

# Cardholder application form

## What is the Companion Card?

The Companion Card promotes fair ticketing for people with disability who need life-long attendant care support from a companion to participate at community activities and events.

The cardholder uses their Companion Card when they are purchasing a ticket or paying an entry fee at participating businesses, and the cardholder's companion carer receives a free ticket or entry at no charge.

## How to apply

STEP 1 - Be sure that you meet the criteria from the page starting heading level 1 - **Eligibility criteria**.

STEP 2 - Be sure you understand the terms and conditions in the page starting heading level 1 - **Companion Card Cardholder Terms and Conditions** - towards the back of this document.

STEP 3 - Complete **Items 1–5** of the application form.

STEP 4 - Provide **two** identical, high quality, colour, passport-sized photographs (see the page starting with heading level 1 - **Photographs** - for acceptable photographs).

STEP 5 - Ask your service provider **or** health professional to –

- complete **Item 6 and**
- sign the back of your **photographs** for verification.

STEP 6 - Send the completed application form, signed photographs and copies of any recent reports or assessments supporting your application to –

### Companion Card Applications

Department of Communities Tasmania  
GPO Box 65  
Hobart TAS 7001



Please Note– The Companion Card program will not reimburse any costs associated with your application. Completion of an application form does not guarantee a Companion Card will be issued.

## Eligibility criteria

START OF FORM Eligibility criteria

**You can apply for a Tasmanian Companion Card if you answer yes to all of the following eligibility criteria –**

1. Do you live in Tasmania? (Yes/No):
2. Do you have a permanent disability? (Yes/No):
3. Due to the impact of your disability, do you need significant attendant care support (see below) to participate at most community activities or events? (Yes/No):
4. Will your need for this level of support be life-long? (Yes/No):

END OF FORM Eligibility criteria

**If you answered no for any of the above criteria, you are not currently eligible for a Tasmanian Companion Card.**

**Attendant care support** includes significant assistance from another person with mobility, communication, personal care, learning, planning and decision-making, where the use of aids, equipment or alternative strategies does not enable you to carry out these tasks independently. Attendant care support **does not include** only providing social company, reassurance, supervision, encouragement or transport (driving a person to/from an event).

**Not all people with disability are eligible for a Companion Card –**

- Most people with disability can participate at community activities and events independently.
- Sometimes a person may need a companion, but not be eligible for the Companion Card. Examples include a person who is –
- experiencing a temporary disability
- unlikely to need life-long attendant care support
- affected by the inaccessibility of a particular venue.
- You will not be eligible if you are likely to become independent in the future as a result of treatment, management, early intervention therapy, training, recovery or developmental improvements.

# Photographs

## Acceptable photographs

You must include **two** identical colour photographs with your application. We recommend purchasing a photograph from an outlet which sells passport quality photographs.

### Photographs must be –

- of your head and top of shoulders
- taken in front of a plain background
- recent (less than six months old)
- passport sized (45-50mm high x 35-40mm wide)
- colour (not black and white)
- printed on good quality gloss photo paper
- clear (not grainy, pixilated or blurry).



### The back of each photograph must include –

- the name of the person in the photograph; and
- the signature of the same service provider or health professional who signs **Item 6** of your application form.



Write your name on the reverse of **two** passport quality photographs.

Have them signed by the health professional or service provider who signs **Item 6**.

Place the photographs in an envelope to accompany this application.

# Applicant to complete

## Item 1 – Applicant details

The Companion Card is issued to the person with disability, not their carer.

START OF FORM Item 1 Applicant details

Title (eg Mr/Mrs/Ms/Miss):

First name (as it is on official documentation eg birth certificate):

Surname:

Gender (Male/Female):

Date of birth (Day/Month/Year):

Age:

Home address:

Suburb:

Postcode:

Postal address (if different from above):

Suburb:

Postcode:

Daytime phone number:

Email (if available):

How would you prefer the Companion Card program to contact you about your application – (Enter an 'X' after one of the following three options)

1. Phone:
2. Mail:
3. Email:

Contact my legal guardian/agent (details on the page starting with heading level 1 - **Item 5 – Applicant statement.**)

END OF FORM Item 1 Applicant details

## Item 2 – Cultural information (optional)

The following questions are optional and will **not** influence the outcome of your application. Cultural information is collected for statistical purposes and to improve policy development and service delivery.

