

安康寶家庭醫療保障計劃 CARING Family Medical Insurance Plan

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INSURANCE



安康寶家庭醫療保障計劃

CARING Family Medical Insurance Plan

CARING is specially designed for you and your family to protect against the high cost of medical treatments. It provides comprehensive coverage for your entire peace of mind and offers flexibility in the choice of benefits best suited to your need.

安康寶是專誠為您及您的家人而設計,為高昂的醫療費用作好準備。此計劃的保障範圍全面,設計具靈活性,使您能因應個人需要而選擇適合的保障,令您倍感安心。

Special Features of CARING

- A choice of 4 hospitalisation benefit levels to suit your need
- Free Annual Health Check-up profile
- Worldwide coverage with free Emergency Assistance Services
- Option for the Supplementary Major Medical Benefits which gives an extra protection for major illness and serious injury and cover 80% of eligible expenses in excess of the basic hospital cover
- Option for the Supplementary Outpatient Benefits
- The maximum age eligible for application is 64 and it is renewable up to the age of 100 (for Basic Hospitalisation Benefits)

CARING Health Check-up Profiles

CARING provides comprehensive medical coverage to release you from the worries of the expensive medical cost. It also gives you extra peace of mind by assisting you and your family to monitor your health status and detect any health disorder in an early stage through the provision of our health screening profiles. The insured family member is entitled to a FREE annual Basic Check-up Profile at one of the designated laboratory centres and may choose to take any of the following screening profiles at a preferential rate:

- Comprehensive Check-up Profile
- Gentleman Check-up Profile
- Lady Check-up Profile
- Cancer Markers

24-Hour Worldwide Emergency Assistance Services

In case emergency assistance is needed while travelling abroad for a period not exceeding 90 days, the Worldwide Emergency Assistance Services provide the following services:

- 24-hour telephone hotline service
- Emergency medical evacuation and repatriation (up to US\$1,000,000)
- Guarantee of any required hospital admission deposit up to US\$5,000
- Compassionate visit for more than 7 days of overseas hospitalisation (includes the cost of a returned economy class air ticket and hotel accommodation up to US\$250 per day at a maximum of US\$1,000)
- Return of minor children to home country or usual country of residence
- Hotel accommodation for convalescence (up to US\$250 per day at a maximum of US\$1,000)
- Unexpected return in the event of the death of a close relative
- Transportation of mortal remains (up to US\$1,000,000)
- Medical and legal referrals
- Lost luggage assistance
- Emergency travel service assistance
- Emergency medical assistance services in China

Worldwide Emergency Assistance Services are arranged by International SOS Assistance (HK) Limited.

安康寶之特色

- 4種住院保障可供選擇,以配合個人需要
- 免費每年健康檢查計劃
- 全球性保障及免費緊急支援服務
- 附加額外醫療保障可供選擇,為因嚴重疾病或受傷住院而所需費用超過基本住院保障賠償額提供保障,餘額將以百分之八十賠償
- 附加門診保障可供選擇
- 最高投保年齡為64歲及可續保至100歲(適用於基本住院保障)

安康寶健康檢查計劃

安康寶不僅為您提供週全的醫療保障,以應付高昂的醫療費用, 更顧及您及您家人的健康,透過我們提供的各項健康檢查計劃, 從而可於初期察覺病徵,及早作出防範及治療。投保之家庭成員 每年皆可享有免費之基本檢查計劃,於指定的化驗中心進行體檢 服務,更可以優惠價選擇以下任何體檢計劃:

- 詳細檢查計劃
- 男士檢查計劃
- 女士檢查計劃
- 癌症測試

24小時全球緊急支援服務

若受保人於海外遇上緊急事故,而旅程不超過90天,緊急支援可提供以下服務:

- 24小時電話諮詢服務
- 緊急醫療撤離及遺返(高達1,000,000美元)
- 提供高達5,000美元之入院按金保證
- 如在外地住院超過7天,可安排一位親屬前往探望(包括一張來回經濟客位機票及最多1,000美元住宿費,每天住宿費不超過250美元)
- 安排未成年子女返國或原居地
- 康復期間之酒店住宿(最多1,000美元,每天住宿費不超過 250美元)
- 因直系親屬去世而需臨時折返
- 運送遺體返國或原居地(高達1,000,000美元)
- 醫療及法律團體轉介
- 遺失行李協助
- 緊急旅遊支援
- 中國緊急醫療支援服務

