

## Travel Sure Application Form

Name of Insured: \_\_\_\_\_

Date of Birth: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

CNIC: \_\_\_\_\_

Age: \_\_\_\_\_

Passport Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_

Tel No.: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Date of Birth: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

Passport No.: \_\_\_\_\_

1. Child's Name: \_\_\_\_\_

Date of Birth: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

2. Child's Name: \_\_\_\_\_

Date of Birth: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

3. Child's Name: \_\_\_\_\_

Date of Birth: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

Name of Beneficiary: \_\_\_\_\_

Relationship: \_\_\_\_\_

Plan Selected:	Majestic+	Majestic	No icing
	Imperial	Regal	Royal
	Edison	Newton	

Type:	Individual	Single Trip
	Family	Multi Trip

Effective Date: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

Premium Payable (PKR): \_\_\_\_\_

Mode of Payment:                      Cheque                      Cash                      Credit Card

Date: \_\_\_\_\_

Signature of Insured Person: \_\_\_\_\_