

**NATIONAL INSURANCE COMPANY LTD**

DO-IV, 2nd Floor, Twin City Market Complex, M.J. Market, Hyderabad- 500001

**PROPOSAL FORM FOR GROUP MEDICLAIM POLICY**

Name and address of the Journalist	Details of Media Accreditation Card and DD
Surname of the Journalist (full) :	Media Accreditation Card No :
Name of the Journalist :	Valid upto :
Address- 1st line :	Issued By :
Address - 2nd line :	Name of the TV/Newspaper :
Town / City :	DD Number :
District :	Amount :
Landline Phone Number :	DD Date :
Mobile Phone Number :	Bank/Branch :
E-mail id :	

**Members to be covered**

Members	Name	Relation	Age- in completed years	GHPL ID Number ( in case of fresh applicants, write FRESH instead of id.no)	Past/Existing illness/diseases
Journalist					
Spouse					
Child-1					
Child-2					

**Details of the Media Office to which Journalist is reporting**

Newspaper/TV Channel Name :	Name of the Nominee :
Designation :	
Address- 1st line :	Relation with the Journalist :
Address - 2nd line :	
Town / City :	Sum Insured
District :	<b>Rs. 1,00,000/- on Floter Basis</b>
Landline Phone Numbers :	Period of Insurance
Mobile Phone Number :	From Date : AM/PM
E-mail id :	To Date : Midnight

I hereby declare and warrant that the above statements are true and complete. I consent and authorise the Insurers to seek medical information from any Hospital/ Medical practitioner who has at any time attended or may attend concerning any disease or illness which affects my physical or mental health. I agree that this proposal shall form the basis of the contract stated in the proposal form and it's questionnaires and if the replies are incorrect or untrue in any respect, the Insurance Company shall incur no liability in this insurance. I have read the prospectus and am willing to accept the coverage subject to the terms, conditions and exceptions prescribed by the Insurance Company therein.

Place : Signature of I & PR Dept in proof of Signature of the Proposer  
Date : receipt of the above mentioned Premium Date :

Encl : Photos of all family members (to be submitted every year for both for RENEWALS and FRESH applicants)  
Photo copy of valid Media Accreditation Card (to be submitted every year for both RENEWALS and FRESH applicants)  
Photo copy of previous year id.card issued by GHPL (to be submitted every year for RENEWALS only)