全球緊急支援服務由國際(SOS)救援中心提供。

Basic Hospitalisation Benefits 基本住院保障

| | Benefit Level 保障等級 | HS600S Ward 大房 | HS1200S Semi-Private 二等房 | HS1700S Private 私家房 | HS2600S Private 私家房 | | |
|-----|---|---|---|--|--|--|--|
| | | С | over Limit per Disability (| (HK\$) 每症最高賠償額(港幣) | | | |
| 1. | Hospital Room & Board per day (Up to 180 days) 每日住院及膳食費(最高賠償180天) | \$600 | \$1,200 | \$1,700 | \$2,600 | | |
| 2. | Physician's Visit per day (Up to 180 days) 每日醫生巡房費(最高賠償180天) | \$600 | \$1,200 | \$1,700 | \$2,600 | | |
| 3. | Miscellaneous Hospital Services 醫院雜項費 | \$15,000 | \$17,000 | \$20,000 | \$25,000 | | |
| 4. | Surgeon's Fee (Subject to Surgical Schedule) 外科手術費 (按手術費用表計算) Complex Operation 複雜手術 Major Operation 嚴重手術 Intermediate Operation 普通手術 Minor Operation 簡單手術 | \$72,000 \$24,000 \$12,000 \$4,800 | \$87,000 \$29,000 \$14,500 \$5,800 | \$102,000 \$34,000 \$17,000 \$6,800 | \$126,000 \$42,000 \$21,000 \$8,400 | | |
| 5. | Anaesthetist's Fee 麻醉師費 Complex Operation 複雜手術 Major Operation 嚴重手術 Intermediate Operation 普通手術 Minor Operation 簡單手術 | \$21,600 \$7,200 \$3,600 \$1,440 | \$26,100 \$8,700 \$4,350 \$1,740 | \$30,600 \$10,200 \$5,100 \$2,040 | \$37,800 \$12,600 \$6,300 \$2,520 | | |
| 6. | Operating Theatre Fee 手術室費 Complex Operation 複雜手術 Major Operation 嚴重手術 Intermediate Operation 普通手術 Minor Operation 簡單手術 | \$21,600 \$7,200 \$3,600 \$1,440 | \$26,100 \$8,700 \$4,350 \$1,740 | \$30,600 \$10,200 \$5,100 \$2,040 | \$37,800 \$12,600 \$6,300 \$2,520 | | |
| 7. | Specialist's Fee 專科治療費 | \$5,000 | \$7,000 | \$9,000 | \$11,000 | | |
| 8. | Intensive Care Unit per day (Up to 15 days) 每日深切治療費(最高賠償15天) | \$5,000 | \$6,000 | \$7,000 | \$8,000 | | |
| 9. | Post Hospitalisation Treatment (Follow-up treatment within 31 days after discharge from Hospital) 出院後的治療費 (出院後31日內之跟進治療費) | \$1,000 | \$1,500 | \$2,000 | \$3,000 | | |
| 10. | Accidental Dental Treatment (within 31 days after the accident) 意外牙科治療費(意外發生後31天內) | \$2,000 | \$3,000 | \$4,000 | \$5,000 | | |
| 11. | Emergency Outpatient Treatment (Accident) (Outpatient treatment in a Hospital within 24 hours of an injury) 緊急門診費 (意外)(意外發生後24小時內之醫院門診部之治療費) | \$1,000 | \$1,500 | \$2,000 | \$3,000 | | |
| 12. | Home Nursing per day (Up to 60 days) 每日家庭看護費(最高賠償60天) | \$200 | \$300 | \$400 | \$500 | | |
| 13. | Companion's Bed for Child per day (Up to 60 days) 每日兒童住院之陪伴床位費(最高賠償60天) | \$200 | \$300 | \$400 | \$500 | | |
| 14. | Overall Limit per Disability 每次病症最高賠償限額 | \$454,200 | \$727,200 | \$965,200 | \$1,364,600 | | |
| 15. | Daily Cash Benefit (for confinement in general ward of Hospital Authority's hospital in Hong Kong) (up to 60 days) 每日住院現金保障 (入住香港醫院管理局轄下醫院之大房) (最高賠償60天) | \$200 | \$300 | \$400 | \$500 | | |
| 16. | Accidental Death Benefit 意外身亡保障 | \$20,000 | \$30,000 | \$40,000 | \$50,000 | | |

