HARVEST YEARS SENIOR CENTER, INC.

30 South Street Camden, DE 19934

Email: hysc@comcast.net website: www.harvestyeras.org

(302) 698-4285

Healthcare Transport Program Agreement

This letter contains information about the Healthcare Transport Program. Your driver will go over this information with you in order to assure that you understand the rules of the Healthcare Transport Program. After your driver reviews this information with you, if you still have questions, please call me at Harvest Years Senior Center between 9:00 A.M. and 2:00 P.M., Monday-Friday at 698-4285.

HEALTHCARE TRANSPORT PROGRAM

Senior citizen adults who are 60 years and older are eligible for the Healthcare Transport Program (HCTP). HCTP clients are members in good standing of Harvest Years Senior Center. Annual membership dues are \$20.00 due by <u>January 1 of each year</u>.

Doctor appointments is the primary service provided under the Healthcare Transport Program. On the same trip an additional stop can be made at your pharmacy to or from the doctor's office. Due to the cost of mileage, we ask that you live within Dover or Camden area. Doctor offices must be in the same area. We will <u>not</u> travel to Sussex or New Castle counties. Transport runs between 8:30 am and 2 pm, so please make appointments accordingly (no earlier than 9:00 am and no later than 1:30 pm).

Harvest Years Senior Center cannot give out the phone numbers of its drivers. If you need to contact your driver, please call Harvest Years and your message will be relayed to your driver.

There is a \$3.00 donation for each trip service provided.

Prepaid cards may be purchased in advance from the driver. The donation may be given to your driver in the form of cash, check, or Prepaid Healthcare Transport card.

Thank you for your understanding and cooperation. Harvest Years is proud of its Healthcare Transport Program service and with your help it will continue to assist you and other Kent County Seniors who need this service.

I agree with the above Healthcare Transport Program client agreement.

Sincerely,		
Thomas Bones	Signature and Date	
Executive Director		