



2011-2012 Go!pass Order Form

Contact Information

Organization/Business Name: _____

Organization/Business Address: _____ Phone: _____

Owner/Manager: _____ go!pass Contact: _____

Email Address: _____ Website: _____

Employer Confirmation Documents

Please include the following information with your order:

- A copy of your Michigan Quarterly Tax Wage Earnings Report **OR** a letter from a manager confirming the total # of employees.
- Your Employer Identification # _____
- A signed copy of the 2011-2012 go!pass Employer Handbook Agreement (pg. 7 of Employer Handbook)

Order & Payment

Required: You MUST pay \$10 for each full time employee at your organization to receive go!passes.

1. TOTAL number of full time employees at your organization: _____ X \$10 per employee = \$ _____

Optional: You can optionally purchase passes for your part-time employees (including interns and volunteers) IF they work at least 16 hours a week downtown.

2. TOTAL number of part-time employees at your organization: _____ X \$10 per employee = \$ _____

Total go!pass price = \$ _____

3. **Total Number of go!passes requested:** _____

(can be equal to or less than the number of employees at your organization)

Owner/Manager Signature (Mandatory): _____ **Date:** _____

Payment Method: Check# _____ (payable to getDowntown Program) Cash

Online Credit Card or PayPal payment (www.getdowntown.org/bus/gopass/onlinegopasspayment.html)

Credit card: Visa MasterCard

Credit Card Number: _____ Exp. Date: _____ Security Code: _____

Name on Credit Card: _____

Return to:

getDowntown Program, 518 E. Washington, Ann Arbor, MI 48104

Phone: 734.214.0100—Fax 734.668.2525—Email: info@getdowntown.org