

Group Travel Insurance Claim Form Sample

Download our **group travel insurance claim form sample** to easily file your claims and ensure a smooth reimbursement process. This sample form guides you through the necessary details required by insurers for group travel policies. Simplify your claim submission with a clear and comprehensive template designed for group travelers.

Group Policy & Trip Information

Group Policy Number:

Group Name:

Trip Dates:

Start Date - End Date

Trip Destination:

Claimant Information

Claimant Name:

Date of Birth:

Passport/ID Number:

Contact Number:

Claim Details

Date of Incident:

Type of Claim:

Medical

Description of Incident:

Total Claim Amount (USD):

Bank Account Details (for reimbursement)

Account Holder's Name:

Bank Name:

IBAN/Account Number:

SWIFT/BIC:

Declaration

I/we declare that the information given is true and complete to the best of my/our knowledge. I/we authorize the insurance company to verify the information provided.

☐ I agree to the above declaration

Submit Claim