



Diabetes Membership Reimbursement

This form should be completed by eligible Department of Veterans' Affairs (DVA) clients when requesting a reimbursement of membership fees paid to diabetes organisations.

Eligible DVA clients are:

- all Gold Card holders, and
- White Card holders with diabetes as an accepted condition.

Note: Membership is only for eligible DVA clients, family memberships cannot be claimed.

Privacy notice – Your personal information is protected by law, including the *Privacy Act 1988*. Your personal information may be collected by DVA for the delivery of government programs for war veterans, members of the Australian Defence Force, members of the Australian Federal Police and their dependants.

Go to www.dva.gov.au/privacy for more information about how DVA manages personal information.

Client details

1 Client's name	Surname	<input type="text"/>		
	Given name(s)	<input type="text"/>		
2 Date of birth (dd/mm/yyyy)	<input type="text"/>			
3 DVA file number	<input type="text"/>			
4 Card type	Gold <input type="checkbox"/>	White <input type="checkbox"/>	▶ White Card holders must have diabetes as a DVA accepted condition.	
5 Address	<input type="text"/>			Postcode <input type="text"/>
6 Phone number	[<input type="text"/>]	Mobile	<input type="text"/>	
7 Email address	<input type="text"/>			

Membership information

8 Diabetes organisation	NSW/ACT <input type="checkbox"/>	VIC <input type="checkbox"/>	QLD <input type="checkbox"/>	SA <input type="checkbox"/>	WA <input type="checkbox"/>	NT <input type="checkbox"/>	Tas <input type="checkbox"/>
9 Membership period	1 year <input type="checkbox"/>	2 years <input type="checkbox"/>	Other <input type="checkbox"/>	▶ Please specify period in years <input type="text"/>			
10 Amount paid	\$ <input type="text"/>	Note: A copy of your receipt/proof of purchase is required.					

Bank details for reimbursement

11 My bank details are up to date with DVA

Yes

To make sure your details are up to date, log into MyService or call DVA on 1800 VETERAN (1800 838 372).

DVA will never phone you directly to ask for your bank details.

OR

Bank details (if not currently in receipt of a DVA payment)

Account name

BSB

Account number

Client's or authorised person's declaration

12 I declare that:

- the details I have provided in this form are correct to the best of my knowledge.
- I have paid for the diabetes membership in full.
- I am aware there are penalties for making false or misleading statements.

I have attached a copy of my receipt.

Signature

Date (dd/mm/yyyy)

Please send the completed form and all required information, via email (preferred)

medtreat@dva.gov.au

Or post to:

**Department of Veterans' Affairs
GPO Box 9998
Brisbane QLD 4001**

Phone: **1800 VETERAN (1800 838 372)**