

# Travel Insurance Claim Form – Overseas Hospitalization

Filing a **travel insurance claim** for overseas hospitalization requires a detailed claim form to ensure smooth processing. This sample form includes essential sections for personal information, medical documentation, and treatment details. Using a well-structured form helps expedite your reimbursement and support during international medical emergencies.

1. Personal Information

Full Name

Passport Number

Policy Number

Contact Number (Overseas)

Email Address

2. Travel Details

Travel Dates (from – to)

Country of Visit

Purpose of Travel

3. Medical Incident Details

Date of Illness/Injury

Brief Description of Incident

Hospital Name

Hospital Address

Date of Admission

Date of Discharge

4. Claim & Expense Details

Total Amount Claimed (Currency & Amount)

**Preferred Payment Method**

**Bank Account Details (if reimbursement claimed)**

**List of Supporting Documents Attached**

Hospital bills, medical reports, discharge summary, passport copy, flight ticket, etc.

5. Declaration

**Declaration:**

I declare that the information provided above is true and to the best of my knowledge. I authorize the insurance provider to obtain medical and other information required to process my claim.

**Signature**

Type your full name here

**Date**