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投保書 Proposal Form

前程錦繡升學保 Overseas Student Care Insurance

AXA安盛理財顧問專用
 For AXA Financial Consultant Use Only

- 你必須在此投保書上填報一切有關的重要事實，否則該合約「保單」將告無效或可被視為無效。如你不清楚某一事實是否重要，也請將此事實在下面說明。
 You are required to disclose in this application ALL material facts; otherwise the contract "Policy" may be void or voidable. If you are in doubt whether certain facts are material, please disclose them as below.
- 如此申請上未有註明，投保人將被視為保單持有人。The Proposer shall be deemed to be the Policyholder unless otherwise indicated in this proposal form.
- 如受保學生年齡為18歲以下，投保人/保單持有人必須為其父母或合法監護人。For Insured Student below age 18, the Proposer/Policyholder must be his/her parent or legal guardian.

請以英文正楷填寫，並在適當的空格內填上 Please fill in this form in English block letters and tick the boxes where appropriate

* 必須填寫項目 Mandatory fields

投保人/監護人資料 PROPOSER/ GUARDIAN DETAILS

投保人/監護人姓名 - 姓* Name of Proposer/Guardian - Surname	名* Given Name	性別* Sex <input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female	香港身份證號碼* HKID Card No.	手提電話* Mobile
通訊地址* Correspondence Address			<input type="checkbox"/> 香港 HK <input type="checkbox"/> 九龍 KLN <input type="checkbox"/> 新界 NT	電郵地址* Email
與受保學生的關係* Relationship to Insured Student				
<input type="checkbox"/> 本人 Self	<input type="checkbox"/> 家長 Parent	<input type="checkbox"/> 監護人 Guardian	<input type="checkbox"/> 親屬/其他: Relative / Others: _____	

投保計劃 INSURANCE PLAN*

<input type="checkbox"/> 美國/ 加拿大 USA/ Canada	<input type="checkbox"/> 其他地區 (不包括美國 / 加拿大) Rest of the world (excluding USA/ Canada)
起保日期 (日/月/年): Insurance Effective Date (dd/mm/yyyy):	保費 (港元): Premium (HK\$):

受保學生資料 INSURED STUDENT DETAILS

姓* SurName	名* Given Name	性別* Sex <input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female
香港身份證號碼* HKID Card No.	出生日期 (日/月/年)* Date of Birth (dd/mm/yyyy)	婚姻狀況* Marital Status <input type="checkbox"/> 未婚 Single <input type="checkbox"/> 已婚 Married
香港通訊地址 (如與投保人/監護人的地址不同)* Correspondence Address in Hong Kong (if different from Proposer's/Guardian's address)		<input type="checkbox"/> 香港 HK <input type="checkbox"/> 九龍 KLN <input type="checkbox"/> 新界 NT
海外通訊地址 Correspondence Address Abroad		
香港聯絡電話號碼 Hong Kong Contact Tel	海外聯絡電話號碼 Abroad Contact Tel	
電郵地址 Email	受益人姓名/與受保學生的關係 Name of Beneficiary / Relationship to Insured Student	

有關學校及課程資料 SCHOOL & COURSE DETAILS

就讀國家 Country of Study	
就讀學院及校址 Name & Address of the School/Institution	
報讀課程名稱／級別 Title/Grade of the Course	修讀年期／開課日期 Period of Enrolment/Commencing Date

海外住宅資料 HOME DETAILS (RESIDENCE SCHOOL OR LODGINGS)

海外留學住址 Address of home in Country of Study			
住宅形式 Accommodation type	<input type="checkbox"/> 院校宿舍 Dormitory	<input type="checkbox"/> 自租單位 Rented flat / apartment	<input type="checkbox"/> 其他 (請註明) Others (please specify) _____
	<input type="checkbox"/> 寄住 Home-stay	<input type="checkbox"/> 分租單位 Shared flat / apartment	
於上址居住年期 Length of residence at above address			

付款方法 PAYMENT METHOD

本人選擇以下列方式繳交保費及徵費[^]港幣 _____ 元正
I wish to pay my premium and levy[^] HK\$ _____ by

支票 抬頭請填「安盛保險有限公司」 Cheque payable to **AXA General Insurance Hong Kong Limited**

VISA 咭 萬事達咭 MasterCard

信用卡號碼 Credit Card No. _____ - _____ - _____ - _____

信用卡有效期至 Credit Card Expiry Date _____ - _____
月mm 年yyyy

持咭人姓名 Cardholder's Name _____

本人授權安盛保險有限公司從本人上述的信用卡賬戶支取有關保險保單的保費及徵費[^]。
I hereby authorize AXA General Insurance Hong Kong Limited to charge my above credit card for the insurance premium and levy[^] of this insurance policy.

