PREMIUMS (Effective from 1 November 1999 until further notice)

INDIVIDUAL PLAN								
Period of	Area 1	Area 2	Area 3	Area 4				
Insurance	ASEAN*	Asia**	Worldwide	Worldwide				
			excluding	including				
			USA & Canada	USA & Canada				
1 to 3 days	25	35	51	52				
4 to 7 days	30	50	62	68				
8 to 11 days	45	60	75	79				
12 to 16 days	59	69	88	90				
17 to 20 days	68	78	97	100				
21 to 24 days	80	89	108	113				
25 to 31 days	90	100	125	130				
Each additional	10	15	18	20				

week or part

Premium discount for children

- accompanied bynan adult for the entire period of insurance

- 50% of all premiums (for Individual Plan Only)

	FAMILY	BUDG	ET PLAN		
Period of	Area 1	Area 2	Area 3	Area 4	
Insurance	ASEAN*	Asia**	Worldwide	Worldwide	
			excluding	including	
			USA & Canada	USA & Canada	
1 to 3 days	60	83	115	121	
4 to 7 days	75	120	150	153	
8 to 11 days	110	150	185	190	
12 to 16 days	135	170	200	210	
17 to 20 days	169	190	230	235	
21 to 24 days	190	220	250	255	
25 to 31 days	205	245	295	300	
Each additional week or part	25	35	45	55	

"Family" refers to parent(s) travelling with their immediate child(ren).

"Child(ren)" refers to the dependent and unmarried children who are below the age of 18 years or up to 23 years who are studying full-time in a recognised Institution of higherlearning travelling with the Insured Person for the entire Period of Insurance.

*ASEAN : Includes Brunei, Cambodia,Indonesia, Laos, Malaysia, Myanmar, Philippines,Thailand & Vietnam.

**Asia : Includes India, Sri-Lanka, Australia, New Zealand, China & Japan.

APPLICATION FORM				Tick Appropriate box: Individual Plan			Family Budget Plan	
Maximum period any one trip - Six (6) Consecutive months. A journey/trip shall involved return to			Geographical Area					
Singpore within the period of insurance.					Asia	Worldwide	Worldwide	
Insured Persons (Dr/Mr/Mrs/Miss/Mas)	Date of Birth	Relationship	Premium			excl. USA & Canada	Incl. USA & Canada	
1		Insured						
2				Period of Insurance : Leaving Singapore on		and		
3					re	turning on		
4								
5				Address of first named Insured Person :				
My Cheque is enclosed for the Total Premium			S\$					
Please debit my VISA/Master Card Credit Card Account No.			Expiry Date	Tel :		HP :		
				Pager :		Fax :		
STATEMENT PURSUANT TO SECTION 24(4) OF THE INSURANCE ACT (CAP 142)								

Important Notes : Statement pirsuant to Section 24(4) of the Insurance Act (Cap 142) (or any subsequent amendments thereof). You are to disclose in this application form, fully and faithfully, all the facts you know or ought to know in respect of the risk that is being proposed, otherwise the policy issued hereunder may be void.

Signed by or on behalf of the Insured Person(s) Date

Warranty : Insured Person must be domiciled in Singapore and travel must not be for the purpose of seeking medical attention.

NB. No refund premium is allowed once the Certificate of Insurance is issued.