



**ROCKFORD MASS  
TRANSIT DISTRICT**

**APPLICATION FOR RMTD SENIOR CITIZEN PHOTO ID**

**NAME** \_\_\_\_\_  
FIRST MIDDLE LAST

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**TELEPHONE** ( \_\_\_\_\_ ) \_\_\_\_\_

**BIRTH** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Proof of age submitted (must be 65 years or older) Please select all that apply.**

- |                         |                             |                   |
|-------------------------|-----------------------------|-------------------|
| _____ Birth Certificate | _____ Insurance Policy      | _____ Citizenship |
| _____ Drivers License   | _____ Military Papers       | _____ Passport    |
| _____ Marriage License  | _____ Baptismal Certificate | _____ Other       |

*"I certify that the above information is correct. In the event that I discontinue using the SENIOR CITIZEN PHOTO ID, I will return the ID to Rockford Mass Transit District, Inc. I will not loan my card to anyone and I understand that if I do so my card can be revoked."*

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

*FOR OFFICE USE ONLY:*

**ROCKFORD MASS  
TRANSIT DISTRICT, INC.  
520 MULBERRY STREET  
ROCKFORD, ILLINOIS 61101-1016**

**VERIFIED** \_\_\_\_\_

**FEE PAID** \_\_\_\_\_