

Privacy notice

- 7** The privacy and security of your personal information is important to Services Australia, and is protected by law. We collect this information so we can process and manage your applications and payments, and provide services to you. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to servicesaustralia.gov.au/privacypolicy

Declaration

8 I declare that:

- the information I have provided in this form is complete and correct
- I am eligible to register for the London 2005 Disaster Health Care Assistance Scheme under the following category:

Tick one only

Category A – A person who was injured by the London 2005 bombings

An Australian who is eligible for Medicare and was in London on 7 July 2005 and was injured as a direct result of the bombings.

Category B – A person who was at the scene of the London 2005 bombings

An Australian who is eligible for Medicare and present at or near the aftermath of the London bombings on 7 July 2005, and saw injured or deceased persons, or participated in viewing deceased persons or assisting injured persons either at the scene or in providing support services (for example, counselling).



Provide a certified copy of the passport used with Visa for travel at time of event. If passport cannot be supplied, provide a statutory declaration.

Category C – Family members of a victim of the London 2005 bombings

An Australian who is eligible for Medicare and is a family member of a person who died as a direct result of the London bombings on 7 July 2005, or is a family member of an Australian who was injured by the London bombings on 7 July 2005.

Special consideration for eligibility:

If you do not meet the above criteria because you have been eligible for Medicare but are no longer eligible, tick this box if you wish to seek special consideration. You may be asked to provide further information.

Name of victim

Relationship

I consent to:

- Services Australia using my Medicare card number to validate appropriate payments
- Services Australia checking Medicare Benefits Schedule payments, Pharmaceutical Benefits Schedule payments and private hospital payments, **or**
- undertaking verification related to any other benefit program or assistance provided by the Australian, state or territory governments, or by any other non government organisation to which the Disaster Health Care Assistance Scheme may be directly related
- and authorise Services Australia obtaining personal information from other agencies and organisations for the purpose of assessing registration and claims.

I understand that:

- benefits are provided under the Disaster Health Care Assistance Scheme as a result of information that I have provided
- giving false or misleading information may result in Services Australia recovering benefits provided by the Disaster Health Care Assistance Scheme
- giving false or misleading information is a serious offence.

Applicant's signature

Date (DD MM YYYY)

Returning this form

Check that you have answered all the questions and the form is signed and dated.

Return this form and any supporting documents by post to

Services Australia
Special Assistance
Reply Paid 9822
PERTH WA 6848