Trial to Ticket to Wellbeing program: Voucher application form

Applicant must be.
1. Living in Tasmania
2. Aged 65 years and over at the time of application
3. Be listed on a valid Services Australia Health Care or Pensioner Concession card
I confirm that I meet the requirements to apply for the Ticket to Wellbeing voucher.
APPLICATION TYPE
Health Care card Pensioner Concession card
APPLICANT CONSENT
l authorise:
 The Tasmanian Department of State Growth T/A Active Tasmania, to use Centrelink eServices to perform a Centrelink enquiry of my Centrelink customer details and concession card status to enable the business to determine if I qualify for Ticket to Wellbeing voucher service. Services Australia to provide the results of that enquiry to Active Tasmania.
understand that
 Services Australia will disclose personal information to Active Tasmania including my name, payment type, payment status and concession card type and status to confirm my eligibility for Ticket to Wellbeing voucher service. This consent, once signed, remains valid while I am a customer of Active Tasmania unless I withdraw it by contacting Active Tasmania or Services Australia. I can get proof of my circumstances or details from Services Australia and provide it to Active Tasmania so they can determine my eligibility for Ticket to Wellbeing voucher service. If I withdraw my consent or don't alternatively provide proof of my circumstances or details, I may not be eligible for the Ticket to Wellbeing voucher service provided by Active Tasmania.
have read the privacy policy and agree
Yes No*
*Please note Service Tasmania cannot process your application in person. You can provide Active Tasmania proof of your circumstances or details from Services Australia so they can determine your eligibility for the Ticket to Wellbeing Service (tickettowellbeing@active.tas.gov.au)
Given name:

Surname:_____

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APPLICANT INFORMATION

First Name				
Surname				
Gender		eren	t term	
Date of Birth				
Phone number				
Residential address				
Postcode				
Applicant Centrelink Customer Reference Number (CRN)				
Card Expiry Date				
ADDITIONAL QUESTIONS (COMPULSORY)				
Are you of AboriginaStrait Islander originYesNo		3.	Are you currently participating in a sport or active recreation activity? Yes No	
2. Do you identify as hat a second se		4.	Are you intending to use the voucher to participate in a new sport or active recreation activity? Yes No	
		5.	Did someone assist you in completing this form? Yes No	