

Please print this application form, complete and sign it then follow the instructions on the "How Do I Get a Dacorum Card" page.

DACORUM CARD APPLICATION FORM

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First Name _ Address Postcode_									
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Male			 -emale	٥					
The following two questions are part of Dacorum Borough Council's equal opportunities monitoring, to ensure we are reaching all members of our community. Your answer affect our decision to issue you with a Dacorum Card Do you consider yourself disabled in any way? Yes									

How would you describe your ethnic origin?									
White Asian/Asian British Other (please specify)		Black/Black British Mixed	<u> </u>						
You can also claim a Dacorum Card for your partner/husband/wife and any dependent children, providing they live at the same address. Please list their names and dates of birth below:									
Name		Date of Birth							
Where did you hear about the Dacorum Card?									
Please read the following and sign below:									
"I confirm that the information I have given is correct. I agree to my benefits being checked for eligibility with the relevant agency. I agree to be bound by the terms and conditions of Dacorum Card"									
Signature									
Postal Applicants only "I confirm that the photograp myself/dependents/partner."		nave enclosed are a true l	ikeness of						

Signature	
Date//	

The information requested is to be used for the purposes of Dacorum Card only and will be processed in accordance with the Data Protection Act 1998.

Please tick this box **to be included** on our mailing list so that we can keep you updated on discounts and special offers with Dacorum Card.

For official use only – Must be completed by issuer
Card No. Centre of issue
Issuers initials Expiry date on card

Benefit/proof reference

