## GREEN MOUNTAIN PASSPORT APPLICATION FORM

## **INSTRUCTIONS**

- 1. Provide name, mailing address, and date of birth in the appropriate spaces below.
- 2. Applicant certifies eligibility.
- 3. Clerk certifies applicant oath and payment.
- 4. **Voluntary information:** In order to make it useful as an identification card, the Green Mountain Passport <u>may</u> include (at the option of the applicant) other information in appropriate spaces below if desired:
  - Contact person's name and address in case of an emergency.
  - Medical information about a chronic physical condition such as heart disease, diabetes, allergies, sensitivity to drugs or other conditions.

			202
Name:First	Middle	Last	DOB:
Mailing Address:			
Emergency Contact (c			
<b>Medical Information</b> (	(optional)		
APPLICANT CER	TIFICATION		
I declare under oath	and penalty:		
1. That I am 62 yea	rs or over, or a Vet	eran of the un	iformed services.
2. That I am a resid	ent of Vermont.		
		Signatu	re of Applicant
Clerk's Certification	)n		
			has declared under oath that fee and information has been
Signature of Clerk	Munici	pality	Date