



PENINSULA TRAFFIC CONGESTION RELIEF ALLIANCE

Attention college commuters!

If you currently drive alone to campus, and you commute to, from, or through San Mateo County, we invite you to try carpooling!

The Peninsula Traffic Congestion Relief Alliance is offering gas cards worth \$20.00 to commuters who will carpool to college, a minimum of two days per week, per semester. Each member of the carpool is eligible for this offer twice a year – spring and fall, while supplies last.

If you need a carpool partner or want to find a new member for an existing carpool, visit our website at www.commute.org and click on "Find a Carpool Partner."

Commute by carpool... and we'll buy the gas

Now is the time to try carpooling! The Peninsula Traffic Congestion Relief Alliance is offering a \$20.00 gas card incentive to help you get started!

Start here:

- Form a NEW carpool with two or more people over the age of 18.
- Register yourself and your carpool member(s) by completing the attached application form.
- Provide copy of school registration for current semester.

Mail or fax completed form to:
 Peninsula Traffic Congestion Relief Alliance
 1150 Bayhill Drive, Suite 107
 San Bruno, CA 94066
 Fax: (650) 588-8171
www.commute.org

Questions? Call 650-588-8170

Your carpool must consist of at least two adults (18 years of age or older). If you have received any of the Peninsula Traffic Congestion Relief Alliance incentives in the past, you are not eligible to receive this gas card offer. The gas card incentive is per semester – spring and fall, while supplies last.



→ free gas card

...Please register all your carpool members on attached application form AND Complete Carpool Release and Waiver of Liability form to the right.



You Pool, We Pay!

Carpool to College Incentive Program Application

CARPOOL RELEASE AND WAIVER OF LIABILITY

I, the undersigned, request to register my participation in the Carpool Incentive Program ("Program"). In consideration of the benefits I receive as a participant in this Program, I hereby assume full responsibility for all risk of injury or loss, including death, which may result from my participation in this Program, I agree to hold harmless, release, waive, forever discharge, and covenant not to bring suit or claim against the Peninsula Traffic Congestion Relief Alliance (ALLIANCE), San Mateo County Transit District, City/County Association of Governments of San Mateo County, and their respective from any and all claims and demands which the undersigned may have or damage to or loss or destruction of any property arising or resulting or death is alleged to be caused in whole or in part by the negligent acts my heirs, executors, administrators, and all of my family members as well as myself.

The Peninsula Congestion Relief Alliance reserves the right at its sole discretion to determine eligibility of any Participant, and may change, modify or discontinue the Program without notice, at any time, and for any reason including but not limited to a loss of, or change in, funding.

I have read the foregoing release and fully understand the terms contained therein and sign this waiver freely and without inducement. I hereby verify the information submitted is true and correct.

#1 (NAME)

Signature

#2 (NAME)

Signature

#3 (NAME)

Signature

#4 (NAME)

Signature

This Release and Waiver of Liability must be on file prior to participation in the ALLIANCE Carpool Incentive Program. Each individual participating in the ALLIANCE Carpool Incentive Program is required to sign this release form. Return the completed form(s) to address at left.

Carpool to College Incentive Program Application

Mail or fax this application along with the Carpool Release and Waiver of Liability form located on the previous page.

Carpool Member #1 (Name)

Home Address

Home City

Home Zip

Daytime Phone – required to process

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Email Address

College/Training School you attend

What is the one-way mileage from your home to the school?

How many days per week do you carpool?*

Prior to joining this carpool, did you drive alone to school?

YES NO

Our carpool Started:

MONTH: YEAR:

Are you a ...

Student Faculty Staff

How did you hear about this program?

School www.commute.org
 Fair/Event ALLIANCE
 Other:

Carpool Member #2 (Name)

Home Address

Home City

Home Zip

Daytime Phone – required to process

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Email Address

College/Training School you attend

What is the one-way mileage from your home to the school?

How many days per week do you carpool?*

Prior to joining this carpool, did you drive alone to school?

YES NO

Our carpool Started:

MONTH: YEAR:

Are you a ...

Student Faculty Staff

How did you hear about this program?

School www.commute.org
 Fair/Event ALLIANCE
 Other:

Carpool Member #3 (Name)

Home Address

Home City

Home Zip

Daytime Phone – required to process

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Email Address

College/Training School you attend

What is the one-way mileage from your home to the school?

How many days per week do you carpool?*

Prior to joining this carpool, did you drive alone to school?

YES NO

Our carpool Started:

MONTH: YEAR:

Are you a ...

Student Faculty Staff

How did you hear about this program?

School www.commute.org
 Fair/Event ALLIANCE
 Other:

Carpool Member #4 (Name)

Home Address

Home City

Home Zip

Daytime Phone – required to process

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Email Address

College/Training School you attend

What is the one-way mileage from your home to the school?

How many days per week do you carpool?*

Prior to joining this carpool, did you drive alone to school?

YES NO

Our carpool Started:

MONTH: YEAR:

Are you a ...

Student Faculty Staff

How did you hear about this program?

School www.commute.org
 Fair/Event ALLIANCE
 Other:

* Each member must pledge to carpool a minimum of two days per week during the semester/quarter.

Each carpool member must sign the Waiver of Liability.

Falsification of this document will disqualify you from this Carpool Incentive Program.

Participation in the Carpool Incentive Program requires your participation in a follow-up survey.

Please duplicate this form, as needed, for additional members of your carpool. Send along with the Carpool Release and Waiver of Liability from previous page.

Mail or FAX completed forms to:

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