



FREEDOM RIDE PROGRAM TAXI VOUCHER ORDER FORM

ADA ID # _____

AMOUNT OF CHECK: \$ _____ CHECK #: _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE NUMBER: (_____) _____

**A \$25.00 MINIMUM IS REQUIRED THE FIRST TIME YOU PURCHASE A VOUCHER.
A MAXIMUM OF \$50 IS ALLOWED PER MONTH.**

Freedom Ride voucher cards may not be used to tip the driver. Cash or use of another credit card is permissible for tipping.

PLEASE CHECK IF:

_____ **A NEW ACCOUNT**

_____ **ADDING VALUE TO AN EXISTING ACCOUNT**

Do not send cash. Enclose a check or money order payable to :

Greater Hartford Transit District - Freedom Ride

Lost Taxi Voucher Cards

If voucher card is lost or stolen, report it to the Yellow Cab Company immediately. A new voucher card will be issued and any unused taxi credit will be transferred to the new card.

**MAIL FORM WITH PAYMENT TO:
GREATER HARTFORD TRANSIT DISTRICT
FREEDOM RIDE TAXI VOUCHER PROGRAM/ADA
ONE UNION PLACE HARTFORD, CT 06103**

This information is available in accessible format and in languages other than English upon request.
Para información en español, por favor llame al numero (860) 724-5340 y seleccione el numero 5.