a week	Once a week	Once a fortnight	Once a month	A couple of times a year	Don't know but will use it sometimes

**Fitness for Travel** (please circle responses)

**Do you use a:**

- |                                 |     |    |
|---------------------------------|-----|----|
| 1. Walking Aid (without wheels) | Yes | No |
| 2. Walking Aid (with wheels)    | Yes | No |
| 3. Walking Stick                | Yes | No |
| 4. Wheelchair (collapsible)     | Yes | No |

Are you able to enter and alight from a car independently?      Yes                  No

If assistance is required please specify

.....  
 .....  
 .....

Are you willing to travel with other passengers if required?      Yes                  No

Prior to commencement of each trip you will be required to sign a **CAR POOL DISCLAIMER.**

Are you prepared to sign this document?                          Yes                  No

**Privacy Statement**

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Signature:.....Date:...../...../.....

**Parental Consent**

<b><u>This section of the application must be completed by all applicants 17 years of age and under</u></b>		
Parent/Guardian Name:		
Home Phone Number:	Business Hours Phone:	Mobile:
Address (if different to Applicant)		
I give permission for:		To be a passenger in a car as a participant in the TOAST scheme.
Parent/Guardian Signature:		Date...../...../.....



## Tolmie Sports Association Incorporated

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### *Membership Application*

Name/s: .....

Address: .....

Phone: .....

Email (opt.) .....

Nominator Name:..... Signed:.....

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Paid: \$..... Received (name):.....

Date: ..... Position : .....

Membership is \$1 joining fee and \$2 per year annual fee.

## CAR POOL DISCLAIMER

I acknowledge and agree that I wish to be a participant in the Tolmie **Offers A Seat to Town** (TOAST) program.

I further acknowledge that my participation in the project may require me to drive a vehicle at my risk, or be a passenger in a vehicle at my own risk around the Tolmie area or to other places such as Mansfield or Benalla.

I am aware that it is a condition of my participation in this project that I acknowledge the risk or injury or death in a Motor Vehicle Accident whilst a driver or passenger in the program, or in connection with boarding and alighting the vehicle, and that I absolve:

- all drivers & passengers,
- the Tolmie Sports Association Inc.,
- the Transport Connections Program – Connection Our Communities Benalla Mansfield,
- \_\_\_TOLMIE SUSTAINABLE TRANSPORT GROUP (TOAST)\_\_\_ (additional organization),
- and all such executives, employees, servants or agents from all liability howsoever arising from injury or damage howsoever caused (whether fatal or otherwise) arising out of my participation in the "Tolmie Offers A Seat to Town", or participation in connection with it or in any way whatsoever due to any negligent act, breach of duty, default and / or omission on the part of the above individuals, organizations, its executives, employees, servants or agents.

By signing this document, I agree to all of the above.

Driver's Name: \_\_\_\_\_

Driver's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Passenger's Name: \_\_\_\_\_

Passenger's Signature \_\_\_\_\_ Date: \_\_\_\_\_