



Northern Essex Elder Transport, Inc. (NEET)
100 Main Street, Suite 108
Amesbury, MA 01913
978-388-7474

Dear NEET Rider:

Please note that our ride services are non-lift, curb-to-curb services. You must be able to self-transport to and from your home and your doctor's office (or other appointment). Additionally, we cannot transport wheelchairs and request that you contact your local Council on Aging (COA) or the Merrimack Regional Transportation Authority, MVRTA or MeVa, for more information.

NEET utilizes volunteers for driving, therefore we cannot guarantee that there will be a driver available for your ride. We have instructed our drivers to call you twice: once upon picking up your ride to introduce themselves and once the night before to confirm your ride. It is imperative that you answer the phone for these calls. If the driver does not talk to you, they may not arrive to pick you up at your scheduled pick up time. If you cannot keep your appointment, please contact your local COA to cancel. Please see the enclosed form for phone numbers and contacts.

Please read and review the enclosed documents. Please understand that **we cannot schedule rides without receiving the two signed documents:**

- **Ride Waiver (signature on back)**
- **Registration Form**

After your review, if you wish to use our volunteer driver program, please:

1. **Complete and sign the Registration Form, including the Acknowledgement.**
2. **Sign the Ride Waiver.**
3. **Return both documents in the enclosed self-addressed envelope.**

Sincerely,

NEET staff

Updated 5/30/2023

****Please call your local Council on Aging to request assistance with transportation through this program and to schedule your ride.**

NEET serves older adults in Amesbury, Boxford, Georgetown, Groveland, Haverhill, Merrimac, Methuen, Newbury, Newburyport, North Andover, Rowley, Salisbury and West Newbury.



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COUNCILS ON AGING

City or Town	Phone Number	Contact Person
Amesbury	978-388-8138	Marilyn Simpson or Kaylyn MacDougall
Boxford	978-887-3591	Lisa Giugliano
Georgetown	978-352-5726	Kirsten Klueber
Groveland	978-372-1101	Nisha Burke
Haverhill	978-374-2390	Maria Yaguel x3912
Merrimac	978-346-9549	Nick Fiorello x3105
Methuen	978-983-8825	Cheryl McQuillan or Sue Riccio
Newbury	978-462-8114	Kathy Zarembo
Newburyport	978-462-0430	Rosemary Coulombe
North Andover	978-688-9560	Paula Lynch
Rowley	978-948-7637	Lisa Lozzi
Salisbury	978-462-2412	Ann Regnier
West Newbury	978-363-1104	Christine Marshall

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RIDER GUIDELINES – Summer/Fall'23

We are dedicated to our mission to provide affordable, accessible transportation to older adults and we are grateful for the combined support that has made this possible.

These Rider Guidelines, along with guidelines provided to our Volunteer Drivers, are necessary to ensure the safety of everyone involved in the program. We are aware of the extra effort that is required to follow the guidelines and appreciate your understanding and continued support.

BEFORE WE CAN SCHEDULE ANY RIDES

To use NEET services, every Rider **must** have provided the following two pages:

- **Rider Registration Form** – which includes the signed Acknowledgement of these guidelines. Please fill this information out clearly as we want to ensure accuracy.
- **Rider Waiver form**

****Your Council On Aging (COA) will not be able to schedule a ride without having already received both of these documents. ****

SCHEDULING A RIDE- Part 1

1. **Call your COA, to schedule your ride.** Most COAs require 4-7 days notice, not including weekends or holidays. Please have the following information available:

- **Location** to pick you up for the ride (your residence or other location) – make sure that this is accurate on your registration form. Special notes, if any, on your address location is important!
- ****Appointment time and expected duration** – *Please make every effort to discuss appointment end time with your medical professional's office staff. * This will assist your volunteer in knowing when to pick you up, hopefully without a longer wait time.
- **Appointment destination** including location, name of practice or service, phone number, and any special instructions about parking and where to meet you after your appointment.

SCHEDULING A RIDE – Part 2

Special Situations:

If you require an escort to your appointment, you must provide the escort and **your escort will be required** to complete a **Rider Registration form**, which includes signed Acknowledgement of these guidelines and **Ride Waiver prior to scheduling your ride.**

CALL FROM DRIVER WHEN THEY HAVE BEEN ASSIGNED TO YOUR RIDE

*****IF WE CAN'T CONFIRM YOUR RIDE WITH YOU, WE CANNOT PROVIDE THE RIDE.*****

- You will receive a confirmation call as soon as the driver has been assigned to your ride. You will receive a second call the night before your appointment to reconfirm. **** IMPORTANT: Please be available to answer these calls** as the volunteer driver may not pick you up if you do not speak beforehand!
- Discuss the appropriate pick up location after your appointment.
- If you have not heard from your volunteer driver a few days in advance of your ride, please contact the COA. ***We do not have enough volunteers to meet all of the driving needs, and therefore, do not guarantee rides.***

THE DAY BEFORE EACH RIDE

- **Your volunteer driver** will call you a second time to reconfirm your ride the day before to make sure there were no changes or cancellations to your ride.
- If you are not feeling well and need to cancel your ride, please contact your COA and, if possible, the volunteer driver that calls to confirm.

DURING & AFTER EACH RIDE

- The Rider MAY BE asked to sit in the back seat. The driver will indicate this upon calling you.
- Some volunteer drivers still require masking, although this is not required by the NEET program as of May '23. They will let you know upon confirmation.

