

**Purchasing GATRA
Passes is as easy as...**

1..2..3

1. Choose the type of pass you want.
2. Fill out the appropriate pass form.
3. Mail the completed form with a self-addressed stamped envelop and a check or money order (payable to GATRA) to:

GATRA PASSES
2 Oak Street
Taunton, MA 02789

GATRA DIAL-A-RIDE

Please send my Dial-A-Ride Pass(es) to:

NAME _____

ADDRESS _____

CITY _____

STATE, ZIP _____

- | | | |
|--------------------------|-----------------|-------------------|
| <input type="checkbox"/> | 1 PASS | \$1) .00 |
| <input type="checkbox"/> | 2 PASSES | \$' 0.00 |
| <input type="checkbox"/> | 3 PASSES | \$ () .00 |
| <input type="checkbox"/> | 4 PASSES | \$* \$.00 |
| <input type="checkbox"/> | 5 PASSES | \$+) .00 |

GATRA 31-DAY PASS

Please send my 31-Day Pass(es) to:

NAME _____

ADDRESS _____

CITY _____

STATE, ZIP _____

Check One:

- | | | |
|--------------------------|-------------------------|----------------------|
| <input type="checkbox"/> | REGULAR PASS | \$(0.00 |
| <input type="checkbox"/> | ELDERLY/DISABLED | \$&\$.00 |
| <input type="checkbox"/> | STUDENT PASS | \$&\$.00 |

* Can now be used on the Route 18*

REGULAR 10-RIDE PASS

Please send my 10-Ride Pass(es) to:

NAME _____

ADDRESS _____

CITY _____

STATE, ZIP _____

- | | | |
|--------------------------|-----------------|---------------------|
| <input type="checkbox"/> | 1 PASS | \$\$.00 |
| <input type="checkbox"/> | 2 PASSES | \$&* .00 |
| <input type="checkbox"/> | 3 PASSES | \$' - .00 |
| <input type="checkbox"/> | 4 PASSES | \$) &.00 |
| <input type="checkbox"/> | 5 PASSES | \$*) .00 |

ELDERLY/DISABLED 10-RIDE PASS

Please send my 10-Ride Pass(es) to:

NAME _____

ADDRESS _____

CITY _____

STATE, ZIP _____

- | | | |
|--------------------------|-----------------|-----------------------|
| <input type="checkbox"/> | 1 PASS | \$* ') \$ |
| <input type="checkbox"/> | 2 PASSES | \$\$.00 |
| <input type="checkbox"/> | 3 PASSES | \$1- ') \$ |
| <input type="checkbox"/> | 4 PASSES | \$&6.00 |
| <input type="checkbox"/> | 5 PASSES | \$' &') \$ |

STUDENT 10-RIDE PASS

Please send my 10-Ride Pass(es) to:

NAME _____

ADDRESS _____

CITY _____

STATE, ZIP _____

- | | | |
|--------------------------|-----------------|-----------------------|
| <input type="checkbox"/> | 1 PASS | \$* ') \$ |
| <input type="checkbox"/> | 2 PASSES | \$\$ ') \$ |
| <input type="checkbox"/> | 3 PASSES | \$1- ') \$ |
| <input type="checkbox"/> | 4 PASSES | \$&* '\$\$ |
| <input type="checkbox"/> | 5 PASSES | \$' &') \$ |