



Child Leap Card 12 - 15

Application Form

Please complete this form in **BLOCK CAPITALS**

(*) = required field

Completed applications should be sent to:

Leap Card Customer Care, PO BOX 12119, Dublin 24

For office use only

CLC 091211

Leap Card Number

Date Issued

Verified by

Signature

1. Cardholder's Personal Details

First Name *

--	--	--	--	--	--	--	--	--	--

Surname *

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of Birth *

d	d			m	m			y	y	y	y
---	---	--	--	---	---	--	--	---	---	---	---

2. Cardholder's Contact Details

Address 1 *

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Address 2

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Address 3

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Phone

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Town *

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Post code

--	--	--	--

(if in Dublin) *

County *

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3. Entitlement Validation

Please attach a copy of either Birth Certificate or Passport Details Page or complete the School Validation section below.

☐

Copy of Birth Certificate

☐

Copy of Passport details page

☐

School validation

School Validation (must be completed by School representative where a copy of Birth Certificate or Passport Details Page is not provided)

I certify that:

- The pupil named on this application is in full-time education at this school
- The date of birth entered in part 1 of this form is correct

School representative's signature

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School stamp

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4. Cardholder's Photograph

Affix most recent photograph here.
Minimum photo size
35mm x 45mm.
Maximum photo size
38mm x 50mm.

5. Parent's/Guardian's Declaration (Forms will be returned if not signed by parent/guardian)

I declare that the information set out in this application is correct.

First Name *

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Surname *

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Signature *

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Date *

d	d			m	m			y	y	y	y
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6. Payment Details (Payment information will be destroyed immediately after the payment has been processed)

Total amount payable €8.00 (€3.00 refundable deposit and €5.00 Travel Credit Top-Up)

Payment method:

☐

Visa

☐

MasterCard

☐

Laser

☐

Cheque

Card number

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(Laser only)

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Expiry date

m	m	y	y
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If paying by cheque please make cheques payable to:

National Transport Authority

Allow an extra 5 working days for clearance of cheques.

Cardholder's name

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Cardholder's signature

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What next?

Complete Applications: If your application is complete and payment is successfully processed you will receive your Child Leap Card 12-15 at the postal address you provided within 10 working days.

Incomplete Applications: If your application is incomplete or if the payment details provided fail to process, your application will be returned to you within 10 working days.