

## Vanpool MemberVacation/Leave Form

Per the Terms of Agreement, you are required to provide Every Commute Counts advance notice of extended vacation and/or a leave of absence if you do not want to be included in the monthly fare. If we do not receive advance notice, you will be considered a passenger and will be billed for the entire month.

Complete the form and submit via email to <a href="mita.robinson@kipda.org">nita.robinson@kipda.org</a> or call us at 502-267-5400 ext. 100. Thank you.

Today's		Vanpool	
Date:		Name:	
Driver's		Van ID	
Name:		Number:	
		Number.	
Driver		Driver	
Email:		Telephone:	
		<del></del>	
Vacation/Leave			
Period:	FROM	TO	
Total Number of	f Commute Days		
Absent:			
l.		, for this Driver Vacat	ion/Leave Form
varrant the truthfu		rmation provided in this form	
		•	
Electronic Signature	e (Type your full	name on the line below, or if	faxing or mailing, sign)
Date:  'YPE IN FIRST & LAST NAME IF SUBMITTING BY EMAIL, OR SIGN, PRINT & SEND			
TYPE IN FIRST & LAST NAME IF	SUBMITTING BY EMAIL, C	OR SIGN, PRINT & SEND	
Lunderstand that checking this how constitutes a legal signature confirming that L			

www.EveryCommuteCounts.org



A KIPDA Program
11520 Commonwealth Drive
Louisville KY 40299
502-267-5400
Fax 502.266-6032
Toll Free 866.822-POOL

I understand that checking this box constitutes a legal signature confirming that I acknowledge and agree to the above Terms as described in the Driver Vacation/Leave Form.  $Updated\ 5/23$