







An AIA Company 友邦保險成員公司 Personal Information Collection Statement

# OVERSEAS STUDY INSURANCE CLAIM FORM 海外升學保險賠償申請表

Please complete this Claim Form in BLOCK LETTERS and provide the relevant documents listed in Part IV to avoid delay in claim process.

請以正楷填妥並簽署此賠償申請表,連同第四部分所列相關文件交回,以免延誤索償進程。

The Company is entitled to request for further information, documents or other specific claim form to be completed, and assign an insurance adjuster for investigation. 本公司有權要求素償者提供更多資料、文件或填寫其他專用索償表格,以及委派保險理算人進行調查。

Completion and submission of this Claim Form shall not be construed as admission of liability on the part of the Company.

填寫及遞交此賠償申請表並不表示本公司承擔賠償責任。

	I.	Claimant's	<b>Particulars</b>	索償人資料
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I. Claimant's Particulars 系貝入」	맂 시 <b>러</b>				
Insurance Certificate No. 保單編號		Claim No. (Office use) 索償編號 (本公司專用)			
Name of Claimant 索償人姓名 (Please provide	e English name 請提供英文姓名)	HKID Card/Passport No. 香港身分證 / 護照號碼			
Mr. /Ms. 先生 / 女士					
E-mail Address 電郵地址		Contact Phone No. 聯絡電話			
Correspondence Address 通訊地址 (Please give E	inglish address 請提供英文地址)				
II. Benefits Claimed 索償保障項目	<b>  </b> (Please select the appropriate item(s) 請選	擇適當項目)			
□ Medical Expenses 醫療費用	□ Personal Accident 個人意外	□ Study Cancellation/Study Interruption 學業取消/學業中斷			
□ Travel Delay 旅程延誤	□ Baggage Delay 行李延誤	□ Loss/Damage of Baggage/Property 行李/財物損失/損毁			
□ Loss of Travel Documents 旅遊證件遺失	□ Personal Liability 個人責任	□ Credit Card Protection 「信用卡」保障			
□ Compassionate Visit「緊急啟程」保障	□ Education Fund Benefit 「教育基金」保	障 ロ Others 其他			
III. Claim Information 索償資料 (	(Please complete where applicable 請填寫:	適當項目)			
Date of Accident/Consultation/Loss 意外/診治/損失日期		Place of Accident/Consultation/Loss 意外/診治/損失地點			
Full Description of Incident (cause and manner) /Diagnosis 事件詳細經過(起因及情況)/診斷					
Amount Claimed and Currency (Medical Expenses/ Study Cancellation/ Study Interruption) 索償金額及貨幣 ( 醫療費用/學業取消/學業中斷 )					
Amount Claimed and Currency (Medical Expense	es/ Study Cancellation/ Study Interruption) 家[	員並額及貞幣 ( 醫療費用 / 學業取消 / 學業 中			
Hospitalization/Travel Delay/Baggage Delay	From 由	(date and time 日期及時間)			
住院/旅程延誤/行李延誤	To 至	、 (date and time 日期及時間)			
List of Loss (Baggage/Property/Travel Documents) 損失列表(行李/財物/旅遊證件)					
. 33 3 1 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
(Please use separate sheet if insufficient space 如空位不足·請另頁說明)					
Riue Cross (Asia-Pacific) Insurance Limited 較十字(凸大)保險有限公司					

Description of Lost/Damaged Articles	From Where		Original Cost	Date of Purc		
失物/損毁物品種類	從何購	貝	原價	購置日期	素償金額 (港幣)	
Name of Payee 收款人姓名(Must be the English name of a bank account holder 必須為銀行帳户持有人之英文姓名)						
(Please give name and documentary proof of guardian if Claimant is under 18 years of age 如素價人未滿 18 歳・請提供監護人姓名及證明文件)						
Any other insurance covering this incident / loss? 有否其他保險承保是次事件/損失? Yes 有 ロ No 沒有 ロ						
If yes, please state name of insurance company 如有·請列明保		Policy No	<b>但</b> 留编號		Benefit Type 保障類別	
if yes, please state frame of insurance company 和月,嗣知	M A G G H	Tolley No	IV = Will 300		beliefit Type //\rightarrow\right	
					N= 4-	
Has the claimant ever claimed on any insurance company for p 素償人有否因同樣性質的財物損失向任何保險公司素償?	roperty loss of th	ne same natu	ıre?	Yes 有 □	No 沒有 □	
If yes, please state name of insurance company 如有·請列明保險公司名稱						

# IV. Claim Documents 索償文件

Unless otherwise specified in the policy terms and conditions, this Claim Form must be submitted within 30 days after the occurrence of any event likely giving rise to a claim under the policy even if any of the claim documents is not readily available.

