Bus Pass Order Form

Name: _____

Address: _____

City & Zip: _____

Fare type	Cost	Ordered	Total Cost
10-Punch Pass (Full Fare)	$ 13.00		$ 0.00
10-Punch Pass (Senior/Disabled)	$ 6.50		$ 0.00
31 Day Pass (Full Fare)	$ 50.00		$ 0.00
31 Day Pass (Student)	$ 40.00		$ 0.00
31 Day Pass (Senior/Disabled)	$ 25.00		$ 0.00
ADA Paratransit Single Ride Ticket	$ 3.00		$ 0.00
ADA Paratransit Booklet	$ 30.00		$ 0.00
All Access 31 Day Pass (Full Fare)	$ 80.00		$ 0.00
All Access 31 Day Pass (Student)	$ 70.00		$ 0.00
All Access 31 Day Pass (Senior /Disabled)	$ 40.00		$ 0.00
Day Pass (Full Fare)	$ 3.75		$ 0.00
Day Pass (Student)	$ 3.20		$ 0.00
Day Pass (Senior/ Disabled)	$ 1.85		$ 0.00
Single Ride Ticket (Full Fare)	$ 1.50		$ 0.00
Single Ride Ticket (Senior /Disabled)	$ 0.75		$ 0.00
Wine Country Express Single Ride Ticket (Full Fare)	$ 2.50		$ 0.00
Wine Country Express Single Ride Ticket (Senior /Disabled)	$ 1.25		$ 0.00

* "Senior" is defined as 65 years and older.
* "Student" is defined as 18 years and younger. ID may Be required.
* "Children" is defined as 6 years and under. Children must be accompanied by a fare-paying passenger 14 years and older. Limit three children per adult guardian.
* Monthly passes entitle the purchaser to unlimited use of fixed-roue services for the calendar month.

Total Sales Amount	$ 0.00

Contact Information		**Payment Information**	
Name:	_____	Cash: ☐ Card: ☐ Bill: ☐	
Phone:	_____	PO:	_____
Email:	_____	Check #	_____
Billing Address:	_____		

I hereby acknowledge that the information listed above is correct.

Signture: _____

Print: _____ Date: _____

Thank you for placing a bus pass order with COLT. If you have any questions or concerns please call 805-875-8266, or Email: j_wilks@ci.lompoc.ca.us

For Office Use Only

Picked up: _____ Date and Time _____

Mailed: _____ Date and Time _____