Retail Travel

Proposal Form



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Every question must be answered fully and correctly by the person to be insured or on their behalf by the proposer

General Information

1)	proposer				
	proposer				
2)	Contact Details	Phone :			
		Email Address :			
3)	Address and Postcode				
4)	Nationality				
4)	Ivationality				
5)	Category of Insurance required? (tick one)	Individual (under 18)	Individua	al (18 or over)	
		Couple	One Pare	rent Family	
		Family	Group		
6)	Name(c) and Date(c) of Birth of all other	Full Name		Date of Birth	
0)	Name(s) and Date(s) of Birth of all other travellers (please note, dependant children can be covered under a family policy. If they do not meet the definition of a dependant child, a separate quotation on an Individual Category would need to be completed).	ruii Name		Date of Birtii	

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Travel Information

7)	Type of Insurance Required (tick one)	Single Trip (up to 93 days)							
		Long Trip (from 4 to 12 months)							
		Annual (Multi-trip)							
8)	Duration of Cover.								
	If Single Trip selected in question 7, please provide dates of travel:-	From			То				
	If Long Trip selected in question 7, please provide dates of travel:-	From		То					
	If Annual selected in question 7, please state maximum duration any one trip required	31		45		62		93	
8)	Geographical Location	UK Only Europe							
		Worldwide (excluding USA and Canada)							
		Worldwide (including USA and Canada)							
۵۱									
9)	Baggage and Money Required?	Yes		No					
10)	Leisure Activities required (not including Winter Sports)? (please list)								
11)	Winter Sports Extension required?								
·	If Single Trip selected in question 7, please state Yes or No:-	Yes				No			
	If Long Trip selected in question 7, please provide Number of Days required during the period of insurance:-	8			21		32		
	If Annual selected in question 7, please provide Number of Days required during the period of insurance:-	8			21		32		

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12)	Cover for work purposes required? (please note non-manual work is automatically included. Please provide details of any manual work).						
13)	Is Gold or Platinum cover required? (these provide different benefits; please contact your broker for details)	Gold?		Platinum?			
14)	Have you reported any claims in the past three years? If yes please provide details	No		Yes			
15)	If you are a company purchasing a single trip insurance on behalf of your employees, please provide company name and company address:-						
Declaration To the best of my/our knowledge and belief, the information provided in connection with this proposal, whether in my/our own hand or not, is true and I/we have not withheld any material facts. I/We understand that non-disclosure or misrepresentation of a material fact may entitle Underwriters to void the Insurance. (N.B: A material fact is one likely to influence acceptance or assessment of this proposal by Underwriters. If you are in any doubt as to whether a fact is material or no, you must disclose it.) I/We understand that Underwriters will determine their terms and conditions upon the information provided in connection							
Data It is un Person	nis proposal; and I/we further understand the vriters to accept this Insurance. Protection Act 1998 derstood by the Insured Person that any informula will be processed by the Underwriters in colless of providing insurance and handling claim.	ormation provided mpliance with the	to the Underwrite provisions of the D	rs regarding the As ata Protection Act	sured/Insured 1998, for the		
	ure of the Person to be Insureder than the proposer)			Date			
Signatu	ure of the Proposer			Date			

A copy of the full standard WORDING may be seen upon application to your Insurance Broker including Cover, Conditions and Exclusions applicable.