

**苏黎世保险公司北京分公司**  
**“海外任我行” 境外旅行保险投保单**  
**ZURICH INSURANCE COMPANY LIMITED BEIJING BRANCH**  
**“OVERSEAS EASY TRIP” TRAVEL INSURANCE APPLICATION FORM**



**投保须知 Application Guide**

1. 为了维护您的利益, 请仔细阅读投保须知、投保人/被保险人声明、保险责任, 尤其是责任免除部分条款内容, 并听取业务人员的说明。如对业务人员的说明不明白或有异议的, 请在填写本投保单之前向业务人员进行询问, 如未询问, 视同已经对条款内容完全理解并无异议。请详细填写投保单上所需资料, 并亲笔签名确认。For your own benefit, please read the Application Guide, Applicant / Insured Declaration and benefits, especially the exclusion terms carefully and make sure to understand the explanation from service person, if anything unclear or dissent, please enquiry before fill this application. No enquiry is deemed as understand and agree with the terms and conditions entirely, then please complete the application form and sign below.

2. 每位被保险人最多可购买一份本保障计划。超过一份者, 超过部分无效。Only one effective coverage for an Insured in one trip.

**投保人信息 Applicant Information**

|                                |                  |
|--------------------------------|------------------|
| 姓名/名称<br>Name                  | 联系电话<br>Tel No.  |
| 通讯地址<br>Correspondence Address | 邮政编码<br>Postcode |

**被保险人信息 Insured Information**

|                                                                                                                         |                                                                                |                                         |
|-------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-----------------------------------------|
| 姓名<br>Name                                                                                                              | 身份证/护照号码<br>ID No.                                                             |                                         |
| 出生日期<br>Date of Birth                                                                                                   | 性别 Gender<br><input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female | 与投保人关系<br>Relationship to the Applicant |
| 现住址 Dwelling Address (如未填写, 则默认为被保险人名下或其签署的租赁合同所在房产 If not assigned, deem the same as estate under the name of insured) |                                                                                | 邮政编码<br>Postcode                        |

**身故保险金受益人信息 Beneficiary Information** (若未填写, 则默认为法定继承人 If not assigned, deem the payment as heritage)

|            |                       |                                                                                |                                        |
|------------|-----------------------|--------------------------------------------------------------------------------|----------------------------------------|
| 姓名<br>Name | 出生日期<br>Date of Birth | 性别 Gender<br><input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female | 与被保险人关系<br>Relationship to the Insured |
|------------|-----------------------|--------------------------------------------------------------------------------|----------------------------------------|

**旅行信息及保障方案 Travelling Information and Package**

|                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                            |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| 旅行目的<br>Purpose of Travelling                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> 外出旅游 Travelling <input type="checkbox"/> 探亲 Visit <input type="checkbox"/> 学习培训 Training <input type="checkbox"/> 商务考察 Business <input type="checkbox"/> 留学 Study | 旅行主要目的地<br>Destination |
| <input type="checkbox"/> 单次旅行 (最长保障期限为 180 天) Single Trip (The maximum insured trip is 180 days)<br>旅行期间 从 年 月 日 至 年 月 日 共 日 (含开始及结束日期)<br>Travelling period From Year/ Month/ Day To Year /Month /Day Total Days (Including starting and ending day)                                                                        |                                                                                                                                                                                            |                        |
| <input type="checkbox"/> 全年旅行 (全年旅行次数不限, 每次旅行最长保障期限为 90 天) Annual Travel (The maximum insured days for each trip is 90 days)<br>保险生效日 年 月 日零时, 保险期间为一年 (保险生效日不得早于投保单签署日期的次日)<br>Effective Date Year/ Month/ Day 00: 00, the insured period is one year (Effective date needs to be late than the date of application signed) |                                                                                                                                                                                            |                        |
| 保障方案 Plan<br>(具体内容见背面 Please find detailed plan at the back)                                                                                                                                                                                                                                                                 | 保险费 (大写)<br>Premium (In Words)                                                                                                                                                             | (小写)<br>(In Figures)   |

**投保人/被保险人声明 Applicant / Insured Declaration**

1. 投保人同意此投保单为投保人与苏黎世保险公司北京分公司 (以下简称“贵公司”) 订立保险合同的根据。投保人特此声明投保单内所填报之资料, 为投保人所知悉并确定全部真实且正确无误。

Applicant agrees that this Application Form shall be the proof of the contract between applicant and Zurich Insurance Company Limited Beijing Branch. Applicant declares that the statements made in this application form are true, correct and complete to the best of applicant knowledge and belief.

2. 被保险人保证其旅行目的不在于治疗疾病且无任何不适宜旅行的精神状态或身体状况。

Insured declare that travelling is not for the purpose of medical treatment or with health conditions inappropriate for travelling.

