

Travel Guard Application Form



www.chartisinsurance.com.sg

Insured 1

Name: _____

NRIC/PP: _____ D.O.B. _____

E-mail: _____

Address in Singapore: _____

Postal Code: _____

H: _____ HP: _____

Insured 2 (Applicable for Family Plan only)

Name: _____

NRIC/PP: _____ D.O.B. _____

E-mail: _____

Address in Singapore: _____

Postal Code: _____

H: _____ HP: _____

Number of Accompanying Children: _____ (For Family Plan, Child or Children shall mean an unmarried person or persons not older than 18 years of age or below 23 years of age if such person(s) is studying full-time or enrolled to study full-time in a recognized institution of learning or higher learning during the Policy period. For Annual Plan, each child must be the legal child of the insured adult(s). There is no limit to the number of accompanying children.)

■ Please tick (✓)

Choice of Plan	Choice of Benefit	Area
<input type="checkbox"/> Individual Plan <input type="checkbox"/> Family Plan	<input type="checkbox"/> Classic <input type="checkbox"/> Superior <input type="checkbox"/> Premier	<input type="checkbox"/> Asean <input type="checkbox"/> Asia <input type="checkbox"/> Worldwide
Per-trip: Maximum of up to 182 consecutive days per trip		Annual: Maximum of up to 90 consecutive days per trip
<input type="checkbox"/> Per Trip Furthest Destination from Singapore: _____ Length of Trip: _____ (both days inclusive) Date of Departure: _____ (DD MM YYYY) Date of Return: _____ (DD MM YYYY)		<input type="checkbox"/> Annual Effective Date: _____ (DD MM YYYY) Expiry Date: _____ (DD MM YYYY)

Total Premium Payable (No GST required)	S\$
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Mode of Payment	
<input type="checkbox"/> <input type="checkbox"/> AMEX <input type="checkbox"/> DINERS <input type="checkbox"/> Visa	NB: Policy will be issued upon receipt of approval from the respective credit card company
Card Account No: _____	Card Expiry Date: _____ (MM YYYY)
Cardholder's Name: _____	

Warranty and Declaration: The Insured Person(s) hereby warrant and declare for themselves and on behalf of all members of the travelling party as follows:
 (I) I/We hereby declare that I/We have received, read and understood, or have been advised of and understand, the contents of the brochure and any information material relating to this insurance product.
 (II) I/We understand and agree that no insurance is in force until an Application is accepted by the Company, payment received in full and a Policy is issued.
 (III) I/We are aware of and agree to abide by the Policy's terms, conditions and exclusions.
 (IV) I/We are not travelling contrary to the advice of a Qualified Medical Practitioner or for the purpose of obtaining medical treatment.
 (V) I/We are currently in good health, free from all physical impairment and deformity.
 (VI) I/We agree and authorise any medical source (including hospitals and clinics), insurance officer or any other organisation to release to the Company at any time any information concerning the Insured Person(s) if required.

Important Notice:

- Statement pursuant to the Insurance Act or any amendments thereof: You are to disclose in this Form, fully and faithfully, all the facts that you know or ought to know, otherwise, the policy issued may be void and you may receive nothing from the policy.
 - I hereby declare that I am ordinarily resident in Singapore as defined by "Insurance Act (Cap. 142) (Amendment of First Schedule) Order 2010".
 - Neither the brochure nor the Application Form is a contract of insurance. However, your warranties, declarations and disclosures therein and herein shall form the basis of the policy. The specific terms, conditions and exclusions applicable to the insurance are set out in the policy.
 - This policy is protected under the Policy Owners' Protection Scheme administered by the Singapore Deposit Insurance Corporation (SDIC). Visit www.chartisinsurance.com.sg or www.sdic.org.sg for more information.
 - Pre-existing medical conditions are not covered by the policy.
- I/We agree that any information collected or held by Chartis (whether contained in the Application or otherwise obtained) may be used and disclosed by Chartis to its associated individuals/companies or any independent third parties (within or outside Singapore) for any matters relating to this application, any policy issued and to provide advice or information concerning products and services which Chartis believes may be of interest to me/us and to communicate with me/us for any purpose.

Signature of Insured Person or his/her Authorised Representatives

Date

Producer Name

Producer Code



U0205010

ASEAN	Malaysia, Indonesia, Thailand, Philippines, Myanmar, Vietnam, Cambodia, Laos, Brunei					
Length of trip (days)	Premier		Superior		Classic	
	Individual	Family	Individual	Family	Individual	Family
1 – 3	47	104	34	77	26	52
4 – 6	60	140	42	99	31	69
7 – 10	80	179	56	128	38	86
11 - 14	107	235	73	167	51	109
15 - 18	129	281	88	198	64	135
19 - 22	144	330	98	234	74	147
23 - 27	161	362	110	249	87	175
28 - 31	173	397	118	290	97	198
Each additional week	35	64	24	51	19	37
Annual Plan	NA	NA	NA	NA	NA	NA
ASIA	ASEAN, China, Hong Kong, Macau, Taiwan, Korea, Australia, New Zealand, Japan, India, Sri Lanka & Mongolia					
Length of trip (days)	Premier		Superior		Classic	
	Individual	Family	Individual	Family	Individual	Family
1 – 3	64	138	45	98	33	74
4 – 6	78	173	55	128	40	98
7 – 10	106	239	75	170	51	122
11 - 14	130	288	91	203	64	150
15 - 18	152	339	106	244	74	171
19 - 22	173	388	116	270	87	191
23 - 27	193	419	132	301	95	206
28 - 31	208	438	142	316	107	226
Each additional week	45	82	32	69	26	47
Annual Plan	450	900	320	590	NA	NA
WORLDWIDE	ASEAN, Asia & the rest of the world including Nepal, Tibet					
Length of trip (days)	Premier		Superior		Classic	
	Individual	Family	Individual	Family	Individual	Family
1 – 3	89	198	64	150	43	98
4 – 6	110	242	80	178	61	135
7 – 10	128	283	93	209	75	170
11 - 14	165	373	120	273	100	221
15 - 18	195	428	139	310	113	252
19 - 22	223	489	158	358	131	298
23 - 27	240	536	172	395	151	339
28 - 31	258	578	186	428	161	374
Each additional week	48	110	38	89	27	60
Annual Plan	630	999	420	780	NA	NA

Please note that Travel Guard does not cover travel to: Afghanistan, Cuba, Democratic Republic of Congo, Iran, Iraq, Liberia, Sudan and Syria.