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Application for a **Corporate Bee Card** (if paying on account)

Please complete sections A and B of this form using capital letters. A designated approver of the organisation must complete section C.

Section A – Your details (Please complete in CAPITAL LETTERS)																										
Employer name																										
Title (Place a cross in the box)	Mr		М		lrs		Miss		M		۱s	s		Other (plea		lea	ise state)		2)							
First name																						Middle Initials				
Surname																										
Date of birth	D	D		Μ	Μ		Y	Y	Y	Y																
Declaration To be completed by the applicant																										
I confirm that the details given on this application form are correct.																										
Applicants signature															Da	te	D	D		Μ	Μ		Y	Υ	Y	Y
Section B – Ticket Information																										
Zone(s)																										
Example		1	+	2		0	R		1	+	2	+	3		0	R		2	+	3						
Discounted ticket price		£																								
Ticket start date*			D	D		Μ	Μ		Y	Y	Y	Y														
*You need to allow 7 days from the application submission before the requested start date of the Metrolink annual ticket.																										
Section C – Declaration To be completed by your organisation's designated approver																										
I confirm that the applicant is employed by the organisation named above and is entitled to apply for a Corporate Bee Card and a discounted Metrolink annual ticket on account. The purchase order number for this ticket sale has been included below.															d a											
Name of approver																										
Email address																										
Approvers signature															Da	te	D	D		Μ	Μ		Y	Y	Y	Y

Transport for Greater Manchester