Not many things can free your soul as much as taking a trip somewhere you can find peace. Travelling the world can help expand your worldview, and with APA’s Globetrotter Travel Insurance you can rest assured that your travel plans are in safe hands.
APA TRAVEL INSURANCE

Travelling around the globe and exploring the wonders of the world has become easier. Whether on business or pleasure you require some essentials without which your trip would not be complete. One of these is the APA Globetrotter Travel Cover. It provides security for the unexpected emergencies and peace of mind that you will have assistance whenever you travel.

Who Can be Covered?
- Any person between the age of six months and 80 years
- A traveller within and outside Kenya
- Tourists - while in Kenya
- Persons on business trips

What Does it Cover?
- You have comprehensive coverage against local and international travel risks and hazards anywhere in the world
- You are covered from the time you leave your usual place of residence or business until your return for a period of up to 180 days

24 Hour Assistance
You will have access to 24 hour assistance in any emergency situation including:
- Rescue and Evacuation in the event of an accident or illness
- Emergency Medical Treatment

PERSONAL ACCIDENT

You and/or your beneficiaries will recieve compensation should you be involved in an accident that results in:
- Injuries
- Disability
- Death
MEDICAL EXPENSES
You will have your expenses arising directly out of the following covered:
• Evacuation or repatriation following accidental injury or illness
• Emergency Dental Care
• Follow-up treatment

PERSONAL LIABILITY
You are covered should you be found to be legally liable in the event of:
• Accidental damage to property belonging to a third party
• Accidental loss or damage to property belonging to a third party

TRAVEL DELAY/ MISSED DEPARTURE
You will be compensated for eventual delay of booked flights, including accommodation

HIJACK
In the event that you cannot reach your destination as a result of a hijacking, the cover compensates USD 100 for each full 24 hour period up to a maximum of 10 days or USD 500

LOSS OF BAGGAGE & DOCUMENTS
• You are covered for loss of passport or essential documents while travelling
• Loss or damage to checked baggage or personal effects
### APA GLOBETROTTER TRAVEL INSURANCE

### SCHEDULE OF COMPENSATION

The schedule of compensation applicable under each section of this policy for each insured during each period of travel