如未能即時提供任何索償文件‧賠償申請表亦需於事故發生起計30天內填妥並提交予本公司‧除保單條款及細則另有註明外。

All claims shall be made with supporting documents to the satisfaction of the Company at the Insured Person's own cost. In particular, the Company requires a copy of the proof of current enrolment issued by the Overseas Educational Institution and the following supporting documents:

所有索償均須連同令本公司滿意的證明文件一併提交·所有費用須由受保人負責。尤其是本公司會要求受保人提供由其海外教育院校發出之在學證明及下列之證明文件

## Medical Expenses 醫療費用

 Written confirmation of the Insured Person's illness or injury from a qualified Physician (including diagnosis, all relevant dates, circumstances of symptoms, treatment, prescription and length of confinement as an in-patient) (the "Medical Report") and laboratory report, if any

由註冊醫生就受保人所患之疾病或受傷發出之書面證明(包括診斷、所有相關日期、徵狀、治療、藥物處方及以 住院病人身分持續住院之時間)(「醫療報告」)及檢驗報告、如有

Invoices and original receipts issued by Hospital or other registered medical service providers
 醫院或其他註冊醫療服務供應商發出之發票及收據正本

#### Compassionate Visit 緊急啟程

- Original hospital invoice and medical expenses receipt with diagnosis stated, medical report /death certificate, if any 列明傷患名稱的醫院帳單及醫療費用收據正本、醫療報告/死亡證・如有
- Original receipts issued by any tour operator, travel agent, transport provider, hotels and any other providers of travel arrangement or accommodation
   由旅遊承辦商、旅行代理商、交通服務機構、酒店及任何其他安排旅程或住宿之服務供應商發出之收據正本
- Immediate family members' relationship proof (e.g. birth certificate / marriage certificate, if appropriate 直屬家庭成員關係證明(例如: 出生證明書、結繙證書‧如適用)

#### Personal Accident 個人意外

- Medical Report 醫療報告
- Local Police Report confirming details of the Accident 當地警方報告‧以證實該意外之詳情
- Death certificate, the relevant coroner's report and original Letters of Administration / Probate, if any 死亡證‧相關驗屍報告及遺產管理書正本/遺囑認證正本‧如有

## Study Cancellation 學業取消

- Local Police Report/Medical Report/ death certificate and the relevant coroner's report, if appropriate 當地警方報告/醫療報告/死亡證及相關驗屍報告,如適用
- Documentary proof of the witness summons, jury service or compulsory quarantine issued by the government or the relevant authorities
   由政府或相關機構發出要求受保人出任審判證人、陪審員或接受強制性隔離之書面證明‧如適用
- Immediate family members' relationship proof (e.g. birth certificate / marriage certificate, if appropriate)
   直屬家庭成員關係證明(例如: 出生證明書、結繙證書‧如適用)
- With respect to the relevant travel arrangement, (i) the written advice certifying the refund amount of deposit or
  prepaid fare or the reason for non refundable amount and alternative arrangement, if appropriate and (ii) the
  original receipts, tickets and contract issued by any tour operator, travel agent, transport provider, hotels and any
  other providers of travel arrangement or accommodation

就相關旅程安排而言·由旅遊承辦商、旅行代理商、交通服務機構、酒店及任何其他安排旅程或住宿之服務供應商發出之(i)書面通知以證明就按金或預付費用所退還之金額/不獲相關機構退回之金額及不獲退回之原因及任何其他安排之詳情·如適用;及(ii)收據、門票及合約正本

With respect to the Tuition Fees, (i) invoice or original receipts certifying the amount of Tuition Fees paid and the
forfeited and irrecoverable portion and alternative arrangement, if any, with reasons, the certification has to contain
program duration with commencement date and end date of each semester; (ii) Official study curriculum, syllabus,
mode and timetable and/or (iii) documentary proof of course withdrawal issued by the Overseas Educational
Institution

就學費而言·由海外教育院校發出之(i)發票及收據正本以證明已付的學費金額及未使用並不獲退回的學費部分及 其他安排(如有) 連同合理原因·海外教育院校發出之證明需列明課程內每段學期開始及終結曰期、校方發出 之課程詳細資料·教學大綱·學習模式及時間表及(ii) 由海外教育院校證明受保人已退修課程

