

If answer to any of the above a) to d) is Yes.

Please give details :

I hereby declare & warrant that the above statement is true and complete in all respects and that information relevant to my application of insurance has been disclosed to you. I understand that this policy does not cover any pre-existing medical condition/injury/illness/deformity and complications arising from them that are declared or undeclared. I will not be travelling against the advice of a physician will not be travelling for the purpose of obtaining medical treatment. I consent to Bajaj Allianz seeking medical information from any doctor in respect of any matter relating to my physical or mental health and I authorize and consent to him giving such information to Bajaj Allianz and / or to the claims administrator or medical advisors.

I agree to this proposal and the declaration shall be the basis of the contract between me and Bajaj Allianz and I agree to accept the policy subject to the terms & conditions prescribed by Bajaj Allianz General Insurance Company Ltd. I/We have read and understood the Privacy Policy of your Company at www.bajajallianz.com and I hereby unconditionally agree and bind myself to all terms and conditions of your Privacy Policy, as amended, from time to time.

Payment Details

Cash / Cheque	Amount Bank/Name	Cheque No.	Cheque Dt.	Branch

Name : _____

Date : _____

Signature of Proposer

Additional information to be completed by the student (Only for Travel Prime Student plan)

Name Of the Student _____

Date of Birth

D	D	M	M	Y	Y	Y	Y
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 Name of the School Overseas: _____

Address of the School _____

Course Opted for _____ Telephone no: _____

Duration of the Course _____

Number of Semesters _____ Tuition Fees Per Semester : _____

Tuitions financed by (Self, parents, borrowing from bank or FI's), please give details _____

Have you undergone medical examination/fitness test _____

Would like to state any thing that is not asked which you may want the insurer to know? _____

Vernacular Declaration

I hereby declare that, I have fully explained the contents of the proposal form and Terms and Conditions of the policy to the Proposer in the language understood to him / her and that the Proposer has affixed the thumb impression above after fully understanding the contents thereof.

Date : _____ Name of the Declarant: _____

Place : _____ Signature of the Declarant (Intermediary/ Agent/ Insurance Official)

Agent's Declaration:

I, _____ (Full Name) in the capacity of Insurance Advisor/ Specified Person of the Corporate Agent/Authorised employee of the Broker/Relationship Officer, do hereby declare that I have explained (in vernacular/local language as well) to the proposer all the contents of this Proposal Form including the nature of the question(s),statement(s), information and response(s) submitted by him/her. Any detail submitted through this proposal form will be considered as the basis of the Contract of Insurance between the Insurer and the Proposer, subject to the acceptance of the proposal. I have further explained that in case of any untrue statement(s)/information/misrepresentation is/are contained in this Proposal Form/including addendum(s), affidavits, statements, submissions, furnished/to be furnished, the Company shall have the right to reject the proposal or limit benefits under the policy at its sole discretion. Also, in case of nondisclosure of any material fact, the policy issued to his/her favour based on the Proposal form may be treated by the Company as null and void and all premiums paid under the Policy may be forfeited by the company.

Signature of the Advisor/Corporate Agent/ Broker/Relationship Officer)

License No. and Agency Code/Broker Code/ Employee No. _____

Insurance Act, 1938 Section 41 - Prohibition of Rebates

No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer.. ANY PERSON MAKING FAULT IN COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHABLE WITH FINE WHICH MAY EXTEND TO TEN LAKH RUPEES.

Certified that the contents of the Proposal Form and documents have been fully explained to the Proposer and that he/they have fully understood the significance of the proposed contract***

Declined country list includes- Pakistan, Afghanistan, DR Congo, Iran, Iraq, Yemen, Syria, N Korea, and similar terror prone and politically unstable countries. Additionally Haj and Manasarovar Yatra are not covered, for other cases of Pilgrimage and Ritual Journey proposal is to be referred to Underwriter.

Date : _____

Place : _____

Name : _____

Signature (On behalf of Proposer)

*** This is required only where, for any reason, the Proposal Form and other connected papers are not filled by the Prospect/Proposer.

** Please read declaration wordings carefully before signing the proposal form.

Bajaj Allianz General Insurance Co. Ltd.

GE Plaza, Airport Road, Yerawada, Pune 411 006 | Reg. No.: 113 | CIN - U66010PN2000PLC015329 | UIN:IRDA/NL-HLT/BAGI/ P-T/V.I/462/13-14
To know more visit: www.bajajallianz.com or Call us at: 1800- 102- 5858