

MobilityPLUS Visitor Application

Application Overview and Eligibility Mandate

A visitor to the City of Cambridge, Kitchener, Waterloo or the Township of North Dumfries may register with GRT MobilityPLUS for a maximum of six months. In addition to MobilityPLUS specialized transit service, the Region of Waterloo offers accessible buses on all GRT conventional routes and all local taxi companies have wheelchair accessible taxis.

Applicants must:

- Meet current GRT MobilityPLUS eligibility criteria
- Allow a minimum of 10 business days for the application to be processed
- Complete a MobilityPLUS visitor application

GRT MobilityPLUS eligibility criteria

GRT MobilityPLUS service in the urban service area of the Region of Waterloo is intended for persons who:

- Are physically unable to use conventional transit, or
- Are physically unable to walk a distance of 175 metres, or
- Are registered with the CNIB, or
- Have a temporary mobility impairment, such as a broken hip.

GRT MobilityPLUS North Dumfries is a specialized transit service developed specifically for the residents of North Dumfries, and is intended for persons who:

- Are 65 years of age or older, or
- Are registered with CNIB, or
- Have a physical challenge, or
- Have a cognitive challenge, or
- Have a temporary mobility impairment, such as a broken hip.

You must meet GRT eligibility criteria to receive visitor status. Please note these criteria may be different than for your home specialized transit service.

Completed applications will be reviewed within 14 calendar days from the day they are received. Please contact us at 519-585-7555 if you have not been contacted by GRT by the end of the 14-day period.

Once your application has been processed we will send you an information sheet with your Identification number and information on how to use the MobilityPLUS prebooked system.

Disclaimer

All personal information collected on this application and any supporting documentation is collected under the authority of the Municipal Act, 2001, and in accordance with the Municipal Freedom of Information and Protection of Privacy Act, and is used solely for the purpose of determining eligibility for Grand River Transit specialized transit services. The application and supporting documentation will be discussed only with the applicant, the applicant's legal guardian, or appointed substitute decision-maker. If a Release of Information Consent is completed, the application may be discussed with the individual named in the release. Any questions about this collection should be directed to the Manager, Marketing and Communications at 250 Strasburg Rd, Kitchener ON, 519-585-7555, TTY: 519-575-4608.

I have read and understood the above application overview.

Applicant or designate's name (please print)

Applicant or designate's signature

Applicant details

1. Contact information

Title

First name

Initial

Last name

Address

City

Province

Postal code

Phone number

Email address

Date of birth (DD/MM/YYYY)

2a) Are you currently registered with a specialized transit service?

Yes No

2b) If yes, provide the organization name: _____

City/Region

Current customer ID number

Devices and mobility aids

3. Please identify any of the mobility aids you will be using while you visit.
Please check all that apply

- Walker
- Manual wheelchair
- Power wheelchair
- Scooter (Must be able to transfer independently to a seat)
- Crutches
- Oxygen
- Service animal (Attach a copy of your service animal certification)
- Legally blind (Attach a copy of your CNIB registration card)
- Other: _____
- None

Region of Waterloo visit details

4. When will the applicant be in the Region of Waterloo?

Arrival date (DD/MM/YYYY)

Departure date (DD/MM/YYYY)

5. Temporary address where the Applicant is staying during their visit to the Region of Waterloo:

Address

City

Province

Postal code

Hotel name (if applicable)

6. Where can the Applicant be reached during their visit?

Phone number

Alternate phone

Fax number

Email address

7. Please provide any additional information relevant to this application:

I/we hereby certify that the information provided is accurate and complete to the best of my knowledge. I/We allow GRT to contact any healthcare professional or family member named within to obtain further information as required to determine eligibility status. Upon successful registration, I/we allow GRT to contact individuals named within to assist with operational concerns, should they arise.

Signature

Name (please print)

Date

If I am approved for MobilityPLUS, please send my identification number and information package to my:

Home address

Email address

Fax number _____

Submitting this application

Ensure you have filled in all the blanks in all sections of the application. Incomplete applications cannot be processed. You may wish to make a copy for your own records.

Return the complete application with copies of any necessary documentation to Grand River Transit.

Fax to: 519-744-2899

Scan and email to: grtinfo@regionofwaterloo.ca

Mail to: Grand River Transit, 250 Strasburg Rd, Kitchener ON N2E 3M6

Questions? Contact us at 519-585-7555 / TTY 519-585-4806