

**ID·Assist™ PAYMENT DETAILS**

Please use a pen and print all entries in CAPITALS. Please tick all boxes this way

**Registration Costs**

For ID·Assist service registration

- Individuals:** \$65 incl. GST / per year.
- Organisations/Groups:** Price on application.

**Registration Period**

	Incl. GST	No. of Years	Cost (incl. GST)
Individuals:	\$65/year	<input type="text"/>	<input type="text"/>
<b>TOTAL \$</b>			<input type="text"/>

**Payment Options**

Please select your preferred method of payment and fill in the relevant details on the payment form below. Cheques or money orders made payable to: "ID·Assist **Safe Return Home**" Applied Aged Care Solutions.

The Safe Return Home registration fees have been set for those using Cheques, Money Orders or Electronic Transfer (eg. from Commonwealth Bank NetBank). There is no additional charge for credit card usage.

**Payment by Credit Card**

MasterCard   
  VISA   
  Bankcard

Cardholder:

Card No:

Expiry Date:   /

Amount authorised for payment: \$

.....  
 Cardholder Signature

**Payment by Cheque or Money Order**

(payable to: "Safe Return Home" Applied Aged Care Solutions.)

Cheque No:

Drawer:       Total Payment: \$

**Payment by Electronic Funds Transfer**

Transfer monies to **BSB: 063 222** Account number: **1030 5947**

Amount authorised for payment: \$       Date:   /   /

Please attach / fax or post the bank receipt if possible.

Please complete the details on the following page.

### Billing Contact

Billing Contact person is listed on registration form as

Registrant     Primary Contact     Second Contact     Third Contact

If not a previously listed contact, please provide details below

Title:  Mr.     Mrs.     Ms.     Other:   
 First Name:     Surname:

Telephone Numbers (include STD Area Code)

Home: ( )     Work: ( )     Mobile:

Residential Address

No. & Street:   
 Suburb:   
 State:     Postcode:

### Safe Return Home Checklist

- 1. Complete the Registration Form(s): QR or IAR. (required for all registrations)
- 2. Complete the Consent Form(s) IAC. (required for all registrations)
- 3. Complete the Payment Form PAY-ID. (required for all registrations)
- 4. Include Photo(s). (please make sure you indicate the date of each of the photos)
- 5. I being the Registrant/the Registrant's Representative, acknowledge that I have read, understood and agree to be bound by the terms contained in the Registration Form(s), Consent Form(s), Privacy Policy and Terms and Conditions. (please strike out one)

Signature

Date:   /   /

6. Post completed forms to    OR    Fax completed forms to    OR    To pay by phone

Safe Return Home  
 Applied Aged Care Solutions  
 PO Box 4088  
 Balwyn East  
 Melbourne, Victoria 3103

(03) 9836 8853

Call (03) 9836 8852  
 Please have your registration  
 and credit card details ready  
 before making your call.