

Application for the insurance PROTRIP-WORLD

Allianz Partners
Generali Versicherung AG
Europ Assistance Versicherungs-AG
provided by Dr. Walter GmbH

Space for special notices	Issuing organization [00001]	Policy no. (to be indicated after application)
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Applicant

<input type="checkbox"/> Ms <input type="checkbox"/> Mr	First name	Family name (if applicable: company/organization)	
Street, street number	Postal code	City	Country
Telephone	Fax	Email	

The following person shall be insured

<input type="checkbox"/> Ms <input type="checkbox"/> Mr	First name	Family name		
Date of birth (age limit 39 years)	Start of trip	End of trip	Home country	
Destination		Reason for traveling (voluntary information)		

I choose the following insurance coverage

Persons up to 39 years	Monthly premiums in €
Within Europe	<input type="checkbox"/> 29.10
Worldwide without USA and Canada	<input type="checkbox"/> 42.00
Worldwide incl. USA and Canada	<input type="checkbox"/> 63.30

Payment method

<input type="checkbox"/> Single payment in one sum by SEPA direct debit mandate to the following account (Euro member states only):
<input type="checkbox"/> Monthly payment by SEPA direct debit mandate to the following account (German and Austrian accounts only):
IBAN <input type="text"/> BIC <input type="text"/>
I hereby authorize Dr. Walter GmbH (Eisenerzstrasse 34, 53819 Neunkirchen-Seelscheid, Germany; Creditor Identifier DE76ZZZ00000887121; Mandate reference: insurance policy number) to collect payments from my/our bank account by direct debit. I also instruct my bank to pay the direct debits drawn by Dr. Walter GmbH from my/our account. Note: I am entitled to demand the refund of the debited amount within eight weeks from the debit date. The terms and conditions agreed with my/our bank shall apply.
Account holder (first name, family name) <input type="text"/> Signature of account holder <input type="text"/>

<input type="checkbox"/> Payment of total sum by bank transfer to Dr. Walter GmbH, Postbank Köln, BIC: PBNKDEFF, IBAN: DE03 3701 0050 0212 0765 00 (proof of payment attached)
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Important note and signature

The insurance policy is purchased prior to departure for the entire duration of the stay abroad or up to one month after departure for the remaining period of the stay abroad. Insurance cover is provided – subject to proper payment of the insurance premium – from the date applied for, but at the earliest on receipt of the application by Dr. Walter GmbH.

Before signing this application, please carefully read the closing statements on page 2 as well as the other important notes. These statements are an integral part of the contract. By signing this document, the closing statements become part of this contract.

I apply for insurance cover in accordance with the attached General Insurance Conditions.

Date, Place <input type="text"/>	Signature of the applicant <input type="text"/>
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Final declaration of the applicant and the person to be insured as well as other important notes

Authorization for transmission of data

I authorize the insurers and Dr. Walter GmbH, as far as necessary within the proper handling of all my insurance matters, to store my general contract, billing and benefits data in a data base. The general contract and billing data may also be forwarded to the agency that acts as an insurance broker.

Contract basis

The product PROTRIP-WORLD is a combination of travel health, travel liability, travel accident, travel baggage and assistance insurance for international students and doctoral students, language and exchange students, au pairs, volunteers, high school students and work and travel participants who want to stay abroad for one to two years.

PROTRIP-WORLD is a group contract solution consisting of legally independent insurance contracts. PROTRIP-WORLD provides insurance cover during trips abroad for members of the LAC Living Abroad Community e.V. (LAC) and for participants of affiliate partner companies and organizations.

When joining the contract, you will receive a certificate of enrollment with all the information about the insured person and the agreed range of services.

The product PROTRIP-WORLD is exclusively offered and managed by Dr. Walter GmbH (Dr. Walter) or its distribution partners.

In the event of a disagreement, please contact Dr. Walter GmbH. Our contact data are: Dr. Walter GmbH, Eisenerzstrasse 34, 53819 Neunkirchen-Seelscheid, Germany T +49(0)2247 9194-0, F +49(0)2247 9194-40, Email: info@dr-walter.com

We will try to find a mutually acceptable solution as quickly as possible. If we do not succeed in this endeavor, you can also contact an extra-judicial arbitrator:

For complaints that do not affect health insurance, please contact

- Versicherungs-Ombudsmann (ombudsman for insurance matters), Postfach 080632, 10006 Berlin, Germany.

