

Travel Shield[®]

Travel Insurance

Schedule of Benefits

Policy Number: ITS/ Contract Number:

Broker's Reference:

Your name:

Annual Trip: Yes or No Single Trip: Yes or No

Period of Insurance: to
(both days inclusive)

Note: The Period of Insurance for a Single Trip policy is the period when the trip commences and concludes.

Geographical Area to be visited:

Insured Person(s)	Date of Birth	Premium
		£
		£
		£
		£
		£
		£

Winter Sports: Yes or No
Note: Winter Sports is included within the Annual Multi Trip policy for up to 17 days in total at no additional premium
Business Cover: Yes or No

Premium Total

Insurance Premium Tax (IPT)

Total Premium Payable

In Witness of:
By:
Date:
for Issuing Broker

Canopus Underwriting Limited

Registered in England No: 2473672

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