



REGIONAL PILOT TAXI VOUCHER PROGRAM APPLICATION

Name _____ Date of Birth _____ Age _____
 Address _____ City _____ State ____ Zip Code _____
 Home Phone # _____ Cell # _____
 Emergency Contact: Name _____ Phone # _____
 Email Address _____ Preferred Method of Contact _____

PLEASE CHECK APPROPRIATE BOXES

- Are you 65 years or older?
- Disabled- If you are disabled, you must enclose a statement from a physician stating the nature of your disability or provide verification of disability.
- Temporary Disability- If you have a temporary disability, you must attach a letter stating the type of disability and length of time transportation services will be needed.

DO YOU?

- | | |
|-------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> use a standard wheelchair?
If yes, are you able to transfer? Y / N? | <input type="checkbox"/> require an Aide when traveling?
(Physician letter required) |
| <input type="checkbox"/> use an electric wheelchair? | <input type="checkbox"/> use oxygen? |
| <input type="checkbox"/> have a visual impairment? | <input type="checkbox"/> use a cane? |
| <input type="checkbox"/> use a three wheeled scooter? | <input type="checkbox"/> other mobility device? |
| <input type="checkbox"/> use a walker? | (describe)_____ |

VOLUNTARY PARTICIPANT INFORMATION

- Race:**
- | | |
|-------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> White | <input type="checkbox"/> Native Hawaiian/Other Pacific Islander |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Black/African American & White |
| <input type="checkbox"/> Asian | <input type="checkbox"/> American Indian/Alaskan Native & White |
| <input type="checkbox"/> Asian & White | <input type="checkbox"/> American Indian/Alaskan Native & Black |

Ethnicity: Hispanic Non-Hispanic

Veteran: Yes No

A 2 inch by 2 inch passport-type photo is required for the electronic farecards. You may submit a photo with your application or email the photo to ridekcondemand@kcata.org. Please allow seven to 10 business days for application processing.

SIGNATURE _____ **DATE** _____

I HAVE REVIEWED AND FULLY UNDERSTAND THE QUALIFICATIONS, GUIDELINES, AND POLICIES OF THE REGIONAL TAXI VOUCHER PILOT PROGRAM.