SMART CARD REQUEST

REQUIRED INFORMATION																			
NAME																			
SURNAME																			
OIB (PIN)																			
ADDRESS																			
CITY/TOWN																			
POST CODE																			
COUNTRY																			
DATE OF BIRTH																			
General Terms and Conditions of Busir By signing this request, I give my explipurpose of issuing a smart card and residual SIGNATURE/SIGNATURE OF GUARDIAN DATE All the data listed in the request muprijevoz will not issue the smart card	gist	erir	ng t	he p	oass	eng	er.]								
I WANT TO RECEIVE NOTIFICATIONS AN	ND (OFF	ERS	5 FR	ОМ	ΗŽΙ	PUT	NIČI	KI PF	RIJE\	/OZ								
If you wish to receive notifications and	offe	ers	fro	m H	ΙŽ Ρι	utnič	čki p	rijev	/OZ,	plea	ase '	fill ir	n the	e fol	low	ing	deta	ails:	
E-MAIL																			
MOBILE PHONE																			
By providing this data, I declare that I c tions and offers from HŽ Putnički prijev To unsubscribe from the list of recipier	oz.							•	-						otio	onal	not	ifica	-

PLEASE MARK THE PROFILE:
STUDENT OF PRIMARY SCHOOL ANNUAL TICKET
HIGH SCHOOL STUDENT ANNUAL TICKET
CHILDREN WHO DO NOT ATTEND HIGH SCHOOL ANNUAL TICKET
WITH THIS CERTIFICATE, THE EDUCATIONAL INSTITUTION CONFIRMS THAT
IS A REGULAR STUDENT IN THE SCHOOL YEAR // //
CERTIFICATION OF THE EDUCATIONAL INSTITUTION
TO BE FILLED OUT BY HŽPP:
NAME AND NUMBER OF POINT OF SALE
EMPLOYEE
SMART CARD NUMBER
°⇒HŽPP