

Permission for others  
to access your account

**Please complete this form to give permission for other people to enquire on your behalf.**

At EnableNSW we care about your privacy and have measures in place to ensure the right people can access your information. We understand there may be other people involved in your care that need to enquire on your behalf. It is very important we know who we can share your information with and we need your permission to authorise their access. This form can be used to add people to your account.

I  (name)  
of  (postal address)  
Date of birth  Consumer Eligibility (CE) number (if known)   
give permission to the following person(s) to enquire on my behalf:

Full Name	Organisation (if applicable)	Relationship	Contact details
			Ph.: Postal address: Email address:
			Ph.: Postal address: Email address:
			Ph.: Postal address: Email address:

**If you would like to give permission to more than three (3) people, please complete an additional form.**

I have undertaken steps to ask the person(s) nominated on this form to ensure they aware they have been chosen to enquire on my behalf when dealing with EnableNSW. I assert that I have obtained the nominated person's/persons' consent for EnableNSW to use their personal information to allow them to enquire on my behalf.

Your signature  Date

Your name

What is your requested person's relationship to you (e.g. parent, guardian, child, Power of Attorney)

I give permission for the above nominated person(s) to

- a) Enquire on my behalf when dealing with EnableNSW in regards to my request, and
- b) Make changes to my contact details and address

I understand:

- The information in this form is used to nominate individuals who I have authorised to enquire on my behalf regarding to the support that I receive through EnableNSW.
- The information may also be provided to an external repairer or supplier to allow EnableNSW to arrange the delivery or repair of equipment. This information will only be sent to the external repairer or supplier if EnableNSW is unable to contact me.
- The information I provide on this form will not be disclosed to any other third party without my written approval or as required by law.
- Both my nominated representative and I can request access to my information and ask for it to be corrected by writing to EnableNSW.
- That all information that I provide on this form is voluntary and if this form is not complete then I will not be able to nominate any representatives named on this form.
- I can find further information on my Privacy rights at [www.health.nsw.gov.au/patients/privacy/Documents/privacy-leaflet-for-patients.pdf](http://www.health.nsw.gov.au/patients/privacy/Documents/privacy-leaflet-for-patients.pdf)

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