



MAA General Assurance Philippines, Inc.

10/F Pearlbank Center, 146 Valero St., Salcedo Village, Makati City
Tel. Nos: (632) 867-2452 to 55; Fax: (632) 893-2230

MAAGAP-AFUW017

TRAVEL APPLICATION FORM

Applicant's Information

Complete Name : _____

Address : Current : _____
: Permanent : _____

Tel. No. : _____ Cellphone No. : _____

Nationality : _____ Date of Birth : _____ Age : _____ Sex : _____

Tin No : _____ SSS/GSIS No. : _____ Civil Status : _____ Height : _____ Weight : _____

Occupation : _____

Name of Employer : _____

Nature of Business : _____

Address : _____

Tel/ / Fax Nos. : _____

Duties and Responsibilities :
1 _____
2 _____
3 _____
4 _____
5 _____

Income

Annual Gross Income : _____ Other Income : _____

Beneficiaries

Name of Beneficiaries or Travelling with Family	Relationship and Birthdates

Person to contact in case of an emergency : _____
Relationship : _____ Contact Nos.: _____

Travel Details Information

Purpose of Travel : Leisure Destination : _____
 Business Departure Date : _____
 Others

Duration of Stay : _____

I hereby declare that:

- I am in good health, free from physical impairment or deformity.
- I am not traveling to receive any medical treatment
- I hereby warrant that all statements in this application are true and complete to the best of my knowledge and belief, and completeness thereof shall be the basis for the issuance of the policy.
- I hereby authorize any physician, hospital, clinic or other organization, institution or person that has any record or knowledge of me, to give MAA General Assurance Phils., Inc., any and all information about me. This authorization is made only in connection with my application for insurance.
- I also understand and agreed that no coverage will be in effect until the Company approves this application, the policy issued and the premium is paid in full.

Applicant's Signature

Co-Representative

(signature over printed name)

(signature over printed name)

Date:

Date:

Agent Code :

Enclosed is my premium payment in the amount of:

Cash Php _____
Check Php _____

Check No. : _____
Date Issued : _____
Bank : _____
Branch : _____

Please submit your signed application form to the nearest MAA Office :

Makati
10/F Pearlbank Center
Valero St., salcedo Village,
Makati City

Manila
Statecenter Bldg.,
Juan Luna St., Binondo
Manila

Alabang
5/F Sycamore Bldg.,
Buencamino St. Alabang Zapote Rd.
Muntinlupa City

Cebu
5/F Keppel Center
cor. Samarloop & Cardinal Rosales St.,
Cebu Business Park, Cebu City

Dagupan
2/F Gutierrez Bldg.,
252 AB Fernandez Ave.,
Dagupan City