



## Introducing myOwn health insurance

Power2 Brisbane Pty Ltd is pleased to announce that we are now an Authorised Referrer of **myOwn health insurance**.

MyOwn health insurance provides a range of options for private hospital and extras cover, backed by **GMHBA** (an Australian not-for-profit health insurer with more than 80 years' experience) and **AIA's Vitality health and wellbeing rewards program**.

**For a no-obligation quote and to find out more, simply sign and return the attached contact form.** A myOwn representative will contact you directly within ten (10) business days of receiving your details to assist you to determine whether myOwn health insurance is appropriate for your needs.

We are simply an Authorised Referrer of myOwn health insurance and this is not a recommendation. We do not provide warranty on the accuracy or suitability for your individual needs of the information and health insurance options provided by myOwn health insurance. This referral should not be deemed as a financial and/or other advice.

If you take out a myOwn health insurance policy, as an Authorised Referrer, Power2 will receive a referral fee equal to 22% (including GST) of your first year's premium. 10% of this referral fee is retained by Power 2 Financial Services Pty Ltd and 90% is retained by Power2 Brisbane Pty Ltd. For example, on an insurance premium of \$1,000, the total referral fee would be \$220 (\$22 paid to Power 2 Financial Services Pty Ltd and \$198 paid to Power2 Brisbane Pty Ltd). This is not an additional cost to you and will only be received in the event that you proceed to take out a myOwn health insurance policy.

If you have questions regarding private health insurance or our referral arrangement with myOwn health insurance, please don't hesitate to contact us.

Kind Regards

Sarah Davies B Bus (Acc), Dip FP, JP (Qual)  
CERTIFIED FINANCIAL PLANNER™ professional  
Tax (Financial) Adviser No. 24792478  
Authorised Representative No. 287760

### SLACKS CREEK

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F (07) 3808 8600

Unit 1/196 Kingston Road,  
Slacks Creek QLD 4127

EMAIL: [info@power2brisbane.com.au](mailto:info@power2brisbane.com.au)

WEB: [power2brisbane.com.au](http://power2brisbane.com.au)

### MOOROOKA

P (07) 3848 0201

F (07) 3808 8600

3 Mayfield Road  
Moorooka QLD 4105

### CABOOLTURE

P (07) 5495 3355

F (07) 3808 8600

Shop 4/1-5 Piper Street  
Caboolture QLD 4510  
PO Box 1374,  
Caboolture QLD 4510

Power2 Brisbane Pty Ltd. ABN 15 158 390 937

Power2 Caboolture Pty Ltd. ABN 82 611 367 063

Licensee: Power2 Financial Services Pty Ltd. ABN 51 164 747 595. AFSL 444078

Liability Limited by a scheme approved under Professional Standards Legislation.

*Statement introducing  
myOwn health insurance*

## Contact Form

I/We have read and understood the information provided in the [statement introducing myOwn health insurance](#) and the [Power2 Financial Services Guide](#) (available at [www.power2brisbane.com.au](http://www.power2brisbane.com.au)). I/We hereby consent to my/our contact details being provided to myOwn health insurance. I/we acknowledge that myOwn health insurance will collect, use and disclose my/our personal information in the manner described in its [Privacy Policy](#) (as updated from time to time and available at [www.myown.com.au](http://www.myown.com.au)).

<b>Signature</b>	
<b>Full Name</b>	
<b>Date</b>	/ / 2018

### Main contact details:

<b>Address</b>	
<b>Phone</b>	
<b>Email</b>	
<b>Preferred contact day and time</b>	<input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri ..... am   or   ..... pm
<b>Date of birth</b>	/ /

### Cover requirements:

- Single    Family    Couple    Single parent family  
 Hospital only    Combined Hospital with Extras  
 Accident    Basic    Mid    Comprehensive (no pregnancy)    Top cover (with pregnancy)

Specified commencement date (if applicable): ..... / ..... / 2018

Do have an existing AIA Priority Protection policy with AIA Australia?  Yes    No

Policy number(s) (if applicable):

### Existing health insurance details (if applicable):

<b>Fund name &amp; policy</b>	
<b>Policy type &amp; cover</b>	<input type="checkbox"/> Single <input type="checkbox"/> Family <input type="checkbox"/> Couple <input type="checkbox"/> Single parent family <input type="checkbox"/> Hospital only <input type="checkbox"/> Extras only <input type="checkbox"/> Combined Hospital with Extras
<b>Premium</b>	\$ <input type="checkbox"/> Yearly <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly
<b>Lifetime health cover loading</b>	Client 1: <input type="checkbox"/> Yes <input type="checkbox"/> No                      Client 2: <input type="checkbox"/> Yes <input type="checkbox"/> No