



VITAFLO DELIVERY TO YOU



Because life is  
busy enough



Enhancing Lives Together  
A Nestlé Health Science Company

We know your life is busy enough,  
so we've improved our Vitaflo  
home delivery service **V2U**.

At Vitaflo, we don't just look after your  
prescription. We also look after you.

.....

## V2U offers



### **Convenience**

Products delivered  
to you in a timely  
manner, so you can  
get back to your  
day to day life.



### **Free delivery\***

We can deliver to  
your home, work  
or even holiday  
destination!

\*Usual pharmacy  
dispensing fees apply.



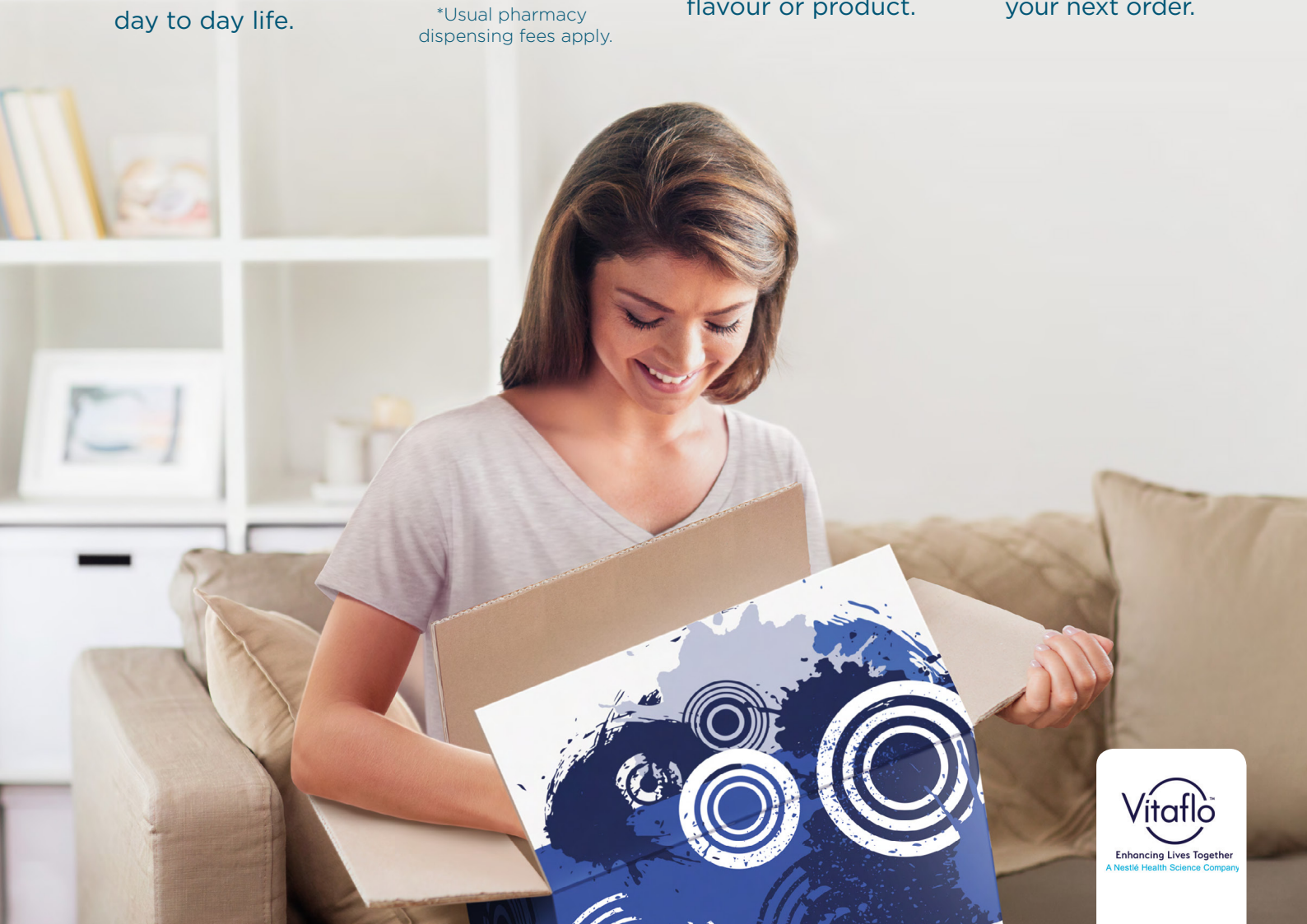
### **Peace of mind**

Safe and reliable  
product supply.  
Never run out  
of your favourite  
flavour or product.



### **A friendly reminder**

We will contact you to  
make sure you always  
have enough repeat  
prescriptions for  
your next order.