Emergency Assistance Services 緊急支援服務

Evacuation / Repatriation 醫療撤離及遣返服務

US\$1,000,000

Supplementary Major Medical Benefits (Optional) 附加額外醫療保障(自選)

Supplementary Major Medical Benefits (SMM) provides additional benefits for items 1 to 8 under the Basic Hospitalisation Benefits (BHB). If the medical expenses incurred under benefit items 1 to 8 of the BHB exceed the cover limit, 80% of the excess amount will be reimbursed, in which, the excess amount incurred for the Hospital Room & Board and Physician's Visit Benefits, can be reimbursed regardless of the number of days of the confinement.

此附加額外醫療保障為基本住院保障項目內1至8項提供額外賠償。若醫療費用超過基本住院保障項目內1至8項之最高賠償額,餘額可獲80%賠償,而當中之**每日住院及膳食費及每日醫生巡房費**不受最高賠償日數限制,均可獲得賠償。

| | MC1S Ward 大房 | MC2S Semi-Private 二等房 | MC3S Private 私家房 | MC4S Private 私家房 | | | |
|--------------------|---|--------------------------|----------------------------|----------------------------|--|--|--|
| Benefit Level 保障等級 | Cover Limit per Disability (HK\$) 每症最高賠償額(港幣) | | | | | | |
| | \$60,000 | \$120,000 | \$180,000 | \$240,000 | | | |

Note 附註:

If the hospital confinement is at a higher accommodation level than the insured benefit level, the Reimbursement % shall be reduced as follow:

如入住之住房等級 高於保障等級,賠償率將作以下調整:

- Ward to Semi-Private 大房升至二等房
 - 50% 25%
- Ward to Private 大房升至私家房 : 25
- Semi-Private to Private 二等房升至私家房 :50%

Supplementary Outpatient Benefits (Optional) 附加門診保障(自選)

| 100% Reimbursement 賠償額為100% | OP190S | OP220S | OP270S | OP340S |
|---|---------|-------------------|-------------|---------|
| 100 /6 Neillibul3elliellt 和良银网100 /6 | | Cover Limit (HK\$ |) 最高賠償額(港幣) | |
| Consultation at Physician's Office per visit per day (Maximum 25 visits per year) 每日一次的醫生診所治療費 (每年最多25次) | \$190 | \$220 | \$270 | \$340 |
| Physiotherapist's & Chiropractor's Treatment per visit per day (Maximum 10 visits per year) 每日一次的物理治療師及脊椎治療師之治療費 (每年最多10次) | \$190 | \$220 | \$270 | \$340 |
| Specialist's Consultation per visit per day (Maximum 10 visits per year) 每日一次的專科診治費(每年最多10次) | \$290 | \$330 | \$410 | \$510 |
| Diagnostic X-Ray & Laboratory Tests per year 每年X光檢驗及化驗費 | \$1,600 | \$2,000 | \$2,400 | \$2,800 |
| Prescribed Western Medicines & Drugs per year (From any legitimate source outside clinic) 每年處方西方藥物 (只限於診所以外購藥) | \$2,400 | \$3,000 | \$3,600 | \$4,200 |

Written referral by the attending physician is required for Physiotherapist's & Chiropractor's Treatment, Specialist's Consultation, Diagnostic X-ray & Laboratory Tests, Prescribed Western Medicines & Drugs (Consultation of Dermatologist, Ophthalmologist, Gynaecologist, Orthopaedist & Traumatologist, Paediatrician and Otorhinolaryngologist can be waived).

物理治療師及脊椎治療師治療費、專科診治費、X光檢驗及化驗費及處方西方藥物費須由主診醫生以書面推薦才可獲得賠償 (皮膚科醫生、眼科醫生、婦科醫生、骨科醫生、兒科醫生及 耳鼻喉科醫生之專科可獲豁免)。

This brochure gives only an outline of the terms and conditions of the insurance cover and any information given herein is subject to the precise terms and conditions in our Policy, a specimen copy of which will be furnished to you on request.