持咭人簽署 Cardholder's Signature _____

日期 (日/月/年) Date (dd/mm/yyyy) _____

投保人須知 IMPORTANT NOTES TO PROPOSER

- 受保學生必須為香港居民，年齡介乎10至35歲。
Insured Student must be a Hong Kong resident and aged between 10 and 35.
- 保費須連同此申請表一併繳交。
Payment must accompany this application.
- 閣下必須在其知悉範圍內提供所有有關會影響保險公司於接納或釐定此保單條文的資料，如對應透露的資料有任何疑問，請即向本公司或閣下的保險代理查詢。我們建議閣下將有關的資料作記錄（包括信件副本），以備日後作參考之用。為確保閣下的利益，閣下應如實呈報所有有關資料，否則此保單將可能無法提供閣下所需的保障，甚至可能會導致此保單無效。
Any other facts known to you which are likely to affect acceptance or assessment of the insurance cover you are requesting must be disclosed. Should you have any doubt about what you should disclose, do not hesitate to ask us or your insurance agent. We recommend you keep a record (including copies of letters) for your future reference of any additional information given. Providing correct answers and making sure we are informed is for your own protection, as failure to disclose such information may mean that your policy will not provide you with the cover you require and may even invalidate the policy altogether.
- 除保單特別註明外，若受保學生的年齡為十八歲以下，保險公司只會對其家長或合法監護人作出賠償，並於賠償被接納及付清後，本公司就該項索償不再負有任何責任。
Unless otherwise stated, all claim settlements will be made to the parents or the legal guardian of the Insured Student aged below 18. The acceptance of the claim settlements by the parent(s)/legal guardian will constitute a full and valid discharge of the claims.

聲明 DECLARATION

本人／我們謹此確認本人／我們並沒有代表任何其他人士提出此投保申請；如在此投保書或就此申請提交的任何其他文件上另有註明則除外。

I/We HEREBY CONFIRM that I/We am/are not acting on behalf of any other person for this insurance application unless otherwise expressly indicated in this proposal form or any other documents provided to the Company for this application.

本人／我們謹此代表本人／我們及其他在此投保書提及之人士（下稱「相關人士」或「我們」）（為免存疑，「相關人士」或「我們」指包括本人及此投保書提及之其他人士）聲明及同意

I/We HEREBY DECLARE AND AGREE on behalf of myself/ourselves and other persons referred to in this application (hereinafter referred to as "Relevant Persons", "We", "Our" or "Us") (for the avoidance of doubt, the expressions "Relevant Persons", "We", "Our" or "Us" include myself/ourselves and such other persons) that

