Valley Regional Transit 700 NE 2nd Street, Suite 100 Meridian, ID 83645 Phone (208) 345-7433 Fax (208)258-2730 Email: buspass@valleyregionaltransit.org



		General Bus Pass Order Form					
ORDER #:	DATE:						
Order number is the date of the order and your first initial and last name. Example: 07.12.24-JSmith							
Bill To:	Ship to:	PAYMENT TYPE Credit Card Check Po #					
GENERAL PASS FARES		REGULAR PRICE	QUANTITY	TOTAL			
	1 Day Local Adult	\$ 2.50					
*1 Day Local Youth (6-18)/Senior/ Disabled		\$ 1.25					
	Day Universal Adult	\$ 7.50					

*1 Day Lo	cal Youth (6-18)/Senior/ Disabled	\$ 1.25		
	1 Day Universal Adult	\$ 7.50		
*1 Day Universal Youth (6-18)/Senior/ Disabled		\$ 3.75		
	*\$13.50 Stored Value	\$ 10.00		
	*\$27.00 Stored Value	\$ 20.00		
	31 Day Local Adult	\$ 42.00		
*31 Day Local Student/Senior/Disabled		\$ 21.00		
	31 Day Universal Adult	\$ 90.00		
*31 Day L	Iniversal Student/Senior/Disabled	\$ 45.00		
	One Year Pass Local	\$ 282.00		
	One Year Pass Universal	\$ 594.00		
	ACCESS Tickets Book of 10	\$ 30.00		
	ACCESS Single Ticket	\$ 3.00		
	SCRIP Tickets Book of 10	\$ 10.00		
	SCRIP Single Ticket	\$ 1.00		
Mailing Fee for orders	that are requested to be mailed	\$ 5.00		
			Total:	
Agent:	Invoice #:			
DATE SHIPPED:	Tracking #			
Pass #:				
Picked-up by:			Date:	