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Africa</th>
<th>Asia</th>
<th>Europe</th>
<th>Worldwide Basic</th>
<th>Worldwide Superior</th>
<th>Silver</th>
<th>Platinum</th>
<th>Excess</th>
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</thead>
<tbody>
<tr>
<td><strong>Medical Section</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>Emergency Medical Expenses</strong></td>
<td>$15,000</td>
<td>$15,000</td>
<td>$75,000</td>
<td>$100,000</td>
<td>$150,000</td>
<td>$200,000</td>
<td>$250,000</td>
<td>$100</td>
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<tr>
<td>Medical Evacuation In Case Of Illnesses Or Accident</td>
<td>$5,000</td>
<td>$5,000</td>
<td>$15,000</td>
<td>$15,000</td>
<td>$25,000</td>
<td>$30,000</td>
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<td>$100</td>
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<tr>
<td>Emergency Dental Care</td>
<td>$350</td>
<td>$350</td>
<td>$500</td>
<td>$500</td>
<td>$600</td>
<td>$750</td>
<td>$750</td>
<td>$50</td>
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<tr>
<td>Daily Hospital Benefits</td>
<td>50 per day Max 500</td>
<td>50 per day Max 500</td>
<td>50 per day Max 500</td>
<td>50 per day Max 500</td>
<td>75 per day Max 750</td>
<td>75 per day Max 750</td>
<td>24 hours</td>
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<tr>
<td><strong>Repatriation of Family Member Travelling With Insured</strong></td>
<td>$1,000</td>
<td>$1,000</td>
<td>$2,500</td>
<td>$3,000</td>
<td>$3,500</td>
<td>$4,000</td>
<td>$5,000</td>
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<tr>
<td>Repatriation of Mortal Remains/ Burial Expenses</td>
<td>$3,000</td>
<td>$3,000</td>
<td>$5,000</td>
<td>$5,000</td>
<td>$7,500</td>
<td>$7,500</td>
<td>$10,000</td>
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<tr>
<td>Follow Up Treatment In Kenya</td>
<td>$250</td>
<td>$250</td>
<td>$500</td>
<td>$500</td>
<td>$750</td>
<td>$1,000</td>
<td>$1,500</td>
<td>$50</td>
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<tr>
<td>Travel of One Immediate Family Member</td>
<td>$1,000</td>
<td>$1,000</td>
<td>$1,500</td>
<td>$1,750</td>
<td>$2,000</td>
<td>$2,500</td>
<td>$3,000</td>
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<tr>
<td>Emergency Return Home Following Death of a Close Family Member</td>
<td>Covered</td>
<td>Covered</td>
<td>Covered</td>
<td>Covered</td>
<td>Covered</td>
<td>Covered</td>
<td>Covered</td>
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</tr>
<tr>
<td><strong>Personal Accident</strong></td>
<td>$5,000</td>
<td>$5,000</td>
<td>$15,000</td>
<td>$25,000</td>
<td>$30,000</td>
<td>$35,000</td>
<td>$40,000</td>
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<tr>
<td>Loss of Checked Baggage</td>
<td>$250</td>
<td>$500</td>
<td>$1,000</td>
<td>$1,000</td>
<td>$1,500</td>
<td>$2,500</td>
<td>$3,500</td>
<td>$100</td>
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<tr>
<td>Delay of Checked Baggage</td>
<td>$100</td>
<td>$200</td>
<td>$500</td>
<td>$500</td>
<td>$1,000</td>
<td>$1,250</td>
<td>$1,500</td>
<td>6 hours</td>
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<td><strong>Travel Delay</strong></td>
<td>$100</td>
<td>$200</td>
<td>$350</td>
<td>$350</td>
<td>$500</td>
<td>$500</td>
<td>$750</td>
<td>$50 per 6 hours</td>
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<tr>
<td>Missed Departure</td>
<td>$100</td>
<td>$200</td>
<td>$500</td>
<td>$500</td>
<td>$650</td>
<td>$750</td>
<td>$1,000</td>
<td>$50.00</td>
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<td>Loss of Passport</td>
<td>$100</td>
<td>$200</td>
<td>$200</td>
<td>$250</td>
<td>$250</td>
<td>$300</td>
<td>$500</td>
<td>$50.00</td>
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<tr>
<td>BENEFITS</td>
<td>AFRICA</td>
<td>ASIA</td>
<td>EUROPE</td>
<td>WORLDWIDE BASIC</td>
<td>WORLDWIDE SUPERIOR</td>
<td>SILVER</td>
<td>PLATINUM</td>
<td>EXCESS</td>
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<tr>
<td>--------------------------------</td>
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<td>------------------</td>
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<tr>
<td>Legal Assistance</td>
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<td>$ 7,500</td>
<td>$ 7,500</td>
<td>$ 10,000</td>
<td>$ 10,000</td>
<td>$ 12,500</td>
<td>$ 15,000</td>
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</tr>
<tr>
<td>HIJACK</td>
<td>$ 500</td>
<td>$ 500</td>
<td>$ 800</td>
<td>$ 1,000</td>
<td>$ 1,000</td>
<td>$ 1,300</td>
<td>$ 1,500</td>
<td>12 hours</td>
</tr>
<tr>
<td></td>
<td>$ 100 per 24 hrs</td>
<td>$ 100 per 24 hrs</td>
<td>$ 100 per 24 hrs</td>
<td>$ 100 per 24 hrs</td>
<td>$ 100 per 24 hrs</td>
<td>$ 100 per 24 hrs</td>
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<tr>
<td>TRIP CANCELLATION AND CURTAILMENT</td>
<td>$ 750</td>
<td>$ 750</td>
<td>$ 1,000</td>
<td>$ 1,500</td>
<td>$ 2,000</td>
<td>$ 2,500</td>
<td>$ 3,500</td>
<td>$ 150</td>
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<tr>
<td>ADVANCE BAIL BOND</td>
<td>$ 5,000</td>
<td>$ 5,000</td>
<td>$ 10,000</td>
<td>$ 10,000</td>
<td>$ 12,500</td>
<td>$ 15,000</td>
<td>$ 20,000</td>
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<tr>
<td>PERSONAL LIABILITY</td>
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<td>$ 25,000</td>
<td>$ 75,000</td>
<td>$ 100,000</td>
<td>$ 150,000</td>
<td>$ 250,000</td>
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<td>$ 250</td>
</tr>
<tr>
<td>PREMIUM PER PERSON</td>
<td>AFRICA</td>
<td>ASIA</td>
<td>EUROPE</td>
<td>WORLDWIDE BASIC</td>
<td>WORLDWIDE SUPERIOR</td>
<td>SILVER</td>
<td>PLATINUM</td>
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</tr>
<tr>
<td>1 to 7 days</td>
<td>$ 14</td>
<td>$ 29</td>
<td>$ 26</td>
<td>$ 28</td>
<td>$ 32</td>
<td>$ 34</td>
<td>$ 50</td>
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<tr>
<td>8 to 10 days</td>
<td>$ 19</td>
<td>$ 37</td>
<td>$ 31</td>
<td>$ 41</td>
<td>$ 52</td>
<td>$ 68</td>
<td>$ 90</td>
<td></td>
</tr>
<tr>
<td>11 to 15 days</td>
<td>$ 27</td>
<td>$ 46</td>
<td>$ 41</td>
<td>$ 53</td>
<td>$ 65</td>
<td>$ 97</td>
<td>$ 165</td>
<td></td>
</tr>
<tr>
<td>16 to 21 days</td>
<td>$ 32</td>
<td>$ 61</td>
<td>$ 55</td>
<td>$ 67</td>
<td>$ 79</td>
<td>$ 125</td>
<td>$ 185</td>
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<tr>
<td>22 to 30 days</td>
<td>$ 40</td>
<td>$ 75</td>
<td>$ 67</td>
<td>$ 98</td>
<td>$ 106</td>
<td>$ 165</td>
<td>$ 215</td>
<td></td>
</tr>
<tr>
<td>31 to 60 days</td>
<td>$ 68</td>
<td>$ 130</td>
<td>$ 125</td>
<td>$ 155</td>
<td>$ 185</td>
<td>$ 250</td>
<td>$ 294</td>
<td></td>
</tr>
<tr>
<td>61 to 90 days</td>
<td>$ 90</td>
<td>$ 180</td>
<td>$ 170</td>
<td>$ 225</td>
<td>$ 235</td>
<td>$ 310</td>
<td>$ 349</td>
<td></td>
</tr>
<tr>
<td>91 to 180 days</td>
<td>$ 140</td>
<td>$ 280</td>
<td>$ 276</td>
<td>$ 290</td>
<td>$ 305</td>
<td>$ 370</td>
<td>$ 390</td>
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</tr>
<tr>
<td>Annual Multi Trip (maximum any one trip 45 days)</td>
<td>$ 210</td>
<td>$ 210</td>
<td>$ 235</td>
<td>$ 300</td>
<td>$ 375</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Annual Multi Trip (maximum any one trip 60 days)</td>
<td>$ 235</td>
<td>$ 235</td>
<td>$ 280</td>
<td>$ 350</td>
<td>$ 450</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Multi Trip (maximum any one Trip 90 days)</td>
<td>$ 250</td>
<td>$ 250</td>
<td>$ 355</td>
<td>$ 465</td>
<td>$ 500</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Rate (age up to 40 years)</td>
<td>180 days</td>
<td>180 days</td>
<td>265</td>
<td>285</td>
<td>350</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>365 days</td>
<td>$ 235</td>
<td>$ 235</td>
<td>$ 310</td>
<td>$ 350</td>
<td>$ 500</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Note:

