

PATIENT DETAILS

Process Number Name _____

Date of Birth _____ Sex _____ Marital Status _____

Address _____

Postcode _____ Country _____

Passport/ID _____ Local Tax N° (contribuinte) _____

Local SNS * _____ Mobile _____

Home Telephone _____ Business Telephone _____

E-mail _____

FAMILY MEMBERS

Process N.º	Name	Date of Birth	Local Tax N°	Local SNS *
<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	_____	_____	_____	_____
<input type="text"/>	_____	_____	_____	_____

Confirm the data with the identification documents.

HOW DID YOU BECOME AWARE OF THE CARECARD?

Hospital
 Website
 Advert
 Friends/Family
 Others

CLÍDIS USE ONLY

Nome do(a) Rececionista (legível) _____ Valor/ Associado _____

Observações _____

Por favor, anexar ao formulário do Carecard, comprovativo de pagamento ou fotocópia de cartão válido, de parceiro associado.

GENERAL CONDITIONS

1. The **CareCard CLÍDIS**, further designated as Card, property of CLÍDIS - Clínica de Diagnósticos de Sines further designated as CLÍDIS.
2. The Card is personal and non-transferable, issued in the name of the holder.

VALIDITY

1. Each Card is valid for one year and can not be used after the expiry date.
2. Reissue is not automatic. Care Holder must apply for renewal 30 days prior to expiry date.

REQUIREMENTS & PAYMENT

1. The use of the Card becomes valid once the Card holder accepts its conditions.
2. The annual cost of **CareCard CLÍDIS** is 36€, paid in full on application.

USE

1. The Card can only be used for services provided at the HPA Group and also in benefits offered by associated companies of the HPA.
2. The Card holder must:
 - a) Be in possession of an identification document;
 - b) The Card holder is responsible for the conservation and correct use of the Card;
 - c) In cases of bad use, the Card can be reissued at the cost of 5€ (five euros).

CONDITIONS

1. The Card conditions are not cumulative with other health plans.
2. The Card is not subject to a period of grace and has no age limit.
3. All family members can benefit from these advantages at the cost of 1€ per month per member.
4. The holder of the **CareCard CLÍDIS** will have access to the existing services available at the CPMedchique as well as at the HPA Health Group, under preferential conditions and advantages (see table below).

EXCLUSIONS

1. Exclusions to the present contract are the medical services provided by doctors that are contracted out of the CareCard CLÍDIS.
2. Free Check-Up available only after annual payment.
3. Discounts and benefits apply to CareCard holders after application.

LOSS OR THEFT

1. In case of loss or theft the Card holder must inform CLÍDIS immediately (Tel: 269 630 370).
2. If this information was made by telephone, it must also be communicated in writing, either by post or email: recepcaoclidis@grupohpa.com.
3. Once a written confirmation has been received, CLÍDIS will cancel the Card and will issue a substitution Card.

> **PLEASE TICK IF YOU DO NOT WISH TO RECEIVE FURTHER NEWSLETTERS.**

CANCELLATION OF THE CARD

1. Cancellation of the contract must be communicated in writing, with a 15 (fifteen) day notice period by either party.
2. Once cancelled the Card holder must return the Card to CLÍDIS within 15 (fifteen) days.
3. CLÍDIS reserves the right to cancel or suspend the use of the Card in case of breach of the contract.

ALTERATIONS OR UPDATES

1. CLÍDIS is free to, at any time, modify these general conditions, but must inform the Card holder within a minimum notice period of 15 (fifteen) days, via one of the following means: email, Letter, Fax or SMS.
2. The Changes or Updates stated in point one, give the Card holder the right to cancel the Card, within a period of 15 (fifteen) days.

CHANGES ON APPLICATION DETAILS

1. Alterations or Changes of personal details must be communicated in writing to CLÍDIS by the Card holder.

REFLEXION PERIOD

1. The card holder can revoke the present contract by registered letter within a 7 (seven) day period, from the application date.
2. The cancellation of this contract during the first 7 days does not entail any expense to the card holder.

PRIVACY POLICY

1. **Data Collection and its Use**
The HPA Health Group is the entity responsible for collecting and processing the personal data of Users.
The personal data collected will be processed and stored by the HPA Health Group or by an entity contracted by HPA for answering your queries, comments and suggestions as well as appointment requests.
Personal data collected shall be stored for the period and purpose which might be necessary in order to comply with requests, after which it shall be deleted.
The HPA Health Group assumes that the data collected was inserted by the respective holder and that its insertion was authorized and accurate.
2. **Right of Access**
In compliance with Legislation Act 67/98, of October 26, for the Protection of Personal Data, the user may, at any time, exercise the rights of access, rectify and cancel their personal data, as well as the right of disagreeing with the treatment thereof, by written request addressed to: Grupo HPA Saúde, Estrada de Alvor, 8500-322 Portimão, Portugal.
3. **Data Transmission**
The HPA Health Group may transmit personal data to a third party provided that it has unequivocally obtained the consent of the User or when the request is of a legal nature, from the National Data Protection Commission; or the communication is carried out to protect the vital interests of the User or any other legitimate legal purpose.
4. **Changes to the Privacy Policy**
The HPA Health Group reserves the right to, at any time and without prior notice, alter, add or revoke, partially or totally its Privacy Policy with immediate effect. Any alteration will immediately be posted online on this same page.

SERVICES	COST/DISCOUNT *	SERVICES	COST/DISCOUNT *
CONSULTATIONS WITH GENERAL PRACTITIONER AT CLÍDIS	30€	HOME AND HOTEL VISITS	-20%
EMERGENCY CONSULTATIONS AT CLÍDIS AND HPA HEALTH GROUP	30€	SCREENINGS	Free ²⁾
EMERGENCY EPISODES ¹⁾	90€/Episode	IN-PATIENT FACILITIES INCLUDING IN-PATIENT MEDICAL FEES, PERMANENT OBSERVATION ROOM, AND INTENSIVE CARE UNIT ³⁾	-20%
SPECIALISTS CONSULTATIONS AT CLÍDIS AND HPA HEALTH GROUP	-20%	MATERNITY SERVICES ⁴⁾	-30%
NURSING TREATMENT	-20%	OPERATING THEATRE INCLUDING SPECIALIST FEES & RECOVERY ROOM ³⁾	-20%

* Discount on CLÍDIS and HPA Health Group Price List.

- 1) Includes all services (Specialists Fees, namely Pediatrics) from admission to discharge. **Excludes CT Scan, MRI, Surgical Procedures and Hospitalization.** If a medical consultation is the only medical care required, the cost will be 30€.
- 2) On most screening tests. However, where consumables or equipment are uses, a residual amount may be charged.
- 3) Only were the services are available.
- 4) Only ai Hospital Particular de Gambelas - Faro.

SIGNATURE

DATE / /