GO TAP (Group Organization TAP) Enrollment Form

Please complete this writeable PDF form and email it to *gotap@taptogo.net*. The subject line of your email should be "Group Organization Account Enrollment." Please attach an Excel spreadsheet to your email listing the names and TAP card numbers of the patrons you would like to have in your account.

Primary Account (Required for	r all organizations)	
ORGANIZATION'S NAME		
Billing Address:		
STREET ADDRESS		
CITY, STATE		ZIP CODE
Shipping Address (If different	from Billing Address)	
STREET ADDRESS		
CITY, STATE		ZIP CODE
Primary Contact		
FIRST AND LAST NAME		
EMAIL		PHONE NUMBER
Payment		
Select form of payment:		
CREDIT CARD	☐ CHECK *	☐ PURCHASE ORDER *
Do not provide credit card information on form.		Government organizations with advance approval.
* Delinquent accounts will be suspe	ended.	

Questions?

For technical support with your GO TAP account, please contact:

Direct: 213.922.3702 Email: gotap@taptogo.net

