



Northern Essex Elder Transport, Inc. (NEET)  
100 Main Street, Suite 108  
Amesbury, MA 01913  
978-388-7474 / [info@driveforneet.org](mailto:info@driveforneet.org)

Dear Prospective NEET Rider:

Thank you for your interest in our no-cost transportation to and from your medical appointments. Please note that our ride services are non-lift, curb-to-curb. You must be able to self-transport to and from your home and your doctor's office (or other essential appointments). At this time, we cannot transport wheelchairs. Please contact your local Council on Aging (COA), the Merrimack Regional Transportation Authority (MVRTA), or "MeVa" for more information at (978) 469-6878 ext. 3.

**IMPORTANT:** NEET uses volunteers to drive; therefore, **we cannot guarantee driver availability for your ride.** Our volunteer drivers will call you twice: once when your ride is assigned and once the night before to confirm it. It is very important that you answer these calls or return them if they leave a message. **If the driver does not speak with you, they may not arrive to pick you up at your scheduled pickup time.** If you do not hear from a driver, it may be that we did not have a volunteer to drive. Please contact your local COA/Senior Center (listed on the reverse of this form) to confirm whether you have a driver for your ride. If you cannot keep your appointment or your appointment has changed, please contact your driver to cancel and your local COA/Senior Center to reschedule. See the enclosed form for COA/Senior Center phone numbers and contacts.

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

1. The **Rider Registration Form**, page 7, including the **Acknowledgment (at the bottom)**
2. The **Ride Waiver** – **Read, sign, date & return the second page (page 10).**
3. **Return both documents** to your local COA for entering, or in the enclosed envelope.

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

Sincerely,

*NEET staff*

NEET serves older adults, through the COA, 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	Cathy Spell MWF
Boxford	978-887-3591	Lisa Giugliano
Georgetown	978-352-5726	Kirsten Klueber
Groveland	978-372-1101 #2	Nisha Burke
Haverhill	978-374-2390	Betty x3911/Maria x3912
Merrimac	978-346-9549	Jon Behrens Tu-Th, 10-4
Methuen	978-983-8825	Cheryl McQuillan or ask for assistance
Newbury	978-462-8114	Kathy Zaremba
Newburyport	978-462-0430	Rosemary Coulombe
North Andover	978-688-9560	Paula Lynch
Rowley	978-948-7637	Lexi Zubricki
Salisbury	978-462-2412	Audrey Allen
West Newbury	978-363-1104	Christine Marshall

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## RIDER GUIDELINES – Spring/Summer 2026

Our mission is to provide quality no-cost transportation to older adults, and we are grateful for the combined support of the local COAs/Senior Centers that have made this possible. These Rider Guidelines, along with those provided to our Volunteer Drivers, are necessary to ensure the safety and accuracy of running this program. We know that following these guidelines requires extra effort, and we very much appreciate your understanding and continued support so that everyone is treated equitably.

**PLEASE NOTE: ALL RIDES MUST BE SCHEDULED THROUGH THE COA/Senior Center**

**Please refrain from calling our driver/volunteers directly for scheduling.**

### BEFORE WE CAN SCHEDULE ANY RIDES

Please fill out and return the documents to your local COA/Senior Center:

1. **Rider Registration Form**—This includes the signed Acknowledgment of these guidelines (at the bottom of the form on page 7). Please fill this information out clearly, as we want to ensure the accuracy of the information, and allow our volunteers to properly contact you.
2. **Rider Waiver Form - Please read and sign page 10.**

### SCHEDULING A RIDE- Part 1

- **Call your COA, to schedule your ride.** Most COAs require a 4-7-day notice, not including weekends or holidays. Please have the following information available:
  1. **Location:** where to pick you up for the ride (your residence or other location or special notes) – make sure that this is accurate on your registration form. Special notes, if any, on your address location are important!
  2. **\*\*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 return, without a longer wait time.
  3. **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. **Tolls and parking are your responsibility.**

## **SCHEDULING A RIDE – Part 2**

### **Special Situations:**

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

### **CALL FROM DRIVER WHEN THEY HAVE BEEN ASSIGNED TO YOUR 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! If the NEET driver leaves a message, please return their call. They will identify themselves in the message as a NEET driver.
- 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 driving needs; therefore, NEET cannot guarantee rides.***

### **THE DAY BEFORE EACH RIDE**

- Your volunteer driver will call you a second time the day before to reconfirm your ride and 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 both your volunteer driver and the COA/Senior Center. Then reschedule with the COA.

