

Student Dependant Registration



Membership Details

Member Number _____

Name (*first name*) _____ (*surname*) _____

Address _____

_____ Postcode _____

Student Dependant Details

Student Name _____ Date of birth _____

Declaration

I declare that:

- (1) I am contributing to the maintenance of the above-named dependant.
- (2) He/she is a full time student at _____
- (3) He/she is without a partner.
- (4) I will immediately inform Health Partners of any change in the above-named dependant's circumstances.
- (5) I am the main member or authorised to sign this registration as the legal representative or as a holder of a Delegation of Authority on the policy.

Signature _____ Date _____

Important Information

- This form is to be completed by the main member, their legal representative or a person with a Delegation of Authority.
- Once a dependant turns 18 he/she is no longer covered under the family membership unless he/she is registered as a student dependant.
- A student dependant must be 18 years and under 25 years of age and undertaking a full-time study workload for a course at a school, college, TAFE or university.
- To ensure continuity of cover a registration form must be completed for each student dependant included on the family membership before the commencement of the new student year.
- The student year commences 1 March and ends 28 February. Dependants must be registered as soon as they turn 18 and again in the new student year to ensure continuity of cover. For example, if Mary Smith turns 18 on 21 December 2010, she will need to be registered for the student year ending 28 February 2011. She will need to be re-registered before 1 March 2011 if she is to continue studying in 2011.
- **Proof of full-time study status must be provided if requested by Health Partners.** This may include a copy of student ID card, enrolment summary or letter from the institution indicating full-time study for the year.