



**BCT BUS PASS ORDER FORM
NON-RESIDENTS ONLY**



MONTH: _____

NAME: _____

ADDRESS: _____

PHONE: _____

	RATE	
Student (K-12th Grade)	\$ 20.00	_____
Senior	\$ 10.00	_____
Disabled	\$ 10.00	_____

Name of school you attend: _____

MAIL COMPLETED FORM WITH A SELF-ADDRESSED STAMPED ENVELOPE(S)

TO: THE CITY OF REDONDO BEACH
ATTN: TRANSIT DIVISION
415 Diamond Street
Redondo Beach, CA 90277

Passes will be mailed beginning the 25th of the month prior to the month of the pass and will not be sold after the 10th of the month.

For questions or further information call 310.937.6660