



Sport Coverage Declaration

Policy Number _____

1 - The Insured

Policy number _____
Surname (of the insured) _____ First Name _____
Occupation _____
Address _____ No. _____ P.O. Box _____
City _____ Postcode _____ Phone _____

2 - Payment

The injured party agrees that any compensation will be paid to:

IBAN _____ BIC _____
Your IBAN is stated below your account statements (below the balance). It is also visible in your electronic banking application.

3 - Travel Agent

Name _____
Address _____
References _____

4 - Tour Operator

Name _____
PO number _____

5 - Destination

Destination _____ Reservation Date ____ / ____ / ____
Departure Date ____ / ____ / ____ Return Date ____ / ____ / ____

6 - Incident

Date ____ / ____ / ____ Time ____

Place _____

a) Clear description of the circumstances

b) Where were you at the moment of the incident?

c) Are there any witnesses to the incident?

No

Yes Name _____ First Name _____

Address _____

Phone _____

d) An incident involving a vehicle

- Vehicle Make _____ Year _____

Type _____ License Plate _____

- Owner Name _____
Address : _____
- Where was the baggage? _____
- Description of the damage to the vehicle _____

7 - Statements

a) Statement to the police No

- Yes Name of police _____
Address _____
Police Report number _____
Statement date ____ / ____ / ____ Time ____

b) Statement to carrier

- No
 Yes Date of statement ____ / ____ / ____ Time ____

c) Statement to the hotel management

- No
 Yes Date of statement ____ / ____ / ____ Time ____

8 - Skipass, Lessons, hiring of equipment

a) Skipass

- No Yes valid from ____ / ____ / ____ to ____ / ____ / ____
Amount _____

b) Ski or snowboard lessons

- No Yes valid from ____ / ____ / ____ to ____ / ____ / ____
Amount _____

c) Hiring of ski or snowboard equipment

- Stolen Damaged Montant _____

d) Hiring of sport equipment or sportswear

- No Yes from ____ / ____ / ____ to ____ / ____ / ____
Amount _____

9 - Documents to be attached

- At point 4 : the registration invoice from the tour operator
7.a. : original certificate from the government recording the facts.
7.b. : original statement of the carrier, the original airline tickets and the tickets of the baggage items
7.c. : original certificate from the hotel management
8 : - Original receipts (e.g. original invoices, bank statements, credit card statements)
- In case of damage: scope of the damage and the possible repair of the damage

The undersigned declare that this declaration is completed fully and truthfully. Inter Partner Assistance Ltd. is automatically relieved of its obligations if information is intentionally concealed or inaccurate information is communicated.

Signatures claimants, preceded by "read and approved"

Date ____ / ____ / ____