

## \$50.00 Membership Promotion

Simply fill in the form below and send it in with your Phoenix Health Fund application and we will post both gift cards out to you and the referrer.

Please note: If you apply on line please send this form in separately. Posted, scanned & emailed, or faxed copies accepted.  
Gift cards are only available when new member joins a combined hospital and extras cover.

**I wish to join Phoenix Health Fund and claim my free \$50.00 Gift Card for both myself and the member that referred me.**

I was recommended to join by \_\_\_\_\_ Member number (if known) \_\_\_\_\_

As part of this promotion please send a \$50 Gift Card to both myself and the member shown above.

Member name/s \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_ Postcode \_\_\_\_\_

Signed \_\_\_\_\_ Dated \_\_\_\_\_

**Phoenix Health Fund Ltd**

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