



投保人/被保险人信息Information of Applicant & Insured

投保人名称Name of Applicant:张三  
保险期限Insurance Period:2017年yyyy 07月MM 26日dd 00时HH 00分mm 00秒ss 至 2017年yyyy 08月MM 04日dd 23时HH 59分mm 59秒ss(北京时间Beijing Time)  
总保险费Total Premium (RMB: yuan):120.00 元 被保险人人数合计Total Insured Person:1 人  
旅行目的地Destination:CHINA  
被保险人资料Insured Details:

姓名Name of Insured Person	证件号Document No.	出生日期Date of Birth
张三	G12345	1989/12/16

承保条件Terms and Conditions

各被保险人保险计划Each Insured Person Insurance Coverage: “全家保”境内旅行险-尊崇款

保障项目Benefit Schedule	各被保险人保险金额(人民币:元) Maximum Limit (RMB: Yuan)/Person
1. 意外身故及伤残保障 Accidental Death & Disablement	500,000
2. 急性病身故 Acute Sickness Death	50,000
3. 公共交通工具伤害双倍补偿 Common Carrier accident	500,000
4. 意外伤害医疗费用 (每次事故免赔额100元) Accidental Medical Expenses	25,000
5. 住院津贴(累计住院以20天为限) Hospital Cash Benefit(limited to 20 days)	150元/天
6. 食物中毒 Food Poisoning	3,000
7. 紧急医疗转运和送返 Medical Evacuations & Repatriation	60,000
8. 身故遗体送返 (仅含丧葬费用) Repatriation of Remains	30,000
9. 个人随身财物 (每件或每套行李或物品赔偿限额:RMB1,000) Loss of Personal Effects	3,000
10. 个人及宠物责任 Personal and Pet Liability Insurance	150,000

争议处理方式Dispute Resolution: 诉讼Litigation

身故保险金受益人Beneficiary:被保险人的法定继承人 The death benefits shall be payable to the estate of the Insured Person.

特别约定 Special Agreement:

1. 本保险保障地域范围为中国 (不包含香港、澳门和台湾)。本计划的投保年龄为0至70周岁。Territorial Coverage include mainland China .The insured age of this insurance plan is 0 to 70 years old.
2. 本保险计划的保障责任由被保险人、被保险人的配偶、被保险人的子女共同分享。配偶及子女以保险合同成立时法律上认可的关系来确定其身份。该保险计划子女限额2人。The coverage and the sum insured of the policy shall be shared by the insured, the spouse of the insured and the children of the insured. The spouse and children identity shall be determined according to the legal relationship upon the establishment of insurance contracts. The children of the policy is limited to 2 people.
3. 本保险的意外险保障部分扩展承保被保险人参加的由有正式营业执照且具有经营潜水活动资质的公司或机构组织的, 有潜水教练资质人员指导的, 非比赛性、非职业性及非商业性的潜水运动。潜水指在江、河、湖、水库、海、运河等水域进行的, 深度距离水面18米以内(含)的水下运动。This policy covers the non-competitive, non-professional and non-commercial diving activities organized by the diving entity or organization who has government license and professional qualification and accompanied by a dive master. Diving refers to underwater activities with diving depth no more than 18 meters in the river, lake, reservoir, sea and/or canal.
4. 18周岁以下的未成年人身故保险金额以保险事故发生时中国保监会规定的未成年人身故保险金额的相应限额为限。Any insured under 18 years old, the death benefit paid to the insured shall not exceed the limit as specified by China Insurance Regulatory Commission.
5. 在同一保险期间内, 每位被保险人仅限投保一份旅行意外伤害保险。若同一个被保险人就同一旅行同时投保2份(或以上)任何旅游险产品, 则仅按保额最高者作出赔偿。In one single trip duration, no more than one policy is granted to each insured. If one insured purchased two(or more) policies for the same trip, we shall only pay indemnity according to the policy with the highest amount of sum insured.
6. 被保险人在北京市平谷区、密云县、怀柔区所有医院的就医均不属于本保险合同认可医院, 建议被保险人去往其他区域二级以上公立医院就医。如因急诊情况导致被保险人必须在以上区域医院就近治疗, 保险人仅承担首次急诊治疗费用, 后续治疗要求被保险人去往其他区域二级以上公立医院就医。

保险人提示The Reminder of Insurer

1. 本保险提供24小时全球紧急医疗援助和旅行咨询热线服务。若您在旅行期间需要任何紧急援助或咨询服务、查询您保障的详细信息、办理理赔事宜, 请直接拨打利宝24小时全球救援热线电话(境外请拨+86 23 89867567, 境内请拨400 888 2008)。Please dial Liberty 24-hour worldwide emergency hotline (In overseas please dial +86 23 89867567, in territory please dial 400 888 2008), should you need any travel assistance service, advice, enquiries or handling claims.
2. 本保险的保险责任以相关保险条款的约定为准。Insurance responsibility see clauses please.
3. 为了保障您自身的权益, 请仔细阅读理解保险合同的各项约定, 尤其是免除保险人责任的约定。保险条款可通过保险人的业务人员获得或登录网站http://www.libertymutual.com.cn/查阅。如果您未收到保险条款, 或对包括保险条款在内的合同内容有任何疑问, 您可致电400 888 2008或向保险人的业务人员询问保险合同各项规定, 并听取保险人业务人员的说明。请确保您对保险人业务人员的说明完全理解, 没有异议。如未询问, 则视同已经收到保险条款并对合同内容完全理解无异议。In order to protect your own interest, please read carefully the terms and conditions of this policy, especially the exclusions. The policy wording is available from our salesperson or on our website: http://www.libertymutual.com.cn/. Please call our service hotline 400 888 2008 or contact our salesperson to enquire the terms and conditions of this policy. Please make sure that you fully understand the explanations of our salesperson. With no enquiry, you are deemed to have fully understood the terms of conditions of this policy.



保险人签章Signature of Insurer

保单处理信息Policy Handling Record

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