#### Study Interruption 學業中斷

- Local Police Report/Medical Report/ death certificate and the relevant coroner's report, if appropriate 當地警方報告/醫療報告/死亡證及相關驗屍報告,如適用
- With respect to the relevant travel arrangement, (i) the written advice certifying the refund amount of deposit or prepaid fare or the reason for non refundable amount and alternative arrangement, if appropriate and (ii) the original receipts, tickets and contract issued by any tour operator, travel agent, transport provider, hotels and any other providers of travel arrangement or accommodation

就相關旅程安排而言,由旅遊承辦商、旅行代理商、交通服務機構、酒店及任何其他安排旅程或住宿之服務供應商發出之(i)書面通知以證明就按金或預付費用所退還之金額/不獲相關機構退回之金額及不獲退回之原因及任何其他安排之詳情,如適用;及(ii)收據、門票及合約正本

- Receipts issued by any tour operator, travel agent, transport provider and any other providers of travel arrangement
  for the additional travelling expenses of Public Conveyance incurred by the Insured Person to return to Hong Kong
  and surrender the original unused portion of travel tickets
  - 由旅遊承辦商、旅行代理商、交通服務機構及任何其他安排旅程之服務供應商發出之額外公共交通費用收據正本 證明受保人直接返回香港所招致之合理額外公共交通工具費用及提交未曾使用但不適用於餘下旅程的原有交通票據 由本公司處置
- With respect to the Tuition Fees, (i) invoice or original receipts certifying the amount of Tuition Fees paid and the forfeited and irrecoverable portion and alternative arrangement, if any, with reasons, the certification has to contain program duration with commencement date and end date of each Semester; (ii) Official study curriculum, syllabus, mode and timetable and/or (iii) documentary proof of course withdrawal issued by the Overseas ducational Institution

就學費而言·由海外教育院校發出之(i)發票及收據正本以證明已付的學費金額及未使用並不獲退回的學費部分及 其他安排(如有) 連同合理原因·海外教育院校發出之證明需列出課程內每段學期開始及終結曰期、校方發出之課 程詳細資料·教學大綱·學習模式及時間表及(ii) 由海外教育院校證明受保人已退修課程

## Education Fund 教育基金

- Medical Report of the Insured Person's parent or Legal Guardian 受保人之父母或法定監護人之醫療報告
- Death certificate and the relevant coroner's report of the Insured Person's parent or Legal Guardian, if appropriate 受保人之父母或法定監護人之死亡證及相關驗屍報告‧如適用
- Police Report confirming details of the Accident 警方報告‧以證實該意外之詳情
- Invoice or original receipts issued by the Overseas Educational Institution for the Tuition Fees paid 由海外教育院校發出的發票及收據正本
- Evidence of the Insured Person's relationship with his parent(s) or Legal Guardian, such as a copy of birth certificate 受保人與其父母或法定監護人之關係證明·如出世紙

## Travel Delay 旅程延誤

- Boarding pass, air ticket or travel ticket 登機證、機票或交通票據
- Written advice from the transport provider confirming the circumstance of interruption or delay (including causes and details of the delay and alternative arrangement), if appropriate 由交通服務機構就旅程中止或延誤的情況發出之書面證明(包括延誤之原因、詳情及另作之安排)・如適用
- Receipts issued by any tour operator, travel agent, transport provider and any other providers of travel arrangement or accommodation for the additional travel and/or overseas accommodation expenses incurred by the Insured 由旅遊承辦商、旅行代理商、交通服務機構及任何其他安排旅程之服務供應商發出之額外公共交通及/或海外住宿費用收據

#### Baggage Delay 行李延誤

- Boarding pass, air ticket or travel ticket 登機證、機票或交通票據
- Airline's property irregularity report and written advice from the transport provider confirming the relevant circumstance (including cause, details of the delay and alternative arrangement) 列明延誤期間的航空公司行李事 故報告及由交通服務機構就相關情況發出之書面證明(包括延誤之原因、詳情及另作之安排)
  - Original receipts 收據正本

#### Baggage and Personal Property 行李/財物損失/損毁

- Report which the Insured Person or his representative lodged with the local Police (the "Police Report")
   受保人或其代表向當地警方提出有關情況之報告(「警方報告」)
- Evidence of ownership including original receipts 擁有權之證明,包括收據正本
- Property irregularity report or confirmation of incidents from the relevant authorities, transport provider or carrier 行李事故報告書(PIR)或由相關機構、交通服務機構或公司就有關事件發出之證明
- Photos showing the damaged item (in cases of damage) 如該物件已損毀‧該損毀物件之相片
- Repair quotation showing the cause of damage or repairer's confirmation of irreparable damage (in cases of damage) 如該物件已損毀·修理該損毀物件之報價單·內裡必須註明引致損毀之原因·或由修理人員證明該損毀為無法修復

