

Please use this form to request a special consideration of acceptance of late payment.

Extras only cover and Overseas Visitors Covers are not eligible for special consideration. You will not be able to apply for Special Consideration if you are more than six months behind in your health cover payments or have previously had Special Consideration approved.

1 **Your membership details**
Review

Membership number Date paid up until

Title Surname First name

If your contact details have changed, please complete below:

Postal address

Suburb State Postcode

Email

Telephone (home) (mobile)

2 **Cover details**
Complete

Reason for special consideration

Please list all unpaid claims for services that were provided during the period that your membership was unpaid, and all pre-arranged or proposed claims:

	Outstanding claims	Proposed claims	Date of service
Hospital			
Dental			
Extras			
Total approximate cost			

3 **Declaration**
Sign

I declare that the above information provided on this form, including the summary of outstanding and proposed claims, is true and correct to the best of my knowledge. I understand that Australian Unity has the right to recover any monies for claims paid incorrectly during the unfinancial period. I acknowledge that acceptance of my late payment and reinstatement of membership is fully at the discretion of Australian Unity.

Member signature SIGN HERE ▶ Date / /

Witness signature SIGN HERE ▶ Date / /

Please Note: That pursuant to Rule C 8.1 of the Australian Unity (Health Benefits Fund) Rules, at the expiration of two months from the date on which a member becomes unfinancial, if the member has not paid all contributions due, membership of the fund and entitlements to benefits shall cease. Rule G 2.2.3(a) states that the Fund shall have no liability for any claim in respect of services or treatment rendered on or after the date on which a member becomes unfinancial.

Where to send this form:

Mail: Forward this form to Australian Unity using the reply paid address:
Australian Unity Health Membership
Reply Paid 64466, South Melbourne VIC 3205.

Email: Email this form to customerservice@australianunity.com.au