### **DAY OF RIDE**

- If the weather is not safe, the driver will be in touch with you to cancel. It is their prerogative to cancel due to inclement weather. We want to keep you and our volunteers safe!
- You must wear a seatbelt.

## **RIDER GUIDELINES – Fall/Winter 2025-2026**

### **THE APPOINTMENT**

Before leaving the volunteer's vehicle, please confirm your pickup location with the volunteer driver and, if possible, leave the driver a contact phone number. If you learn at check-in that your appointment will be longer than expected, please contact the driver right away. Your driver may give you a card with their number upon exiting the vehicle.

### **DONATIONS**

**NEET never charges for our services.** Voluntary donations are appreciated and tax-deductible. 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, or you may request them from our administrative office at 978-388-7474. Please do not feel obligated to donate. If a volunteer driver is available, you will receive a ride whether or not you donate.

**Please note: Do not contact your volunteer driver directly for any additional rides.**

**All additional rides or changed rides must be scheduled only through the COA/Senior Center.**

**Please help us make the program equitable for all involved. Thank you!**

**Thank you very much for your support of these guidelines, ensuring a smooth ride and experience for all involved!**

**Northern Essex Elder Transport, Inc., "NEET"**





## Rider Registration Form

Name: \_\_\_\_\_

**(PLEASE PRINT VERY CLEARLY)**

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Email: \_\_\_\_\_

Are you a Veteran? Yes or No (circle one)

### EMERGENCY CONTACT INFORMATION

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Circle any of the following that apply to you:**

- |                             |                                   |                                     |
|-----------------------------|-----------------------------------|-------------------------------------|
| <u>Uses Rollator Walker</u> | <u>Uses Regular Walker</u>        | <u>Assistance with Seatbelt</u>     |
| <u>Cane</u>                 | <u>Unable to get in Truck/SUV</u> | <u>Unable to get in Low Vehicle</u> |
| <u>Vision Impaired</u>      | <u>Hearing Impaired</u>           | <u>Unable to Get in Sm. Vehicle</u> |

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 arrangements for your companion. Your companion or spouse must also complete the paperwork. NEET is a non-lift, curb-to-curb, volunteer driver transportation service.

### ACKNOWLEDGEMENT

**Your signature is required below to acknowledge that:**

- Have read and agree to abide by the Rider Guidelines.
- You understand that failure to abide by these guidelines may result in a dismissal from these 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 the  
COA/Senior Center in your area\*\***





Northern Essex Elder Transport, Inc.

## Older Adult 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.

Our mission is to provide dependable and compassionate, no-cost transportation assistance to older adults, ensuring they can access vital medical appointments with ease and peace of mind. Through our dedicated team of volunteers, we aim to bridge the transportation gap and alleviate the challenges older adults face in reaching healthcare services. NEET is committed to promoting the health and well-being of older adults by facilitating access to essential medical care, thereby enhancing their overall quality of life. We strive to create a supportive and caring environment where older adults feel valued, respected, and supported throughout their journey. Our mission is to make a meaningful difference in the lives of older adults by ensuring they receive the healthcare they deserve.

### Affirmative Duty.

I agree to participate in the older adult 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 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 that I am not relying on their being described in this document.

**-continued on back for signature page to be returned with the registration form**

I further acknowledge that NEET requires Program volunteers and participants to follow preventive measures to prevent the spread of infectious diseases, but that NEET cannot guarantee that I will not become infected with an infectious 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 exposure to or infection with infectious diseases at the Program may result from my own actions, omissions, or negligence, as well as those of 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 \_\_\_\_\_