

**Hong Kong Baptist University**  
**Request for Insurance Coverage for Personal Overseas Trips – Staff & Student**  
**香港浸會大學 個人海外旅遊保險申請表 – 職員及學生適用**  
**(Zurich Policy No. 蘇黎世保險公司保單編號 TTT0001125ZC)**

**Notes 注意：**

- This Request Form is applicable to **Personal Trips** of staff and students (and their travel companions) only. Students and Staff members going overseas for business purposes/exchange need not fill in this form but shall submit the Overseas Travel Insurance Declaration Form posted on the Finance Office website. Invalid or no declaration may cause all claims incurred during the whole trip would be declined.  
此表格只適用於浸會大學教職員及學生(及其同行親友)的個人海外旅遊，往海外公幹的教職員或進行交流學習的學生，無須填寫此表格，但需填寫並遞交上載於財務處網站的海外旅遊保險申報表。未能遞交有效的海外旅遊保險申報表，將可能導致所有在整段旅程產生的索賠事項遭拒絕賠償。
- Applicants should calculate the premium (for premium rates, please see Part II) and deposit into Hang Seng Bank account no. 283-338366-001(account holder: Hong Kong Baptist University). Please submit the pay-in slip together with the Request Form to the Finance Office at least five working days before the date of departure from Hong Kong.  
申請人須計算保費(保費表請參閱第二部分)並以入數形式支付。入數戶口為恒生銀行 283-338366-001，帳戶持有人為“香港浸會大學”。請將填妥的申請表連同入數紙存根或入數紀錄，在離港日期前最少五個工作天交到財務處。
- The Age limit of Insured Person(s) under this Insurance Program are between 17 – 80 years (both inclusive). Other age range is subject to the insurer’s approval.  
本保險計劃只保障年齡介乎 17 至 80 歲之人仕。其他年齡組別之人士需得到保險公司的特別批准，方能生效。
- This Form and related Insurance Summary are available at the website “<http://fohome.hkbu.edu.hk>” Should you have any question in completing or submitting this Form, please call the Finance Office at 3411-7683.  
此表格及有關保險摘要可在網站“<http://fohome.hkbu.edu.hk>”下載，如對填寫或遞交此表格有任何疑問，請致電財務處 3411-7683 查詢。

**Part I – Personal Particulars 第一部分 – 個人資料**

Insured Name(s) (In English) as in HKID Card/ Passport 受保人姓名 (英文) 須與香港身份証/護照相同	1. _____ (Age : _____)	2. _____ (Age : _____)
	3. _____ (Age : _____)	4. _____ (Age : _____)
Period of Coverage 受保時期	_____ (date of departure from HK) (離港日期)	_____ (date of arrival at HK) (到港日期)
Itinerary 行程	From Hong Kong to : 由香港至: _____	
Name of Applicant 申請人姓名	_____	Contact No. 聯絡電話 _____
Signature of Applicant 申請人簽署	_____	Date 日期 _____

**Part II – Premium Rate Table 第二部分 – 保費表**

**Premium Rate per Person for Personal Trip with Departure Date between 1 July 2023 and 30 June 20234**

每人保費，適用於由2023年7月1日至2024年6月30日離港日期之個人海外旅遊

Up to 14 days	14 日或以下	HK\$153.00
15 days and up to 30 days	15 日至 30 日	HK\$243.00
31 days and up to 60 days	31 日至 60 日	HK\$330.00
61 days and up to 90 days	61 日至 90 日	HK\$466.00
91 days and up to 120 days	91 日至 120 日	HK\$557.00
121 days and up to 150 days	121 日至 150 日	HK\$672.00
151 days and up to 185 days	151 日至 185 日	HK\$786.00

**Part III – Coverage 第三部分 – 保障範圍**

Coverage 保障範圍		Limit 最高賠償額	
Personal Accident 人身意外		HK\$1,000,000	
Medical Expenses 醫療費用		HK\$1,000,000	
Personal Liability 個人責任		HK\$1,000,000	
Baggage and Personal Effects 行李及個人財物		HK\$10,000	
Baggage Delay and Emergency Purchase 行李延誤及應急物品		HK\$1,000 for 6 hours and above HK\$1,000, 延誤 6 小時或以上	
Flight Delay 行程延誤		HK\$2,000, HK\$300 for each 5 hours HK\$2,000, 每 5 小時可獲賠償 HK\$300	
Re-route Expenses due to Flight Delay 因行程延誤引致之更改行程費用		HK\$10,000 for flight cancelled due to delay over 10 hours HK\$10,000 行程因延誤超過 10 小時後被取消	
Travel Document 旅遊證件		HK\$3,000	
Personal Money 個人金錢		HK\$3,000	
Emergency Evacuation 緊急運送服務		Actual Cost 實際開支	
Cancellation 取消行程		HK\$25,000	
Curtailed 縮短行程		HK\$25,000	
Maximum Insurance Period 最長保障期		Max 185 days 最多 185 日	
Policy Excess (Amount not covered by the policy)	HK\$150 for Medical (per sickness/injury) HK\$200 for Cancellation & Curtailed HK\$200 for Lost of Baggage HK\$200 for Personal Money	自負額	醫療費用部分為 HK\$150 元 (每個病/受傷) 取消及縮短行程部分為 HK\$200 元 個人行李部分為 HK\$200 元 個人金錢部分為 HK\$200 元

In case of emergency, please make a collect call to 24 hours Zurich Emergency Assistance Hotline at (852) 2886-3977 and quote the policy number TTT0001125ZC.

當發生緊急事故，請撥由受話人付款之蘇黎世 24 小時熱線，電話為 (852) 2886-3977，並提供保單編號 TTT0001125ZC 以尋求協助。

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**Personal Data on this Form**

From time to time, it is necessary for you to provide the Finance Office with Personal Data in order to receive services from the Finance Office.

- The Personal Data collected on this Form are used for the purpose of arranging Insurance Cover for the applicant.
- Your Personal Data would be disclosed to the underwriters, insurance brokers or any other persons or companies for the purpose mentioned in (1.) above.
- You have the rights to check, correct, or gain access to your personal data filed with the Finance Office. The University has the right to charge a certain fee for the processing of every data access request. All requests for access / correction of personal data held by Finance Office should be addressed to :  
Director of Finance  
Finance Office  
Hong Kong Baptist University
- For more details of the University's Privacy Policy Statement and Personal Information Collection Statement, please visit the website at <http://bupdp0.hkbu.edu.hk/policies-and-procedures/pps-pics/>.

**本表格內的個人資料**

閣下不時須要向財務處提供個人資料，以便財務處提供服務。

- 本申請表上的個人資料將會用作安排保險用途。
- 閣下的個人資料，會提供給保險公司、保險顧問或任何人士或公司，作安排保險用途。
- 閣下有權查核、更正或取得你在財務處檔案內之個人資料。大學有權對個人資料之查閱酌量收取費用。如欲取得/更正閣下在財務處之個人資料，請致函：  
香港浸會大學  
財務處
- 有關大學的私隱政策聲明及收集個人資料聲明的詳情，請參閱網站 <http://bupdp0.hkbu.edu.hk/policies-and-procedures/pps-pics/>。