



UCDHS GREEN LIGHT COMMUTER CLUB REGISTRATION FORM

Name: _____

Home Address:

Street _____ City _____ Zip _____

Home Phone Number: _____ Work Phone Number: _____

Work Hours: _____ A.M or P.M.

Work Days (circle appropriate days): Mon: Tue: Wed. Thu. Fri. Sat. Sun.

E-mail Address: _____

Do you currently use, or would you like to try one of the following commute options?

Carpool

Bicycle

Vanpool

Walk

Transit

UCD/UCDHS Shuttle

Amtrak

Dropped-Off

Carpool with non-UCDHS Employee

To be eligible for monthly drawings, you must be enrolled in or trying one of the above commute options.

Fax completed registration form to 734-0600.