



RTA/CTA Transit Benefit Program Employee Enrollment Form

RTA/CTA
TRANSIT
BENEFIT
FARE
PROGRAM

This form will be used to establish your Chicago Card Plus® account through the RTA/CTA Transit Benefit Fare Program. Your pre-tax payroll deduction administered by your employer or third-party administrator will be applied directly to your Chicago Card Plus account. Unless otherwise indicated by the CTA, the \$5 purchase fee is waived for new card orders. The replacement fee for lost cards is \$5.

Do you already own a Chicago Card Plus that you would like to use in the Transit Benefit Fare Program?

Yes

No

If yes, please provide the card number and PIN. Card #:

PIN:

If yes, you will only need to fill out sections A and C. Once your first Transit Benefit dollars are applied to your account, the credit card currently listed on your account will be charged for reloading purposes only if the balance on this Chicago Card Plus falls below \$0.

ENROLLMENT INFORMATION (Please Print)

A. EMPLOYER INFORMATION (All fields required)

Company Name:

Phone Number:

Address/Suite:

City/State/Zip:

B. PERSONAL INFORMATION (All fields required)

Name (First/MI/Last):

Home/Shipping Address:

City/State/Zip:

Phone Number:

E-mail:

Select a PIN for your account. Must contain any combination of four letters/numbers:

C. FARE PAYMENT PREFERENCES AND RELOAD AMOUNTS (Choose One)

Please select your initial fare choice and initial reload amount. Reload amounts must be changed through your employer. Fare choice can be changed only by you, either online or by phone.

Pay-Per-Use: \$30 \$45 \$60 \$80

Full fare and transfers are deducted from your online account each time you ride.

30-Day Pass - \$86

Provides unlimited rides for 30 consecutive days beginning with the first ride taken using your Chicago Card Plus.

CREDIT CARD BACK UP — OPTIONAL

You may opt to provide a credit card to reload value to your account in the event that your account balance reaches \$0 before your next pre-tax reloading. Your credit card will be charged only if your account value falls below \$0. It will be charged an amount sufficient to bring your account balance to \$10. You can set up your account to send you an e-mail notification each time your credit card is charged.

Billing Name (First/MI/Last):

Credit Card Type: Visa MasterCard Discover AMEX

Credit Card Billing Address:

City/State/Zip:

Credit Card Number:

Expiration Date:

Cardholder signature:

Credit Card security code:

(3 digits on back of card; 4 digits on front of AMEX)

Please sign and date to authorize the establishment of your Chicago Card Plus account. Your signature certifies that you agree to the terms and conditions for using Chicago Card Plus as established by the Chicago Transit Authority. Terms and conditions are available at chicago-card.com. Your signature also authorizes your employer or administrator to deduct an additional \$5 of pre-tax income for payment of replacement card fees. Pre-tax payroll deductions are to be used only by you during your commute to and from work.

Signature:

Date:

Deliver this form to your HR department or third-party administrator once completed. Your Chicago Card Plus will be mailed to the address you provided in section B. If the CTA receives this form by the 15th of the month, your employer will be able to submit an order during the following month which lists the amount of pre-tax dollars to be posted to your account. These dollars will be available for fare payment on the first day of the month following placement of this order.

D. Deliver this form to your HR department once completed.