

VIP ENROLMENT FEES (valid until 31st October 2012)

Joining Fees: Please note, a joining fee applies for all new or re-joining members expect for VIPi membership as follows:

	1 st member of household	2 nd member of household	3 rd member of household	4 th member of household	5 th and subsequent members of household
Joining Fee	£50	£40	£30	£20	£10

Membership Fees: Annual fees can be paid by cheque, debit/credit card or Direct Debit. Monthly fees are to be paid by Direct Debit only.

	VIP12		VIP24		VIP24+		VIPi (no joining fee required)	
	Monthly	Annually	Monthly	Annually	Monthly	Annually	Monthly	Annually
Adult	£35	£378	£41.60	£454	£86.30	£965	N/A	£126
Child	£25.20	£269	£32.90	£357	N/A	N/A	N/A	£126

Please fully complete this enrolment form and return to us:

Title	Name	D.O.B.	Adult/Child	VIP Type	Calculate amount from prices above	
					Joining Fee	Annual/Monthly Fee
TOTALS:						

PAYMENT (choose from 1 of the 4 options below)

- I wish to pay annually in advance and enclose a cheque for the above amount made payable to Doctor Now Ltd
- I wish to pay annually in advance and authorise you to charge my credit/debit card for the total membership fee and joining fee (Cards accepted: Visa, Mastercard, Switch, Maestro)

Card Number: _____

Valid From: ____/____/____ Expires End: ____/____/____ Security Code: _____

- I wish to pay annually in advance and enclose the completed Direct Debit Mandate Form.*
- I wish to pay monthly in advance. I enclose payment for the first month and joining fee, and have completed the Direct Debit Mandate Form.*

* Please note: direct debit legislation requires the original DD Mandate to be submitted to the bank (enclosed with the membership brochure), therefore faxes are not acceptable.

I agree to pay the membership fee either in full, or by monthly instalments in advance. If paying by monthly instalments I agree to give at least 30 days notice to Doctor Now Ltd before I cancel my membership and understand that Doctor Now Ltd can increase my monthly instalments at my membership anniversary.

Signed: _____ Name: _____ Date: _____

Address: _____

Home Tel: _____ Mobile no: _____ Email: _____

Instruction to your Bank or Building Society to pay by Direct Debit

Service User Number:



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Please fill in the whole form using a ball point pen and send it to:
Doctor Now Ltd, The Old Barn, Mulberry Court, Windsor End, Beaconsfield, Bucks, HP9 2JJ

Reference Number: (Office Use)

Name(s) of Account Holder(s)

Bank/Building Society Account Number

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Branch Sort Code

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Instruction to your Bank or Building Society
Please pay Doctor Now Ltd Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Doctor Now Ltd and, if so, details will be passed electronically to my Bank/Building Society.

Name and full postal address of your Bank or Building Society

Bank/Building Society:	
Address:	
	Postcode:
Signature(s):	Date:



Banks and building societies may not accept Direct Debit Instructions for some types of account. This Guarantee should be detached and retained by the payer.

The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit DOCTORnow Ltd will notify you 45 working days in advance of your account being debited or as otherwise agreed. If you request DOCTORnow Ltd to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by DOCTORnow Ltd or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.
 - If you receive a refund you are not entitled to, you must pay it back when DOCTORnow Ltd asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.