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## Application to Receive the Federal Government 30% Rebate as a Reduced Premium

*Please complete details on this registration form, sign below and return it to nib health funds to receive your applicable 30%, 35% or 40% Federal Government Rebate on private health Insurance as a reduced premium.*

Name: ..... nib policy number

Address: .....  
 .....  
 .....  
 Suburb: ..... State: ..... Post Code: ..... / /

Date joined this policy  
/ /

**NEW Customers** – Do you want your reduced premiums to commence from the date of joining nib? Yes  No  date to commence  /  / 2

**EXISTING Customers** – Date you would like your reduced premium to commence  /  / 2

Note: Employers and trustees of organisations cannot claim the Federal Government Rebate on policies paid on behalf of employees.

Your Medicare Card number #	<span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> Valid to <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> / <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center;">2</span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span>
Your full name as it appears on your Medicare Card	<div style="border: 1px solid black; height: 20px;"></div>
Your date of birth	<span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> / <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span> / <span style="border: 1px solid black; display: inline-block; width: 20px; height: 20px;"></span>
Phone numbers	home: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span> work: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px;"></span>

# You must have a current Medicare Card - if yours has expired you cannot qualify for the rebate until you renew your card

**Other people covered on this policy**

Note: All people covered by the policy must be eligible to claim Medicare for you to receive the Federal Government Rebate as a reduced premium. You are entitled to claim Medicare if you are listed on a Medicare card, you live in Australia and are:

- an Australian or New Zealand citizen; or
- a holder of a permanent resident visa; or
- in some cases an applicant for a permanent resident visa

Are all people listed below on an eligible Medicare card or entitled to a Medicare card? Yes  No

If you answered No, you cannot apply for the rebate until all people on the policy are listed on a Medicare card or are entitled to a Medicare card. Please call nib on 13 14 63 to discuss.

Given names	Surname	Date of Birth	Gender <small>(please circle)</small>		Dependant child	
			M	F	Yes	No
			M	F	Yes	No
			M	F	Yes	No
			M	F	Yes	No
			M	F	Yes	No
			M	F	Yes	No
			M	F	Yes	No
			M	F	Yes	No

**Declaration and Signature**

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

Applicant's signature X Date  /  / 2

The information provided on this form will be used for the purposes of registering you for the Federal Government 30% Rebate. Its collection is authorised by law, and information collected may be disclosed to the Department of Health and Ageing, Medicare Australia, and the Australian Taxation Office.