Rideshare Plus

Do you ride the bus or train, vanpool, carpool, telework, bike, or walk to work at least five days per month?
Get access to best-in-class offers, powered by Entertainment, the premier provider of promotions and discounts.

SIGN UP NOW at **IECommuter.org** or complete this application, to receive a **FREE membership** to Rideshare Plus – a program that includes access to online savings at more than 500,000 merchants locally and nationwide.

IE Commuter is a program of the Riverside County Transportation Commission and San Bernardino County Transportation Authority

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Rideshare Plus Application Form

To qualify for this program you must have been ridesharing to work a minimum of **five days** a month for at least **three months** and be a resident of **Riverside County** or **San Bernardino County**.

To apply, complete this application form or apply online at **IECommuter.org**

① CHOOSE ONE: ☐ Riverside County resident ☐ San Bernardino County resident

② COMMUTER INFORMATION (Please Print)

Name _____

Address _____

City _____ Zip _____

Home Phone _____ Work Phone _____

E-mail Address _____ (Required)

Date of Birth ____ /____ /____ (Required as a unique identifier)

How many consecutive months have you been ridesharing to work? _____ months

How far do you commute one-way to work? _____ miles

How long does your one-way commute to work take? _____ minutes

How many days a week do you rideshare to work? (Check one) ☐1 ☐2 ☐3 ☐4 ☐5

Which rideshare mode do you most often use to commute to work? (Check one)
☐ Bus ☐ Train ☐ Vanpool ☐ Carpool* ☐ Telework ☐ Bicycle ☐ Walk
*If carpooling, you must ride with at least one other working adult

If you checked carpool, is it an electric vehicle? ☐ Yes ☐ No

Interested in finding carpool or vanpool partners? ☐ Yes ☐ No

SIGNATURE (Required)_____ **DATE** _____

③ EMPLOYER INFORMATION (Please Print)

Employer Representative Name*_____
*Supervisor, Human Resources, or Employer Transportation Coordinator

Title_____

Phone_____ E-mail_____

Employer Name _____

Address _____ City _____

Zip_____ Approximate number of employees at this worksite _____

④ SEND APPLICATION | Scan form and email to **incentives@iecommuter.org** or send to
IE Commuter, P.O. Box 10431 San Bernardino, CA 92423-0431

NEED HELP? Call 1-866-RIDESHARE (866-743-3742)

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