

# Recreational Services Keycard Scheme Application Form



St.Helens Council

Complete this form in full to apply for a Keycard/s for yourself and/or dependent relatives who are aged four or over, if you are a St Helen's resident and in receipt of one or more of the following:

**Income Support, Income-Based ("means tested") JSA or ESA, Working Tax Credit or Pension Credit, Council Tax Reduction Scheme, Housing Benefit, Foster Carer.**

**Universal Credit recipients should support their request with entitlement documentation with reasons for eligibility.**

Once completed, the form needs to be stamped by the relevant office & then taken to your chosen Leisure Centre Reception for processing.

**For further help on completing this form and information on where to get it stamped, please contact any Leisure Centre Reception or telephone 01744 671726**

You must show your card and have it swiped at reception every time you visit. If you can't produce your card you will be asked to pay full price.  
**An annual administration fee of £4.00 will be charged for each person listed below, in addition to a £4.00 fee charged for replacement cards.**

### Claimant Details

Title \_\_\_\_\_ First Name \_\_\_\_\_ Surname \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_

Telephone no (main) \_\_\_\_\_ (other) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email address \_\_\_\_\_

Benefit/s \_\_\_\_\_ Benefit reference number \_\_\_\_\_

Child Benefit Reference Number (required if children listed on form) \_\_\_\_\_

### Dependent relative details (including spouse/partner)

Forename/s	Surname	Date of Birth	Office Use

In the event of a change in circumstances affecting the cardholder's qualifying benefit and eligibility for a keycard, the cardholder must notify the Council and cease to use the keycard facility.

### Data Protection Notice:

The information provided on this form will be processed in accordance with the requirements of the Data Protection Act 1998. It will be treated as confidential and used only to provide data for the management and administration of the Keycard system Under the Council's liability to protect the public funds it administers, information relating to any of the qualifying benefits will be subject to verification with the relevant departments of St. Helens Council and the appropriate administering bodies (for example, the DWP).

### Declaration

**I declare that these particulars are correct to the best of my knowledge. I understand that details of any of the qualifying benefits given on this form may be checked with the appropriate body/ies to confirm that the information given is correct.**

**Signature** \_\_\_\_\_ **Please complete the Equal Opportunities Monitoring form overleaf**

Staff Name	Date	Xn Person number	Notes

## Benefits office use only

I certify that the applicant named has been receiving the benefit below, **either stand alone or within Universal Credit criteria**, for a period of four weeks or more.

**Please confirm receipt of benefit by using your official stamp in the relevant box and complete the details below.**

<b>Housing Benefit or Council Tax Reduction Scheme</b> (Wesley House)	<b>Income Support, Income-based JSA or Income-based ESA</b> (Job Centre – Wolverhampton)	<b>Working Tax Credit or Pension Credit</b> (Leisure Centre)	<b>Foster Carer</b> (Sports Development Wesley House)
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**Signature of Benefits Officer** \_\_\_\_\_ **Date** \_\_\_\_\_

Revenues & Benefits / DWP / Tax Office / Leisure Centre (delete as appropriate)

## Equality in Service Delivery

### Information for our Customers / Service users

The Council has a duty to ensure that all people living or working within our Borough have the opportunity to use our services, and that people feel fairly treated when they use our services. Monitoring the personal characteristics of people who use our services is one way in which we can get information to tell us if we are excluding any group of people from our services or treating them unfairly when they make use of our services.

The information you are about to complete is held in strictest confidentiality by the Council Department.

Use or disclosure of personal details is subject to the Data Protection Act, which prohibits unlawful access by any person, agency or organisation. Please fill in your personal characteristics below and help us ensure quality within equality.

### 1. Disability

Do you consider yourself disabled? (tick the appropriate box)

- No  
 Yes

If yes, can you specify what kind of impairment? (optional)

### 2. Ethnic monitoring

Choose one section from (a) to (e) then tick the appropriate box to indicate your cultural background

<b>(a) White British</b> <input type="checkbox"/> Scottish <input type="checkbox"/> Northern Irish <input type="checkbox"/> Welsh <input type="checkbox"/> English <input type="checkbox"/> Irish <input type="checkbox"/> Any other White background Please write in below	<b>(c) Asian or Asian British</b> <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Any other Asian background Please write in below
	<b>(d) Black or Black British</b> <input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Any other Black background Please write in below
<b>(b) Mixed or Mixed British</b> <input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Any other Mixed background Please write in below	<b>(e) Chinese, Chinese British or Other Ethnic Group</b> <input type="checkbox"/> Chinese <input type="checkbox"/> Any other Please write in below

