GUHealth



Application for Australian Government Rebate on private health insurance as a reduced premium

Please print in black ink, using capital letters and mark check boxes with an X.

GU Health Membership No.	(if you have one):					
Are you covered by this policy? Yes No (If No, employers and trustees of organisations cannot claim the Australian Government Rebate on private health insurance on policies paid on behalf of employees).						
I wish to (please indicate with an X):						
Nominate my rebate tier		Australian Government Rebate on s a reduced membership contribution) 2, 5)	or	Apply for Australian Government Rebate on private health insurance (Complete all Sections)		

Complete this registration form and lodge it with GU Health to receive the Australian Government Rebate on private health insurance as a reduced membership contribution or to update your rebate tier.

- You do not need to complete this form if you are currently claiming the Australian Government Rebate on private health insurance as a reduced membership contribution and wish to leave your existing rebate tier unchanged.
- All the people listed on the membership must be eligible to claim Medicare entitlements.

Please complete the information requested below and send your completed form by:

- FreePost to GU Health, Reply Paid 2988, Melbourne VIC 8060 (no stamp required); or
- FreeFax to 1800 656 778; or Scan and email to corporate@guhealth.com.au

For assistance or more information call your GU Health Member Relations Team on 1800 249 966 between 8.30am – 5.00pm (EST) Monday to Friday **or** email corporate@guhealth.com.au

Section 1: Policyholder's Details (the person in whose name membership is held)

Title:	Surname:							Sex:
Given name:							Date of birth:	
Home address:								
							State:	Postcode:
Postal address:								
							State:	Postcode:
Daytime telephone	number:							

Section 2: Australian Government Rebate on private health insurance

Date premium reduction and/or rebate tier	nomination to commence from: DDMMYYYYY
Medicare card number:	Valid to: D D M M Y Y Y Y
Policyholder's name and initial (exactly as	they appear on your Medicare card):
Please nominate the level of rebate you	believe you are entitled to:
Base Tier 1	Tier 2 Tier 3
	itlement, a recovery of monies will occur through the Australian Taxation Office (ATO) your actual entitlement, a refund will occur through the ATO as a tax credit.
Health insurers are not permitted to provid registered tax agent or the Australian Tax (e tax advice. For assistance in determining your appropriate rebate tier, please contact your Dffice at ato.gov.au

Section 3: About your dependant/s

All persons covered on this membership must have Medicare entitlements.

Surname:	Given name(s)	Date of birth (DD / MM / YYYY)	Dependant Sex Child
		/ /	M F Y N
		/ /	M F Y N
		/ /	M F Y N
		/ /	M F Y N

Section 4: Eligibility

Are all the people on the membership listed on a Medicare card or entitled to a Medicare card? Yes No

If **NO**, you cannot apply for the Australian Government Rebate on private health insurance on private health insurance until all persons to be covered on the membership have full Medicare entitlements.

You are entitled to a Medicare card if:

• you are a person who lives in Australia; and

- you are an Australian citizen; or
- a holder of a permanent resident visa; or

• a New Zealand citizen; or, in some cases an applicant for a permanent resident visa.

If you are from a country with which Australia has a Reciprocal Health Care Agreement (RHCA), you may be eligible for an RHCA Medicare card.

For further details on Medicare eligibility contact the Department of Human Services on 132 011 for the cost of a local call or visit humanservices.com.au.

Section 5: Declaration (must be signed)

I declare that the information I have provided is correct. I understand that there are penalties for giving false or misleading information.

If at any stage you wish to stop receiving the Australian Government Rebate on private health insurance as a reduced membership contribution or wish to update your rebate tier, you must notify GU Health as soon as possible.

Policyholder's signature:



The information provided on this form will be used for the purposes of registering you for the Australian Government Rebate on private health insurance. Collection of this information is authorised by the Private Health Insurance Act 2007. This information may be disclosed to the Department of Health and Ageing, the Department of Human Services, and the Australian Taxation Office or as authorised or required by law.



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