



AXA Affin General Insurance and Malaysian Golf Association Golfer's Insurance Scheme



AXA Affin General Insurance Berhad (23820-W)
 Ground Floor Wisma Goldhill
 67 Jalan Raja Chulan 50200 Kuala Lumpur
 Tel: 03-2170 8282 Fax: 03-2031 7282
 Website: www.axa.com.my

When does the insurance take effect

By completing this Application Form and have the same submitted to the Club Management. The Insurance cover will then commence upon the receipt of the completed Application Form by fax from the Club to AXA Affin General Insurance Berhad. This insurance coverage expires on 31st December each year and is renewal thereafter.

Application Form

Please complete the form with the use of BLOCK LETTERS

Name of Proposer (As per IC / Passport) :

New IC No. :

Name of Club :

Occupation :

Club Membership No. :

Mailing Address :

 Post Code

Tel No. : Office : Mobile :
 E-mail : Fax :

Please tick where appropriate

- I, the above Proposer wish to enrol in the AAGI and MGA Golfer's Insurance Scheme and please debit my account for the premium payable.
- I, also wish to automatically renew my enrolment annually and hereby authorise the Club to debit my account with the premium due accordingly.

PREMIUM	ANNUAL (1 JAN - 31 DEC)			2ND QUARTER (1 APR - 31 DEC)			HALF-YEAR (1 JULY - 31 DEC)			LAST QUARTER (1 OCT - 31 DEC)		
	Option A	Option B	Option C	Option A	Option B	Option C	Option A	Option B	Option C	Option A	Option B	Option C
Individual	<input type="checkbox"/> RM70	<input type="checkbox"/> RM115	<input type="checkbox"/> RM160	<input type="checkbox"/> RM60	<input type="checkbox"/> RM95	<input type="checkbox"/> RM130	<input type="checkbox"/> RM50	<input type="checkbox"/> RM80	<input type="checkbox"/> RM100	<input type="checkbox"/> RM30	<input type="checkbox"/> RM50	<input type="checkbox"/> RM70
Extended Cover - Individual	<input type="checkbox"/> RM120	<input type="checkbox"/> RM190	<input type="checkbox"/> RM260	<input type="checkbox"/> RM100	<input type="checkbox"/> RM160	<input type="checkbox"/> RM220	<input type="checkbox"/> RM85	<input type="checkbox"/> RM130	<input type="checkbox"/> RM180	<input type="checkbox"/> RM50	<input type="checkbox"/> RM80	<input type="checkbox"/> RM105
Family Package	<input type="checkbox"/> RM100	<input type="checkbox"/> RM145	<input type="checkbox"/> RM190	<input type="checkbox"/> RM85	<input type="checkbox"/> RM125	<input type="checkbox"/> RM160	<input type="checkbox"/> RM70	<input type="checkbox"/> RM100	<input type="checkbox"/> RM130	<input type="checkbox"/> RM45	<input type="checkbox"/> RM65	<input type="checkbox"/> RM85
Extended Cover Family Package	<input type="checkbox"/> RM150	<input type="checkbox"/> RM220	<input type="checkbox"/> RM290	<input type="checkbox"/> RM125	<input type="checkbox"/> RM185	<input type="checkbox"/> RM245	<input type="checkbox"/> RM105	<input type="checkbox"/> RM150	<input type="checkbox"/> RM200	<input type="checkbox"/> RM60	<input type="checkbox"/> RM90	<input type="checkbox"/> RM115

Important Note: Please provide the following details if the insurance includes Family Members:

Name of Spouse :

New IC No. :

Club Membership No. :

(AGED 3 TO 18 YEARS ONLY)

Name of Child #1 :

New IC No. :

Name of Child #2 :

New IC No. :

Signature of Member _____

Date _____

FOR OFFICE USE ONLY

CONFIRM HOLD COVERED: W.E.F. _____ TO _____

FOR THE COMPANY

AXA Affin General Insurance Berhad