This ombudsman is both responsible for extra-judicial arbitration in the event of a dispute arising from insurance contracts with consumers and between insurance brokers and policyholders. His decisions are not binding for the insurer. The right to take legal action shall remain unaffected hereby.

In addition, you can file a complaint with

- Bundesanstalt für Finanzdienstleistungsaufsicht (Federal Financial Supervisory Authority), Graurheindorfer Strasse 108, 53117 Bonn, Germany.

For complaints that affect international health insurance, please send a letter or email to

- Allianz Partners
AWP Health & Life SA - Relations Clients,
Eurosquare 2, 7 Rue Dora Maar, 93400 Saint-Ouen, France.
Email: clients@allianz.fr

Allianz Partners is a signatory to the mediation charter of the French Federation of Insurance Companies (FFSA). Therefore, in the event of a persistent and definitive disagreement, and after exhaustion of all domestic remedies listed below, the policyholder association, the member firms or the insured persons have the option to contact the Mediator of the FFSA – without prejudice to other potential remedies – by mail to the following address: BP 290 – 75425 Paris cedex 09.

Information on the right of revocation

You can revoke your contractual declaration in writing (e.g. letter, fax, e-mail) without giving reasons within two weeks after conclusion of the contract. Timely sending of the revocation statement is sufficient for complying with the revocation period. Please send you revocation to

Allianz Partners
AWP Health & Life SA
Generali Versicherung AG
Europ Assistance Versicherungs-AG
c/o Dr. Walter GmbH
Eisenerzstrasse 34
53819 Neunkirchen-Seelscheid
Germany
T +49(0)2247 9194-0
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info@dr-walter.com

Elements of the insurance premium (in €)

The monthly premium consists of the LAC membership fee (LAC share), health insurance premium (KV share), liability/accident insurance premium (HU share), assistance insurance (AS share) and travel insurance (RG share).

Total amount = LAC share + KV share + HU share + AS share + RG share

For travels	within Europe	worldwide without USA/Canada	worldwide incl. USA/Canada
Total amount	29.10	42.00	63.30
Membership fee	0.30	0.30	0.30
International health insurance	22.20	35.10	56.40
Accident and liability insurance	3.00	3.00	3.00
Assistance insurance	1.50	1.50	1.50
Baggage insurance	2.10	2.10	2.10

The premiums for accident, liability, assistance and baggage insurance each include 19% German insurance tax. The premiums for international health insurance are free of tax in accordance with § 4 no. 5 Insurance Tax Act (VersStg).

The premium is a single premium and is due for the entire term of the insurance after receipt of the certificate of enrollment and after expiry of the revocation period.

Contract partners

The product PROTRIP-WORLD is an insurance combination exclusively offered and managed by Dr. Walter GmbH or its distribution partners. We, Dr. Walter GmbH, want to provide you as our customer with the following comprehensive information about the involved insurance companies and the underlying insurance policies:

Health insurance is provided by:

Allianz Partners
AWP Health & Life SA
Registration Court: Registre du Commerce et des Sociétés, Bobigny
Number: 401 154 679
Eurosquare 2,
7 Rue Dora Maar,
93400 Saint-Ouen,
France

Accident, liability and baggage insurance is provided by:

Generali Versicherung AG, Adenauerring 7, 81731 Munich, Germany.
Headquarters: Munich, Registration Court: District Court Munich HRB 177658

Assistance insurance is provided by:

Europ Assistance Versicherungs-AG Adenauerring 7, 81731 Munich, Germany.
Headquarters and Registration Court Munich, HRB 61 405

Contact

If you have any questions regarding contract management or settlement of claims, please contact us at:

Dr. Walter GmbH
Insurance Brokers
Eisenerzstrasse 34
53819 Neunkirchen-Seelscheid
Germany

Registration Court: District Court Siegburg HRB 4701
Managing Director: Dipl.-Kfm. Reinhard Bellinghausen

Postbank Köln
IBAN: DE 03 3701 0050 0212 0765 00
BIC: PBNKDEFF

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www.dr-walter.com
info@dr-walter.com
www.protrip-world.com