

ORDER FORM FOR INDIVIDUALS: RENEW STUDENT REDUCED FARE RIDING PRIVILEGES 2015-2016 School Year

- i** **DO use this form to request Student Reduced Fare riding privileges be renewed for the 2015-2016 school year on a Student Ventra Card that a student already has.**
- !** **DON'T use this form if the student attends a Chicago Public School or a school that issues Ventra Cards directly. (The school will let us know if the student is still enrolled.)**
- !** **DON'T use this form if the student doesn't have a Student Ventra Card from their last school term—use the New/Replacement Student Ventra Card order form at ventrachicago.com/students instead.**

ELIGIBILITY

- Student Reduced Fare riding privileges are available to full-time students ages 7-20, for trips to and from regular day classes at a public, parochial or private elementary or high school, on school days 5:30am–8:30pm.
- Fare is calculated automatically when using this card and students only need this one card, year-round. Outside of Student Reduced Fare hours (or when not attending school), students <12 are charged Reduced Fare when riding (automatically, if registered—otherwise, they'll need to ask for help to get the Reduced Fare when riding), while students 12-20 are charged Full Fare.



REGISTER YOUR STUDENT'S CARD

If you register your student's card, transit value is protected if the card is lost or stolen. Also, you'll be able to use convenient account management features—including loading value online or over the phone—and for receiving important notifications and updates regarding student fares.

Completing this form doesn't automatically register your card with Ventra. You must visit www.ventrachicago.com or call 1-877-NOW-VENTRA to complete your registration.

STEP 1: Fill Out Student Information (cardholder)

FIRST NAME _____ MIDDLE INITIAL _____
 LAST NAME _____
 ADDRESS _____ APT./SUITE _____
 CITY _____ ZIP _____ DATE OF BIRTH ____/____/____

STUDENT VENTRA CARD # (from front of card) :

6	3	7	0																
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Parent's/Legal Guardian's Information

FIRST NAME _____ MIDDLE INITIAL _____

LAST NAME _____

Address information, if different than student address:

ADDRESS _____ APT./SUITE _____

CITY _____ STATE _____ ZIP _____

PRIMARY PHONE: (_____) _____

EMAIL: _____

Note: Giving us your email address allows us to send you important updates about the student fare program.

SCHOOL VERIFICATION

School Verification (must be completed by the school)

School administrator: Please verify that the student named on this form will be in attendance during the 2015-2016 school year (in classes for all or part of 8/10/15 thru 6/24/16).

SCHOOL NAME _____

SCHOOL ADDRESS _____

CITY, STATE, ZIP _____

PRINCIPAL (OR REPRESENTATIVE) NAME _____

SIGNATURE _____ DATE _____

SCHOOL STAMP OR SEAL (if available):

WHERE TO SEND COMPLETED FORMS

WHERE TO SEND COMPLETED FORMS (choose only one)

By mail:	By fax:	By e-mail:
Ventra Services Attn: Student Ventra P.O. Box 8291 Chicago, IL 60680	Ventra Services Attn: Student Ventra Fax (312) 283-1692	Scan (or take clear pictures) of a completed form to ctastudents@ventrachicago.com