EMPLOYEE Commute Alternative Program (CAP) Registration

Complete this form and email it to commute@emory.edu or fax it to 404.727.2673. You can also drop it off at the Transportation and Parking Services office on Clairmont Campus: 1945 Starvine Way, Suite 400B; Monday - Friday, 7:30am - 4:30pm.

I. APPLICANT INFORMATION

Full Name: ________________________________
Last First Middle

Home Address: ____________________________
Street Address City / State Zip

Emory ID #: __________________ Work location: __________________ Work phone: __________

Email Address: ____________________________ Work hours: __________ Cell phone: __________

II. COMMUTE ALTERNATIVE PROGRAM OPTION

How did you hear about the Commute Alternatives Program (CAP)? (Circle one)
Word of Mouth Signage Email Website In-Person Event Parking Office Front Desk Other

Check one box and complete the section below it.

☐ Public Transit (Circle one)
   Monthly unlimited pass:
   MARTA Xpress GCT CobbLinc
   If you use a regional pass (Xpress/GCT/CobbLinc) AND MARTA for your commute to work, please check here for a 20-Trip MARTA Pass.

☐ Emory Commuter Shuttle (Circle one)
   North DeKalb Park-and-Ride CCTMA
   South DeKalb Park-and-Ride Executive Park

☐ Active Commute (Circle one)
   Bike Walk Drop-off

☐ Carpool ☐ 2-person ☐ 3+ person
   I am Primary Secondary (Circle one)
   Primary Driver Name__________________________
   Primary Driver Phone__________________________
   Secondary carpool participants:
   Name__________________________
   Name__________________________
   Name__________________________
   Each carpool participant must complete a separate CAP registration form.

☐ Vanpool Van #____________
   Primary Driver Name__________________________
   Primary Driver Phone__________________________

III. COMMUTE ALTERNATIVE PROGRAM BACKUP BENEFIT Main Campus employees ONLY

Commute Alternative Program Benefits: Check one box to select your back-up benefit.

☐ 20-Swipe CAP Pass
   Occasional use parking swipes

☐ 40-Trip MARTA
   Trips to use on MARTA

☐ 10 Swipe CAP Pass + 20-Trip MARTA
   Combination of parking swipes and MARTA trips

CAP pass and 40 Trip MARTA are pro-rated based on the academic calendar year. If you select public transit or MARTA trips, you must sign the transit subsidy agreement on pg 2. Please allow up to 5 days for processing.

IV. VEHICLE INFORMATION

Make (Manufacturer)__________________________
Model__________________________
License Plate #__________________________
State of Registration__________________________
Primary color__________________________

PERMIT # _________________________________
Dept. Use ONLY

Pkg. Code:__________________________
Initials:__________________________ Date: __ / __ / ___