

Application Form

How to Apply

Applying for a Leisure Saver Card could not be easier. Just follow the steps below:

Step 1

Complete the application form ensuring all sections are filled in correctly

Step 2

Call in person to the listed leisure centres with your completed and signed application form

Together with

Photo ID, proof of address, proof of eligibility (see last section) and the appropriate joining fee.

Leisure Saver Card Application Form

Your Personal Details:

Joining Site:	Member ID:
*Mr / Mrs / Miss / Ms / Dr / Other:	(*Please delete as appropriate or specify if other)
First Names:	Surname:
Male / Female:	Date of Birth:
Address:	
Town:	Post Code:
Telephone Numbers:	Home:
Mobile:	Work:
Car Registration:	E-mail:
Employer:	Job Title:

EQUAL OPPORTUNITIES MONITORING

Please complete this monitoring section. The information will be treated as being personal and confidential. We appreciate you taking the time and trouble to complete this form, as the information it contains helps us to monitor and improve our services.

A. Ethnic Monitoring

What is your ethnic group? Choose one selection from **a.** to **e.** then tick the appropriate box to indicate your cultural background.

a. White

- White British
- White English
- White Irish
- White Scottish
- White Welsh
- Any other White background
(Please write in below)

b. Mixed

- White and black Caribbean
- White and black African
- White and Asian
- Any other White background
(Please write in below)

c. Asian or Asian British

- Asian British
- Asian English
- Asian Scottish
- Asian Welsh
- Asian Indian
- Asian Pakistani
- Asian Bangladeshi
- Any other Asian background
(Please write in below)

d. Chinese or other ethnic group

- Chinese
- Chinese British
- Chinese English
- Chinese Scottish
- Chinese Welsh
- Other Ethnic Group
(Please write in below)

e. Black or Black British

- Black British
- Black English
- Black Scottish
- Black Welsh
- Black Caribbean
- Black African
- Black Bangladeshi
- Any other Black background
(Please write in below)

B. Disability

The Disability Discrimination Act 1995 states that a person has a disability for the purposes of this Act if he/she has or has had "a physical or mental impairment which has had a substantial and long-term adverse effect on his/her ability to carry out normal day to day activities". Long term has been defined as meaning having lasted 12 months or is likely to last at least 12 months. Day to day activities include such things as mobility, speech, hearing, eyesight, memory and dexterity.

Do you consider yourself to be disabled? Yes No
 Are you registered disabled? Yes No

C. Religion & Belief

If you wish, you may disclose information about yourself in this section.

We want to collect the information below to find out whether there are any particular minority needs within our service. Please be assured this information will be stored for monitoring purposes only, and will be kept confidential.

Religion

- | | | | |
|------------------------------------|--------------------------------------|-----------------------------------|---|
| Christian <input type="checkbox"/> | Jainist <input type="checkbox"/> | Atheist <input type="checkbox"/> | No Religion <input type="checkbox"/> |
| Muslim <input type="checkbox"/> | Hindu <input type="checkbox"/> | Agnostic <input type="checkbox"/> | Other <input type="checkbox"/> |
| Buddhist <input type="checkbox"/> | Rastafarian <input type="checkbox"/> | Sikh <input type="checkbox"/> | (Please specify) <input type="checkbox"/> |
| Jewish <input type="checkbox"/> | Humanist <input type="checkbox"/> | Bahai'i <input type="checkbox"/> | |

D. Preferred Language

What is your language of preference? Choose one selection from the selection below to indicate or specify.

- Welsh
- English
- Other
(Please specify)

Please tick the box/boxes to indicate the Saver Card required & Proof of Eligibility supplied:

ALL APPLICANTS	Proof of Eligibility Required	✓
	Photo ID (e.g. passport, driving license etc)	<input type="checkbox"/>
	Proof of name and address (within the last 3 months, e.g. bank statement / utility bill)	<input type="checkbox"/>
All Applicants aged 12 – 18 Years	Validate Card	<input type="checkbox"/>

SAVER CARDS	✓	Proof of Eligibility Required	✓
Loyalty Saver Adult	<input type="checkbox"/>	As above – All Applicants	
Loyalty Saver Junior (16yrs & under)	<input type="checkbox"/>	As above – All Applicants	
Student Saver Card	<input type="checkbox"/>	Letter from School or College on headed paper confirming applicant is in full-time education	<input type="checkbox"/>
Young at Heart	<input type="checkbox"/>	Birth Certificate or Passport	
Bonus Saver Card	<input type="checkbox"/>	As listed below	
Recipients of Jobseeker's Allowance		JSA 40 or JSA 40W Booklet issued within last 2 weeks prior to application.	<input type="checkbox"/>
Recipients of Income Support		Certificate of Benefit issued within last month prior to application.	<input type="checkbox"/>
Recipients of Incapacity Benefit		Certificate of Benefit issued within last month prior to application.	<input type="checkbox"/>
Recipients of Housing Benefit / Council Tax Benefit		Confirmation letter from Council Housing Benefit Office dated no earlier than last April.	<input type="checkbox"/>
Recipients of Disability Living Allowance		Condition of Entitlement Notice issued within last 12 months (DBD 384).	<input type="checkbox"/>
Recipients of Invalid Care Allowance		Condition of Entitlement Notice issued within last 12 months (DBD 384).	<input type="checkbox"/>
Recipients of Severe Disablement Allowance & Other Disability Allowances & Benefits		Condition of Entitlement Notice issued within last 12 months (DBD 384).	<input type="checkbox"/>
Any of the above benefits		Bank Statement clearly displaying relevant benefit within last month	<input type="checkbox"/>
Dependant children living at the same address as Bonus Saver Card holder aged 16 yrs & under		Evidence of parent / guardian being a Bonus Saver Card holder, together with proof of address and a Validate Card	<input type="checkbox"/>

Data Protection Act

The personal data you provide will be held in confidence under the terms of the Data Protection Act 1998. The information will be used only to process your application for a Leisure Saver Card and will not be passed to any outside organisation. We may, however, like to contact you with regard to monitoring the effectiveness of our equalities policy and to send you further information on activities that we feel may be of interest to you. If you are happy for us to use your details in this way, please tick the box/boxes below to indicate how you would like to be contacted:

All E-mail SMS (Text)
 Mail Telephone Fax

Terms & Conditions / Further information

Full terms and conditions are available from the participating leisure site, at www.carmarthenshire.gov.uk or by writing to Leisure Saver Scheme, Carmarthen Leisure Centre, Llanstephan Road, Johnstown, Carmarthen SA31 3NQ. Further information is available by emailing leisure@carmarthenshire.gov.uk or by telephoning 01267 236865.

I agree to abide by the terms and conditions of the Leisure Saver Card and I declare that the information I have provided is correct.

Signed: **Date:**

Office Use only

Amount Rec'd	£	Receipt No	Membership ID
Staff Name	Date		
I confirm the application form has been completed correctly, payment has been received in full and that I have checked and verified all relevant documents with regards to eligibility.			
Staff Signature:			