

# Carer Passport Application form for businesses



*Please fill in using block capitals*

## Business details

|                     |           |
|---------------------|-----------|
| Name of business:   |           |
| Nature of business: |           |
| Website:            |           |
| Social media:       |           |
| Address:            |           |
|                     | Postcode: |
| Phone:              |           |

## Contact details for administrative purposes

|               |        |
|---------------|--------|
| Contact name: |        |
| Position:     |        |
| Phone:        | Email: |

< [Insert data protection statement of the organisation running the Carer Passport scheme]>

*Please turn over*

## Your offer

What is your offer? e.g. 10% discount for carers

Who is the offer for? e.g. Just the carer, carer and cared for person

Is there a time limit for this offer? e.g. until end of 2018

Please supply the wording for your business listing in our booklet and/or on our website:

Signed:

Date:

Print name:

### FOR INTERNAL USE ONLY

|   |        |       |
|---|--------|-------|
| Offer signed off by business                                  | Print: | Date: |
| Copy for website signed off by business                       | Print: | Date: |
| Logo checked with business                                    | Print: | Date: |
| Check business is aware of terms and conditions of the scheme | Print: | Date: |