



## ALTERNATIVE MODE USER REGISTRATION FORM

**Yes!** Sign me up as a registered Alternative Mode User (AMU).

Date: \_\_\_\_\_

I understand that I am now eligible to participate in the Guaranteed Ride Home program and all the other incentives associated with the Travel Reduction Program when I use an alternative mode of transportation (anything other than driving alone).

Name: \_\_\_\_\_ Contact Info: \_\_\_\_\_

Home Zip Code: \_\_\_\_\_ Are you a new AMU?  Yes  No

I expect to be an AMU \_\_\_\_\_ days per week \_\_\_\_\_ month.

I will (check all that apply):

Carpool  Vanpool  Bus/Light Rail  Bike  Walk  Other: \_\_\_\_\_

Please register my vehicle to park in the carpool parking. I understand the policies & procedures for using these spaces. License Plate Number(s): \_\_\_\_\_

TC Notes:

\_\_\_\_\_

CARPOOL | VANPOOL | BUS | LIGHT RAIL | TELEWORK | BIKE | WALK



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