3. 被保险人同意贵公司为本保险的目的收集被保险人的个人资料 (该资料不论是从本投保单上或其它地方所获取) 并授权可由贵公司或任何与贵公司有关的机构或人员 (不论在中国或海外地方) 持有、转告及用于 (1) 处理及审核本投保单或其它保险事宜 (2) 提供与该保险有关之服务, 及 (3) 与投保人联络的用途。

Insured hereby declare and agree on behalf of his/her self and any person, firm or corporation, who/which may have or claim any interest in any insurance on this application that, any personal information collected or held by Zurich Insurance Company Limited Beijing Branch (whether contained in this application or otherwise obtained) may be held, used, and disclosed by Zurich Insurance Company Limited Beijing Branch or any selected third party (within or outside of China, including reinsurance and claims investigation companies and industry associations /federations) for the purposes of processing this application and providing subsequent services for this and other financial products and services, direct marketing, and date matching, and to communicate with me for such purposes.

4. 投保人完全了解, 保险期间不满 1 年的合同, 如在保险合同生效前退保, 须提供使馆拒签证明, 贵公司将全额退还保险费; 在保险合同生效后, 贵公司不接受退保申请。

Applicant completely knows that for the contract with the insured period less than a year, if policy is cancelled prior to the effective period of this contract, a refusal visa certification must be provided. Zurich Insurance Company Limited Beijing Branch will refund total premium; If the policy takes effect, Zurich Insurance Company Limited Beijing Branch will not accept cancellation application.

5. 投保人现声明, 贵公司已经向投保人明确说明保险责任及所有免除贵公司责任的条款, 投保人已仔细阅读了保险条款, 尤其是责任免除部分条款内容, 并对贵公司就保险条款内容的说明和提示完全理解, 没有异议, 申请投保。

Applicant hereby declares that Zurich Insurance Company Limited Beijing Branch has provided applicant with clear explanations on all coverage, exclusion terms. Applicant has read the terms and conditions carefully especially the exclusion terms. Applicant apply the insurance based on entirely understanding and agreement about the contents and the explanation.

投保人签名: 被保险人签名: (若与投保人为同一人则免签 If different to Applicant)

Signature of Applicant: Signature of Insured:

签署日期: Date: 签署日期 Date:

**销售公司填写 For agency only**

名称: 经办人:

**保险公司填写 For insurance company only**

销售公司 CIA 代码: 渠道服务人员姓名:

“海外任我行” 境外旅行保险保障方案及保险费

“OVERSEAS EASY TRIP” TRAVEL INSURANCE PACKAGE AND PREMIUM

保险责任说明 Benefits Disclosure

1. 被保险人的投保年龄：60 天-80 周岁，以投保时被保险人的周岁年龄为准。Insured Persons must be from 60 days to 80 years of age inclusive upon application.
2. 被保险人投保年龄为 71-80 周岁时，旅行意外伤害保险、附加特定事故意外伤害保险及身故恩恤金的保险金额为如下所选方案中所载金额的一半，保险费维持不变。For any insured aged from 71 to 80 years old, half Sum Insured or Limit of indemnity under Zurich Travel Accidental Death and Disablement, Extra Accidental Death Indemnity due to Specific Named Perils and Compassionate Death Cash benefit applies and the premium remains unchanged.
3. 未满 18 周岁的未成年人，按照中国保险监督管理委员会规定，其身故给付保险金额，在北京、上海、广州及深圳地区为 10 万元，其余地区为 5 万元。For insured person under 18 years old, the limit of death indemnity shall not exceed that as specified by China Insurance Regulatory Commission (RMB100,000 for Beijing , Shanghai, Guangzhou and Shenzhen, RMB 50,000 for other areas).
4. 单次旅行每次旅行最长保障期限为 180 天。如选择全年旅行保单，被保险人在保险期间内可进行多次旅行，但每次旅行最长保障期限为 90 天。For each trip, The maximum insured day is 180 days. For Annual Travel policy, the insured can have more than one trip during the insured period with the maximum insured day for each trip is 90 days.
5. 本保险不承担在下述国家旅行期间发生的保险事故：阿富汗、刚果(金)、乍得、海地、伊拉克、索马里。This policy will not cover any loss, injury, damage or legal liability arising out of the travel in, to, or through Afghanistan, Democratic Republic of Congo, Chad, Haiti, Iraq, and Somalia.