-continued-

RIDER GUIDELINES – Summer/Fall '23 (continued)

THE APPOINTMENT

Prior to leaving your vehicle, please confirm your pick-up location with the volunteer driver and, if possible, leave the driver with a contact phone number. If you find out upon check in that your appointment will be longer than expected, please contact the driver right away. Your driver will give you a card with their number upon exiting the vehicle.

DONATIONS

NEET never charges for our services. Free-will donations are appreciated and are tax deductible. If you are able, and only if you are able, you may donate at any time. Upon receipt of your Rider Registration Form, NEET will mail you a welcome package with donation envelopes.

Thank you very much for your support!

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Rider Registration Form

Name: _____

(PLEASE PRINT CLEARLY)

Address: _____

City/State/Zip Code: _____

Telephone: Home: _____ Cell: _____

Birthdate: _____ Email: _____

Are you a Veteran? __ Yes ___ No

Emergency Contact Information

Name: _____ Relationship: _____

Phone: _____

Check any of the following that apply to you:

Uses a Rollator walker Uses a walker Needs assistance with seatbelt
 Hearing impaired Low Vision Unable to get in Truck or SUV

Please let us know if you need special assistance (in space below or on reverse):

If you need physical assistance when moving, you may have a companion accompany you. You must make the arrangement for your companion. Your companion or spouse must also complete the paperwork. NEET volunteers may not provide escort services. NEET is non-lift, curb-to-curb.

ACKNOWLEDGEMENT

Your signature is required below to acknowledge that:

- Have read and agree to abide with the Rider Guidelines.
- You understand that failure to abide by these guidelines may result in a lack of services.
- You understand that our program uses volunteer drivers and driver availability may be limited. *Rides are not guaranteed.*

Signature: _____ Date _____

****PLEASE MAIL this registration page & your signed waiver to NEET
in the enclosed, self-addressed envelope.****



Northern Essex Elder Transport, Inc.

Senior Rider Release & Waiver of Liability & Indemnity Agreement

PLEASE READ CAREFULLY. THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS AND IS LEGALLY BINDING. BY SIGNING THIS AGREEMENT, YOU ARE RELEASING NORTHERN ESSEX ELDER TRANSPORT, INC. (“NEET”) FROM ALL LIABILITY AND FOREVER GIVING UP ANY CLAIMS THEREFORE.

Mission Statement.

The mission of NEET is fourfold, namely: To continue the development of the volunteer driver transportation program in 13 Essex County communities according to the needs of the older adults of each community; to continue the recruitment of volunteer drivers in each of the 13 communities to provide transportation for older adults; to provide information to the aging network and outreach to the older adults in the community with information about transportation services; and to assist older adults in maintaining their independence and being engaged with their community.

Affirmative Duty.

I agree to conduct my participation in the elder transportation program (“Program”) in compliance with prevailing governmental or health agency standards intended to prevent the spread of infectious diseases, to the extent practicable.

Assumption of Risk.

I acknowledge that and my participation in the Program will consist of being a passenger in a vehicle driven by a NEET volunteer driver. I acknowledge and agree that my participation comes with risks including, but in no way limited to: (1) moderate and severe personal injury, (2) property damage, (3) disability, (4) death, and (5) sickness or disease including, without limitation, COVID-19. I voluntarily accept and assume full responsibility for these risks as well as any and all other risks of participation in the Program. I agree that I have full knowledge of the nature and extent of all such risks and am not relying on all such risks being described in this document.

I further acknowledge that NEET requires Program volunteers and participants to follow preventive measures against the spread of infectious diseases, but that NEET cannot guarantee that I will not become infected with a disease as a result of my participation in the Program.

By signing this Agreement, I acknowledge the contagious nature of some infectious diseases and voluntarily assume the risk that I may be exposed to or infected by these diseases while participating in the Program and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by infectious diseases at the Program may result from the actions, omissions, or negligence of myself and others, including, but not limited to, NEET employees, volunteers, and other Program participants.

Waiver, Release, Indemnification & Covenant Not to Sue.

In consideration of the use of Facilities and my participation in the Program, I, the undersigned, agree that NEET, its officers, directors, agents, employees, volunteers, insurers and representatives (“Releasees”) will not be liable for any personal injury, property damage, disability, death, sickness or disease incurred by myself, my family members, dependents or guests, including minors, however occurring including, but not limited to the negligence of Releasees. I understand that I will be solely responsible for any loss or damage, including personal injury, property damage, disability, death, sickness or disease sustained from my participation in the Program.

I further agree, on behalf of myself and any and all legal successors and proxies, to release and HEREBY DO RELEASE, WAIVE AND COVENANT NOT TO SUE Releasees from any causes of action, claims, costs, suits, liabilities or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I and any legal successors and proxies may have, now or in the future, against Releasees on account of personal injury, property damage, disability, death, sickness, diseases or accident of any kind, arising out of or in any way related to my participation in the Program, whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of Releasees.

In further consideration of my participation in the Program, I agree to INDEMNIFY AND HOLD HARMLESS Releasees from any and all causes of action, claims, demands, losses, suits, liabilities or costs of any nature whatsoever, arising out of or in any way related to my participation in the Program.

Signature: _____ Date: _____

Print Name _____