

Additional go!pass order form

When to use this form: Use this form when you need to order additional go!passes for new employees. All *new* go!passes are \$5.

Organization/Business Name: _____

Organization/Business Address: _____

Phone: _____ Fax: _____

Email Address: _____

Number of additional go!passes needed for full-time employees: _____

Number of additional go!passes needed for part-time employees: _____

Name(s) of new employee(s) receiving go!passes (please type or write on a separate sheet if names won't fit in space provided):

I attest that I am ordering new go!passes, not replacement go!passes, for employees at my business:

Owner/Manager Name: _____

Owner/Manager Signature: _____

Date: _____

Payment:

Check (payable to Ann Arbor Chamber of Commerce) Cash

Credit Card: Visa MasterCard American Express

Name on Credit Card: _____

Credit Card Number: _____ Exp. Date: _____

Return to:

getDowntown Program, Ann Arbor Area Chamber of Commerce
115 W. Huron 3rd Floor, Ann Arbor, MI 48104
Phone: 734.214.0100 Fax 734.665.4191 Email: nancy@annarborchamber.org