



**Please complete and return to:**

**Helping Hands of Glenview  
C/O Glenview Senior Center  
2400 Chestnut Ave  
Glenview IL 60026  
847-729-8181**

**WWW.HELPINGHANDSGLENVIEW.ORG**

**VOLUNTEER DRIVER TRANSPORTATION INFORMATION**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: HOME \_\_\_\_\_ WORK \_\_\_\_\_

E-MAIL \_\_\_\_\_

ANY PHYSICAL LIMITATIONS (such as; inability to load a walker into car)?

\_\_\_\_\_

**DRIVING AVAILABILITY INFORMATION**

	MON	TUES	WED	THURS	FRI	SAT	SUN
AM							
PM							
EVENING							
OCCASIONAL							

**WOULD YOU ALSO BE WILLING TO HELP OUT WITH:**

ERRANDS: WITH CLIENT \_\_\_\_\_ FOR CLIENT \_\_\_\_\_ SHOPPING: WITH CLIENT \_\_\_\_\_ FOR CLIENT \_\_\_\_\_

YARD CLEAN-UP – (USUALLY A SATURDAY IN THE FALL) \_\_\_\_\_

**AUTO INSURANCE INFORMATION:**

**PLEASE ATTACH COPIES OF:**

- DRIVER'S LICENSE showing expiration date (sometimes on back of license)
- INSURANCE CARRIER - current insurance registration card

MAKE OF AUTO \_\_\_\_\_ YEAR \_\_\_\_\_ SEATING CAPACITY \_\_\_\_\_

2 DOOR: \_\_\_\_\_ 4 DOOR: \_\_\_\_\_ SUV/MINI VAN: \_\_\_\_\_ TRUCK: \_\_\_\_\_



## Volunteer driver information:

Thank you for your interest in becoming a volunteer driver for *Helping Hands of Glenview*, a non-profit organization to help our clients living in Glenview.

The Volunteer Driver form will assist our driver coordinator to know when you can help AND what you feel comfortable doing. It is very important that you furnish us with a copy of both your auto insurance card **and** a copy of your Illinois Driver's license including the date of expiration, which must be in the future.

*Helping Hands of Glenview* is a non-profit organization founded to, among other purposes, to assist to fulfill the needs of the elderly and disabled of our Glenview community. As part of our services, rides are arranged for our clients-at no charge and no compensation is expected by the volunteers.

The Board of *Helping Hands of Glenview* does realize that a client might wish to express his/her gratitude to the driver. This intended compensation might, for example, be monetary or a small personal gift, or even an offer of a cup of coffee. We, the Board realize that no driver will ever accept a gift that would be considered disproportionate to the volunteer's services, i.e. any gift in excess of \$50.00 with a twelve month period.

If you have any questions, please direct them to our driver coordinator at (847) 729-8181.

### Guidelines

1. A scheduled trip typically is no longer than 2 hours and within 10 miles of Glenview. Occasionally a client may request a trip that may be longer or further. If you are unwilling to provide this service, just let the phone coordinators know and they will accommodate your requirements.
2. The client should inform you before the trip if they wish to stop at a pharmacy or grocery, it is your decision if you can accommodate this.
3. If you are unable to load a walker or wheelchair, let the coordinator know and request the client have a caregiver to assist them.
4. Rides are usually between 9 AM and 5 PM –Mondays to Friday. Occasionally a ride is requested for the weekend. Let the phone coordinators know when you are available.
5. If available, the client is responsible for providing a **Handicapped Parking** card.
6. For cancellations or changes, please call 847 729-8181 as soon as possible. Give your name, date and time of appointment and the client's name. The phone coordinator will contact the client of the change and attempt to arrange for another driver.
7. Each client is required to complete and sign a Liability Release Form before rides are provided.