

Travel Delay Claim Form



THANK YOU FOR NOTIFYING US OF YOUR CLAIM
PLEASE COMPLETE ALL QUESTIONS - IF ANY QUESTION IS NOT APPLICABLE PLEASE STATE "N/A"

Name of Institution (University, College etc):

Certificate No:

Date on which Travel commenced:

Full Name of Person Covered:

Date of Birth:

Title (Mr, Mrs, Miss, Ms):

Full Address:

Postcode:

Tel No. (Business):

(Home):

Email:

Full Name of other Persons Covered

Date of Birth

Relationship

1

2

3

PLEASE ENSURE YOU SIGN THE DECLARATION ON THIS CLAIM FORM

TRAVEL DETAILS

Type of Travel: Business/Holiday

Please give reason for delay/missed departure:

Please state the **scheduled** times of travel:

Place of Departure:

Place of Destination:

Date of Departure:

Departure Time:

Please provide a copy of your original itinerary/travel documents

Please state the **actual** times of travel:

Date of Departure:

Departure Time:

Total length of delay in departure:

Please provide documentary evidence from the carrier/tour operator to confirm length and cause of delay or evidence that the Person Covered missed the scheduled departure

Please provide any additional information you feel would be of use to us:

DECLARATION

I declare that the information given is to the best of my knowledge and belief, full, true and correct.

Signed: _____ Date: _____

PLEASE ENSURE

(v)

You have completed ALL relevant questions on this claim form.

You have enclosed all requested information/documentation.

You have signed this claim form.

As failure to do so will result in delay in handling your claim.

Please return the completed claim form together with any enclosures to:

U.M.Association Ltd & Hasilwood Management Services Ltd,5 St Helen's Place ,London EC3A 6AB

Thank you for fully completing this form.