



**Transportation Ministry
Parish Bus Passenger Registration Form**

This form should be returned to the BUS DRIVER or CHURCH REPRESENTATIVE. It is very important that all information is correctly filled out below in order to participate in St. Joseph's bus service. This information will be kept CONFIDENTIAL and will only be used in case of emergency. Please contact Michael Broach at 891-0746 if you have any questions.

Last Name _____

First Name _____

Street Address _____

Formal name of residence/community (i.e.: Name of retirement center, neighborhood, apartment complex, etc.; If this does not apply, please write "N/A" in the space below):

City / State _____ Zip _____

Phone Number _____

Mass Preferred 5:30 Mass on Saturday (Space Limited) 10:00 Mass on Sunday (Depending on location, service is provided by the church bus or JTA Community Shuttle*)

Emergency Contact _____ Phone _____

Date of Birth _____

Special Notes or Comments:

MEDICAL INFORMATION (use only in case of emergency and given to paramedics if necessary):

Special Needs, Important Medical Information, etc:

Please list any medications that you currently take or carry with you that may be necessary information in case of an emergency:

*St. Joseph's Transportation Ministry does coordinate rides for parishioners on Jacksonville Transportation Authority's (JTA) Community Shuttle as a service to its parishioners. St. Joseph's does not charter this shuttle, nor does the JTA directly endorse or support St. Joseph's Catholic Church.