

Request for Reduced Fare Certification For CyRide Fixed Route Service

Return to CyRide at the address below or to any CyRide driver.

The information obtained in this certification process will be used by Ames Transit Agency (CyRide) only for the determination of eligibility to ride CyRide fixed route buses for the reduced fare. The information will not be provided to any other person or agency except the person listed as a physician or other professional with familiarity with the applicant's disability.

Name_____			
Address_____			
City_____	State_____	Zip_____	
Phone_____			

What is the disability that would make you eligible for a reduced fare on CyRide fixed route service? Please use the back of this form if needed.

In order to allow the Ames Transit Agency to evaluate your request, it may be necessary to contact a professional to confirm the information you have provided. Please complete the following information and authorization form:	
The following person is familiar with my disability and is authorized to provide information to the Ames Transit Agency required to complete this form:	
Name_____ Address_____	
City_____	State_____ Zip_____ Phone_____

I hereby certify that the information given in this application is correct.	
Signed_____ Date_____	

For office use only	Ames Transit Agency 601 N. University Blvd. Ames, IA 50010
Received_____ Approved/Denied_____	
Notes_____	