- Maximum Insured age 80 years at the date of inception of policy
- Premium loaded by 25% for person aged between 66 to 70 years
- Premium loaded by 50% for person aged between 71 to 75 years
- Premium loaded by 100% for person aged between 76 to 80 years
- Premium for Worldwide, Worldwide Superior, Gold, Elite premiums are excluding USA/Canada
- For USA/Canada : 35% Loading on the above rates
- For Age 70 and over medical/doctor report required

SALIENT FEATURES

1. Pre-existing medical conditions or planned medical treatment are not covered
2. Policy Cancellation can only be effected prior to commencement of cover. No refunds will be allowed once cover has begun
3. In case of any medical emergencies requiring treatment, call and/or advice the International Assistance office on the numbers provided on your travel card / policy document.
4. Lodge your claim with APA Insurance Ltd within 30 days after the end of your journey and ensure the claim form and the relevant original receipts and/or invoices, travel documents and other related documents are attached
5. Disclose all material facts relating to your health when applying for cover. Failure to disclose may lead to nonpayment of benefits

Disclaimer:
The information contained in this brochure is for marketing purposes only. For detailed information on the product please contact your agent/broker or any one of our branches near you.

If interested in this cover, feel free to get in touch with our representatives through 0709 912 777 or email us at customer.service@apollo.co.ke
APPLICATION FORM

First Name ___________________ Middle Name ___________ Last Name ___________________
Date of Birth ___________ Passport No. ___________ Occupation _____________________
Postal Address_________ Phone Number___________ Email Address_____________________
Pin Number ____________ Destination (s) ___________________
Purpose of Trip _______________ Date of Departure_________ Date of Return __________
Total number of Days/Months _______________
Beneficiary(Name) ___________________________________ Contact Details ______________
Next of Kin (Name) ___________________________________ Contact Details ______________
Name and Address of the regular Doctor/last seen Doctor _________________________________

Product Selected: ☐ Africa ☐ Asia ☐ Europe ☐ Worldwide Basic  ☐ Worldwide Superior  ☐ Silver ☐ Platinum ☐ Student

MEMBER’S DECLARATION

I hereby declare that the above answers are true and complete and that I have withheld no information. I agree that this proposal and declaration shall be the basis of the contract between all insured persons and the underwriter. If the answers now given by me cease to be true and/or complete, prior to departure I undertake to give immediate written notification to the underwriter. I authorize any doctor or physician, healthcare practitioner, hospital, or other medical care facility, the Ministry of Health, or any person who has knowledge or records or has attended or examined me or any other named persons mentioned above to provide to the underwriter or to Assistance Company all information with respect to any illness, injury, medical history, consultations, medications, treatments and copies of all hospital or medical records for the purpose of this policy application and any subsequent claim. I authorize the underwriter or the Assistance Company to consult its existing files for this purpose. A photocopy or fax copy of this Declaration and Authorization shall be deemed as valid as the original.

INSURED SIGNATURE_______________________ DATE_______________________
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Website: www.apainsurance.org

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E-mail: info@apalife.co.ke
Website: www.apalife.co.ke

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Tel: +254 (0) 20 364 1000
E-mail: assetmanagement@apollo.co.ke
Website: www.apolloassetmanagement.co.ke

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P.O. Box 30389 - 00100, Nairobi
Tel: +254 020 364 1900
E-mail: info@apollocentre.org
Website: www.apollocentre.org

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E-mail: insure@reliance.co.tz