



Additional Go!pass Order Form

Organization/Business Name: _____

Organization/Business Address: _____ Phone: _____

Owner/Manager: _____ go!pass Contact: _____

Employment Confirmation

I confirm that this organization has a total of _____ full time employees and _____ part-time employees.

I am checking this box to confirm that I am buying passes for new employees (not to replace lost or stolen passes).

Order & Payment

Price	Additional go!passes requested for new employees	Total \$
\$10		

Owner/Manager Signature: _____ Date: _____

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

PayPal (www.getdowntown.org/bus/gopass/gopasspayment.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—Email: info@getdowntown.org