**Appendix 22 Taxi Booking Form**

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| **Taxi Booking Form** |
| **This form MUST be completed on every occasion that a taxi booking is made.**  |
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| **Name of the Taxi Company**  |  |
| **Booking Reference Number**  |  |
| **Name of the Staff Member and Ward/Service (making the booking)** |  |
| **Reason for Taxi Booking**  |  |
| **Authorised by**  |  |
| **Name of Passenger**  |  |
| **Address to be conveyed from**  |  |
| **Address to be conveyed to**  |  |
| **Date & Time of Travel**  | **Date:** | **Time:** |
|  |
|  |
| **On completion of the form, a copy MUST be emailed within 24 hours to:****Your Service Manager / Modern Matron or Admin Team (as per local agreement)**  |