START OF FORM Item 2 Cultural information (optional)

Do you identify as – (Enter an 'X' after one of the following three options) –

1. Aboriginal:
2. Torres Strait Islander:
3. Aboriginal and Torres Strait Islander:

Do you need an interpreter when dealing with the Companion Card program?  
(Yes/No):

If **Yes** – What is your preferred language?:

END OF FORM Item 2 Cultural information (optional)

## Item 3 – Describing your disability

Your health professional or service provider may help you complete this item.

START OF FORM Item 3 Describing your disability

What is your primary diagnosis?:

Date of diagnosis (Day/Month/Year):

Do you have any other disability or medical condition that is relevant to your need for attendant care to participate at most community activities or events?  
(Yes/No):

If **yes**, please provide details and date/s of diagnosis:

Is the impact of your disability episodic, meaning it occurs at different times?  
(Yes/No):

If **yes**, how often does an episode occur? (Times per week or Times per month):

How do the episodes affect you?:

END OF FORM Item 3 Describing your disability

## Item 4 – Describing the impact of your disability and your need for attendant care support

Your health professional or service provider may help you to complete this item.

This section helps us to understand –

- the **functional impact** of your disability, or how your disability affects you, and
- **your need for attendant care support** from a companion to participate at community activities and events.

**Attendant care support** includes significant assistance from another person with mobility, communication, personal care, learning, planning and decision-making, where the use of aids, equipment or alternative strategies does not enable you to carry out these tasks independently. Attendant care support **does not include** only providing social company, reassurance, supervision, encouragement or transport (driving a person to/from an event).

START OF FORM Item 4 Describing the impact of your disability and your need for attendant care support

### Previous reports or assessments

Do you have any recent (less than two years old) reports or assessments that describe the functional impact of your disability or your need for attendant care support? (Yes/No):

If yes, please **attach a copy** with this application.

### Do you need attendant care support with any of the following to participate in community activities and events?

**Mobility** - your ability to move around, for example, your need for significant support from a companion to access transport, navigate your wheelchair, assist you in and out of your seat or with other venue facilities. (Yes/No):

If **yes**, please give examples of your mobility support needs below.

At community activities and events, I need attendant care support from a companion to:

**Communication** – your ability to make yourself understood and to understand others, for example your need for significant support from a companion to assist your social interactions and behaviours in a public place. (Yes/No):

If **yes**, please give examples of your communication support needs below.

At community activities and events, I need attendant care support from a companion to:

**Personal care** – your ability to complete daily personal care tasks and routines, for example your need for significant support from a companion to assist with meals, dressing, toileting or taking medication. (Yes/No):

If **yes**, please give examples of your personal care support needs below.

At community activities and events, I need attendant care support from a companion to:

**Learning, planning and decision-making** - for example your need for significant support from a companion to assist with time management, reading, writing, problem solving, decision-making, money handling, directions, and what to do at an event. (Yes/No):

If **yes**, please give examples of your learning, planning and decision-making support needs below.

At community activities and events, I need attendant care support from a companion to:

Do you use any aids, equipment or assistive technology when you participate at community activities and events? (Yes/No):

If **yes**, please provide details of any aids, equipment or assistive technology you use.

