

**PUBLIC TRANSPORTATION IN RURAL AREAS
OF MRC MEMPHRÉMAGOG**

REGISTRATION FORM

Send back to: **Transport des Alentours** **Phone: 819-843-3350**
455, rue MacDonald, office 200 **Fax: 819-843-3504**
Magog (Québec) J1X 1M2

The information provided is confidential and for the exclusive use of Transports des Alentours

1. Identification of the person:

Madam Sir Name: _____

Address: _____

City: _____ Postal code: _____

Phone number: _____ Birth date (YYYY/MM/DD): _____

2. Do you have a limitation that requires support for your embarkations?

3. How often will you use the public transportation?

4. Person to contact in case of emergency

Family name: _____ First name: _____

Phone number: _____ Office: _____

Relationship to applicant: _____

I certify that the information provided is accurate. Any false statement could lead to the rejection of my eligibility.

Signature required:

	Date :
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Signature of applicant or legal guardian if under 18