VOI client information sheet

**Please complete this form.**

Please note, at the VOI interview we will take your photo.

|  |  |
| --- | --- |
| **Your personal and contact details** | |
| First name: Middle name: | |
| Last name: | |
| Also known as: | |
| Date of birth: Place of birth: | |
| Home address: | |
| Postal address if different: | |
| Telephone: Email: | |
| Website: | |
| Tax file number: ABN: | |
| **Tick a box to select your preferred method of contact with us** | |
|  Email |  Face to face |
|  Telephone |  Post |
|  Specify other: | |

|  |  |
| --- | --- |
| **Current employer details** | |
| Name: | |
| Address: | Telephone: |
| Email: | Website: |

You authorise us to contact your employer in the event of an emergency or where you are uncontactable.

|  |
| --- |
| **Your specimen signature** – please use a black pen |
|  |

|  |  |
| --- | --- |
| **Please complete if instructing us in your capacity as a director of a company** | |
| Company name: | Company address: |
| Company ABN: | Company telephone: |
| Number of directors: | |

|  |
| --- |
| **Please complete if instructing us in your capacity as an attorney** |
| Donor name: |
| Donor address: |
| Donor contact number: |
| Relationship to donor: |

|  |
| --- |
| **Closest relative or spouse / de facto / life partner details** |
| First name: |
| Last name: |
| Address: |
| Telephone: |
| Email: |
| Relationship: |
| You authorise us to contact this person in the event of an emergency or where you are uncontactable. |

**What to bring to our office for your VOI interview**

* Completed VOI client information sheet.
* Marriage or change of name certificate where the name on your identity documents has changed.
* Original or certified copy power of attorney if instructing us as an attorney.
* The original documents listed in category 1 must be provided. If those documents are not available move to the next category down the list until you have all of the listed documents. The list below is from the [ARNECC Model Participation Rules](https://www.arnecc.gov.au/publications/model_participation_rules).

**For Australian citizens and residents**

**Category 1:** An Australian or Foreign Passport

* plus either an Australian driver’s licence or Australian Government-issued card with photo evidencing age and/or identity

**Category 2:** An Australian or Foreign Passport

* plus a full birth certificate, citizenship certificate or descent certificate
* plus a Medicare, Centrelink or Department of Veterans’ Affairs card.

**Category 3:** An Australian driver’s licence or Australian Government-issued card with photo evidencing age and/or identity

* plus a full birth certificate, citizenship certificate or descent certificate
* plus a Medicare, Centrelink or Department of Veterans’ Affairs card.

**Category 4a:** An Australian or Foreign Passport

* plus another form of Australian or Foreign Government issued photographic identity document

**Category 4b:** An Australian or Foreign Passport

* plus a full birth certificate
* plus another form of Australian or Foreign Government issued identity document

**Category 5a:** An Identifier Declaration

* plus a full birth certificate, citizenship certificate or descent certificate
* plus a Medicare, Centrelink or Department of Veterans’ Affairs card.

**Category 5b:** An Identifier Declaration from a specified class of person

* plus a Medicare, Centrelink or Department of Veterans’ Affairs card.

**For non-Australian citizens and residents**

**Category 6a:** A Foreign Passport

* plus another form of Australian or Foreign Government issued photographic identity document

**Category 6b:** A Foreign Passport

* plus full birth certificate
* plus another form of Australian or Foreign Government issued identity document