本小冊子乃保障條款之摘要,僅供參考之用。有關保障條款及規定一概以保單內容為準。如閣下需要保單樣本,請向本公司索取。

CARING Health Check-up Profiles 安康寶健康檢查計劃

Free Basic Check-up Profile 免費基本檢查計劃 (BP)

Anaemia & Blood Disease Screening 貧血及血病檢查

- Complete Blood Count (CBC) 血常規
- Platelet 血小板

Diabetic Screening 糖尿病檢查

• Glucose 血糖

Lipids Pattern Screening 血脂肪檢查

- Total Cholesterol 總膽固醇
- Triglyceride 三酸甘油脂

Medical Evaluation on Laboratory Reports 化驗報告評估

You are entitled to the following optional health check-up profiles at preferential rates. Please refer to the back of the application form for details of the fees. 您可以優惠價選擇以下自選健康檢查計劃。計劃費用請參閱申請表背部。

Optional Comprehensive Check-up Profile 自選詳細檢查計劃 (CP)

Anaemia & Blood Disease Screening 貧血及血病檢查

• ESR 紅血球沉降率

Blood Group and Rh Factor 血型及血因子類別

• ABO group & Rh-D 血型及Rh因子

Gout Screening 痛風症檢查

• Uric acid 尿酸

Heart & Lung Disease Screening 心肺病檢查

- Chest X-Ray X光肺片
- Electrocardiogram (ECG) 心電圖

Cardiac & Stroke Risk Evaluation 心臟病發率檢定及預防中風

- HDL cholesterol 高密度膽固醇
- LDL cholesterol 低密度膽固醇

Intestinal Disease Screening 陽病檢查

• Stool, Routine Examination 大便常規檢查

Liver Function Tests 肝功能測試

- SGOT 谷草轉氨
- SGPT 谷丙轉氨

Renal Function Tests 腎功能測試

- Urea 尿素
- Creatinine 肌酸酐
- Urine, Routine Examination 小便常規檢查

Thyroid Function Test 甲狀腺功能測試

• Thyroxine (T4) 甲狀腺素

Optional Gentleman Check-up Profile 自選男士檢查計劃 (GP)

Tumor Marker Tests 癌症指標測試

- EBV Antibodies 鼻咽癌病毒抗體
- Alpha Fetoprotein (Liver) 甲種胚胎蛋白(肝)
- Prostate Specific Antigen (PSA) 前列腺癌抗原

Optional Lady Check-up Profile 自選女士檢查計劃 (LP)

- Breast Examination 乳房檢查
- Trichomonas and Monilia Culture 念珠菌及滴蟲培養
- Pelvis Examination 盆腔檢查
- Pap Smear 柏氏子宮頸抹片檢查

Optional Cancer Markers 自選癌症測試 (CM)

The level of individual cancer markers (Cancer antigens) in the blood may reflect the related cancer cells in the body. The blood test is to assist to detect the cancers in an early stage.

個別癌症指標(癌抗原)於血液內之度數,能反映體內相關之癌細胞,可有效測試出初期癌症。

- CEA(Colon/Rectum Cancer 直腸/結腸癌)
- AFP(Liver Cancer 肝癌)
- CA125 (Ovary/Cervix Cancer 卵巢/子宮頸癌)
- CA19.9 (Pancreatic Cancer 胰臟癌)
- SCC (Respiratory, lung and digestive tracts 鱗狀細胞癌 - 肺/呼吸道/消化道)
- BetaHCG(Trophoblast 絨毛膜性腺癌)
- EBV(Naso-Pharyngeal Carcinoma 鼻咽癌)

Annual Premium Table (HK\$) 每年保費表 (港幣)

