

TRAVEL

Please ensure that all questions are answered fully and accurately and, where necessary, Schedules giving further explanation are provided.

Important Notice Concerning Disclosure: It is your duty to disclose all material facts to Underwriters. A material fact is one that is likely to influence an Underwriter's judgement and acceptance of your proposal. If your proposal is a renewal of an existing policy, it should also include any change in facts previously advised to Underwriters. If you are in any doubt as to whether or not facts are considered material, you should disclose them.

PI	PREMIUM CALCULATION			PERIOD OF INSURANCE						
Number of Days		1	2	3	4-10	11-18	19-24	25-31	Each extra month:	
1	Loss of Deposits and Tour Max. Sum Insured: \$5,000 Min. Premium: \$35			Rated On Application						
2	Personal Accident	Max. No. of units: 10	Cost per Standard (10,000) Unit of Cover				r			
		Normal Benefits	75¢	\$1.75	\$2.50	\$3.00	\$4.00	\$5.00	\$6.00	\$3.00
		Capital Benefits Only	30¢	60¢	80¢	\$1.00	\$1.30	\$1.60	\$1.80	\$1.00
		Death Benefit Only	20¢	50¢	70¢	90¢	\$1.10	\$1.50	\$1.70	90¢
3	Medical & Other Expenses Excl. first \$100 of each claim	Cost per Unit of Cover Max. No. of Units: 5 (\$100,000)	Cost per Standard (20,000) Unit of Cover (for each extra Unit of Cover, add 50% of the First Unit)							
				\$20.00		\$25.00	00 \$35.00		\$12.50	
			The	These rates increased by			/ 100% if visiting USA or Ca			Canada
4	Baggage/ Personal Luggage Excl. first \$100 of each claim	Rate Percent on value of personally accompanied luggage Min. Sum Insured: \$1,000 per person (child under age 15: \$500) Max. Sum Insured: \$15,000	1.25%		1.50%	2.00%	2.25%	1.00%		

DART 1	DETAIL	SOF	DRODOSAL

1.	a.	a. Name of Proposer:					
	b.	Mailing Address:			Postal Code: _		
	c.	VAT No./TRN (where applicable):					
		Contact Nos./Fax No.: (H)					
	e.	Email address:					
	f.	Occupation:		National Reg	istration (ID) No.: _		
	g.	Date of Birth:		Loyalty No. (if appl	icable to territory):		
2.	a.	Period of Journey: From		To			
	b.	The Journey: From	To		_Return		
	C.	Do you wish to extend cover under S	Section 3 (Medica	al Expenes) to include U	JSA and Canada? [□ Yes □ No	
7	Dο	erson(s) to be insured and cover reque	astad.				

Name	Age*	1. Loss of Deposits	2. Personal Accidents	3. Medical & Other	4. Baggage
		Sum Insured	No. of Units	Expenses	Sum Insured**

^{*}For anyone under age 15 or over age 70, please provide age

^{**}Minimum Sum Insured: \$1,000 per person (children under age 15: \$500)



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4.	There is a normal limit of 20% of the sum insured on any item of Personal Baggage. If the value of any such item
	exceeds 20% of the Sum Insured, please give details below:

Value	Description	Value
	Value	Value Description

5.	5. If you (or any member of your family) are insuring for Personal Accident (Section 2) please give details of any other Personal Accident policies already in force:							
PA	ART 2 DECLARATION							
NC	TE: SIGNING THIS PROPOSAL DO	ES NOT BIND THE PRO	POSER TO COMPLETE THIS INSU	RANCE.				
Ιd	eclare that:							
1.	 to the best of my knowledge and belief, all persons proposed are in good health, free from any physical defect or infirmity are not receiving medical treatment of any kind and are not suffering nor have suffered from a recurring illness. 							
2.	to my knowledge at the present t	ime there is no reason	why the journey may have to be ca	ncelled or curtailed.				
Pro	Proposer Name (Please print)							
Sig	Signature Date							

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PART 3

DECLARATION

Available for travel anywhere in the world by land and sea and by air as a passenger in an aircraft operated by a regular airline or established charter service. Insurance may be arranged under any or all of the following Sections to meet individuals' requirements.

