

# EVEREST INSURANCE COMPANY LTD.

Head Office : Hattisar , P. O. Box : 10675, Kathmandu, Nepal

Tel: 4444717,4445090.4445091, 4445092, Fax: 977-1-4425758, email. eveinsco@mos.com.np

## PROPOSAL FOR EVEREST TRAVEL TRIP INSURANCE POLICY

All shaded areas must be completed as appropriate

Date of Departure

Date of Return

Period of Insurance

(Total number of days outside of the Kingdom of Nepal)

Geographical Area 1 or 2

Selected Plan A or B

Persons to be Insured  
(State Mr./Mrs./Miss)

Date of  
birth

X  
Premium  
per  
person

Y  
Family  
Premium

Z  
Premium  
inc  
additional  
Premium  
for ski-ing

1.





2.





3.





4.





5.





Premium Payable for X, Y, Z





Total Premium Payable

Address of Applicant

Telephone number

### To be read and signed by the applicant

I hereby declare that all persons named in this application form are in good health and will not travel unless they are in good health and fit to undertake the insured trip nor has anyone named in this application been diagnosed with and does not suffer from any medical condition for which medical treatment may be required. Furthermore all persons named in this application will not travel against medical advice or for the purpose of obtaining medical treatment. I further declare that I am not aware of any reason, in connection with the health of anyone named on this application, that could result in any claim under this insurance. I am aware that this is not a general health insurance policy and that pre-existing medical conditions are not covered. I have been made aware of the important terms and conditions of this insurance and that certain restrictions to cover do apply. I also understand that this application does not feature all of the coverage issues, terms, conditions and exclusions which are fully described in the certificate wording.

I am a permanent resident of the Kingdom of Nepal and I am over 18 years of age.

Signed:

By the Applicant on behalf of all insured persons

Date

**Photocopy of Passport should be submitted with this proposal form.**