

PROPOSAL FORM FOR GOLFERS INSURANCE

AGENT / BROKER ACCOUNT NO.: POLICY NUMBER

SECTION 1 (A) - INDIVIDUAL CUSTOMERS DETAILS

i) Full Name of Proposer
(First Name) (Second Name) (Other Names)

Date of Birth - - Gender M F Marital Status Single Married
(Day) (Month) (Year)

Nationality Citizenship

ii) Contact Details: (mobile): (tel):
 (email address):
 (Postal Address): (Postal code): (town/ city):
 Residential Address (Physical)

iii) Identification Doc.

<input type="checkbox"/> Identity Card	<input type="text"/>	<input type="text"/> - <input type="text"/> <small>(Month) (Year)</small>
<input type="checkbox"/> Passport	<input type="text"/>	
<input type="checkbox"/> Asylum	<input type="text"/>	

(Attach a copy of Identification Document)

iv) Income Tax No. (PIN) (Attach a copy of PIN Certificate)

v) Are you Employed? Yes No OR ii) Self Employed? Yes No

vi) If employed, state your current employer.

vii) Occupation Sector

viii) Source of Income Salary Business Proceeds Pension (Recipient of Annuity) Rent (Real Estate)
 Non-Income generating dependant

ix) Source of Wealth Legal Settlement Royalties Inheritance Donations
 Winnings Savings Sale of Investment Sale of Property
(Lottery/ Casino/Bettings)
 Rent (Real Estate) Employment Pension Business Proceeds

x) Full Name of Next of Kin Relationship
 (Telephone No.):

SECTION 2: PROPOSAL DETAILS

i) Period of insurance From - - To - -
(Day) (Month) (Year) (Day) (Month) (Year)

1. a) Any personal accidents suffered by you while playing golf on any golf club.

b) Losses or breakage suffered in respect of golfing equipment.

c) Losses or damages suffered in respect of your personal effects.

[Redacted text box]

d) Any Third Party Claim against you arising from your playing golf at any golf club.

[Redacted text box]

2. Has any insurer in respect of any of the risks to which this proposal applies declined to insure you, or required special terms to insure you, or cancelled or refused to renew your insurance? Yes No
If yes, give details:

[Redacted text box]

3. Please supply details of insurance policies which you hold with this Company or which you propose to effect in the near future.

[Redacted text box]

The primary mode of delivery of your policy document and other official documents shall be via email. Kindly provide your email address below:

[Redacted text box]

BENEFITS REQUIRED

SECTION 1

GOLFING EQUIPMENT

Clubs	[Redacted]	KShs.	[Redacted]	} KShs. 150,000 (maximum available)
Bag	[Redacted]	KShs.	[Redacted]	
Caddy Cars	[Redacted]	KShs.	[Redacted]	
Other Equipment	[Redacted]	KShs.	[Redacted]	

Against ALL RISKS in transit to and from any Golf Club including the Club House, Caddie Master's Hut or Professional Shop.

EXCLUSIONS

- (a) Wear and tear or deterioration
- (b) Loss of Golf balls

SECTION 2

PERSONAL EFFECTS (including Golfing Apparel)

Against: Fire, Lighting, Thunder bolt, Burglary, Housebreaking Larceny or theft in any Golf Club House. KShs. [Redacted]
Single article limit- Kshs 25,000/= (Maximum available) Kshs 50,000.00

EXCLUSIONS

Watches, Gold and Silver Articles, Jewellery, Furs, Trinkets, Medals, Cash/ Physical Money, Money Securities, Stamps, Documents and Manuscripts.

SECTION 3

THIRD PARTY LIABILITY

- (a) Legal liability for bodily injury to third parties or damage to their property caused by Insured while playing Golf on any golf course. Plus Legal costs recovered from the Insured and costs incurred by him with the consent of the Company. Kshs 1,000,000.00
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SECTION 4

PERSONAL ACCIDENT

To the Insured on any Golf Course resulting in:

- (a) Death or loss of both hands or both feet or one hand and one foot, or loss of sight of both eyes. Kshs 100,000.00 (Maximum)
- (b) Loss of one hand or one foot or loss of sight of one eye. Kshs 50,000.00 (Maximum)
- (c) Medical Expenses Kshs 20,000.00 (Maximum)

To the Caddies or ball boys on any Golf Course, Court or practicing ground resulting in:

- (d) Medical Expenses Kshs 20,000.00 (Maximum)

SECTION 5

HOLE IN ONE

- (e) Reimbursement of expense incurred on production of appropriate proof of the event. Kshs 50,000.00 (Maximum)
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CONSENT & DECLARATION

I/We consent to The Heritage Insurance Company Kenya Limited:

- (i) Collecting, using, disclosing and/or processing and/or storing my/our personal data for purposes that are relevant to my policy and as permitted by law;
- (ii) Collecting and sharing my personal data in accordance with the privacy statement on its website (<https://www.heritageinsurance.co.ke/>);
- (iii) Transferring my/our personal data to their reinsurers and affiliated companies for the purposes of insurance and as permitted by law;
- (iv) And/or its contracted Third parties contacting me via email/phone-call/SMS/post in regard to insurance products and/or services.

I/We hereby declare the truth and correctness of the above statements and agree that this Declaration shall be held to be promissory and the basis of the contract between me/ us and The Heritage Insurance Company Limited.

I/We hereby declare the truth and correctness of all the statements and particulars entered in this Proposal and that I have not withheld any material information, and that my/our answers herein are in my/our full knowledge and have been written by me/us or with my/our full authority.

I/we agree that this Declaration shall form the basis of the contract between me/us and the Insurer and I/we agree to abide by the terms and conditions of the Policy to be issued.

Proposer's Signature: _____ Date: _____

No liability (except for the period stated in the Insurer's Official Cover Note) is undertaken until the Proposal is accepted by the Insurer and the premium paid.