

Abbreviated T&Cs

Referring member must refer via cbhs.com.au/refer by 31 December 2021 and new member must join on both Hospital and Extras by 31 December 2021. Extras cover for new CBHS Corporate Health member must be Ultimate Extras 75, Select Extras 65, Standard Extras 60 or Budget Extras 55. iChoose prepaid Visa card sent 3 months after new member's policy starts, provided policies of both new and referring member are paid up to date. iChoose prepaid Visa card \$2.50 monthly maintenance fee deducted from available balance after 6 months. Full T&Cs at cbhs.com.au/referandearn

CBHS Health Fund Limited

Member Get Member Promotion

Terms and Conditions (updated 22 December 2020)

Eligible Entrant Residency	Australia
Age	18+ years old
Special Conditions	Current member of CBHS whose policy is paid up to date
Entry Process	<p>Eligible Entrant must:</p> <ol style="list-style-type: none"> 1. obtain New Member's consent to disclose their personal information to CBHS for the purposes of this promotion; 2. during the Promotion Period, visit cbhs.com.au/refer, complete and submit the referral form, including providing the following details: <ol style="list-style-type: none"> (a) New Member's full name, email address, phone number, state, and relationship between Eligible Entrant and New Member; and (b) Eligible Entrant's full name, email address and membership number; and 3. follow any reasonable direction by CBHS regarding this promotion and the membership process. <p>New Member must:</p> <ol style="list-style-type: none"> 1. join CBHS or CBHS Corporate Health on both Hospital and Extras cover which starts during the Promotion Period; and 2. hold both Hospital and Extras cover continuously for 3 months from its start date, which is paid up to date. <p>Extras cover for New Member of CBHS Corporate Health must be:</p> <ul style="list-style-type: none"> • Ultimate Extras 75; • Select Extras 65; • Standard Extras 60; or • Budget Extras 55.
Promotion Period	<p>Start Date: 1 January 2021 at 12am AEDT</p> <p>End Date: 31 December 2021 at 11:59pm AEDT</p>
Gift	<p>iChoose prepaid Visa card to the value of:</p> <ul style="list-style-type: none"> • 1-2 New Members join – \$100 per policy referral; and • 3+ New Members join – \$300 per policy referral.
Definitions	New Member has not been a CBHS or CBHS Corporate Health member respectively in the last 12 months.
Special Conditions	<p>iChoose prepaid Visa card</p> <ol style="list-style-type: none"> 1. iChoose prepaid Visa card administered by 212F Pty Ltd (ABN 70 106 450 631) will be posted to the address associated with the Eligible Entrant's policy 3 months after New Member's Hospital and Extras cover starts. 2. For full iChoose prepaid Visa card terms and conditions, including \$2.50 monthly maintenance fee deducted from available balance of iChoose

	prepaid Visa card after 6 months, please refer to the user guide posted together with the iChoose prepaid Visa card and visit ichoosegift.mycardplace.com .
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Further terms and conditions

1. Information on how to enter the promotion forms part of the terms and conditions.
2. Promoter is CBHS Health Fund Limited (ABN 87 087 648 717) (**CBHS**), Level 5, 79 George Street, Parramatta NSW 2150, email: help@cbhs.com.au, telephone: 1300 136 796.
3. Not available with any other offer.
4. If a New Member is referred more than once, only the first referral will be eligible for a Gift.
5. Gift is not transferable or exchangeable and cannot be taken as cash.
6. If a Gift (or any part thereof) becomes unavailable, CBHS reserves the right to substitute it with another gift of equal value and/or specification.
7. CBHS reserves the right to amend the terms and conditions.
8. Privacy Policy and Health Benefit Fund Rules available at www.cbhs.com.au and www.cbhscorporatehealth.com.au apply respectively.
9. CBHS may contact entrants with direct marketing communications. You can unsubscribe at any time.
10. The promotion is governed by the laws of New South Wales and each entrant submits to the non-exclusive jurisdiction of the courts of New South Wales.