### **Additional comments**

Is there any other information that you would like to provide to support your application?:

For example, details of any services, payments or other supports you or your carer receive?:

## Item 5 – Applicant statement

**This item must be completed by the applicant or their legal guardian/agent.**

START OF FORM Item 5 Applicant statement

I consent to being contacted to participate in future evaluation of the Companion Card program (optional). (Yes/No)

### **My signature verifies that:**

- I have a permanent disability and I will always need attendant care support to participate at most community activities and events;
- I understand and accept the Companion Card Cardholder Terms and Conditions;
- I authorise the Companion Card program to verify the information contained in this form and to obtain further information about my eligibility for a Companion Card. This may include requesting information held in databases by government departments, organisations and agencies;
- I agree that health professionals or service providers may disclose information about me to the Companion Card program to assist with the assessment of my application;
- I will advise the Companion Card program of any change in my circumstances that may affect my eligibility to hold a card;
- I certify that the information in this application is correct.

### **You must provide one of the following signatures:**

- Applicant signature (for applicant over 18 years of age); **or**
- Legal guardian/agent signature (if applicant is under 18 years of age or unable to sign).

Signature:

Date (Day/Month/Year):

### **If signed by a legal guardian/agent –**

Name of legal guardian/agent:

Relationship to applicant:

Contact number:

Email (if available):

END OF FORM Item 5 Applicant statement



# Health professional or service provider to complete

**Important:** You now need to give this application and your two photographs to your health professional or service provider to complete Item 6.

## Information for health professionals and service providers

This application form must be verified by the applicant's health professional or service provider.

To be eligible for a Tasmanian Companion Card the applicant must meet all of the following eligibility criteria. The applicant must:

1. live in Tasmania; and
2. have a permanent disability; and
3. need significant **attendant care support** to participate at most community activities or events, due to the impact of their disability; and
4. have a life-long need for this level of support.

**Attendant care support** includes significant assistance from another person with mobility, communication, personal care, learning, planning and decision-making, where the use of aids, equipment or alternative strategies does not enable you to carry out these tasks independently. Attendant care support **does not include** only providing social company, reassurance, supervision, encouragement or transport (driving a person to/from an event).

## To verify this form:

- Check that the information provided in **Items 3 and 4** is correct. The applicant may need your assistance to complete these items.
- Sign the back of both photographs to verify that they are a true likeness of the applicant.
- Complete **Item 6** and sign the declaration.
- Do not sign this form if you are unable to verify that the applicant needs significant life-long attendant care support to participate at community activities and events.

For more information or assistance in completing this form please contact the Tasmanian Companion Card program on **1800 009 501** (during business hours) or [companion.card@communities.tas.gov.au](mailto:companion.card@communities.tas.gov.au)

## Item 6 – Health professional or service provider declaration

START OF FORM Item 6 Health professional or service provider declaration	
<b>I am a Health professional (Yes/No):</b>	
Registered medical practitioner (Yes/No):	
Registered nurse (Yes/No):	
Registered physiotherapist (Yes/No):	
Registered psychologist (Yes/No):	
Qualified occupational therapist eligible for membership of Occupational Therapy Australia (Yes/No):	
Qualified social worker eligible for membership of the Australian Association of Social Workers (Yes/No):	
Qualified speech pathologist eligible for practicing membership of Speech Pathology Australia. (Yes/No):	
<b>I am a Service provider</b> The service (for example, supported accommodation service, individual support package provider, residential aged care service) must use the <b>same eligibility criteria</b> as the Companion Card. (Yes/No):	
Position (must be a manager or equivalent):	
Name of service organisation:	
Type of service provided to the applicant:	
I have known the applicant in a professional capacity for (years/months):	
Does the applicant need life-long attendant care support to participate at most community activities and events? (Yes/No)	

**A Companion Card cannot be issued if** the applicant is likely to become independent in the future as a result of treatment, rehabilitation, management, early intervention therapy, training, skills development, recovery or developmental improvements.

**Please provide a statement describing the applicant’s life-long need for significant attendant care support at community activities and events. Describe their needs in the areas listed below** (Mobility, Communication, Personal care, Learning, planning and decision-making):

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**Please comment on any ongoing treatment, rehabilitation or other intervention that the applicant is receiving:**

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**Declaration**

**My signature below verifies the following:**

Service providers only:

- I verify that the applicant currently receives the service or support described in Item 6.

