



VANPOOL APPLICATION

Getting to and from work is easier and cheaper with Metro Rides' Vanpool Program. Metro Rides will assist you with your long-distance commuting needs. If you are interested in being a driver or a rider in a vanpool, fill out the application form and return it to:

Metro Rides
1015 Transit Drive
Colorado Springs, CO 80903
Fax: (719) 385-5419
metrorides@springsgov.com

Name: _____
(First) (Middle) (Last)

Home Address: _____

City: _____ State: CO Zip Code: _____

Work Address: _____

City: _____ State: CO Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

Drivers License #: _____ State: _____ Expiration Date: _____

Date of Birth: _____ Work Hours: _____ - _____
(Start) (Finish)

Check Work Days: MON TUE WED THURS FRI SAT SUN

Check One: Primary Driver Back-up Driver Rider Only

Emergency Contact: _____ Phone: _____ Relationship: _____

If someone referred you to Vanpool, who was it? _____

Everything stated on this application is both true and correct to the best of my knowledge. I understand that Metro Rides will submit this application to their insurance carrier to seek approval. I also understand that Metro Rides will obtain my current driving record every six (6) months. This information is only used for current vanpool drivers and will be kept confidential.

(Signature)

(Date)