| Basic Hospitalisation Benefits 基本住院保障 | HS6 | 00S | HS1 | 2005 | HS1 | 700S | HS2 | 600S |
|--|----------|----------|----------|----------|----------|----------|----------|----------|
| Age Last Birthday 年齡 | M 男 | F女 |
| 0#-4 | \$2,024 | \$2,024 | \$3,026 | \$3,026 | \$4,000 | \$4,000 | \$5,439 | \$5,439 |
| 5 - 17 | \$1,578 | \$1,578 | \$2,359 | \$2,359 | \$3,118 | \$3,118 | \$4,241 | \$4,241 |
| 18 - 24 | \$1,596 | \$1,669 | \$2,386 | \$2,509 | \$3,152 | \$3,323 | \$4,295 | \$4,669 |
| 25 - 29 | \$1,652 | \$1,880 | \$2,477 | \$2,841 | \$3,278 | \$3,774 | \$4,471 | \$5,314 |
| 30 - 34 | \$1,802 | \$2,051 | \$2,702 | \$3,100 | \$3,575 | \$4,118 | \$4,877 | \$5,798 |
| 35 - 39 | \$2,075 | \$2,518 | \$3,142 | \$3,847 | \$4,178 | \$5,136 | \$5,722 | \$7,261 |
| 40 - 44 | \$2,264 | \$2,747 | \$3,428 | \$4,197 | \$4,558 | \$5,603 | \$6,243 | \$7,922 |
| 45 - 49 | \$3,311 | \$3,714 | \$5,062 | \$5,709 | \$6,761 | \$7,644 | \$9,566 | \$10,836 |
| 50 - 54 | \$3,612 | \$4,052 | \$5,522 | \$6,228 | \$7,375 | \$8,339 | \$10,435 | \$11,822 |
| 55 - 59 | \$4,995 | \$5,210 | \$7,689 | \$8,039 | \$10,305 | \$10,784 | \$14,618 | \$15,314 |
| 60 - 64 | \$6,448 | \$6,448 | \$9,970 | \$9,970 | \$13,388 | \$13,388 | \$19,025 | \$19,025 |
| *65 - 69 | \$8,237 | \$8,237 | \$12,737 | \$12,737 | \$17,103 | \$17,103 | \$24,304 | \$24,304 |
| *70 - 74 | \$10,486 | \$10,486 | \$16,214 | \$16,214 | \$21,772 | \$21,772 | \$30,940 | \$30,940 |
| *75 - 79 | \$12,771 | \$12,771 | \$19,463 | \$19,463 | \$26,491 | \$26,491 | \$37,642 | \$37,642 |
| *80 - 84 | \$14,936 | \$14,936 | \$22,567 | \$22,567 | \$31,923 | \$31,923 | \$45,360 | \$45,360 |
| *85 - 89 | \$15,855 | \$15,855 | \$23,956 | \$23,956 | \$33,886 | \$33,886 | \$48,148 | \$48,148 |
| *90 - 94 | \$16,668 | \$16,668 | \$25,180 | \$25,180 | \$35,618 | \$35,618 | \$50,607 | \$50,607 |
| *95 - 99 | \$17,348 | \$17,348 | \$26,204 | \$26,204 | \$37,067 | \$37,067 | \$52,665 | \$52,665 |

| Supplementary Major Medical Benefits(Optional) 附加額外醫療保障 (自選) (Renewal up to Age 75 only 只續保至75歲) | MC1S | | MC2S | | MC | T3 S | MC4S | |
|--|---------|---------|---------|---------|---------|-------------|---------|---------|
| Age Last Birthday 年齡 | M 男 | F女 | M 男 | F女 | M 男 | F女 | M 男 | F女 |
| 0# - 4 | \$608 | \$608 | \$908 | \$908 | \$1,200 | \$1,200 | \$1,632 | \$1,632 |
| 5 - 17 | \$474 | \$474 | \$707 | \$707 | \$935 | \$935 | \$1,272 | \$1,272 |
| 18 - 24 | \$479 | \$501 | \$716 | \$753 | \$945 | \$997 | \$1,289 | \$1,400 |
| 25 - 29 | \$495 | \$564 | \$743 | \$853 | \$983 | \$1,132 | \$1,342 | \$1,594 |
| 30 - 34 | \$541 | \$616 | \$811 | \$930 | \$1,072 | \$1,236 | \$1,463 | \$1,739 |
| 35 - 39 | \$623 | \$756 | \$943 | \$1,154 | \$1,253 | \$1,541 | \$1,716 | \$2,178 |
| 40 - 44 | \$679 | \$824 | \$1,029 | \$1,259 | \$1,367 | \$1,681 | \$1,873 | \$2,376 |
| 45 - 49 | \$993 | \$1,114 | \$1,519 | \$1,713 | \$2,028 | \$2,293 | \$2,870 | \$3,251 |
| 50 - 54 | \$1,084 | \$1,216 | \$1,657 | \$1,868 | \$2,212 | \$2,502 | \$3,130 | \$3,546 |
| 55 - 59 | \$1,498 | \$1,563 | \$2,307 | \$2,411 | \$3,091 | \$3,235 | \$4,386 | \$4,595 |
| 60 - 64 | \$1,934 | \$1,934 | \$2,991 | \$2,991 | \$4,017 | \$4,017 | \$5,707 | \$5,707 |
| *65 - 69 | \$2,471 | \$2,471 | \$3,821 | \$3,821 | \$5,132 | \$5,132 | \$7,291 | \$7,291 |
| *70 - 74 | \$3,146 | \$3,146 | \$4,865 | \$4,865 | \$6,531 | \$6,531 | \$9,283 | \$9,283 |

