

# EYECAN.

## CHILDREN'S SPECTACLES

## VOUCHER SCHEME



If needed, a copy of your child's JY number can be obtained from Customer and Local Services.

### EYECAN VOUCHER

I hereby agree with the Terms and Conditions outlined in this document and certify the accuracy of the information provided below.

Parent/Guardian's signature:

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Parent/Guardian's name (PLEASE PRINT):

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Date: \_\_\_\_\_

No claim has been made within the last 12 months for this child.

JY Number: \_\_\_\_\_

Date of birth: \_\_\_\_\_