



Prime Bank

P U T T I N G Y O U F I R S T



VISA GOLF
Gold Card



INSURANCE POLICY APPLICATION FORM

Supporting the



**KENYA
GOLF
UNION**

&



PRIME CARD GOLFERS' INSURANCE POLICY

Executive summary and Proposal Form

The Policy covers the insured during golfing activities by providing insurance and indemnity to amateur golfers in respect of the following:-

- a) Accidental bodily injury that may lead to loss of life or permanent disability.
 - b) Liabilities incurred thereof
 - c) Loss or damage to golf equipment.
 - d) Covers medical expenses incurred as a result of accidental bodily injuries to the caddy or ball boys as a result of the insured playing or practicing.
 - e) Charges and expenses the insured incurs after hole in one.
- Cover summary and cost please chose one by putting a tick.

	Option	Premium
Loss or Damage a) Clubs, golf bags, trolley (not motorized) and other golfing equipment (except golf balls unless lost with bags or clubs). b) Personal effects (excluding valuables, glasses, cameras, radios, money, securities, stamps and motor vehicles) at any club, course or Diving Range	(i) 200,000/= (ii) 175,000/= (iii) 150,000/= (iv) 125,000/= (v) 100,000/= (vi) 75,000/= (vii) 20,000/=	- 5,000/= - 4,375/= - 3,750/= - 3,125/= - 2,500/= - 2,000/=
Claims against you by Third Parties or Caddies due to your negligence at Golf Club. To pay damages (any claimant's costs and expenses to members of the public (other than employees and your family as a result of accidental. a) Bodily injury (including death and illness. b) Loss of or damage to property Caused by you and happening at any Golf Club, Course or Driving Range.	Limit of liability Kshs. 1,000,000/= any one claim and one period of Insurance.	Free
Personal Accident At a Golf Club, Course or Driving Range and will pay the following benefits; (i) Death (ii) Loss of one or more limbs or eyes. (iii) Medical expenses (Caddy only)	(i) 50,000/= (ii) 50,000/= (iii) 20,000/=	Free
Hole-in-one Any recognized Golf competition within Kenya	- Kshs. 30,000/=	Free
Territorial Limits Jurisdiction	- Worldwide - Kenya	

Minimum premium – Kshs 2,000 Levies inclusive;

Excess: Nil

Bio Data

Broker/Agents: Prime Merchant Insurance Agency

Full Name of card Holder: Surname:

Other Names:

Pin No: -----

Postal Address: ----- Code: ----- Town: -----

Occupation: -----

Home Club: ----- Membership No: -----

Which other Clubs are you currently a member of:

Make of Clubs: ----- Date Purchased: -----

Insurance History

1. Have you ever had any losses in the past three years? Yes: ----- No: -----

If Yes, give details and the amounts of losses -----

2. Name of previous insurer(s)

3. Has any insurance Company?

a) Declined your proposal Yes: -----No: -----

b) Cancelled or refused to renew your policy? Yes: -----No: -----

c) Required an increased premium on renewal. Yes: -----No: -----

If Yes to any of the above, Please give details:

Declaration

I/We do hereby declare that the above answers and statements are true, and that I have not withheld any material information regarding this proposal.

Signature of Proposer:-

Date: -----

Prime Merchant Insurance Agency

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