

Got Wheels!

Got Wheels Membership Application

Today's Date _____

PLEASE PRINT

First Name _____ Last Name _____

Street Address _____, Daly City

Zip Code _____

Cell Phone: _____ Other Phone: _____

Email: _____

Will you need a wheelchair accessible vehicle? Yes No

How did you hear about the program?

Please send the completed form to:

Got Wheels Coordinator,
Peninsula Family Service
24 Second Avenue
San Mateo, CA 94401

Or Fax to:

650-403-4303 Attention: Got Wheels Coordinator

Or Email to:

CQMoreno@peninsulafamilyservice.org

For more information, please contact:
Cherie Querol Moreno at 650-403-4300, Ext.4329