1. 受保學生屬健康良好而且沒曾被註冊醫生勸諭不適合是次升學行程，及／或籍是次升學行程接受醫學治療或移民外國，及／或亦不會在受保期內參與任何體力勞動的活動。
The Insured Student is in good health, and will not be travelling contrary to the advice of medical practitioner, and/or for the purpose of obtaining medical treatment or for migration, and/or engaging in any manual work during the period of insurance.
2. 受保學生沒有任何身體缺陷或精神失常，並從未曾被證實患有或接受以下病症的治療：血壓不正常、潰瘍、肺結核、精神失常、血栓塞、脫腸症、糖尿病、癌症、靜脈曲張、性病、癱瘓、關節炎、風濕、神經失常、泌尿系統不正常、脊柱病及心臟病。
The Insured Student does not have physical impairment or mental deficiency, and has never been treated for or examined that he/she has abnormal blood pressure, ulcers, tuberculosis, mental disorder, thrombosis, hernia, diabetes, cancer, varicose veins, venereal disease, paralysis, arthritis, rheumatism, any disorder of disease of nervous, genito-urinary system, spine or heart.
3. 上述一切陳述及問題的所有答案，不論是否本人／我們親手所寫，就本人／我們所知所信，均為事實全部並確實無訛；
all statements and answers to all questions whether or not written by my/our own hand are to the best of my/our knowledge and belief complete and true;
4. 上述問題的所有答案及此投保書，將成為發出保單的根據，並作為保單的一部份；
all answers to such questions, together with this application, shall form the basis and become a part of the policy;
5. 本人／我們已細閱並明白所申請的保單之主要銷售刊物之內容；
I/We have read and fully understood the principal brochure for the policy applied for;
6. 本人／我們會向貴公司申報，自簽署此投保書至保單簽發期間，有關任何一位相關人士的重要事實之轉變；
I/We shall disclose to the Company any change and/or material facts of all Relevant Person(s) that occur after signing this proposal form but before the policy is issued;
7. 保單將在保單附表列明之保費已全數繳清及符合所有規定後，方能生效；
the policy shall be effective only following the full payment of premium stated in the policy schedule and all applicable requirements being met;
8. 本人／我們對任何人所作出的任何聲明，如沒有在此投保書上填寫或印出，貴公司不須受其約束。
the Company is not bound by and is not required to rely on any statement which I/We may have made to any person if not written or printed here.

本人／我們聲明 I/We declare that

- 受保學生為全時間海外學生(就讀日間課程)，絕無違返醫生之勸諭，亦不會在受保期內參與任何體力勞動之活動。
the Insured Student is a full time overseas student (attending day courses) and is not travelling contrary to the advice of a medical practitioner, or not engaging in any manual work during the insuring period.
- 本人／受保學生從未遭受任何保險公司拒絕受理投保、續保或取消本人／受保學生之保單或要求提高保費及附加特別條件始允承保。
No Insurer has ever cancelled, declined, refused to renew or imposed special terms or conditions on any policy held by myself/Insured Student.
- 本人／我們已填報一切重要的有關資料，絕無隱瞞或保留，並同意將本投保書和聲明作為與安盛保險有限公司和本人／受保學生所訂合約的根據，並以保單上各條款為準則。
I/We have not withheld any material information and accept that this proposal and declaration shall be the basis of, and be incorporated in, the contract between AXA General Insurance Hong Kong Limited and myself/Insured Student.

收集個人資料的聲明 PERSONAL INFORMATION COLLECTION STATEMENT

安盛保險有限公司（下稱“本公司”）明白其就《個人資料（私隱）條例》（香港法例第486章）（“條例”）收集、持有、處理、使用和／或轉移個人資料所負有的責任。本公司僅將為合法和相關的目的收集個人資料，並將採取一切切實可行的步驟，確保本公司所持個人資料的準確性。本公司將採取一切切實可行的步驟，確保個人資料的安全性，及避免發生未經授權或者因意外而擅自取得、刪除或另行使用個人資料的情況。

敬請注意，如果閣下不向本公司提供閣下的個人資料，我們可能無法提供閣下所需的資料、產品或服務，或無法處理閣下的要求。

目的：本公司不時有必要收集閣下的個人資料，並可能因下列各項目的（“有關目的”）而供本公司使用、存儲、處理、轉移、披露或共享該等個人資料：

1. 向閣下推介、提供和營銷本公司、安盛集團的其他公司(“安盛關聯方”)或本公司的商業合作夥伴(參閱下文“在直接促銷中使用及將其個人資料提供予其他人士”部份)之產品／服務，以及提供、維持、管理和操作該等產品／服務；
2. 處理和評估閣下就本公司及安盛關聯方所提供之產品／服務提出的任何申請或要求；
3. 向閣下提供後續服務，包括但不限於執行／管理已發出的保單；
4. 與就本公司和／或安盛關聯方提供的任何產品／服務而由閣下或針對閣下提出的或者其他涉及閣下的任何索賠相關的任何目的，包括索賠調查；
5. 評估閣下的財務需求；
6. 為客戶設計產品／服務；
7. 為統計或其他目的進行市場研究；
8. 不時就本條款所列的任何目的核對所持有的與閣下有關的任何資料；
9. 作出任何適用法律、規則、規例、實務守則或指引所要求的披露或協助在香港或香港以外其他地方的警方或其他政府或監管機構執法及進行調查；
10. 進行身份和／或信用核查和／或債務追收；
11. 遵守任何適用的司法管轄區的法律；
12. 開展與本公司業務經營有關的其他服務；及
13. 與上述任何目的直接有關的其他目的。