Health professionals and service providers:

- I have read and understand the Companion Card eligibility criteria.
- I have read the information in **Items 3 and 4** and verify it is correct to the best of my knowledge.
- I am not the applicant or an immediate family member of the applicant.
- I have written the applicant’s name and signed the back of both photographs to verify that each **photographs** is of the applicant.
- I agree to offer all reasonable information to assist the Companion Card program to determine the applicant’s eligibility.

**Only sign this form if you can verify that the applicant needs lifelong attendant care support to participate at community activities and events.**

Signature:

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Date (Day/Month/Year):

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<b>Your contact details</b>	
Name:	
Professional Registration Number:	
Postal address:	
Suburb:	
Postcode:	
Daytime phone number:	
Email:	
Fax number:	
Organisational stamp (if available):	
<small>END OF FORM Item 6 Health professional or service provider declaration</small>	

## Frequently asked questions

### Where is the card accepted?

The Companion Card is accepted at participating activities and events throughout Australia, including cinemas, theatre, sporting events, tourist attractions, parks and gardens, and some transport operators. Visit [www.companioncard.gov.au](http://www.companioncard.gov.au) or call **1800 009 501** for more information about where the card is accepted.

### Is there a temporary card if my need for attendant care support is not life-long?

No, Companion Cards can only be issued to people who have life-long need for attendant care support. Companion Cards will not be issued if you are likely to become independent in the future as a result of treatment, management, training, skills development, recovery or developmental improvements.

For people currently undergoing rehabilitation or therapy for a recently diagnosed or acquired condition, it may be best to wait until rehabilitation or therapy is complete and the ongoing need for attendant care support is clear.

### My child is only four years old. Are there any age limits on who can apply for a Companion Card?

Most community activities and events have ticketing policies that need children under a specified age to be supervised by an adult. Children up to a certain age need a parent/supervisor to perform functions that are similar to that of a companion carer. While there are no age limits on who can receive a Companion Card, applicants must demonstrate that the need for attendant care support is due to the impact of the applicant's disability (not due to age alone) and there is a **life-long** need for attendant care support. For some children, it may be difficult to determine lifelong need for attendant care support until further development or early intervention therapy has taken place. If a child has the potential to develop skills for independent participation in the community in the future, it may be best to wait until the child's life-long need for attendant care support is clear.

### I work full-time and earn a good income. Does this prevent me from receiving a Companion Card?

There are no income or assets tests applied to applications for a Companion Card. People may apply regardless of their employment status.

**I provide attendant care support on a regular basis. Can I apply for a Companion Card?**

Companion Cards are issued only in the name of the person with disability.

This enables the cardholder to choose their companion in each instance. Cards are not issued to facilities, organisations or carers.

## Terms and Conditions

**It is important that you read and understand the information below:**

1. The Companion Card must only be used when the cardholder requires the assistance of a companion to participate at a particular venue/activity.
2. Only the person whose photograph and details appear on the Companion Card can use the card.
3. Companion Tickets cannot be used without the Companion Card cardholder being present.
4. Companion Card cardholders must inform the venue/activity operator of their requirement for a Companion Ticket at the time they book or purchase their own ticket.
5. Acceptance of the Companion Card does not indicate that a venue/activity is accessible. Cardholders are advised to check accessibility with the venue/activity operator before booking tickets.
6. The minimum expectation of Companion Card affiliates is that they will issue cardholders who require assistance to participate with one Companion Ticket, or admission, at no charge. This ticket will be exempt from all booking fees.
7. Where a cardholder needs more than one companion to provide attendant care support, the cardholder must negotiate this with the venue/activity operator at the time of booking.
8. The Companion Card can be used to obtain admission for any programs, services and sessions run by affiliated venue/activity operators. This will be subject to the usual admission availability and conditions.
9. The Companion Card can be used in conjunction with any recognised concession cards.
10. Cardholders must provide their Companion Card details when making telephone bookings, and must present their valid card during ticket collection and at any time when asked during the activity. If cardholders cannot present their card, they may be charged for the Companion Ticket.
11. Affiliated venues/activities must ensure cardholders are able to be located physically close to their companions. Companions must remain close to cardholders to assist them as required. Cardholders with specific seating requirements must inform the venue/activity operator at the time of booking.

