



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

Dear NEET Rider:

Our number one concern is the health and safety of you, our riders, and our generous volunteer drivers. Our COVID-19 guidelines are enclosed and remain in place. For your protection, we anticipate we will continue these guidelines for several months. Your cooperation is greatly appreciated.

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

- **Senior Rider Release Waiver (page 2 - with signature)**
- **Senior Rider Registration Form**

Our volunteer drivers have been given similar Guidelines and we ask you join them in following these mandated precautions.

**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 (white paper) documents in the enclosed self-addressed envelope. If requested, a copy will be mailed to you.**

We realize that many of you have been using our services for several years, and we look forward to assisting you.

**In addition to our Guidelines**, we hope you are practicing these everyday preventive actions:

- Avoid touching your eyes, nose, or mouth especially when wearing a mask.
- Keep in mind where you can access and use facilities with soap and water during the ride.
- Wash your hands regularly with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer containing at least 60% alcohol.
- Carry tissues in with to use when you cough, sneeze, or touch your face. Throw used tissues in the trash.

Please stay safe and healthy.

Sincerely,

*NEET staff*

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



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

## COUNCILS ON AGING

City or Town	Phone Number	Contact Person
<b>Amesbury</b>	978-388-8138	<u>Marilyn Simpson</u> x558 M, Th, Fri 9-3:30 (Leave Msg.)
<b>Boxford</b>	978-887-3591	Lisa Giugliano
<b>Georgetown</b>	978-352-5726	Kirsten Klueber
<b>Groveland</b>	978-372-1101	Nisha Burke
<b>Haverhill</b>	978-374-2390	Susan Lagasse x 3911
<b>Merrimac</b>	978-346-9549	Nick Fiorello x 3105
<b>Methuen</b>	978-983-8825	Cheryl McQuillan
<b>Newbury</b>	978-462-8114	Kathy Zaremba
<b>Newburyport</b>	978-462-0430	Rosemary Coulombe
<b>North Andover</b>	978-688-9560	Paula Lynch
<b>Rowley</b>	978-948-7637	Lisa Lozzi
<b>Salisbury</b>	978-462-2412	Pauline Stanwood
<b>West Newbury</b>	978-363-1104	Christine Marshall

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## THE DAY BEFORE EACH RIDE

- **Your 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.

### **Please Tell your driver:**

- If you are bringing a walker,
- If you are bringing an escort (refer to the requirements on page 2).

## DURING & AFTER EACH RIDE

### **If you have a walker**

You should disinfect the walker before leaving your home. Your walker will be placed in the trunk of the driver's vehicle.

### **Wear a mask** *(Yes, we are still masking in vehicles.)*

NEET requires senior riders and drivers to wear face coverings prior to greeting the driver and throughout the entire ride.

### **Getting into the car**

Avoid close contact with driver, when possible. The driver will also avoid close contact.

- You MAY BE asked to sit in the back seat. The driver will indicate this upon calling to confirm your ride.
- You will be asked to wear a seatbelt. If you require assistance, please let the COA know when you schedule your ride.

## **The Appointment**

Prior to leaving your vehicle, please confirm your pick- up location with the driver and, if possible, leave the driver with a contact phone number (e.g., cell phone number).

## **Donation Envelopes**

Upon receipt of your Senior Rider Registration form, NEET will mail you donation envelopes. **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.

*Thank you very much*

Northern Essex Elder Transport, Inc. (NEET)



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# Senior Rider Registration Form

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

**PLEASE PRINT**

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

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

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

Birth Year: \_\_\_\_\_ Email: \_\_\_\_\_

## Emergency Contact Information

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Are you a Veteran  Yes  No

COVID 19 Vaccination  Yes  No Have received one dose

Optional

**Check any of the following that applies 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:**

\_\_\_\_\_  
If you need physical assistance when moving, you may have a companion accompany you. You must make the arrangement for your companion, not NEET. Your companion or spouse must also complete the paperwork. NEET volunteers are not allowed to provide escort services.  
\_\_\_\_\_

## ACKNOWLEDGEMENT

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

- Have read and agree to abide with the Senior 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 availability may be limited.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

**\*\*PLEASE MAIL this page and your signed waiver (two white pages) to NEET in the enclosed self-addressed envelope.**

Northern Essex Elder Transport, Inc., 100 Main Street, Suite 108, Amesbury, MA 01913



Northern Essex Elder Transport, Inc.

## Senior Rider Release & Waiver of Liability and 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 THEREFOR.**

### **Mission Statement.**

The mission of NEET is fourfold, namely: To continue the development of the volunteer driver transportation program in 14 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 14 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.**

If I should experience or develop symptoms of illness such as fever, cough or shortness of breath, or if I should test positive for a contagious illness including, but not limited to, COVID-19, I agree to contact my Council on Aging so as to cancel any scheduled transportation appointment as far in advance as possible. I further agree to conduct my participation 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 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 acknowledge that COVID-19 has been declared a worldwide pandemic by the World Health Organization, that COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact, and that, as a result, federal, state and local governments and federal and state health agencies recommend or mandate social distancing and the use of masks, among other protective measures. I further acknowledge



that NEET requires Program volunteers and participants to follow preventive measures against the spread of COVID-19 but that NEET cannot guarantee that I will not become infected with COVID-19 as a result of my participation in the Program.

By signing this Agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 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 COVID-19 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** \_\_\_\_\_