

COMMUTER BENEFITS AGREEMENT

PRIMARY MODE OF COMMUTING

PLEASE SELECT ONE MODE



**CARPOOL/VANPOOL/
EV CHARGING**

Electric Vehicle Charging



BIKE

Bicycle Locker
Secure & Enclosed Bike Locker



TRANSIT

\$65 Transit Subsidy
When Using Bus or Light Rail

PLEASE PRINT

I, _____,
agree to participate in the TMA's online three-minute Commute Survey in October in exchange for these McClellan Park TMA benefits. I understand that failure to complete the survey, to validate the use of my commute benefit, will result in removal from this program.

Employer _____ Work Phone _____

Home Email _____ Work Email _____

Signature _____ Date _____

PLEASE EMAIL TO: info@mcclellanparktma.org

IT PAYS TO TMA

 **McClellan Park**
Transportation Management Association