**Annual Event Public Liability /** **Group Personal Accident Insurance – Information requested for insurance quotation**

**(全年團體****活動 - 第三者責任/意外保險 報價所需要的資料)**

Association / Company Name (團體名稱)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide the following info on each type of events (請提供每種活動的以下詳情)

* Event Name (活動名稱)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Number of times per year (每年舉辦次數)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Event Location (活動地點)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Activity Details (活動性質)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Event Days (日數)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Number of Participants (參加者人數)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Protection Include Helpers (保障包括義工幫手)：<number (人數)> \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Protection Include Performers (保障包括表演者)：<number (人數)> \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 <what performance (什麼表演)> \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* All Insured Age Range (所有受保者歲數上下限)：\_\_\_\_\_\_\_\_\_ to (至) \_\_\_ \_\_\_\_\_

Public Liability (第三者責任)

* Insurance Amount (保險保額)：HK$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Group Personal Accident (團體意外)

* Accident Death & Dismemberment AD&D (意外死亡及斷肢保險)：HK$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Accident Medical Expense Amount AME (意外醫療費用)：HK$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Need to include Bonesetter (需要包括跌打保障)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Other Requirements <if any> (其他要求<如有>)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***\*\* Please provide the Event Leaflets or Poster, if any (請提供活動宣傳單張(如有))***

Contract Person (聯絡人)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position (職位)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile (手提電話)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email (電郵)：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

========================================================

Internal Remarks (內部備註)

Intro：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Code：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_