

Application Form [Worldwide Travel]

A. Travellers' details and selection of cover

No	Title	Initials	Surname	Birth date (*)	ID number	Premium (**)		Cover (Tick your selection)								
						Single <small>(Tick your selection)</small>	Family	Comprehensive Age 0-69	Standard Age 0-69	Senior Age 70-85	Youth Age 0-28	Business Age 0-69	Incoming Age 0-69	Emigrate Age 0-69	Groups Age 0-59	CC Top-Up Age 0-69
1.																
2.																
3.																
4.																
5.																
6.																
7.																
8.																
9.																
10.																

B. Your dependant children sharing in cover (***)					C. Notes	
No.	First names (Initials)	Surname	Birth date	Name of parent (as recorded above)	(*)	
1.					(*)	Age of traveller calculates on your date of return.
2.					(**)	The family premium applies to you, your spouse/partner and /or your accompanying children.
3.					(***)	Not available under cover selections 'Youth', 'Business', 'Groups' and 'Credit Card Top up'. Includes children under Section A when children do not share your cover or you choose to insure them separately.
4.						
5.						

D. Other details				E. Payment Details	
Telephone number		Facsimile number		Credit/Debit card	
E-mail		Cell number		Expiry	
Main destination		Beneficiary		Budget period	
Date of departure		Date of return		Security code	
				Name on Card	
Country of residence		Botswana	Mozambique	South Africa	Zimbabwe
		Lesotho	Namibia	Swaziland	Other (please specify)

Banking details					
Bank	:	nedbank	Number	:	1452034923
Name	:	santam limited - tic	Branch Code	:	145 209
Contact details					
Name	:	Alethea Venter	Telephone	:	0860 100 484
EMail	:	Aletheav@tic.co.za	Fax	:	27 (0)11 521 4413
RETURN TO	:	+27 (0)11 521 4413			

