



Application for Santa Fe Ride and Santa Fe Trails
Senior and Veteran Program

Date: _____
 Participant Name: _____ SF Ride # _____
 Telephone Number: _____ Alternate Telephone Number: _____
 Address: _____
 Apt #: _____ Building/Apartment Name: _____
 City: _____ State: _____ Zip: _____ DOB: ____/____/____
 Primary Language (please check) English Spanish Other (specify) _____ Female Male
 Check all that apply: Hispanic Native American African American Asian Caucasian
 Mobility Aid(s) _____
 Emergency Contact _____ Phone number _____
 Emergency Contact _____ Phone number _____

Signature: _____ Date: _____

Requested Program:

SANTA FE RIDE SENIOR ID (60+)

- Medicare Card
- NM Driver License or I.D. Card
- Santa Fe Ride Senior Card
- City of Santa Fe Senior Division I.D. Card

SANTA FE TRAILS SENIOR ½ FARE ID (60+)

- Picture ID with proof of age

SANTA FE RIDE & SANTA FE TRAILS VETERANS FREE FARE ID

- Official Dept. of Veterans Affairs I.D. Card
- Santa Fe Driver's License
- City of SF utility bill with their name

The Santa Fe Ride office will explain how to use Santa Fe Ride.
 If you have any questions you can contact the office at (505) 473-4444.

* Only 1 form of verification is needed per program

If this application has been completed by someone other than the person requesting certification, that person must complete the following:

Name : _____
 Address : _____
 City: _____ State: _____ Zip: _____ Phone: _____
 Signed: _____ Date: ____/____/____