

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.

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 Charges	Max. Sum Insured: 10,000 Min. Premium: \$50	Rated On Application							
2	Personal Accident	Max. No. of units: 10	Cost per Standard (10,000) Unit of Cover							
		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)							
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%
			These rates increased by 100% if visiting USA or Canada							

PART 1 DETAILS OF PROPOSAL

1. a. Name of Proposer: _____
- b. Mailing Address: _____ Postal Code: _____
- c. VAT No./TRN (where applicable): _____
- d. Contact Nos.: (H) _____ (W) _____ (M) _____ (F) _____
- e. Email address: _____
- f. Occupation: _____ National Registration (ID) No.: _____
- g. Date of Birth: _____ Loyalty No. (if applicable to territory): _____
2. a. Period of Journey: From _____ To _____
- b. The Journey: From _____ To _____ Return _____
- c. Do you wish to extend cover under Section 3 (Medical Expenses) to include USA and Canada? Yes No
3. Person(s) to be Insured and cover requested:

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

*For anyone under age 15 or over age 75, please provide age
**Minimum Sum Insured: \$1,000 per person (children under age 15: \$500)

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:

Description	Value	Description	Value

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:

PART 2 DECLARATION

NOTE: SIGNING THIS PROPOSAL DOES NOT BIND THE PROPOSER TO COMPLETE THIS INSURANCE.

I declare that:

- 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.
- to my knowledge at the present time there is no reason why the journey may have to be cancelled or curtailed.

Data Protection Declaration:

By signing this form, I confirm/understand that:

- In order to administer the policy and plan CG United Insurance Ltd. may process any and all of the personal data provided.
- I consent to CG United Insurance Ltd. processing my personal data, in accordance with CG United Insurance Ltd.'s Privacy Policy (<https://international.cgcoralisle.com/privacy-policy/>). For additional information on your rights and how to exercise them, please access or request this Policy.
- I confirm that any personal data I provide to CG United Insurance Ltd. in respect of any third party, is done with that third party's consent and knowledge of CG United Insurance Ltd. processing of their personal data.
- I have the right for my personal data to be processed in accordance with the rights of Data Subjects under the relevant jurisdictional privacy legislation.
- I understand that this form shall be incorporated into and shall constitute a part of the policy contract between me/us and the Company.

Proposer Name (Please print) _____

Signature _____ Date _____

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. If your 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.		<p>The Insurance does not cover:</p> <ul style="list-style-type: none"> • death, injury or sickness of an Insured Person arising wholly or in part or directly or indirectly from the influence of intoxicants, drugs, insanity or venereal disease • pregnancy 	
Sum Insured \$10,000 maximum				
2. PERSONAL ACCIDENT	In the event of Accident causing:	Cover per unit per person: Max. 10 Units Children under 15 - 1 Unit	<ul style="list-style-type: none"> • alcohol or drugs or venereal disease or insanity • pregnancy or childbirth or any wilful exposure to danger • occupations involving manual labour • winter sports or any professional Sports • association or rugby football • mountaineering or rock-climbing or pot-holing • parachuting • flying other than as a passenger • use of underwater breathing apparatus 	
	1. Death	Age 15-75 Under 15 \$10,000 \$1,000	<ul style="list-style-type: none"> • water skiing • use of motor-cycles mopeds mechanically assisted pedal cycles as driver or passenger • hunting or racing except on foot • steeplechasing or polo • illness or disease or physical defect existing at the time of making a proposal for this insurance • persons over 75 years of age • war 	
	2. Loss including total and permanent loss of use of one or more limbs or the sight of one or more eyes	\$10,000 \$10,000		
	3. Permanent total disablement other than described under Item 2 above	\$10,000 \$10,000		
	4. (a) Temporary total disablement	\$100 Nil		
	(b) Temporary partial disablement	\$40 Ni		
For persons aged between 16 and 75 where the Capital Sum exceeds \$50,000 benefit 3 above will be limited to 5 units of cover if gainfully employed and 1 unit of cover if not gainfully employed. Unless specially agreed cover under Items 1, 2 and 3 is limited to 10 units.				
3. MEDICAL & OTHER EXPENSES	Amount each unit \$20,000 Maximum sum insured \$100,000 (5 units)		<ul style="list-style-type: none"> • the first \$100 or equivalent of each claim under Section 3 by each Insured Person. 	
<p>If you or any insured member of your party falls ill, suffers bodily injury or dies during the period of insurance, the insurers will pay necessary expenses incurred as a result. Included are:</p> <p>Medical and surgical fees, hospital and nursing home charges, the cost of massage and emergency dental treatment, the cost of additional travel and accommodation incurred by any insured person and the cost of conveyance of body or ashes.</p>				

<p>4. PERSONAL LUGGAGE</p>	<p>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.</p> <p>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.</p> <p>CASH LIMIT IS \$500.</p>	<ul style="list-style-type: none"> • 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
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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,