

Appendix 2.c: **REPLACEMENT CARD APPLICATION/DATA CHANGES FORM**  
FOR K&H SZÉCHENYI RECREATION CARDS

(Please fill out in block capitals.)

Employer's name*	
Employer's tax number*	

\* To be filled in if the Main Card Holder is employed. Provide the data of the Main Card Holder's employer.

**Data changes** ☐ (data marked with “•” cannot be modified)  
**Type of replacement card** ☐ **Main Card** ☐ **Co-card**

**Replacement card holder's data:**

Family name	
Given name(s)	
• Family and given name(s) at birth	
Name on card (up to 20 characters including spaces)	— — — — — — — — — — — — — — — —
• Tax identification no.	
Type of identification document ( <i>underline</i> )	0: other 1: personal ID card 2: passport
Number of identification document	
• Mother's maiden name	
• Place of birth	
• Date of birth	(year) (month) (day)
Address	ZIP (postal) code: town/city: street: number: floor, door:
Mailing address (where the card will be sent)**	ZIP (postal) code: town/city: street: number: floor, door:
E-mail address***	
Mobile phone number***	

**\*\*IMPORTANT:** the replacement card will be delivered to the address specified in this box so please make sure that data are given here accurately.

**\*\*\***It is recommended to provide a mobile phone number and an e-mail address, as it helps subsequent administration.

**Main Card Holder's data (to be filled in only if a Co-card is replaced):**

Family and given name(s):	
Tax identification no.:	
Main card number:	

Dated: \_\_\_\_\_ (place), \_\_\_\_\_ (month) \_\_\_\_\_ (day) \_\_\_\_\_ (year)

\_\_\_\_\_  
Main Card Holder's signature