

ADULT DEPENDANT REGISTRATION

- All Union Health family and single parent policies cover dependants up to age 21.
- Dependants who are studying full-time at a recognised education facility can remain on their family's policy until they reach age 31.
- Members on most hospital covers can purchase **extended dependant cover** to keep non-student dependants on the family cover until age 31. Available on all covers except Gold Hospital and Basic+ Hospital (stand-alone or combined with an Extras product).
- Use this form to register your dependant as a student or purchase extended dependant cover.

1. My details

Member name

Membership number

2. My dependant's details

Name

Date of birth (dd/mm/yy)

3. Select an option

Option 1: Register a student dependant

Only select this option if you wish to register a dependant who is undertaking **full-time study** at school, college or university. Your dependant is eligible for student dependant status if the period of education is continuous for the whole academic year (1 April of the current year to 31 March of the following year).

Course start date (dd/mm/yy)

Course completion date (dd/mm/yy)

The student will be removed from your membership on the course completion date unless we receive additional advice from you.

Option 2: Purchase extended dependant cover

Only complete this section if you wish to add a non-student dependant aged between 21–31 years. Eligibility criteria and premium loading apply.

Date change of cover to commence (dd/mm/yy)

I give Union Health permission to alter my current payment authority and premium to reflect this change to my cover

4. Acknowledgement and declaration

I declare that my dependant is:

My dependant is aged under 31 years of age, unmarried and not in a de-facto relationship.

I will advise Union Health immediately if my dependant's circumstances change.

I am the primary member or I have authority from the primary member (Union Health may require confirmation from the primary member if an authority is not already held on file).

Union Health reserves the right to verify eligibility for registration. Personal information provided by you on this form will be used in accordance with Union Health's Privacy Policy available at unionhealth.com.au/privacy.

5. Returning this form

Email
enquiries@unionhealth.com.au

Post
Reply Paid 265
Fortitude Valley QLD 4006