個人資料的轉移：個人資料將予以保密，但在遵守任何適用法律條文的前提下，可提供給：

1. 位於香港或香港以外其他地方的任何安盛關聯方、本公司的任何相關聯人士、任何再保險公司、索賠調查公司、閣下之保險經紀、行業協會或聯會、基金管理公司或金融機構，以及就此方面而言，閣下同意將閣下的資料轉移至香港境外；
2. 與就本公司和／或安盛關聯方提供的任何產品／服務而由閣下或針對閣下提出的或者其他涉及閣下的任何索賠相關的任何人士(包括私家偵探)；
3. 在香港或香港以外其他地方向本公司和／或安盛關聯方提供行政、技術或其他服務(包括直接促銷服務)並對個人資料負有保密義務的任何代理、承包商或第三方；
4. 信貸資料機構或(在出現拖欠還款的情況下)追討欠款公司；
5. 本公司權利或業務的任何實際或建議的承讓人、受讓方、參與者或次參與者；及
6. 在香港或香港以外其他地方的任何政府部門或其他適當的政府或監管機關。

如欲了解本公司為促銷目的使用閣下的個人資料的政策，請參閱下文“**在直接促銷中使用及將其個人資料提供予其他人士**”部份。

閣下的個人資料將僅為上文中規定的一個或多個有關目的而被轉移。

在直接促銷中使用及將其個人資料提供予其他人士

本公司有意：

1. 使用本公司不時持有的閣下的姓名、聯絡資料、產品及服務的組合資料、交易模式及行為、財政背景及人口統計數據以進行直接促銷；
2. 就本公司，安盛關聯方，本公司合作品牌夥伴及商業合作夥伴可能提供關於下列類別的服務及產品而進行直接促銷(包括但不限於提供獎賞、客戶或會員或優惠計劃)：
 - a) 保險、銀行、公積金或公積金計劃、金融服務、證券和相關產品及服務；
 - b) 健康、保健及醫療、餐飲、體育運動及會員服務、娛樂、健身浴或類似的休閒活動、旅遊及交通、家居、服裝、教育、社交網絡、媒體的產品及服務及高級消費類產品；
3. 以上服務及產品將會由本公司及／或以下機構提供：
 - a) 任何安盛關聯方；
 - b) 第三方金融機構；
 - c) 提供上文 2. 所列之服務及產品之本公司及／或安盛關聯方的商業合作夥伴或合作品牌夥伴；
 - d) 向本公司或任何以上所列機構提供支援的第三方獎賞、客戶或會員或優惠計劃提供者；
4. 除由本公司促銷上述服務及產品外，本公司亦有意將上文 1. 段部份所述的資料提供予上文 3. 段部份所述的全部或任何人士，以供該等人士在促銷該等服務及產品中使用，而本公司為此目的須獲得客戶書面同意(包括表示不反對)。

在使用閣下的個人資料作上文所述的目的或提供予上文所述的人士之前，本公司須獲得閣下的書面同意，及只在獲得閣下的書面同意後方可使用閣下的個人資料及提供予其他人士作任何推廣及促銷用途。

閣下日後可撤回閣下給予本公司有關使用閣下的個人資料及提供予其他人士作任何促銷用途的同意。

閣下如欲撤回閣下給予本公司的同意，請發信至下文“**個人資料的查閱和更正**”部份所列的地址通知本公司。本公司會在不收取任何費用的情況下確保不會將閣下納入日後的直接促銷活動中。

個人資料的查閱和更正：根據條例，閣下有權查明本公司是否持有閣下的個人資料，獲取該資料的副本，以及更正任何不準確的資料。閣下還可以要求本公司告知閣下本公司所持個人資料的種類。

