



Madison Metro Transit Order Form

Please use the enclosed Order Form to request Madison Metro Paratransit and Fixed Route bus tickets.
Follow the instructions below.

Instructions:

1. Write the Authorization Start, and End dates.
2. Check either Yes or No for auto renewal.
3. Print the Participant Name, Address, and Phone Number.
4. Write the number of books, passes, and/or cards you want.
5. Multiply the number of books, passes, and/or cards you want by the appropriate price for each.
6. Write the Total Amount.
7. Write your signature and today's date.
8. By the 15th of the month, mail, email, or fax the completed and approved order form to:

Mail: iLIFE
P.O. Box 80439
Milwaukee, WI 53208

Email: IRIS.Claims@iLIFE.org

Fax: 414-918-8213

After iLIFE receives the order form, the process is as follows:

1. The approved order form is checked against the Participant's budget.
2. iLIFE sends payment for the order to Madison Metro Paratransit.
3. Madison Metro Paratransit receives the payment.
4. Madison Metro Paratransit mails the order to the Participant.



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Madison Metro Paratransit
1245 E. Washington Ave., Ste. 201
Madison, WI 53703
608-266-4466

Authorization Start/End Dates:
_____ thru _____

Do you want to auto renew?
 Yes No

Ordering Information

Participant Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone Number: (_____) _____ - _____

Paratransit Ride - Service Code: T2003 RI (specialized transportation)

Number of Paratransit Books: _____ x \$137.00 (4 tickets per book) = Total \$ _____

Fixed Route Bus - Service Code: T2004 RI (non-medical transportation)

Number of Senior/Disabled 31-Day Passes : _____ x \$28.00 per pass = Total \$ _____

Number of Senior/Disabled 1-Ride Tickets : _____ x \$1.00 per ticket = Total \$ _____

Monthly Amount Added to Fast Fare Card: \$ _____

Total Amount = \$ _____

By your signature below, you attest that you understand and agree to have your transportation tickets/passes/cards mailed via USPS regular mail to the address listed above. Neither the IRIS Program nor Madison Metro is responsible for lost or stolen transportation tickets/passes/cards. You also understand that you are responsible for the timely reporting of any updates or changes concerning your Plan, address, phone, email, etc.

Approved: _____ Date: _____
(Participant/Guardian Signature)

Please contact Madison Metro Paratransit at 608-266-4466 for ride information.

(10/2024)