| Supplementary Outpatient Benefits (Optional) 附加門診保障 (自選) (Renewal up to Age 75 only 只續保至75歲) | OP190S | | OP2 | OP220S | | OP270S | | 405 |
|---|---------|---------|---------|---------|----------|----------|----------|----------|
| Age Last Birthday 年齢 | M 男 | F女 | M 男 | F女 | M 男 | F女 | M 男 | F女 |
| 0#-4 | \$5,525 | \$5,525 | \$6,433 | \$6,433 | \$7,835 | \$7,835 | \$9,728 | \$9,728 |
| 5 - 17 | \$3,376 | \$3,376 | \$3,930 | \$3,930 | \$4,788 | \$4,788 | \$5,945 | \$5,945 |
| 18 - 24 | \$2,652 | \$3,094 | \$3,088 | \$3,603 | \$3,761 | \$4,388 | \$4,670 | \$5,448 |
| 25 - 29 | \$2,707 | \$3,177 | \$3,152 | \$3,698 | \$3,839 | \$4,506 | \$4,766 | \$5,594 |
| 30 - 34 | \$2,735 | \$3,246 | \$3,184 | \$3,779 | \$3,878 | \$4,604 | \$4,815 | \$5,716 |
| 35 - 39 | \$2,763 | \$3,315 | \$3,216 | \$3,860 | \$3,917 | \$4,701 | \$4,864 | \$5,837 |
| 40 - 44 | \$3,039 | \$3,647 | \$3,538 | \$4,246 | \$4,309 | \$5,171 | \$5,351 | \$6,421 |
| 45 - 49 | \$3,315 | \$3,979 | \$3,860 | \$4,631 | \$4,701 | \$5,641 | \$5,837 | \$7,005 |
| 50 - 54 | \$3,535 | \$4,145 | \$4,116 | \$4,824 | \$5,013 | \$5,877 | \$6,224 | \$7,297 |
| 55 - 59 | \$3,755 | \$4,310 | \$4,371 | \$5,017 | \$5,325 | \$6,112 | \$6,610 | \$7,588 |
| 60 - 64 | \$4,219 | \$4,641 | \$4,912 | \$5,403 | \$5,983 | \$6,581 | \$7,429 | \$8,172 |
| *65 - 69 | \$5,485 | \$6,033 | \$6,386 | \$7,024 | \$7,778 | \$8,555 | \$9,658 | \$10,624 |
| *70 - 74 | \$7,172 | \$7,890 | \$8,350 | \$9,185 | \$10,171 | \$11,188 | \$12,629 | \$13,892 |

For renewal only 只適用於續保

Major Exclusions 主要不保事項

• Pre-existing/Congenital Conditions, sexually transmitted diseases, AIDS contracted before participation in this plan, pregnancy/abortion, cosmetic treatments, dental treatments (except for arising from accident), routine physical examinations, mental disorders, alcoholism/drug abuse, professional/hazardous sports, self-inflicted injury, illegal activities, war.

受保前已存在的疾病/先天性的疾病、性病、受保前已感染的愛滋病、懷孕/墮胎、整容手術、牙科治療 (除因意外事故引起)、例行身體檢查、精神病、酗酒/濫用藥物、專業/危險運動、蓄意自我毀傷、非法活動、戰爭。

- All illnesses occurring in the first 30 days of cover.
 - 起保後30日內發生的一切疾病。
- The following illnesses occurring in the first 180 days of cover: Stones in the urinary or biliary systems, Hypertension or Cardio-Vascular Diseases, Cataracts, Nasal condition requiring surgery, Haemorrhoids, Gastric and Duodenal Ulcers, Endometriosis, Tonsils requiring surgery, Diabetes Mellitus, Hyperthyroidism, Tuberculosis, Tumor of skin or muscular tissue, bone tumors or malignancies of blood or bone marrow.
- 起保後180日內發生的以下疾病:尿道結石或膽結石,高血壓或心血管疾病,白內障,需動手術的鼻腔病變,痔瘡,胃潰瘍、十二指腸潰瘍,子宮內膜異位,需動手術的扁桃腺病,糖尿病,甲狀腺機能亢進,肺結核,皮膚或肌肉組織腫瘤、骨腫瘤或血液或骨髓的惡性病。
- The following illnesses occurring in the first 12 Months of cover: Circumcision, Hallux Valgus, Tumor of internal organs. 起保後12個月內發生的以下疾病:包皮環切術、拇趾外翻、內部器官腫瘤。

