



Australian Government
Department of Immigration and Citizenship

Request form for TIS National Client Code

Please Tick

General Practitioner

Specialist

Pharmacist

Specialist type (for example, Obstetrician)

Medicare Provider/PBS Approval Number

Doctors/Pharmacists full name
(for example, Dr John Smith)

Contact Name (for example, Practice Manager)

Contact Phone Number

Fax Number

Email Address (if applicable)

Street Address (include name of pharmacy/practice, suburb, state and post code)

Mailing Address (if different to above)

Please Complete this form, attention it to the TIS National Client Liaison and Promotions Team and return it by fax or post. Address details below.