



K&R PROTECTION FORM

Please return to sender by email

To:	Your Fax/Email:
From:	Contact number: Email:
Date:	Pages:

Please provide all requested information below, attaching answers on a separate sheet if necessary.

1. Family or business name:	
2. Address (city and country):	
3. Business activity:	4. Approximate net worth:
5. Level of cover required (different options available): <input type="checkbox"/> USD1m per event / USD1m annual aggregate <input type="checkbox"/> USD1m per event / USD2m annual aggregate <input type="checkbox"/> Other, please state:	
6. Number of people to be covered:	
7. Where do you normally travel to?	
8. Do you currently have or have you at any time had kidnap insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, please provide full details on a separate piece of paper)</i>	
9. Do you or your family take security precautions? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, please provide full details on a separate piece of paper)</i>	
10. Is there a specific reason why your family or business might be a target for kidnapping? <i>(If yes, please provide full details on a separate piece of paper)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
11. Has your family or business suffered any threats in the past? <i>(If yes, please provide full details on a separate piece of paper)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



12. Declaration: I have read the above and declare to the best of my knowledge and belief that the statements provided are true and complete and that I have not knowingly withheld any information that is material to insurers in their assessment or acceptance of the risk.

Signed:

Name (please print):.....

Date:

Date: