

Konnekt Pty Ltd Level 1, 451 Nepean Hwy CHELSEA VIC 3196 1300 851 823 or 03 8637 1188



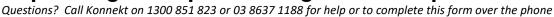
Captioning Videophone Program Participation Agreement for Care Home Residents

The Konnekt-Telstra Captioning Videophone Program seeks to help Australians who have a severe or profound hearing impairment to stay connected.

This Program is available to customers already connected on Telstra's telephone network, as well as residents of Commonwealth-government-subsidized residential care homes.

Captioning Videophone User								
Mr/Ms/ Given Name Family/Surname								
Residential Address (including Room Number or Unit Number, if any)								
Suburb/Town					State	Postcode		
Home phone number (if any):	Mobile (for text) (if any):							
Work phone (if any):	Email (if any):							
			Existing Internet (None / care home / unknown):					
Why my current device or regular phone is unsu	itable (e.g. severe or prof	ound hearing	impair	ment / need li	p reading or large capt	ons to understand)		
Residential Care Home Details								
Care Home Name and Suburb:								
Payer of Program Charges (if diffe	erent from user)							
Mr/Ms/ Given Name				3				
Street Address (including Business Name, if any)								
Suburb/Town		State		Postcode	Country (if not Australia)			
Phone:	Mobile:	1	Email:					
Additional Contact Person (if it is easier for us to talk to someone you nominate)								
Mr/Ms/ Given Name Family/Surname								
Phone:	Mobile:			Email:				

Captioning Videophone Program Participation Form





Equipment Delivery							
Deliver to: User address Payer Additional Contact Person / Other (please provide details below):							
Contact Name for Delivery:	Phone:						
Street Address for courier (no P O Box)							
Suburb/Town	State	Postcode					
Instructions for courier:							
 I acknowledge that the details provided for the Captioning Videophone User are accurate and correct, and there is a need for the Captioning Videophone User to participate in the program. I acknowledge that the Program may be ended at our discretion with at least 6 months' notice in writing. I agree to take care of the equipment and return it if requested at the end of the Program or when my participation ends. I agree to pay Konnekt the Program Fee of \$10 per month, or \$5 per month if I already have a suitable Internet service, during my participation unless otherwise agreed with Konnekt. I understand that if I currently have no compatible Internet service then Konnekt will assist me financially with a 							
suitable Telstra Internet service. I agree that during the Program I may be asked to provide Konnekt service.							
Privacy policy: konnekt.com.au/privacy Konnekt will only relea	se the above information:						
 To Konnekt staff or contractors for purposes of equipment supply, connection, billing, on-going support, return, and to ask you about the Program to help us improve the Program; or If we are required by law, or if required to obtain legal or accounting advice. 							
Signature of Captioning Videophone User or authorized representative:							
	Date:						
Signatory Name and Relationship with User (if signed on behalf of User):							
Referred by (e.g., ABC Audiology):							

Please send this completed form to us:

Scan and email to: sales@konnekt.com.au

OR send your form to: Konnekt

Level 1, 451 Nepean Hwy

Chelsea VIC 3196 AUSTRALIA

We will deliver your Captioning Videophone as soon as possible...usually within 2-3 weeks. Meanwhile, please tell us the names and contact details of the people you want on your speeddial buttons, the colours you would like, and other preferences. Here is a helpful form: www.konnekt.com.au/preferences
Questions? See www.konnekt.com.au/captioning-phone-fag/