



DISCOUNT ID CARD APPLICATION

Permanent Temp

_____ ID Number _____

_____ Issued _____ Expires _____

NOTE: There is a \$3 fee for all replacement cards.

This ID card allows seniors and persons with disabilities to buy GoTriangle passes at a discount. Teens ages 13 to 18 can ride free with a Youth GoPass. Find out more at youthgopass.com. Children 12 and under ride free with an adult.

Name: _____ Date of Birth: _____
Last MI First Month Day Year

Street: _____ City: _____ State: _____ Zipcode: _____

Phone: _____ Phone: _____ Email: _____
Day Evening

Check the box that applies to you and provide the information required. The Health Care Provider Verification portion must be completed and signed by your doctor, nurse or other health care provider who is not a family member. Photo must be taken in person at 901 Slater Road, Durham, NC 27703. Please bring proof of age and your completed application. Please call 919-485-RIDE (7433) for more information.

I am 65 years of age or older.

Office use only

Age Verified _____

Persons With Disability

A Medicare Card, Veterans Health ID Card or a Disability Card from any transit system can be used to secure a GoTriangle Discount ID Card instead of a physicians signature.

I have a permanent disability that prevents me from using mass transportation as effectively as persons who are not so affected.

Nature of Permanent Disability _____

I have a temporary disability that prevents me from using mass transportation as effectively as persons who are not so affected.

Nature of Temporary Disability _____

My doctor estimates that my temporary disability will last until: _____

Healthcare Provider Verification

I have read this application and certify that the information is correct.

Printed Name: _____ If not a MD, List Medical Title: _____ Phone: _____

Street: _____ City: _____ State: _____ Zipcode: _____

Signature: _____ Date: _____