



Shuttle Pass – EMPLOYEE APPLICATION*

Applicant Information:

Name: _____
(First) (Middle) (Last)

Employment Information:

Fair Lakes Employer: _____

Full Fair Lakes Company Address: _____

How Long Employed at this Company: _____
(months/years)

Email: _____

Shuttle Pass – RESIDENT APPLICATION*

Applicant Information:

Name: _____
(First) (Middle) (Last)

Address: _____

Fair Lakes Neighborhood: _____

City, State, Zip: _____

Email: _____

Applications can be faxed (703-631-6481), emailed (efrench@petersoncos.com) or mailed (see address below).

***Shuttle passes will only be mailed to addresses in Fair Lakes. If you cannot receive mail at your office then you may pick up your pass (after employment is verified) at:**

Fair Lakes League – ATTN: Liz French
12500 Fair Lakes Circle, Ste 400
Fairfax, VA 22033

Please contact Liz French – efrench@petersoncos.com – (703) 227-0896 for pick up