



Name of Pass Holder: _____
 (if purchasing Commuter Solution Passes please print clearly the names of passholders on the back of the sheet or on the enclosed form. Please write your name in the space above.)

Name of Business* (if applicable): _____

Address: _____

Mailing Address (if different): _____

Phone #: _____

SUMMER PASSES Valid 4/27-10/8/2018
UNLIMITED RIDES ON ALL ROUTES

_____	SUMMER Adult	\$135
_____	SUMMER Nantucket Student (\$5 off with The CARD)	\$ 70
_____	SUMMER College/Off Island High School Student	\$120
_____	SUMMER Commuter - must be purchased by employer	\$120
_____	SUMMER Reduced (65&older, disabled, veteran, active military)	\$ 70

****NEW ANNUAL PASS****

Valid 4/27 – 12/31/2018

UNLIMITED RIDES ON ALL ROUTES

_____	ANNUAL Adult	\$150
_____	ANNUAL Nantucket Student (\$10 off with The Card)	\$ 90
_____	ANNUAL College/Off Island High School Student	\$125
_____	ANNUAL Commuter - must be purchased by employer	\$125
_____	ANNUAL Reduced (65&older, disabled, veteran, active military)	\$ 75
_____	31 DAY	\$ 75
_____	REPLACEMENT PASS	\$10

For NRTA use only

Date Purchased: _____ Pass# _____ Amount Paid: \$ _____

Check #: _____ Cash: _____ Credit Card: _____