

Noarlunga Volunteer Transport Service Inc.
P.O. Box 608
Noarlunga Centre S.A. 5168
Phone: 08 8384 9279
Fax: 08 8326 7831
Email: enquiry@nvts.org.au
Website: http://www.nvts.org.au



AUTHORITY FOR "NO RESPONSE"

I _____
(Client name)

of _____

(client address)

I understand that Noarlunga Volunteer Transport Service Incorporated will take the following steps to ensure I am safe:

If there is no response to the knocking on the door/windows, calling out, the driver will contact the office who will attempt to verify my whereabouts by phoning my home.

If there is no response to the telephone call, they will then procedure to contact:

- Appointment destination
- Next of Kin/nominated person (if no response continue)
- GP
- Local hospitals
- Police

I agree/disagree to the above procedure

I agree with the following changes

Contact Number and Name of Person to contact is

Signed: _____ (Client)

Signed: _____ (Client representative/Next of Kin)

Signed: _____ (Executive Officer)

Date: _____ / _____ / _____

Form placed in client's file

Signed: _____ (Executive Officer)

This agreement will be discussed at each client reassessment.