





Q43555 08/08/2011

We would be grateful if you could complete the following section. This information will be used for equality monitoring purposes and to help us plan our services.

Northern Irish / British Irish

Gypsy / Romany / Irish Traveller

Other White European (including

#### **Disability** (tick box)

#### Do you have any of the following longstanding conditions?

| Deafness or severe | hearing | impairment |   |
|--------------------|---------|------------|---|
|                    | ncanng  | impairment | L |

Blindness or severe visual impairment

Physical impairment, which limits activities such as walking, climbing stairs, lifting or carrying

A learning difficulty

A long-standing illness

Prefer not to say

#### Ethnic Group (tick box)

| Asian or Asian British             |  |  |
|------------------------------------|--|--|
| Afghani                            |  |  |
| Bangladeshi or British Bangladeshi |  |  |
| British Asian                      |  |  |
| Chinese                            |  |  |
| Filipino                           |  |  |
| Indian or British Indian           |  |  |
| Kashmiri                           |  |  |
| Pakistani or British Pakistani     |  |  |
| Vietnamese                         |  |  |
| Other Asian                        |  |  |
| Black or Black British             |  |  |
| Black African                      |  |  |
| Black British                      |  |  |
| Black Caribbean                    |  |  |
| Somali                             |  |  |
| Zimbabwean                         |  |  |
| Other Black                        |  |  |
| Mixed                              |  |  |
| Asian and White                    |  |  |
| Asian and Black                    |  |  |

| Black African and White      |
|------------------------------|
| Black Caribbean and White    |
| Black and Chinese            |
| White and Other Mixed        |
| Other                        |
| Albanian                     |
| Arab                         |
| Kurdish                      |
| Other Middle Eastern         |
| (excluding Arab)             |
| Yemeni                       |
| Other group                  |
| White or White British       |
| English / Scottish / Welsh / |

Polish

Mixed European)

Prefer Not to Say

Other White

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|-----|-------|-----|-----|------------|----|
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|     |       |     |     |            |    |

If you are over 16, it would help us if you could supply the following information. It will be used for equality monitoring purposes and to help us plan our services.

Gender (tick box) Male Female Faith (tick box) Buddhist Christian

Hindu Jewish Muslim Rastafarian Sikh No religion Other, please specify

Prefer not to say

#### Sexual Identity (tick box)

Bisexual Gay or Lesbian Heterosexual or straight Prefer not to say

Declaration: Please make sure that you have signed and dated your application to confirm your details are correct and complete. I apply for a Birmingham Leisure Card / Passport to Leisure Card and certify that the information provided is correct.

Applicant's signature

Date

If you are under 16, this application must also be signed by a parent or guardian.

Signature of Parent/Guardian

Relationship to Applicant



### 0121 464 2012 birmingham.gov.uk/membership

Leisure CARD

Leisure Card and

**Passport to Leisure Card** 

**Application Form** 



Staff use only Comments:



## **Application**



# Card No: (Staff Use Only)

#### Leisure Card

The Leisure Card is a customer loyalty, access and membership card. It enables you to gain points for every pound you spend on certain activities.

To apply, complete the application form and take it for processing to your local city council leisure centre, swimming pool or golf course. Your photograph will be taken and stored securely as proof of identity.

#### **Passport to Leisure**

If you are over 60, a full-time student, or on low income and receiving benefits, you may qualify for Passport to Leisure. For a small fee, this scheme offers discounts of up to 50% on a range of activities. For more information, ask for a leaflet.

All applicants must produce evidence of their current address in addition to the relevant proof of eligibility when applying for and renewing a PTL, along with payment, if required.

#### Using your Card

Your Leisure Card must be presented on each visit to gain access. If you are on the Be active scheme, or a discount scheme like Passport to Leisure, you must present your card at each visit or the full charge will be required. A fee will be charged for lost or damaged cards.

#### Change of Details

It is your responsibility to advise us if any of your details change. If you have not used your card for three years, we will delete your records and bonus points.

For queries regarding your application, please call **0121 464 2012**.

If you would prefer this text in a different format, please contact us on tel: 0121 464 2012.

#### Data Protection Act 1998

In compliance with the Data Protection Act 1998, information collected on this form will be added to the Leisure Card database. Birmingham City Council may also use this information for administrative and service communication purposes. All information will be treated confidentially and will not be shared with other organisations. For further information on how Birmingham City Council holds your personal data, please visit Birmingham.gov.uk/privacy.

We have a duty to protect the public funds we handle and, to this end, we may use the personal information you have provided for the prevention and detection of fraud. We may also share this information with other organisations, which handle public funds for the same purpose.

Be active

Birmingham City Council may use this information to help you get the most out of the Be active scheme. The scheme, open to Birmingham residents only, is in partnership with the NHS Birmingham and information will be passed to the NHS, if you give consent for us to do so.

#### Your Personal Details

| This section should be completed in full. Please  | write clearly in <b>BLOCK CAPITALS</b> .   |  |                 |  |  |
|---|--|--|-----------------|--|--|
| Mr Mrs Miss Ms  | Date of Birth:         / <th <="" th="">         /         <th <="" th=""> <t< th=""></t<></th></th> | / <th <="" th=""> <t< th=""></t<></th> | <t< th=""></t<> |  |  |
| Surname:  | First Name:  |  |                 |  |  |
| Address:  |  |  |                 |  |  |
|   | Postcode:  |  |                 |  |  |
| Tel No. (Home):   | (Other):   |  |                 |  |  |
| Email:  |  |  |                 |  |  |
| Passport to Leisure   |  |  |                 |  |  |
| This section is to be completed by Passport<br>to Leisure Card applicants only.<br>Please tick the box that qualifies you for a Passport to Leisure Card. | Be active Scheme only<br>Have you been referred by your GP<br>or other health practitioner? Yes No   |  |                 |  |  |
| Birmingham Resident Yes No  |  |  |                 |  |  |
| 60 years and over 70 years and over   | Do you smoke? Yes No   |  |                 |  |  |
| Receiving benefit/job seeker's allowance  | If you answered yes, would you like<br>help and support from your local  |  |                 |  |  |
| Child under 16 with parent receiving benefit  | NHS services? Yes No   |  |                 |  |  |
| Full-time Carer You and Your Helper   | Do you consider yourself overweight? Yes No  |  |                 |  |  |
| Group Asylum Seeker   | If you answered yes, would you like  |  |                 |  |  |
| Full-time student/trainee Looked after Children   | help and support from your local<br>NHS services? Yes No   |  |                 |  |  |
| Disabled person receiving benefit   |  |  |                 |  |  |

Keep up to date: To receive regular email bulletins on sport, leisure & cultural activities, city news, the latest jobs and much more, simply sign up to receive the Birmingham Bulletin on birmingham.gov.uk/bulletin, or text bb and your email address to 62299. We may occasionally contact you with updates on council services and events. Please let us know how you would prefer to receive information: Email Phone Text Post Please complete overleaf Please tick this box, if you do not wish to receive further information.