12. Some venue/activity operators may charge for participation over and above general admission costs (eg a fee for rides in addition to an entry fee at a fun park). Affiliated venues/activities must issue a Companion Ticket for both admission and for additional components, such as rides etc, if the cardholder requires assistance in order to participate.
13. Companion Cards may be used to purchase a package deal for the cardholder that combines admission costs with ancillary components such as meals, etc. When booking a package deal, cardholders must check with the venue/activity operator about what is included with the Companion Ticket. It is essential that the companion's support to the cardholder is not disrupted if the ancillary components are not included in the Companion Ticket (for example, if meals are not included, the Companion must be able to bring or access food in a manner that enables them to provide continual support to the cardholder).
14. Booking and ticket distribution practices for Companion Tickets should not be more difficult than the standard ticketing practices of the affiliated venue/activity.
15. If an affiliated venue/activity operator suspects that a Companion Card is being misused, they can report this to the Companion Card program. Proven misuse of the Companion Card may result in the card being cancelled, and the cardholder will be ineligible to reapply.
16. It is understood that the applicant accepts the Companion Card Cardholder Terms and Conditions when they submit a Companion Card application form.

## Your privacy

The Department of Communities Tasmania is collecting your personal information on this form to assess your eligibility for the Companion Card and to administer and evaluate the Companion Card program.

Your personal information will be handled in accordance with the privacy principles contained in the *Personal Information Protection Act 2004* (Tas). For more information about the *Personal Information Protection Act 2004* visit [www.thelaw.tas.gov.au](http://www.thelaw.tas.gov.au)



## Contact the Companion Card program

The Companion Card program in Tasmania is administered by Communities, Sport and Recreation in the Department of Communities Tasmania.

**Companion Card freecall number: 1800 009 501** (during business hours)

If you are deaf, hearing-impaired or have complex communication needs, you can contact us through the **National Relay Service**, ask for the Companion Card program number **1800 009 501**:

- **TTY users** phone **133 677**
- **Speak and Listen** users phone 1300 555 727
- **Internet relay users** connect to the NRS [www.relayservice.com.au](http://www.relayservice.com.au)

**Email:** [companion.card@communities.tas.gov.au](mailto:companion.card@communities.tas.gov.au)

**Website:** [www.companioncard.gov.au](http://www.companioncard.gov.au)

# Cardholder application form - Additional information

Please keep in a safe place for your information

## Applicant Checklist

START OF FORM Applicant Checklist

I have completed Items 1-5 of the application form. (Yes/No)

My health professional or service provider has completed **Item 6** and **signed the back of my photographs**. (Yes/No)

**I have attached my photographs to my application** (Avoid damaging your photographs by putting them in a separate envelope before attaching to your application form. Do not use tape, staples, glue or pins.) (Yes/No)

**I have attached copies of any recent reports or assessments** (see Item 4). (Yes/No)

END OF FORM Applicant Checklist

**Now return your completed application form to:**

### Companion Card Applications

Communities, Sport and Recreation

Department of Communities Tasmania

GPO Box 65 HOBART TAS 7001

## Assessment process

- Please allow approximately 20 working days for processing.
- Incomplete applications cannot be processed and will be returned to the applicant.
- The Companion Card program will assess each application against all four of the eligibility criteria.
- If more information is needed to determine eligibility, the Companion Card program may ask for additional information by:
  - Contacting you (or your legal guardian/agent)
  - Contacting your service provider or health professional (nominated in the application form).
- You will be notified of the outcome of your application in writing.
- If your application is declined you can request a review in writing.