

SPORTS VOUCHERS

First name: _____ Family name: _____ Gender: M F

Date of Birth: _____ Medicare or Australian Visa Number: _____

Have you already used a Voucher this Calendar year? Y N

Were you a member of a sports club prior to using this voucher? Y N

Do you identify as being Aboriginal or Torres Strait Islander? Y N

Do you come from a culturally and linguistically diverse background? Y N

To be presented at an approved Sports Voucher provider. Not redeemable for cash. Redemption value not to exceed \$50.00
To find your nearest provider or for more information please visit www.sportsvouchers.sa.gov.au



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