



## Group Travel Quotation Request

Please complete this form and return to Vantage Professional Risks to obtain a quotation.

Please allow 24 hours for a response.

Should you require an urgent quotation, please call us when faxing so that the appropriate attention can be given.

**VANTAGE**  
PROFESSIONAL RISKS

Agency Number:	<input type="text"/>
Contact Name:	<input type="text"/>
Telephone No:	<input type="text"/>
Fax No:	<input type="text"/>

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Client Registered Name:	<input type="text"/>
Business Description/Trade:	<input type="text"/>
Address:	<input type="text"/>

### **Estimate Travel Pattern for next 12 months:**

	<b>Business Travel</b>		<b>Holiday Travel (If Required)</b>	
	No of Trips	Average Duration	No of Trips	Average Duration
<b>UK</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Europe</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>USA/Canada</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Rest of World</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Note: Insurance Premium Tax at the higher rate may be applicable to holiday travel. This will be advised when the quote is given.

### **Definition of Insured Persons**

	<b>Please Tick</b>
1) All directors and Employees of the Insured	<input type="checkbox"/>
2) All directors and Employees of the Insured including Accompanying Spouses/Partners &/or Dependent Children	<input type="checkbox"/>
3) All directors and Employees of the Insured including Accompanying Spouses/Partners &/or Dependent Children of Directors	<input type="checkbox"/>
4) Other _____	<input type="checkbox"/>

### **Cover Effective Time**

	<b>Please Tick</b>
1) Business Travel Outside the United Kingdom	<input type="checkbox"/>
2) Business Travel Outside the United Kingdom and travel in the UK involving an overnight stay &/or air flight	<input type="checkbox"/>
3) Business Travel Outside the United Kingdom including incidental holiday travel taken in conjunction with a business trip	<input type="checkbox"/>
4) Business Travel Outside the United Kingdom, travel in the UK involving an overnight stay &/or air flight, including incidental holiday travel taken in conjunction with a business trip	<input type="checkbox"/>
5) Business and Holiday Travel outside the United Kingdom	<input type="checkbox"/>
6) Business and Holiday Travel outside the United Kingdom and Business travel in the UK involving an overnight stay &/or air flight	<input type="checkbox"/>
7) Other _____	<input type="checkbox"/>

**Claims Experience or Accident &/or Sickness Record:**

Please provide details of all claims in the last 3 years if insurance has been purchased for the period, otherwise please advise details of any incidents of accident & illness that have occurred during this period.

**Additional information &/or specific requirements:**

For further information, please contact:

Vantage Professional Risks

41 Eastcheap  
London  
EC3M 1DT

Telephone 020 7655 8020

Email: [pi@vantageinsurance.co.uk](mailto:pi@vantageinsurance.co.uk)