

50% Holiday scheme (singles & couples)

To be considered for this offer your total household income must be under £14,000.

By signing this form to claim the discount if you are not entitled to it, it will be considered a fraudulent act. Further, you may be depriving another UNISON member of a much needed holiday.

Either print this form, complete and return by post to: **Croyde Bay Holiday Resort, Croyde, Braunton, North Devon EX33 1QB.** Or complete and save the pdf and return by attaching to an email to: **D.Mansfield@unison.co.uk**

All applicants must post a recent payslip to the address above.

1. Name of applicant: _____

2. Membership details:

membership number: _____ UNISON branch: _____

3. Contact details:

address: _____

_____ postcode: _____

home phone number: _____ work phone number: _____

mobile phone number: _____ email: _____

4. Information about your finances: *Please check the relevant boxes*

- | | | |
|---|---|--|
| <input type="checkbox"/> reliance on income/health related benefits | <input type="checkbox"/> housing benefits | <input type="checkbox"/> disability living allowance |
| <input type="checkbox"/> council tax benefits | <input type="checkbox"/> carers allowance | <input type="checkbox"/> income support / JSA |
| <input type="checkbox"/> tax benefits | | |
| Low income because of: | <input type="checkbox"/> low pay | <input type="checkbox"/> one main wage earner |
| | <input type="checkbox"/> loss of pay | <input type="checkbox"/> income under £14,000 |

5. Details of applicant, partner and dependants included in break: *Must be living in the same household*

first name: _____ family name: _____ age: _____

first name: _____ family name: _____ age: _____

Preferred dates: option 1: _____

option 2: _____

option 3: _____

6. Members declaration: *Please check to agree*

- I declare that the information I have provided is true and accurate, to the best of my knowledge and undertake to inform you of any changes in my circumstances that might affect eligibility to this offer
- I understand the information I have provided will be used to process this application for assistance
- I understand this offer is made subject to availability and meeting eligibility criteria

Signed: _____ **Date:** _____