	Must be completed by the transport authority	/
	Must be completed by the transport authority	Į



## ORDER FORM FOR A SEMESTER CARD Please cross where applicable.

4020 Linz, Volksgartenstraße 23 Telefon 0732/66 10 10 66

$C\Delta$	DD	HC	ИΓ	LD

		kundencenter@ooevv. www.ooevv			
CARDHOLDER					
□Mr		□Mrs	٦		
Date of birth			1		
First name			1		
Last name					
Postcode		Town/city			
Street/no.					
E-Mail		Tel.			
Matriculation no.		University/college			
I HEREBY ORDER A SEM ESTER CA  ☐ Winter semester	ARD FOR 5 MONTHS	□ Summer semester	7		
□effective from		□effective from			
(not possible before 1 st of Sep	otember!)	(not possible before 1 st of February!)			
From (starting point)					
Via					
Via					
To (destination)			_		
Transport company	6.11		4		
The semester card is valid in the	-				
□Linz	□Wels	□Steyr			
I WILL PAY THE AMOUN T					
□cash in advance		□ by transfer form			
Please complete the order form in full,	nd of Upper Austria and the observing the information contract on the back of thi				
Place, date		Signature of the purchaser	•		