The insurance is subject to the terms & conditions of our standard Travel Coupon

SECTION	SUMMARY OF COVER			PRINCIPAL EXCEPTIONS	
1. LOSS OF DEPOSIT & TOUR CHARGES The insurers will repay lost deposits, payments in advance and any legal claims against you for travel and accommodation charges you have agreed to pay - unless they can be recovered from any other source - if you are forced to cancel or cut short your journey because of:- EITHER death, accident, sickness, compulsory quarantine, jury service or witness summons of yourself or any person with whom you intend to travel, OR death, accident or sickness of the husband, wife, child, father, mother, father-in-law, mother-in-law, or close business associate of yourself or any person with whom you intend to travel.			n any other ns of the	The Insurance does not cover: death, injury or sickness of an InsuredPerson arising wholly or in part or directlyor indirectly from the influence ofintoxicants, drugs, insanity venerealdisease pregnancy	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	yourself or any person with whom you intend to travel. Ifyour stay is cut short the Insurers will also repay necessary additional travel and accommodation charges and if it is cut short within the first four days, provided you are going for longer than seven days, the insurers will repay your outward and return fees.				
2. PERSONAL ACCIDENT		Cover per uni Max. 10 Units Children unde		alcohol or drugs or venereal disease or insanity	water skiing use of motor-cycles mopeds mechanically assisted pedal cycles as driver or passenger hunting or racing except on foot
	In the event of Accident causing:	Age 15-70	Under 15	pregnancy or childbirth	
	1. Death	\$10,000	\$1,000	or any wilful exposure	
	Loss including total and permanentloss of use of one or more limbs or the sight of one or more eyes	\$10,000	\$10,000	to dangeroccupations involving	
	3. Permanent total disablementother than described under Item 2 above	\$10,000	\$10,000	manual labour	steeplechasing or polo
	4. (a) Temporary total disablement	\$100	Nil	 winter sports or any professional Sports 	illness or disease or
	(b) Temporary partial disablement	\$40	Ni	association or rugby	physical defect existing at the time of making
	For persons aged between I6 and 70 where the Capital Sum exceeds \$50,000 benefit 3 above will be limited to 5 units of cover if gainfully employed and I unit of cover if not gainfully employed. Unless specially agreed cover under Items 1, 2 and is limited to 10 units.			football • mountaineering or	a proposal for this insurance • persons over 70 years
3. MEDICAL &	Amount each unit \$20,000			holing of age	
OTHER EXPENSES	Maximum sum insured \$100,000 (5 units)		• parachuting • war	• war	
	member of your party falls ill, suffers bodily injury or dies during t necessary expenses incurred as a result. Included are:	flying other than as a passenger	• the first \$100 or equivalent of each		
	fees, hospital and nursing home charges, the cost of massage and of additional travel and accommodation incurred by any insured per or ashes.	use of underwater breathing apparatus	claim under Section 3 by each Insured Person.		



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4. PERSONAL LUGGAGE

Payment for loss of or damage to Personal Luggage. The limit any one article is 20% of Sum Insured but there is provision for the insurance of specified articles of higher value.

Cash, cheques, travel tickets etc are included up to 25% of the Sum Insured per person. For larger amounts, an additional premium will be required.

NB. All Computers, Electronic Equipment, Mobile Phones, Hand-held Radios and the like, must be carried by hand (carry-on luggage) and under the personal supervision of the insured.

CASH LIMIT IS \$500.

- Loss or destruction of or damage to contact corneal cap or micro lenses
- stamps of any kind
- manuscripts or documents of any description
- medals, coins, bonds, securities, travellers' samples
- camping equipment
- jewellery, watches, furs, precious metals, precious stones or articles composed of any of them
- · wear & tear
- moth or vermin
- confiscation by Customs or other Officials
- sonic bangs
- the first \$100 or equivalent of each claim by each Insured Person
- loss or damage to contact lenses or fragile items unless caused by fire or an accident to the conveyance
- loss of or damage to camping equipment and breakage of skis
- war
- radioactive contamination

DELAYS: Automatic extension granted if transport service is delayed by circumstances outside control of Insured Person(s)

The full policy wording will be supplied on request,