

Direct debit request

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

GU Health Membership No.

With this form you can also request to have claim benefits paid into a nominated Australian bank, building society or credit union account.

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

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

For assistance or more information call your GU Health Member Relations Team on **1800 249 966** between 8.30am and 5pm (AEST) Monday to Friday or email corporate@guhealth.com.au

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

Title	Surname	Given name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	Daytime telephone number	
<input type="text"/>	<input type="text"/>	
Email address		
<input type="text"/>		

Section 2: Authority for direct debit bank deductions

(from a nominated Australian bank, building society or credit union account)

I request and authorise GU Health (Grand United Corporate Health Limited ID No 012495) to debit my account once this application is received and processed and thereafter as required to maintain a financial membership. GU Health may debit or charge me through the Bulk Electronic Clearing System from an Australian account held at the financial institution identified below, subject to the terms and conditions of the Direct Debit Service Agreement, included on the last page.

Name of financial institution at which your account is held

Branch address

State Postcode

Name on the account to be debited

BSB number

Account number

Please note direct debits will occur monthly.

By signing this direct debit request you acknowledge that you've read and understood the terms and conditions governing the debit arrangement between you and GU Health, as set out in this authority and in the Direct Debit Service Agreement. If this is a joint account please ensure each account holder has signed.

Accountholder's signature

Date signed

Accountholder's signature

Date signed

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Section 3: Direct credit of claims (FastBack)

Would you like to save time and effort when you claim?

Take advantage of the GU Health FastBack direct credit, and get your money back even faster! FastBack means we can directly deposit any claim reimbursement into your nominated Australian financial institution account. Just complete the 'authority' section below and we'll set it up for you.

Authority for FastBack payments

I request that GU Health until further notice, credit the following Australian account with any amount which may be payable to me as a result of a claim made under my membership.

Indicate with an X in the appropriate box.

Please use my bank account details provided in Section 2. **(Proceed below to the 'Policyholder's signature' and Date signed')**

OR

I would like my FastBack claims directly deposited into the following account

Bank details

Name of Australian financial institution at which your account is held

Branch address

State

Postcode

Name of account to be credited

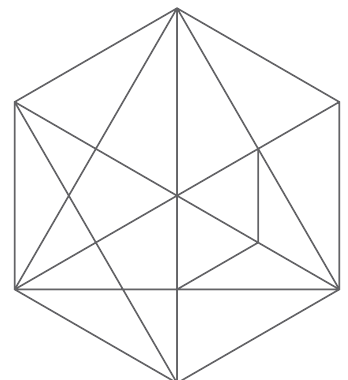
BSB number

Account number

Policyholder's signature

Date signed

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Grand United Corporate Health Limited (GU Health) ABN 99 002 985 033 is a registered health insurer.
A subsidiary of nib holdings limited ABN 51 125 633 856. © Grand United Corporate Health Limited 2017.
GU Health respects the privacy of our members, view our privacy policy at guhealth.com.au.

Direct Debit Service Agreement

Keep for your records

Direct Debit Service Agreement for credit card and bank account debits.

Our commitment to you

This document sets out your rights, our commitment to you and your responsibilities to us, together with where you should go for assistance in respect of your direct debit arrangement with Grand United Corporate Health Limited (GU Health).

Initial terms of the arrangement

In terms of the Direct Debit Request (DDR) arrangement made between us and signed by you, we undertake to periodically debit your nominated account in accordance with your signed authority to direct debit.

Drawing arrangements

- If a drawing is due on a non-business day, it will be debited on the next business day following the scheduled drawing date
- We will give you at least 14 days notice if we intend to make changes to the initial terms of the arrangement
- We will debit all contributions in advance along with any applicable arrears, and will vary the contributions as necessary in line with changes to level of cover, scale, legislation and / or contribution adjustments.

Your rights

Changes to the arrangement

If you want to make changes to the drawing arrangement, please notify us in writing at least four business days prior to your next scheduled drawing date. These changes may include

- deferring the drawing; or
- altering the schedule; or
- stopping an individual debit; or
- suspending the DDR; or
- cancelling the DDR completely.

Enquiries

If you have any enquiries they should be directed to GU Health, rather than to your financial institution.

All information relating to the DDR held by us will remain confidential except for information that may be provided to our financial institution to initiate the drawing to your nominated account, or information disclosed to a third party as required by law. Information may also be provided to nib Holdings Limited or any of its wholly-owned subsidiaries to enable this DDR to be effected.

Disputes

- If you believe that a drawing has been initiated incorrectly, you should raise the matter directly with GU Health
- If you don't receive a satisfactory response to your dispute from us, contact your financial institution who will respond to you with an answer to your claims in accordance with their dispute resolution procedures.

Note Your financial institution will ask you to contact us to resolve your disputed drawing prior to involving them.

Your commitment to us

It is your responsibility to ensure that

- your nominated account can accept direct debits (your financial institution can confirm this); and
- that on the drawing date there are sufficient cleared funds in the nominated account; and
- that you advise us if the nominated account is transferred or closed
- your membership is financial at all times
- you notify GU Health if your bank account or credit card details change.

If your drawing is returned or dishonoured by your financial institution, we will notify you.

Any transaction fees payable by us in respect of the above may be passed on to you. Consecutive returns or dishonours may result in the direct debit facility being withdrawn.

GU Health reserves the right to terminate a membership if contribution payments are in arrears for more than two months.