

# **CLIENT AGREEMENT**

**RETAIN THIS PORTION FOR YOUR RECORDS**

Due to certain eligibility restrictions and limited availability of the number of cars and drivers there may be times whereby we may not be able to provide a ride to every senior that would like to utilize our transportation service. We assure you that every effort is made to bring a meaningful service to as many senior residents as possible in the Township. Your patience and understanding are appreciated.

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*Please complete the registration process by **Signing this Client Agreement, provide proof of age (a current state ID) and residency (Gas or Light bill or Social Security statement), to acknowledge your compliance with these requirements. You can mail, deliver in person, fax or email the portion below to:***

**Proviso Township  
Senior Services Department  
4565 Harrison Street  
Hillside, IL 60162  
FAX: (708/202-1265)**

**Email: [Lrizzo@provisotownship.illinois.gov](mailto:Lrizzo@provisotownship.illinois.gov)**

-----CUT HERE AND RETURN THE PORTION BELOW-----

**As a registered Senior Services Participant, I agree to comply with the terms of the Client Eligibility/Responsibility Requirements:**

Client's Name: \_\_\_\_\_  
Please Print

Client's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sent to the Client by: \_\_\_\_\_ (Staff Must Initial before sending)