Travel claim form

Tell us as soon as you can, and keep every receipt and airline notice - most travel claims are decided on the paperwork alone.

OFFICE USE
Claim ref. _____

TRAVELLER

Full name _____ Date of birth _____

Policy / certificate number _____ Passport number _____

Mobile number _____ Email address _____

THE TRIP

Destination _____ Airline / operator _____

Departure date _____ Return date _____

WHAT HAPPENED

Type of claim

☐ Medical ☐ Baggage lost ☐ Baggage delayed ☐ Trip delay ☐ Cancellation ☐ Other

Date of the incident _____ Country / city _____

Describe what happened

_____

_____

_____

_____

Amount claimed _____ Currency _____

Reported to the airline, hotel or police?

☐ Yes ☐ No

Reference number of that report

_____

WHERE TO PAY THE SETTLEMENT

Complete only if the settlement is to be paid to you directly. Payments are made to the policyholder unless the insurer directs otherwise.

Account holder name _____ Bank name _____

IBAN _____ Account number _____

DOCUMENTS TO ATTACH

- [ ] Passport pages showing the entry and exit stamps
- [ ] Tickets and boarding passes
- [ ] Property irregularity report, for any baggage claim
- [ ] Airline or operator confirmation of the delay or cancellation
- [ ] Medical report and invoices, for a medical claim
- [ ] Original receipts for everything being claimed

DECLARATION

I declare that the information given on this form is true and complete to the best of my knowledge. I understand that giving false information may invalidate the claim and the policy. I authorise Masters Insurance Brokers to pass this form and the attached documents to the insurer and to act on my behalf in progressing this claim.

Signature

Date

Name in block capitals