查閱和更正的要求，或有關獲取政策、常規及本公司所持的資料種類的資料，均應以書面形式發送至：

香港九龍九龍灣宏遠街1號壹號九龍23樓
安盛保險有限公司
個人資料保護主任

本公司可能會向閣下收取合理的費用，以抵銷本公司為執行閣下的資料查閱要求而引致的行政和實際費用。

AXA General Insurance Hong Kong Limited (referred to hereinafter as the “**Company**”) recognises its responsibilities in relation to the collection, holding, processing, use and/or transfer of personal data under the Personal Data (Privacy) Ordinance (Cap. 486) (“**PDPO**”). Personal data will be collected only for lawful and relevant purposes and all practicable steps will be taken to ensure that personal data held by the Company is accurate. The Company will take all practicable steps to ensure security of the personal data and to avoid unauthorised or accidental access, erasure or other use.

Please note that if you do not provide us with your personal data, we may not be able to provide the information, products or services you need or process your request.

Purpose: From time to time it is necessary for the Company to collect your personal data which may be used, stored, processed, transferred, disclosed or shared by us for purposes (“**Purposes**”), including:

1. offering, providing and marketing to you the products/services of the Company, other companies of the AXA Group (“**our affiliates**”) or our business partners (see “**Use and provision of personal data in direct marketing**” below), and administering, maintaining, managing and operating such products/services;
2. processing and evaluating any applications or requests made by you for products/services offered by the Company and our affiliates;
3. providing subsequent services to you, including but not limited to administering the policies issued;
4. any purposes in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates, including investigation of claims;
5. evaluating your financial needs;
6. designing products/services for customers;
7. conducting market research for statistical or other purposes;
8. matching any data held which relates to you from time to time for any of the purposes listed herein;
9. making disclosure as required by any applicable law, rules, regulations, codes of practice or guidelines or to assist in law enforcement purposes, investigations by police or other government or regulatory authorities in Hong Kong or elsewhere;
10. conducting identity and/or credit checks and/or debt collection;
11. complying with the laws of any applicable jurisdiction;
12. carrying out other services in connection with the operation of the Company's business; and
13. other purposes directly relating to any of the above.

Transfer of personal data: Personal data will be kept confidential but, subject to the provisions of any applicable law, may be provided to:

1. any of our affiliates, any person associated with the Company, any reinsurance company, claims investigation company, your broker, industry association or federation, fund management company or financial institution in Hong Kong or elsewhere and in this regard you consent to the transfer of your data outside of Hong Kong;
2. any person (including private investigators) in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates;
3. any agent, contractor or third party who provides administrative, technology or other services (including direct marketing services) to the Company and/or our affiliates in Hong Kong or elsewhere and who has a duty of confidentiality to the same;
4. credit reference agencies or, in the event of default, debt collection agencies;
5. any actual or proposed assignee, transferee, participant or sub-participant of our rights or business; and
6. any government department or other appropriate governmental or regulatory authority in Hong Kong or elsewhere.

For our policy on using your personal data for marketing purposes, please see the section below “**Use and provision of personal data in direct marketing**”.

Transfer of your personal data will only be made for one or more of the Purposes specified above.

Use and provision of personal data in direct marketing:

The Company intends to:

- use your name, contact details, products and services portfolio information, transaction pattern and behaviour, financial background and demographic data held by the Company from time to time for direct marketing;
- conduct direct marketing (including but not limited to providing reward, loyalty or privileges programmes) in relation to the following classes of products and services that the Company, our affiliates, our co-branding partners and our business partners may offer:
 - insurance, banking, provident fund or scheme, financial services, securities and related products and services;
 - products and services on health, wellness and medical, food and beverage, sporting activities and membership, entertainment, spa and similar relaxation activities, travel and transportation, household, apparel, education, social networking, media and high-end consumer products;
- the above products and services may be provided by the Company and/or:
 - any of our affiliates;
 - third party financial institutions;
 - the business partners or co-branding partners of the Company and/or affiliates providing the products and services set out in 2. above;
 - third party reward, loyalty or privileges programme providers supporting the Company or any of the above listed entities;
- in addition to marketing the above products and services, the Company also intends to provide the data described in 1. above to all or any of the persons described in 3. above for use by them in marketing those products and services, and the Company requires your written consent (which includes an indication of no objection) for that purpose.

