## BEREAVEMENT/ UNEXPECTED CRITICAL MEDICAL SITUATION RETROSPECTIVE REFUND APPLICATION FORM EFFECTIVE FOR TRAVEL 12 JUNE 2015 ONWARDS - DOMESTIC NEW ZEALAND TRAVEL ONLY



Passenger Name(s)		Ticket Number			Relationship to deceased or person who suffered an unexpected serious medical situation		
1.					<b>&gt;</b>		
2.					<b>&gt;</b>		
3.					<b>&gt;</b>		
4.					<b>&gt;</b>		
5.					•		
Name of deceased or person who suffered the unexpected critical medical situation:							
Booking Reference (PNR):	email:				Contact Number:		
Contact Address:					Airp	oints Number:	
Traveller's Bank A/c Name:		Baı	nk A/c Numl	ber:		Bank Name:	
Bank Branch Address:							
Routing / Transit No. (for CAD & USD): IBAN/Sort Code (for EUR & GBP):							
Bank & Branch / BSB No. (for all other countries):							
(More than one may apply, originals not required copies accepted)  • Letter from Doctor / Funeral Director  • Death Certificate  • Death Notice  • Birth Certificate  • Marriage Certificate  • Statutory Declaration from a JP  This documentation is required to validate both to death / unexpected critical medical situation, and to immediate family connection of the person(s) requestion refund consideration, e.g. 'beloved daughter of xon Please supply only what is relevant to the situation.  Domestic New Zealand Compassionate Fare Levels: Please note that if the fare you paid is equal to or less than these levels, no refundate.							situation, and the erson(s) requesting daughter of xxx'. the situation.
is applicable therefore we request that no application is submitted.							
Direct Flights (1.1)			Fare (one- nunedin via Wellington) NZ\$ 169.00		vay)		
Direct Flights (including via flights e.g NZ 463 Auckland to D			3 1 1				
Connecting Flights (e.g. Auckland to Invercargill changing aircraft in Christchurch) NZ\$ 249.00  The traveller <b>must be</b> an immediate family member of the deceased or the person who has the unexpected critical medical situation that they are travelling to support.							
Immediate Family Definition The following people are considered immediate family.							
<b>Bereavement</b> - The spouse, de facto partner, parent, child, grandparent, grandchild, brother, sister, step parent, step child, step brother, step sister, parent in law, daughter in law and son in law of the deceased.							
<b>Unexpected &amp; Critical Medical Situation</b> - In addition to the person who has suffered the unexpected and critical medical situation, their spouse, de facto partner, parent, child, grandparent, grandchild, brother, sister, step parent, step child, step brother, step sister, parent in law, daughter in law and son in law.							
NOTE:  Applications must be received by an Air New Zealand office within 30 days of the date of travel to receive consideration for refund. Please do not forward until completion of travel.  Great-grandchildren, great grand parents, aunties, uncles, nephews, nieces, cousins, friends, ex-partner/spouse, grand niece, grand nephews etc. are not defined as immediate family in this situation.  Tickets purchased by credit card will be refunded back to the credit card. Tickets purchased by cash/cheque will be refunded into the bank account listed by you above. Air New Zealand accepts no liability for any lost funds or costs you may incur if the details you provide are not accurate. The account number must be that of the ticketed passenger. You may supply a pre-printed bank deposit slip or similar to verify account.							
$\square$ I confirm that the i	nformation provided	and do	cumentati	ion supporti	ng this applica	ition is true	and accurate.
Name (print):			Sign:			Date:	DD/MM/YYYY
Please email / fax / mail the completed form to: Phone: 0800 733 8637 Email: refunds@airnz.co.nz  Fax: 09-3362939							

Mail: Air New Zealand Refunds Department, Private Bag 92007, Auckland, New Zealand

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