Download AliviRide

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Enter your information **as it appears** on your member ID card

9:41		ا ه ج الد	
~	alivi		
R	egistrati	on	
Please enter yo Last Nam	our Membe ne, and Da	er ID, First Name, te of Birth	
HIT IS	Health) IDHN SMITH Member ID: 1234567 Member ID: 123457 Member ID: 1234577 Member ID: 123	Ver man en en enternen W	Please enter your full first and last name and include
* Required Field		•	any dashes
Member ID * 1234567			
First Name * Marshall			between names.
Last Name * Smith			
Date of Birth (MM-1 01-05-1967	DD-YYYY) *	Ē	
internation of the second seco		1	
	SUBMIT		
	Contact Suppo	ert.	
	S	elect vo	our DOB
(Member	must	be at leas	t 18 years old to register)
Septem	nber 7	2002 2003	
Novem	ber 9	2004 2005	- IOS users:
January	y 11	2006 2007	Please scroll and one
Februar	ry 12	2008	by one select the
March	13	2010 2011	Month, Date, and Year
May			you were born.
	Confirm		
			CIICK CONFIRM
		2	
ELECT DATE		Û	
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Create your password

« alivi	
Hello!	Create a valid
First Name Last Name John Smith	password
Please create a password to continue For security reasons the password cannot contain your first name, last name, or member ID. Also, you cannot reuse your last 10 passwords.	Click this icon to reveal the password you have
* Required field Password * ***********************************	typed III.
Re-enter Password * ********** Minimum 8 characters required A tleast 1 uppercase	
✓ At least 1 number	
✓ At least 1 special character (#?85) ✓ The passwords entered must match	As you create your
 At least 1 special character (#765) The passwords entered must match By registering or logging in, you agree to Alivi Privacy Policy and Terms of Use * 	As you create your password, make sure it
 At least 1 special character (#765) The passwords entered must match By registering or logging in, you agree to Alivi Privacy Policy and Terms of Use * SUBMIT 	As you create your password, make sure it meets the requirements. The color will turn green when each requirement

Click this box to agree to Alivi's Privacy Policy and Terms of Use You must check this box in order to register on AliviRide.

Press SUBMIT button to continue

Enter your contact method

Press **NO** if you noticed a mistake with the number you inputted

Two Factor Authentication

Press **VERIFY** after have entered your code

All set!

You have now successfully created your account on AliviRide!

ENGLISH SPANISH	
alivi	
Enjoy your Benefits!	Enter phone number
	and password.
* Required Field	The same data of your
Phone Number *	registration
(786) 441-8500	
Password *	
Remember me	Select "Remember
\mathbf{T}	Me" to securely save
LOG IN	vour information.
	making it easier to log
REGISTER NOW	in novt time
By registering or logging in you agree to Alivi	in next time.
Privacy Policy and Terms of Use	
Contact Support FAQ	

and follow the instructions as prompted

Click **LOG IN** to access your transportation benefits