

# 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 may 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.

---

Name: \_\_\_\_\_ **DOB:** \_\_\_\_\_  
First Middle Last

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Emergency Contact (optional) \_\_\_\_\_

Medical Information (optional) \_\_\_\_\_

---

## APPLICANT CERTIFICATION

I declare under oath and penalty:

1. That I am 62 years or over, or a Veteran of the uniformed services.
2. That I am a resident of Vermont.

\_\_\_\_\_  
Signature of Applicant

---

## Clerk's Certification

I certify that \_\_\_\_\_ has declared under oath that the statements of eligibility are true. The appropriate fee and information has been collected.

\_\_\_\_\_  
Signature of Clerk

\_\_\_\_\_  
Municipality

\_\_\_\_\_  
Date