

## Cover and amount insured

### Sum Insured

- **Golf equipment** To be determined (See footnote)  
(Palos y accesorios)

Fire, theft or spoliation while clubs and accessories are being kept in the room of the caddy-master or of an officially recognised Golf Club's Professional Shop or while they are being transported by the insured party.

Breakage and/or damage during the course of play.

- **Hole in One** 210 €

Extraordinary expenses incurred in order to hold the Hole in One .

- **Third party Civil Liability** 100.000 €

- **Personal accidents**

Death, Permanent and medical expenses caused by accidental damage suffered in the Golf Club.

- Death 15.000 €
- Permanent Invalidity 15.000 €
- Medical Pharmaceutical Assistance 3.000 €
- Caddie Medical Pharmaceutical Assistance 3.000 €

- **All these levels of cover have the following annual price, based on the amount of insured capital chosen for Golf Equipment Cover (Clubs and Accessories):**

	Capital insured Golf equipment	Total annual premium
A.	1.200 €	76,52 €
B.	1.800 €	83,73 €
C.	2.400 €	93,64 €
D.	3.000 €	103,53 €

**LIBERTY MUTUAL GROUP** is one of the largest insurance and financial services groups in the world.

*Founded in 1912, it has almost 100 years of experience insuring the present and future of millions of people on every continent.*

*Experience, strength, resources and dedication... Liberty Group is committed to finding the very best means of providing its clients with peace of mind.*

For further information:



LI30GOL 04/06



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## Golf



**Make it your  
best shot**



**Liberty  
Seguros**

- Golf is a magnificent sport that includes relaxation, contact with nature and much concentration in order to hit a good shot.
- But what happens if your golf equipment gets damaged or is stolen? And have you thought what would happen if you suffered an accident or caused damage to other people when you were playing?
- So as not to think of anything else except playing, so that no-one will put you off your shot and you can be completely relaxed, Liberty Seguros has created your Golf policy, to cover any risk deriving from playing your favourite pursuit.

LIBERTY SEGUROS, Compañía de Seguros y Reaseguros, S.A. Domicilio Social: Obispo de Caceres, 2 - 28042 Madrid, R.M. MADRID, T. 21.275. 1.0.F. 83. Secc.8. H. M377.257, Insc. 15 - C.I.F. A-48/037642

## Insurance application

Branch/Modality  Mediator   
 Date of validity  Maturity

Name and surname   
 Identity number   
 Address   
 Town/City   
 Postcode   
 Province   
 Telephone   
 Policy replaced

## General Details

- Equipment description
- Where do you normally keep your clubs and accessories?
- Has any claim been made with the goods to be insured in the last 3 years? Yes  No   
 Please give details of cause and amount
- Have you any physical impairment, which might affect the Personal Accident Cover? Yes  No   
 Please give details
- Date of birth
- Profession
- Are you a member of a golf club? Which?
- Have you got an Accident policy with Liberty Seguros? Yes  No   
 Please give details
- Beneficiaries in the event of accidental death of the insured party (please indicate identity number)
- Please indicate the insured capital option for your golf equipment:  

A  B  C  D

The policyholder consents that the personal data on this application which are necessary to assess and restrict the risk will be included in the files of Liberty Seguros, S.A. in order to facilitate the preparation of the contractual relationship to exist between the interested party and the Insurance Company. You are able to exercise your rights to access, rectify, cancel the data or oppose with regards to the Company under the terms provided in the Data Protection Act dated 15/1999 on 13th December, by addressing correspondence to the Company's registered offices. The giving of this consent is essential in order to proceed with the contractual relationship and is impossible without the giving of such. The details may be ceded to other Insurance Companies or Public or private Organisms related with the insurance sector (such as Unespa, Tirea, Icca, etc.), for statistical-actuarial and fraud prevention ends and for coinsurance and reinsurance purposes. Likewise, the policyholder authorises Liberty Seguros, S.A. to send through commercial quotes and financial products. If you do not wish to receive any promotional information, please check the following box.

Signature:

## Standing Orders

It is essential to fill in these bank codes

Bank	Customer Account Code (C.A.C.)
Branch	Control Digits
Account number	

Policy number

Mr/Mrs.  N.I.F.-C.I.F.

Home address

Town/City  Postcode  Province

Bank or Savings Bank

Agency  Current account no. or savings book no.

Registered address

Town/City  Postcode  Province

Dear Sirs,  
 We should be grateful if you would make standing orders on receiving receipts from my account until further instructions to LIBERTY SEGUROS, S.A.  
 Yours faithfully,

Authorised signature

Place and date