

STATEWIDE ACCESS PASS APPLICATION

A **Statewide Access Pass** can be used to obtain half fare on all GATRA fixed-route buses and all other public transportation in Massachusetts. **To apply for a Statewide Access Pass**, please complete and submit <u>this application</u> AND <u>a copy of your Medicare Card or Agency Letter from the below listed agencies</u> verifying current status.

You are eligible for a Statewide Access Pass if	you identify with one or more of the b	elow statuses:	
Medicare Card Holder Currently receive disability pa A veteran with a disability rat Client of DMH (Department o and/or MRC (Massachusetts F	ing of 70% or greater f Mental Health), DDS (Department of	Developmental Services)	
NAME:	First	M.I.	
ADDRESS:			
CITY/TOWN:			
TELEPHONE NUMBER:	EMAIL:	EMAIL:	
DATE OF BIRTH:///			
SIGNATURE:	DATE:		
MAIL to 10 Oa	COMPLETED APPLICATION TO GATRA: ak St, 2 nd Floor, Taunton MA 02780 <i>or</i> MAIL to info@gatra.org FAX 508-824-3474 as, please call 508-823-8828 ext 263 or	TTY: 711.	
·	ducido al Español, llame a 508-823-8828 ext 26 aduzido em Português, ligue 508-823-8828 ext		
Please note a photo is required for all Statew application is received to review the options		-	
Once the application is approved and the pho	oto requirement is met, you will be issu	ed a Statewide Access Pass.	
Date App Received	FOR GATRA OFFICE USE ONLY Date Access Pass Issued Expiration Date MBTA Charlie Card Number		