



CHOICE PASS PROGRAM PARTICIPATION REQUEST FORM

To request ValleyRide bus passes, complete the short request form below. When completed, send your Participation Request to:

Valley Regional Transit
Attn: **Choice Pass Program**
700 NE 2nd Street, Ste. 100
Meridian, ID 83642

You may also fax it (subject: Choice Pass Program) at **208-846-8564** or e-mail it to: buspass@valleyregionaltransit.org Questions? Call RideLine customer service at 345-7433.

Company

Name _____

Number of Employees _____

Type of Business (for profit or non-profit) _____

Company Mailing Address

Street _____

City _____

ZIP Code _____

Company Billing Address (if different from mailing address)

Street _____

City _____

ZIP Code _____

Contact Information

Name _____

Title _____

Phone Number _____ E-mail address: _____

Pass Request (number of passes)

	QUANTITY	PRICE	TOTAL
31-Day Local Passes	_____	x \$32	_____
31-Day Universal Passes	_____	x \$62	_____
3-Month Local Passes	_____	x \$82	_____
3-Month Universal Passes	_____	x \$158	_____
One-Year Local Pass	_____	x \$266	_____
One-Year Universal Pass	_____	x \$516	_____
		TOTAL	_____

PASS SALES AT YOUR WORKSITE

We will sell passes to employees at the price we paid* YES NO

We will sell passes to employees at a discount YES NO

A 31-Day Local Pass will cost _____

A 31-Day Universal Pass will cost _____

A 3-Month Local Pass will cost _____

A 3-Month Universal Pass will cost _____

A 1-Year Local Pass will cost _____

A 1-Year Universal Pass will cost _____

We will give passes to employees at no charge YES NO

Employees can set up a pre-tax commuter benefit account YES NO

Would you like us to contact you to discuss the Choice Pass Program? YES NO

** Passes may not be sold for more than the purchase price.*