



**GOLFER PACKAGE INSURANCE PROPOSAL FORM**

APPLICANT'S DETAILS
Name of Applicant:.....
.....
ID/Passport No:.....
Date of birth: .....
Corresponding Address: .....
.....
.....
Tel:.....
Email:.....
Period of insurance from:.....to:.....(12 months)

**DETAILS OF COVERAGE  
(valid for any golfing activity in Vietnam)**

**SECTION I - Golfing Equipment & Personal Effects**

Covers against accidental damage or loss to members' Golfing Equipment & Personal Effects, including forcible theft.

**SECTION II - Personal Liability**

Covers your legal liability for accidental Loss or Injury caused to third party occurring in connection with and directly attributable to Golf Club activities.

**SECTION III - Personal Accident**

Covers minor injuries and emergency transport, death and permanent disablement.

**SECTION IV - Hole in one Cover**

Payment for Hole-in-One achievement, applied for events registered in official golf club, area, or national competition.

**Please contact us if you need specific or different cover:**

**AEGIS Co., Ltd**  
**Personal Lines Division**  
 Address: 29 Le Duan Boulevard, District 1, HCMC, Vietnam.  
 Tel: +84 (08) 3514 7969 – 70 Fax: +84 (08) 3514 7971  
 Email:[enquiry@aegisrs.com](mailto:enquiry@aegisrs.com) Website:[www.aegisrs.com](http://www.aegisrs.com)

**SUMMARY OF COVER**

COVER	ANNUAL LIMIT member / loss	DEDUCTIBLES
<b>Section I - Golfing Equipment &amp; Personal Effects (US\$)</b>		
• Members' personal effects	\$3,500	\$300 / theft \$100 / other loss
• Golf cart:	\$700	
• Motorized cart :	\$700	

**Section II - Personal Liability (US\$)  
(Annual aggregate of US\$ 5,000,000)**

• Bodily injury:	\$1,000,000	\$100 any one loss in respect of Third Party Property Damage only
• Property damage:	\$280,000	
• Legal costs:	\$2,800 (inclusive)	

**Section III - Personal Accident (US\$)  
(Aggregate limit US\$ 500,000 / event / conveyance)**

From 12 to 75 years old	Per loss	Per year	
• Accidental Death	\$50,000		Nil
• Permanent Disablement	\$50,000		
Note: for the insured <16 years	\$2,000		
• Accidental damage to Teeth	\$140	\$560	except 5% for Permanent Disablement
• Damage to Glasses	\$70	\$140	
• Hospitalization Charges	\$7,000	\$35,000	
• Transportation Costs	\$140	\$140	
• Prosthesis & Orthopedic Costs	\$350	\$1,050	

**Section IV - Hole in one Cover (US\$)**

• The Insured's expenses	\$300	Nil
--------------------------	-------	-----

**ANNUAL PREMIUM (US\$)                      \$100 (inclusive 10% VAT)**

***Important note:*** Please refer to Policy wording for the details of insured perils, conditions and exclusions. No insurance is in force until this proposal has been accepted by the Insurance Company.

**Signature:.....**

**Date:.....**