

## Voucher Redemption Agreement Form

Edenred UK, 50 Vauxhall Bridge Road, London, SW1V 2RS Tel: 0843 453 4433 Fax: 0843 453 4410

This form is an Agreement between you, the Optical Practitioner named below, and Childcare Vouchers Ltd trading as Edenred UK. Under this Agreement, the Optical Practitioner agrees to accept Eyecare Vouchers offered by its customers, and Edenred agrees to reimburse the Optical Practitioner for vouchers accepted from customers and which are returned to Edenred UK, subject at all times to the Conditions of Voucher Redemption shown overleaf

### The Optical Practitioner

Name of Practice \_\_\_\_\_

Name of Principal/Manager \_\_\_\_\_ Telephone \_\_\_\_\_

Trading Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Payment Address (if different from above) \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

### Is your business

- An independent Practice
- A corporate body
- Number of business locations

**PLEASE ATTACH THE ADDRESSES OF ANY ADDITIONAL RELATED PRACTICES**

### Payment of Eyecare Vouchers *(Please complete only one option)*

Payment by Cheque: \_\_\_\_\_

#### Payment by BACS:

Account Name: \_\_\_\_\_ Name of Bank: \_\_\_\_\_

Sort Code: \_\_\_\_\_ Account Number: \_\_\_\_\_

### Your Agreement with us

I / We wish to accept and redeem Eyecare Vouchers, and agree to the Conditions of Voucher Redemption shown on the reverse of this form. I / We confirm that the information given above is accurate.

Signed \_\_\_\_\_

For and on behalf of \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_ Date \_\_\_\_\_

# Conditions of Voucher Redemption

## What you, the Voucher Redeemer, agrees to do

1. As the Voucher Redeemer named overleaf ("the Redeemer / you"), you confirm that you will accept the vouchers issued by Edenred UK ("the Company/ We/Us ") from your customers as part payment or as full payment only for any services or goods detailed on the reverse of each voucher, where such detail is provided. No cash exchange will be made at any time. You will not accept vouchers after the expiry or validity date (together, the "date of expiry") shown thereon.
2. Responsibility for the provision of satisfactory standards of services or goods, and the meeting of any related and relevant statutory regulations or registration rests with you. You will not make any representation or warranty in any way binding on the Company in relation to the services or goods provided when accepting vouchers. You will indemnify the Company against any claim or alleged claim related thereto and against any liability or loss arising in any way from the provision of the services or goods.
3. All vouchers sent to the Company for redemption will be dispatched to be received by us, at our offices, not later than 3 calendar months after the date of expiry shown on the voucher, where such date of expiry is printed thereon. We will not accept any vouchers for redemption which are received by us after that date.
4. Responsibility for the safety and any insurance of vouchers either in your possession, or subsequently sent by courier, postal service or other method, rests with you. If you are redeeming Capital Bonds, Eyecare Vouchers or Carer Break Vouchers, you will retain the counterfoil stubs from each voucher prior to posting, as proof of any loss. Redemption will not be made without original vouchers or counterfoil proof.
5. You will ensure that all vouchers sent to us for redemption ("Voucher Claims") are accompanied by a completed voucher claim form issued by the Company – either in paper or electronic format ("Voucher Claim Form"). Vouchers provided without a completed Voucher Claim Form may not be accepted for redemption. You must sign all paper format Voucher Claim forms.
6. You will ensure that all original vouchers sent for redemption are invalidated for further use by writing a clear and distinct mark through the upper area of each voucher, or by using your company stamp. The Company reserves the right to make an additional charge for the processing of non-invalidated vouchers received for redemption. The Company will only accept vouchers which are in a satisfactory condition including a readable serial number.
7. You will ensure that you satisfy yourself of the validity and authenticity of vouchers sent for redemption by using the Company's printed materials, available on request from the Company, which describe and illustrate the Company's vouchers. Only valid and authentic vouchers will be accepted for redemption.
8. If accepting Eye Examination Eyecare Vouchers, you will provide an eye examination and will issue a separate Certificate of Recommendation to each patient, without additional charge, in exchange for an Eye Examination Voucher. This examination will be in accordance with the definition of a sight test as defined by the Opticians' Act, 1989 Section 36(2). Additionally, you will offer to provide a basic pair of single vision Corrective Spectacles, suitable for VDU use, in exchange for the standard Eyecare Spectacles Voucher, and a basic pair of bi-focal spectacles in exchange for the higher value Eyecare Spectacles Voucher. You will provide these services or goods in exchange for the relevant vouchers and without additional charge to the patient.
9. You will confirm to your own satisfaction that any bank or building society details you provide to the Company in respect of BACS direct transfers of payment are suitable for that purpose.

## Making Changes to your Name, Address, Contact and Payment Details

10. If you wish to make changes to any details held by the Company relating to the redemption of the Company's vouchers you must -
  - a) provide your request in writing to the Company, either by post, fax or email, clearly marking your request "Helpdesk"
  - b) sign the request yourself, if appropriate, and always quote the account number provided to you by the Company
  - c) give a minimum of 10 working days' notice
  - d) confirm to your own satisfaction that your request has reached us and has been processed accordingly
11. The Company reserves the right to charge a service fee for the reissue of any payment initiated to you by the Company against your incorrect instructions. The Company will not accept responsibility for any charges made by your bank or building society.

## What the Company agrees to do

12. We will issue payment against valid Voucher Claims in respect of vouchers originally issued by the Company, after receipt at our offices. Voucher Claims will not be accepted for redemption unless a Voucher Redemption Agreement form has been provided by you as your request to affiliate with the Company as a voucher redeemer and that form has been accepted by us. Payment of valid Voucher Claims will be issued to you when the number of **working** days shown below have elapsed, following receipt at our offices.
  - a) Eyecare Vouchers - 15 days
  - b) Luncheon Vouchers - 1 day Express
  - c) Luncheon Vouchers - 7 days Standard
  - d) Clean Way Vouchers - 5 days
  - e) Carer Break Vouchers - 5 days
  - f) Capital Bonds - 14 days
13. All Redeemable Values and Service Charges are as provided to you in writing, in advance, by the Company at the time of affiliation or of subsequent revision.
14. We will only pay for the actual number of valid vouchers received and counted by ourselves.
15. We will make our payment by BACS direct transfer or by company cheque, crossed A/C Payee, and payable to the person or organisation affiliated with the Company as the Redeemer.
16. We will provide written notification regarding any changes in Redeemable Values of vouchers or Service Charges, and reserve the right to modify the Conditions shown here, providing prior written confirmation.
17. Claim Forms for all vouchers, Certificates of Recommendation for Opticians, and point-of-sale materials for Luncheon Vouchers, Eyecare Vouchers and Clean Way Vouchers are supplied without charge, at the discretion of the Company.
18. In the event of any conflict between these Conditions of Voucher Redemption and a previously agreed Retail Partners Agreement in respect of Capital Bonds then the terms of that Retail Partners Agreement shall prevail.

**Presentation to the Company of vouchers issued by the Company confirms your acceptance of these Conditions.**

**You can contact the Edenred UK Helpdesk using the contact number shown overleaf.**