

Companion Pass Program

Overview:

The Companion Pass Program was created to allow designated caretakers of persons with disabilities to ride conventional transit free of charge as a trainer or companion for that individual.

The companion pass that is made available to a designated caretaker is only eligible for use on Kelowna Regional Transit when the caretaker is accompanying a person with disabilities. The person with disabilities is required to have a valid transit pass. The companion pass cannot be used on its own.

Please allow up to three weeks for processing.

Who can apply:

Individual caretakers can apply for a companion pass.

Organizations/companies can apply for companion passes on behalf of their employees who perform caretaker services.

How to apply:

A companion pass can be obtained by filling out the attached application form and submitting it along with a letter from the organization/company that you perform caretaker services for. This letter must verify your role/organization's role as a trainer or companion of a person with disabilities.

Should your application be approved, staff will arrange for distribution of the companion pass which will be valid for one year.

Companion Pass Application Form

You have received this form in response to your interest in the Companion Pass Program. Please be advised that the Companion Pass Program was created to allow designated caretaker/companion of a person with disabilities to ride conventional transit free of charge as a trainer or companion for that individual. If approved for this program, the issued companion pass can only be used when the applicant is escorting a client/companion with a valid transit pass.

Completed forms should be submitted to the Regional Services Department at 1435 Water St. Kelowna, BC V1Y 1J4, or can be scanned and emailed to airquality@kelowna.ca or faxed to 250-862-3312. Once a decision has been reached on your application, a staff member will contact you. Should your application be approved, staff will arrange for distribution of the companion pass which will be valid for one year.

Please note that if you are applying on behalf of an organization, you must specify how many passes are needed and give the names of each person who will be using the companion passes.

Contact Information:

Name: _____

Phone: _____ Fax: _____

Email Address: _____

Mailing Address: _____ Postal Code: _____

Organization Name: _____

What is the reason for your request?

If applying on behalf of an organization, what is the purpose/goal of your organization?

How many companion passes are being requested? _____

If requesting companion passes on behalf of an organization, please list the names of all people who will be using the passes:

I hereby certify that the above information is correct and request that companion passes be provided as per the details noted above.

Signature of individual authorized to act on behalf of organization

Date