



# INTRA AFRICA ASSURANCE COMPANY LIMITED

(Incorporated in Kenya)

## HEAD OFFICE

Williamson House, 3<sup>rd</sup> floor, 4th Ngong Avenue, P.O. Box 43241-00100, Nairobi, Kenya.

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Email: [info@intraafrica.co.ke](mailto:info@intraafrica.co.ke)

[www.intraafrica.co.ke](http://www.intraafrica.co.ke)

## BRANCH OFFICE

Centre Point House, 2nd floor, Parklands Road, P.O. Box 49884-00100, Nairobi, Kenya.

Tel: 020 3743991/955, Fax 020 3743460

E-mail [centrepoin@intraafrica.co.ke](mailto:centrepoin@intraafrica.co.ke)

### PROPOSAL FOR GOLFERS INSURANCE.

Agency name: \_\_\_\_\_

#### 1. SECTION 1: BUSINESS DETAILS

A. Full name of proposer \_\_\_\_\_

B. Pin number (please attach copy): \_\_\_\_\_

C. Certificate of Registration/Incorporation/ID/Passport  
(Please Attach copy) \_\_\_\_\_

#### D. Contact Details:

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Postal: \_\_\_\_\_ Code: \_\_\_\_\_ Town/City: \_\_\_\_\_

Web: \_\_\_\_\_ Fax: \_\_\_\_\_ Tel: \_\_\_\_\_

Occupation: \_\_\_\_\_ Age: \_\_\_\_\_

#### SECTION 2: PROPOSAL DETAILS

Period of insurance: From: \_\_\_\_\_ To: \_\_\_\_\_

2. Do you enjoy good health? \_\_\_\_\_

Do you suffer from any physical defects or infirmities? \_\_\_\_\_ Yes/No.

If so, give full particulars: \_\_\_\_\_

3. Have you ever sustained any accident, loss or breakages: \_\_\_\_\_

4. Has any Insure or Underwriter ever:

a. Declined your proposal? \_\_\_\_\_ Yes/No

b. Required an increased premium? \_\_\_\_\_ Yes/No

c. Required you to bear the first portion of any loss? \_\_\_\_\_ Yes/No

d. Refused to renew or cover your policy? \_\_\_\_\_ Yes/No

If Yes in any of the above, please give particulars: \_\_\_\_\_

5. Do you have any other Personal Accident Insurances? \_\_\_\_\_ Yes/No

If so, give particulars: \_\_\_\_\_

6. Do you require any of the following benefits?

a. Hole in one: \_\_\_\_\_

b. Personal Effects: \_\_\_\_\_

c. Liability to Caddy/Public: \_\_\_\_\_

d. Golfing Equipment: \_\_\_\_\_

#### Declaration:

I warrant that the above statements are true and complete and agree that this proposal shall form the basis of the contract between me and Intra Africa Assurance Company. I also agree the Company's policy applicable to the Insurance.

Date: \_\_\_\_\_ Signature of Proposer: \_\_\_\_\_

The Insurance will not be in force until the proposal has been accepted by the Company.

**INSURED**

**DETAILS OF INDIVIDUAL VALUE OF GOLF EQUIPMENT E.G. CLUBS, BAG, GOLF BALLS E.T.C.**

ITEM	MAKE OF CLUB	STAINLESS STEEL SHAFT	VALUE Kshs:
1. IRON			
2. IRON			
3. IRON			
4. IRON			
5. IRON			
6. IRON			
7. IRON			
8. IRON			
9. IRON			
PITCHING WEDGE			
SAND WEDGE			
PUTTER			
1. WOOD			
2. WOOD			
3. WOOD			
4. WOOD			
5. WOOD			
6. WOOD			
7. WOOD			
8. WOOD			
9. WOOD			
	<b>MAKE</b>	<b>MISCELLANEOUS</b>	<b>VALUE KSHS:</b>
1. BAG			
2. TROLLEY			
3. SHOES			
4. OTHERS			
		<b>TOTAL VALUE TO BE INSURED:</b>	

**NB: MAXIMUM CLUBS ALLOWED = 14**