保障方案 Insurance Benefits

| 保险金额/赔偿限额/津贴日额 Sum Insured/ Limit of Indemnity / Daily Allowance(人民币元 CNY)                       |                                                                                                              | 方案 A Plan A     | 方案 B Plan B      | 方案 C Plan C      |
|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------|------------------|------------------|
| 险种名称/保障内容 Coverage Item                                                                          |                                                                                                              |                 |                  |                  |
| 旅行意外身故、残疾 Travel Accidental Death and Disablement                                                |                                                                                                              | 300,000         | 500,000          | 1,000,000        |
| 境外紧急医疗费用保险 Overseas Emergency Medical Expenses -每次事故免赔额 300 元 RMB 300 deductible per accident    |                                                                                                              | 300,000         | 500,000          | 500,000          |
| 紧急医疗转运与运返保险 Emergency Medical Evacuation/Repatriation                                            |                                                                                                              | 300,000         | 500,000          | 800,000          |
| 遗体送返保险 Repatriation of Mortal Remains -其中丧葬费用以 20,000 元为限 Sub-limit for funeral fees: RMB 20,000 |                                                                                                              | 100,000         | 200,000          | 200,000          |
| 亲友探病 Compassionate Hospitalize Visit                                                             |                                                                                                              | 10,000          | 10,000           | 10,000           |
| 同行子女或老人回本国或中国 Return of Unattended Children and Aged                                             |                                                                                                              | 25,000          | 25,000           | 25,000           |
| 紧急住院津贴保险 Hospital Cash Allowance                                                                 |                                                                                                              | 50 元/天 Yuan/day | 200 元/天 Yuan/day | 300 元/天 Yuan/day |
| 意外伤害失能保险 Loss of Income Protection                                                               |                                                                                                              | —               | —                | 100 元/天 Yuan/day |
| 特定事故意外伤害保险 Extra Accidental Death Indemnity due to Specific Named Perils                         | 公共交通/抢劫意外伤害 Accident on Public Common Carrier or During Robbery                                              | —               | 300,000          | 500,000          |
|                                                                                                  | 烧烫伤保障 Burns Cover                                                                                            | —               | 100,000          | 200,000          |
| 身故恩恤金及紧急启程保险 Compassionate Death Cash and Visit                                                  | 身故恩恤金 Compassionate Death Cash                                                                               | 50,000          | 50,000           | 80,000           |
|                                                                                                  | 紧急启程保险金 Compassionate Visit                                                                                  | 10,000          | 10,000           | 20,000           |
| 境外个人现金遗失保险 Oversea Loss of Personal Money                                                        |                                                                                                              | —               | 2,000            | 3,000            |
| 信用卡保障保险 Credit Card Protection                                                                   |                                                                                                              | —               | —                | 30,000           |
| 境外旅程及行李延误保险 Overseas Travel and Baggage Delay                                                    | 旅程延误 Travel Delay -每六小时延误赔偿人民币 300 元 RMB300 for each and every full 6 hours of delay                         | 1,200           | 1,200            | 1,500            |
|                                                                                                  | 额外住宿费用 Extra Hotel Costs                                                                                     | —               | 1,000            | 2,000            |
|                                                                                                  | 更改行程 Extra Re-routing Costs                                                                                  | —               | 1,000            | 10,000           |
|                                                                                                  | 行李延误紧急购物 Emergency Purchases                                                                                 | —               | 1,000            | 1,500            |
| 境外证件及行李损失保险 Loss of Travel Document and Personal Baggage                                         | 证件损失/旅行票损失 Loss of Travel Document and/or Travel Ticket                                                      | 2,000           | 3,000            | 3,000            |
|                                                                                                  | 旅行行李物品损失 Personal Baggage Cover -每件行李或每套物品最高赔偿限额为人民币 2,500 元 Maximum limit per item or set of items RMB2,500 | 1,000           | 5,000            | 20,000           |
| 取消行程保险 Cancellation of Trip                                                                      |                                                                                                              | —               | 20,000           | 30,000           |
| 缩短行程保险 Curtailment of Trip                                                                       |                                                                                                              | —               | 20,000           | 30,000           |
| 境外缺席特别活动保险 Overseas Missed Event Cover                                                           |                                                                                                              | —               | —                | 2,000            |
| 旅行家居财物盗抢损失保险 Loss of Home Content due to Burglary -每次事故免赔额 500 元 RMB 500 deductible per accident |                                                                                                              | 20,000          | 50,000           | 100,000          |
| 旅行个人责任保险 Personal Liability -每次事故免赔额 500 元 RMB 500 deductible per accident                       |                                                                                                              | —               | 1,000,000        | 1,500,000        |

保险费 Premium(人民币元 CNY)

| 保险期间 Insured Period                                      | 成年人保险费 Adult Premium |             |             | 未成年人保险费 Juvenile Premium |             |             |
|----------------------------------------------------------|----------------------|-------------|-------------|--------------------------|-------------|-------------|
|                                                          | 方案 A Plan A          | 方案 B Plan B | 方案 C Plan C | 方案 A Plan A              | 方案 B Plan B | 方案 C Plan C |
| 1-7 天 Days                                               | 120                  | 230         | 330         | 105                      | 200         | 260         |
| 8-10 天 Days                                              | 150                  | 300         | 450         | 130                      | 260         | 335         |
| 11-15 天 Days                                             | 180                  | 370         | 540         | 150                      | 310         | 400         |
| 16-20 天 Days                                             | 210                  | 430         | 640         | 170                      | 360         | 465         |
| 21-30 天 Day                                              | 280                  | 570         | 870         | 230                      | 465         | 620         |
| 30 天后每天 Each Day after 30 Days                           | 7                    | 14          | 20          | 6                        | 11          | 14          |
| 全年旅行 Annual Travel (每次旅行限 90 天 Maximum 90 days per trip) | 1,450                | 2,800       | 4,100       | 1250                     | 2,190       | 2,900       |