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VITAFLO DELIVERY TO YOU

# Getting started

1

Get your prescription from your doctor.

2

Send your prescription with the completed application form to Vitaflo via email or registered post.

3

V2U will arrange for your product to be dispensed and delivered free\* to you.

\*Usual pharmacy dispensing fees apply.



## Email



### FASTEST REGISTRATION

Complete the interactive PDF application form online and email to:

**[v2u@vitaflo.com.au](mailto:v2u@vitaflo.com.au)**

We will contact you to arrange collection of your original prescription via express post at no extra cost.

## Post



Alternatively, print the application form, fill it out and post the form and your original prescription(s) to:

**V2U Reply Paid 85079  
C/O Vitaflo Australia  
Unit 3/119 Balliang Street  
South Geelong Vic. 3220**

We will contact you to organise your first delivery.

## Contact details

Address: Vitaflo Australia  
Unit 3/119 Balliang Street  
South Geelong Vic. 3220

Online: [vitaflo.com.au](http://vitaflo.com.au)  
Email: [v2u@vitaflo.com.au](mailto:v2u@vitaflo.com.au)  
Freecall: 1800 230 889



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# Application form



## 1 Who is the prescription for?

Surname:  First Name:

Date of Birth (DD/MM/YYYY):  /  /  Gender: ☐ Male ☐ Female

## 2 Who should we contact to arrange ongoing prescription deliveries?

Name:

Relationship to person above:

Address:

City:  State:  Postcode:

Phone:  Mobile:

Email:

## 3 Where would you like your stock delivered?

We can deliver stock to work, a family member or a neighbour. Someone needs to sign for delivery.

Address as above: ☐ Yes ☐ OR

Name:

Address:

City:  State:  Postcode:

## 4 Who is writing the prescription?

Name of Doctor:

Clinic / Hospital:

Address:

Phone:  Email:

## 5 Dietitian's contact details

Name of Dietitian:

Hospital:  Phone:

## 6 How would you like us to contact you to organise ongoing prescription deliveries?

☐ Mobile ☐ Email ☐ Phone

# Application form (continued)



7

## Medicare patient information

To process your prescription

Name:

(As it appears on Medicare card)

Medicare Number:

(Please indicate the number appearing in front of person's name)

Health Care Card / Pension Card No:

8

## Payment authorisation

Credit Card:



Mastercard



Visa

Name:

(As it appears on card)

Card Number:

Expiry Date (MM/YY):  /

3 Digit Security Code:

I authorise Peak Pharmacy Newtown acting on behalf of Vitaflo V2U to charge my credit card the dispensing fee for each script dispensed.

Signature: .....

Date:

*(Print and sign or insert signature using Acrobat Fill & Sign tool)*

By signing this application form you agree to the terms and conditions listed over leaf.



By ticking this box you consent to information regarding this script being shared with your nominated dietitian or doctor. You also consent to the collection, storage and use of the information provided in this form (and on your script) by Vitaflo (and other companies in its group) and Peak Pharmacy and their respective courier(s) for the purpose of dispensing the products in the script and providing the V2U services. This may include contacting you with reminders about your script or in relation to your use of the V2U service.

**Thank you very much for your application.  
We will contact you on receipt of this form.**

**Email:** v2u@vitaflo.com.au

**Post:** V2U Reply Paid 85079  
C/O Vitaflo Australia  
Unit 3/119 Balliang Street  
South Geelong Vic. 3220



## IMPORTANT!

Your original prescription is needed to process your order. If emailing the PDF application form we will call you to arrange **FAST** collection of your prescription. Alternatively please include the original prescription in a replied paid envelope.

# Terms & conditions



## 1. Definitions

- 1.1 The 'Customer' is the person named on the V2U application form.
- 1.2 'V2U' is Vitaflo Australia Pty Ltd
- 1.3 The 'V2U Pharmacy' is Peak Pharmacy Newtown, Pakington Street, Newtown Victoria 3220.
- 1.4 'Entitlement Card' includes any valid concession card recognised under the PBS such as a Health Care Card or Veterans Card.

## 2. The service

- 2.1 The Customer appoints V2U to provide the services offered by V2U.
- 2.2 In engaging the services, the Customer authorises V2U to collect their information and prescriptions, process their orders and deliver the ordered supplements to the Customer's nominated address.
- 2.3 The V2U service utilises the V2U Pharmacy who shall dispense and sell the ordered products to the Customer.

## 3. Customer details

- 3.1 The Customer agrees that the details provided are true and complete.
- 3.2 Should there be any changes to the Customer's details, the Customer agrees to notify V2U.
- 3.3 V2U may need to authenticate information provided by the Customer and the Customer agrees to assist as reasonably required.
- 3.4 In addition to the information provided on the application form, V2U may need to contact the Customer for extra information from time to time.