## Loss of Travel Documents 旅遊證件遺失

- Local Police Report 當地警方報告
- Invoices and original receipts issued by the issuing authority for the replacement of the travel document 就補領旅遊證件而言・由簽發旅遊證件之機構發出的發票及收據正本

		•	Receipts issued by any tour operator, travel agent, transport provider and any other providers of travel arrangement or accommodation for the additional travel and/or overseas accommodation expenses incurred by the Insured, if appropriate 由旅遊承辦商、旅行代理商、交通服務機構及任何其他安排旅程之服務供應商發出之額外公共交通及/或海外住宿費用收據·如適用
	Personal Liability 個人責任	•	Local police report or statement to police, if any 當地警方報告或警方口供記錄·如有
	1  八貝   1    1    1    1   1   1   1   1   1	•	Immediate written notification to the Company of the possible claim indicating the nature and circumstances of the incident or event 就可能之索償即時向本公司提交的書面通知·指出事件的性質及情況
		•	Written confirmation that no admission of liability has been made and that no settlement has been made or agreed to 受保人書面證明未有承認任何責任及達成任何和解協議
		•	Immediate submission to the Company of all relevant documentation including but not limited to copies of the summons, court documents, solicitors' and other legal correspondence and letters of demand 即時向本公司提供所有相關文件,包括但不限於傳票、法庭文件、與律師之間及其他的法律書信、索償書信副本
	Credit Card Protection 「信用卡」保障	•	Local Police Report/Medical Report/Death certificate and the relevant coroner's report, if appropriat 當地警方報告/醫療報告/死亡證及相關驗屍報告‧如適用
		•	Credit card statement 信用卡月結單
			Invoices and original receipts of purchase 購物之發票及收據正本
	Other Claims 其他索償	•	Any documentary proof related to the claimed incident 任何與索償事件有關之證明文件

# V. Authorisation and Declaration 授權及聲明

I/We (in the capacity of Claimant or guardian of the Claimant (as the case may be)) hereby authorise any hospital, physician, person, party and/or authority that has any records or is holding any information of the insured person or me /us to disclose to Blue Cross (Asia-Pacific) Insurance Limited ("the Company") or its authorised representative, any and all information with respect to the insured person's or my/our loss, disability, medical history, police statement made and the like for the purpose of assessing my/our claim request(s). A photocopy of this authorisation shall have the same effect as the original.

本人/我們(以索價人或索價人的監護人的身份(按情況而定))謹此授權任何持有受保人或本人/我們之任何記錄或資料的醫院、醫生、人士、有關人等、及/或有關當局·向藍十字(亞太)保險有限公司(「貴公司」)或其授權代表提供任何或所有有關受保人或本人/我們之損失、損傷、病歷、口供或任何相關資料作評估賠價申請之用途。此授權書之正本及副本皆具同等效力。

I/We (in the capacity of Claimant or guardian of the Claimant (as the case may be)) hereby declare that all the above information and particulars given herein are accurate, true and complete and are given to the best of my/our knowledge and belief. I/We have not withheld any material information and acknowledge that failure to supply true and accurate answers to this request or inform the Company of all material information may render the Company unable to accept or process this request and all rights to recover under the Policy shall be forfeited. I/We understand that the issuance or completion of this Claim Form does not constitute admission of liability or guarantee payment of the claim on behalf of the Company.

本人/我們(以索償人或索償人的監護人的身份(按情況而定))謹此聲明·上述所有問題的答案包括所有資料及細節均是準確無誤·真實及為事實之全部·並且是盡本人/我們所知及所信而作答的。本人/我們並沒有隱瞞任何重要資料及確認如未能提供真實及準確無誤之資料或通知貴公司任何有關此索償申請之重要資料,將可能導致貴公司不能接受或處理此索償申請及喪失所有追討保單權益之權利。本人/我們明白此索償表格之發出及填妥並不代表貴公司確認責任或保證賠償。

I/We confirm having read and understood the Company's Personal Information Collection Statement as accompanied with this form. 本人/我們確認已閱讀及明白隨本表格附上有關貴公司的收集個人資料聲明。

Signature of Claimant 索價人簽署 (Signature of Guardian if Claimant is below 18 years old, 如索價人未滿 18 歲,請監護 人簽署)	:	Date 日期 (dd/mm/yy 日/月/年)
Name 姓名	:	

The Chinese version of this Form is for reference only. In case of any discrepancy between the Chinese and English versions, the English version shall prevail. 此表格的中文譯本僅供參考之用·文義如與英文本有歧異·概以英文為準。