

SMART EYE START

Let's detect vision problems before it affects a child's learning



PARTICIPATION AGREEMENT

I _____ agree to participate in the Optometry Queensland & Northern Territory SMART EYE START Initiative.
Optometrist Name

I agree to the following conditions of participation:

- My name and practice details, as noted below, will be circulated to schools and parents within my specified region.
- I understand that SMART EYE START will provide schools with a list of participating practices noting if you bulk bill or not.
- My practice is:
 - A bulk billing practice
 - Not a bulk billing practice
- If I wish to end or change my participation with the SMART EYE START Initiative I will notify Optometry Queensland & Northern Territory within 14 days.
- If my practice details change I will notify Optometry Queensland & Northern Territory within 14 days.
- I understand that to participate in SMART EYE START I have to be a current member of Optometry QLD NT.

Signature: _____ Member Number: _____

SMART EYE START Optometrist Participant

Only the optometrist name will be circulated among schools/parents

(Please tick) Mr / Mrs / Ms / Miss / Dr / Prof

Name _____ Surname _____

Preferred Contact Phone _____ Email Address _____

SMART EYE START Practice Details These details will be circulated among schools/parents

Practice Name _____

Practice Street Address _____

Suburb _____ State _____ Postcode _____

Phone _____ Website (if applicable) _____

SMART EYE START Regions

I wish to be included in the following regions, as they become available:

- | | |
|---|--|
| <input type="checkbox"/> Brisbane North (including Ferny Hills, Nudgee etc) | <input type="checkbox"/> Sunshine Coast (including Nambour, Maleny, Gympie etc) |
| <input type="checkbox"/> Brisbane South (including Mt Ommaney, Forest Lake, Rochedale etc) | <input type="checkbox"/> Fraser Coast (including Maryborough, Hervey Bay, Bundaberg etc) |
| <input type="checkbox"/> Brisbane Bayside (including Manly, Thornlands, Victoria Point etc) | <input type="checkbox"/> Rockhampton (including Gladstone, Biloela, Longreach, Emerald etc) |
| <input type="checkbox"/> Moreton Bay (including Redcliffe, Kallangur, Caboolture etc) | <input type="checkbox"/> Mackay (including Clermont, Moranbah etc) |
| <input type="checkbox"/> Logan / Beaudesert (including Heritage Park, Tamborine etc) | <input type="checkbox"/> Townsville (including Charters Towers, Mt Isa, Hughenden etc) |
| <input type="checkbox"/> Ipswich (including Lockyer Valley etc) | <input type="checkbox"/> Far North Queensland (including Cairns, Cooktown, Innisfail etc) |
| <input type="checkbox"/> Gold Coast (including the Hinterland) | <input type="checkbox"/> Darwin (including Katherine, Timber Creek etc) |
| <input type="checkbox"/> Darling Downs (including Kingaroy, Roma, St George, Goondiwindi etc) | <input type="checkbox"/> Alice Springs (including Tennant Creek, Yulara, Yuelamu, Laramba etc) |

Please return completed forms to:

Email: infoqld@optometry.org.au

Fax: 07 3839 4499

Post: Optometry House, 58 St Pauls Tce, Spring Hill Qld 4000

Contact:

Phone: 07 3839 4411

Email: infoqld@optometry.org.au