



### Support person

Name of support person

[Grid of 26 boxes for name entry]

If funding is required for a support person, please give the reason

Parent of a child patient, Clinical decision maker, Learning technical skills – ongoing, Patient well being, Accessing services, Emotional/physical support, Assistance with clinical decision, Escourting clinical care

Funding for a second support person requires an approval letter from the specialist.

Specialist transport – if funding is required for special transport please give method

Air travel, Taxi/shuttle, Mobiliy taxi, Ferry, Other (please specify)

Reason for specialist transport

Patient or support person’s medical condition or disability, Due to distance travelled, Other (please specify)

### 3. Referring specialist sign-off

Specialist’s name, Medical Council number (MCNZ)

Referring hospital, Contact phone number

Are you signing on behalf of the specialist?

Yes, Your name [Grid of 26 boxes]

I, the referring specialist/designated signatory, certify that the above information is true and correct.

Sign here

Date: [DDMMYYYY grid]

Hospital stamp

Please tick if it is not reasonably practicable for the patient to complete Section 1 of this registration form or sign the declaration. (Note: Specialist may only sign in their capacity as a publicly funded health or disability specialist.)

### 4. Declaration

I, the patient registering for National Travel Assistance, understand that:

- this form will be sent to the Ministry of Health where my registration will be processed on behalf of my DHB and that my DHB and the Ministry of Health may use this information to pay my claim and monitor access to health and disability services in a manner consistant with the Privacy Act 1993
the information I provide will be held securely by the Ministry of Health and my DHB and will be kept confidential except when required to be disclosed by law. I have the right to access this information by asking the Ministry of Health and I may also request that it be corrected
the Ministry of Health can decline reimbursing the expenses of any person who does not meet Ministry of Health eligibility criteria
the National Travel Assistance Scheme is funded according to the National Travel Assistance Policy document effective 1 January 2006, published and amended from time to time by the Ministry of Health, and that the Ministry of Health may decline an entitlement to receive that assistance
the Ministry of Health is not obliged to enter into any correspondence as a result of any decision made in relation to reimbursement under the National Travel Assistance Scheme
if the Ministry of Health makes an overpayment to me, I may be obliged to repay the amount of the overpayment and that the Ministry of Health will contact me to discuss repayment options.

I declare that the above information is true and correct.

Sign here

Date: [DDMMYYYY grid]

Signature of patient or their representative. A parent or guardian may sign on behalf of a child.