Before using your personal data for the purposes and providing to the transferees set out above, the Company must obtain your written consent, and only after having obtained such written consent, may use and provide your personal data for any promotional or marketing purpose.

You may in future withdraw your consent to the use and provision of your personal data for direct marketing.

If you wish to withdraw your consent, please inform us in writing to the address in the section on **"Access and correction of personal data"**. The Company shall, without charge to you, ensure that you are not included in future direct marketing activities.

Access and correction of personal data: Under the PDPO, you have the right to ascertain whether the Company holds your personal data, to obtain a copy of the data, and to correct any data that is inaccurate. You may also request the Company to inform you of the type of personal data held by it.

Requests for access and correction or for information regarding policies and practices and kinds of data held by the Company should be addressed in writing to:

Data Privacy Officer
AXA General Insurance Hong Kong Limited
23/F, One Kowloon, 1 Wang Yuen Street, Kowloon Bay, Kowloon, Hong Kong

A reasonable fee may be charged to offset the Company's administrative and actual costs incurred in complying with your data access requests.

本人/我們確認本人/我們已閱讀並明白收集個人資料的聲明(“該聲明”)。本人/我們確認本人/我們已被通知本人/我們須詳細閱讀該聲明，而本人/我們已詳細閱讀該聲明對貴公司所收集或持有之本人/我們的個人資料的影響(不論是否此表格所載或從其他途徑所取得)。根據以上所述，本人/我們特此確認並同意安盛保險有限公司根據該聲明使用及轉移本人/我們的個人資料，包括在直接促銷中使用及將本人/我們個人資料提供予其他人士。

I/WE ACKNOWLEDGE AND CONFIRM that I/we have read and understood the Personal Information Collection Statement (“PICS”). I/We confirm that I/we have been advised to read carefully the PICS, and I/we have read it carefully its effect and impact in respect of my/our personal data collected or held by the Company (whether contained in this application or otherwise). Based on the foregoing, I/we hereby give my/our acknowledgement and agree to the use and transfer of my/our personal data by AXA General Insurance Hong Kong Limited in accordance with the PICS, including the use and provision of my/our personal data for the purpose of direct marketing.

[重要通知: 如閣下不同意根據“收集個人資料的聲明”使用和轉移閣下的個人資料作直接促銷用途(參閱“在直接促銷中使用及將其個人資料提供予其他人士”部份)，請在下列方格內 加上剔號 (“✓”)，本公司將不會使用閣下的個人資料作為直接促銷用途。]

[Important: If you do not agree to the use and provision of your personal data for direct marketing as set out in the section **"Use and provision of personal data in direct marketing"**, please tick the box below and we will not use your personal data for direct marketing.]

本人/我們不同意貴公司根據“收集個人資料的聲明”使用和轉移本人/我們的個人資料作直接促銷用途(參閱“在直接促銷中使用及將其個人資料提供予其他人士”部份) 及並不願意接收任何貴公司的推廣及直接促銷的材料。

I/We do not agree with the use and provision of my/our personal data for direct marketing purposes as set out above in the **Personal Information Collection Statement** (see **"Use and provision of personal data in direct marketing"**) and do not wish to receive any promotional and direct marketing materials.

投保人簽署 Proposer's Signature
(請勿於空白投保書上簽署 Do not sign a blank form)

日期 Date
(日/月/年 dd/mm/yyyy)

*保單已按適用之徵費率徵收保險業監管局的有關徵費。欲了解更多詳情，請瀏覽www.axa.com.hk/ia-levy或致電AXA安盛(852) 2523 3061。

*Levy collected by the Insurance Authority has been imposed on this policy at the applicable rate. For further information, please visit www.axa.com.hk/ia-levy or contact AXA at (852) 2523 3061.

營業員資料 AGENT DETAILS

姓名 Name	編號 Code
聯絡電話 Contact No.	電郵地址 Email Address