## 4. Entitlement cards

- 4.1 To protect all parties from fraud, the Customer will be required to provide V2U with a copy of the Entitlement Card, under which it wishes to claim a discount on the dispensing fees, if requested.
- 4.2 Failure to provide such a copy will limit V2U's ability to accept a claim for a discounted dispensing price.

## 5. Prescription

- 5.1 V2U must have an original prescription written by a medical practitioner, registered in Australia for each and every product order by the Customer.
- 5.2 Faxed, photocopied, scanned or any other form of electronically reproduced prescriptions will not be accepted in accordance with Australian law.
- 5.3 V2U will also request to retain the Customer's prescription repeats so as to allow for more timely and efficient processing of the Customer's orders.
- 5.4 V2U will remind the authorised customer when all repeat prescriptions are dispensed and a new prescription is required.

## 6. Privacy collection notice

- 6.1 Vitaflo Australia Pty Limited ("V2U") is the company responsible for supplying Vitaflo products in Australia and for providing the V2U service. V2U is part of the Nestlé Health Science group of companies. You can contact V2U at [v2u@vitaflo.com.au](mailto:v2u@vitaflo.com.au)
- 6.2 V2U collects certain personal information directly from you and from third parties (e.g. dieticians or doctors) so that we can supply Vitaflo products, the V2U services, provide information to you about V2U's products and services and obtain your opinions and comments about Vitaflo products. If you do not provide the personal information when prompted, we may be unable to supply you with those products, services and information.
- 6.3 We will share your personal information with other companies that form a part of the Nestlé Health Science group and to third party service providers who process information on our behalf (e.g. pharmacies and couriers). We may also disclose your personal information where we believe that the law requires us to do so.

- 6.4 Your personal information may be transferred overseas to other Nestlé Health Science group companies and third parties operating on their behalf in countries including the United Kingdom and Switzerland.
- 6.5 V2U's privacy policy contains information on how to access and seek the correction of personal information that we hold about you. It also tells you how to complain if you believe we have breached Australian privacy laws.

## 7. Delivery

- 7.1 V2U will deliver the orders via the use of couriers.
- 7.2 Orders will be delivered to the nominated address as specified on the application form, or to any other address nominated by the Customer from time to time.
- 7.3 Delivery is free of charge.
- 7.4 V2U shall advise the customer of the estimated date of delivery.
- 7.5 Under Australian law, as the products are prescription products, at the time of delivery the Customer or their agent will need to sign for receipt.
- 7.6 It is the Customer's obligation to ensure that they or their agent is at their nominated address when the order is delivered.
- 7.7 If products are unable to be signed for at delivery address, courier will not deliver the stock. The customer may then be liable for a redelivery charge. V2U will contact the customer in this instance.
- 7.8 V2U will endeavour to provide an estimated time of arrival, however cannot guarantee that the product will arrive at that time.

## 8. Payment

- 8.1 The Customer will be charged the normal pharmacy dispensing fee for the products, including concession when a valid Entitlement Card has been provided.
- 8.2 The Customer will be required to provide current Credit Card details on the application form, from which the Customer authorises V2U to charge the amount as specified at the time of the order.
- 8.3 Should payment be rejected V2U will not honour the order but will contact you to arrange alternate payment options before fulfilling your order.
- 8.4 Should the Customer wish to pay by means other than credit card they may do so by contacting V2U.

## 9. Termination of agreement

- 9.1 The Customer may terminate this agreement with V2U at any time by telephone or email.
- 9.2 The Customer may cancel an order at any time prior to dispensing.
- 9.3 V2U may terminate this agreement in writing at any time.

## 10. Acknowledgement and disclaimer

- 10.1 The Customer acknowledges that the purchase and use of the products are prescribed by a medical practitioner and V2U does not provide any guarantee as to the appropriateness of its product to the Customer.
- 10.2 The Customer in signing the application form acknowledges that they have read and agreed to all of the Terms and Conditions contained herein.
- 10.3 The Customer enters this agreement at their own risk.

## 11. Whole agreement

- 11.1 The Customer and V2U acknowledge that this agreement constitutes the whole agreement and the Customer acknowledges that they have not relied on any representation, warranty or undertaking that is not included in the Agreement.

## Contact details

Address: Vitaflo Australia  
Unit 3/119 Balliang Street  
South Geelong Vic. 3220

Online: [vitaflo.com.au](http://vitaflo.com.au)  
Email: [v2u@vitaflo.com.au](mailto:v2u@vitaflo.com.au)  
Freecall: 1800 230 889