IMPORTMENT NOTES

- You are required to disclose all material facts which you know FWD General Insurance Company Limited as an insurer would regard them as likely to influence the acceptance and assessment of the Application. If you are in doubt whether certain facts are material you should disclose them. We recommend you to keep a record (including a copy of the completed Application form) for your future reference of all information given. Providing correct answers and making sure we are informed is for your own protection, as failure to disclose such information may mean that your policy will not provide you with the cover you require and may even invalidate the policy altogether.
- The liability of the company does not commence until the Application has been formally accepted and the premium has been paid.

- 重要事項 1. 申請人必須提供所有可能影響富衛保險有限公司接受承保及評估之重要事實,如未能確定這項事實是否具有實質性的關係,應將該等事實填報,我們建議你將有關的資料 (包括申請表副本) 作記錄,以備日後作參考之 用。為確保你的利益,你應如實呈現報所有有關資料,否則此保單將可能無法提供你所需的保障,甚至可能會導致此保單無效。 2. 申請經正式接納及在保費繳付後,本公司承保之責任才開始生效。

[&]quot;0"year old means 15 days of age [#]「0」歲指出生滿15日

CORPORATE OVERVIEW

FWD Group spans Hong Kong & Macau, Thailand, Indonesia and the Philippines, offering life and medical insurance, employee benefits, pension, and general insurance across a number of its markets.

FWD is focused on creating fresh customer experiences, with easy-tounderstand products, supported by leading digital technologies. Through this customer-led approach, FWD will achieve its vision to become the leading pan-Asian insurer that changes the way people feel about insurance.

Established in Asia in 2013, FWD is the insurance business arm of investment group, Pacific Century Group.

Our Operations

Life Insurance

As one of the major authorised insurers in Hong Kong and Macau, FWD Life Insurance Company (Bermuda) Limited and FWD Life Insurance Company (Macau) Limited are committed to offering customers a comprehensive range of quality insurance products and services. Our extensive portfolio of insurance products includes individual life, group life, medical, education, retirement, and savings schemes, which are tailored to meet customers' needs throughout the different stages of their lives.

General Insurance#

FWD General Insurance Company Limited provides quality services to individual and corporate clients in the local market. The company offers various types of insurance products, ranging from property, household, marine, motor vehicles, individual and group medical, personal accident to travel etc.

Employee Benefits#

FWD Pension Trust Limited is committed to contributing its expertise to provide quality pension trust services (MPF and ORSO) to corporate and individual customers

Financial Planning#

FWD Financial Planning Limited is committed to setting the standard as a market leader in Independent Financial Advice, attracting the best financial advisers in the industry to deliver quality financial planning advice to clients. The customer-centric focus of the company ensures that clients receive the most suitable solution from advisers to meet their financial needs.

*operates in Hong Kong only

企業概覽

富衛集團業務遍佈香港、澳門、泰國、印尼及菲律賓,為客戶提供人壽及醫療保險、僱員福利、退休金及一般保險。

富衛致力以簡單、貼心的產品以及利用數碼科技,為客戶創造嶄新體驗。富衛秉持以客為先的服務理念及方針,矢志成為泛亞洲區領先的保險公司,實現創造保險新體驗的願景。

富衛於 2013 年在亞洲成立,是投資集團「盈科拓展集團」的保險業務公司。

業務運作

人壽保險

作為香港及澳門主要獲授權的保險公司之一,富衛人壽保險(百慕達)有限公司及富衛人壽保險(澳門)股份有限公司致力為客戶提供全面及優質的保險產品及服務。我們提供全方位的保險產品,包括個人壽險、團體人壽、醫療保險、教育、退休計劃以及儲蓄計劃等,充份照顧客戶於人生各階段的不同需要。

一般保險#

富衛保險有限公司致力為本港企業及個人客戶提供多元化的保險 產品和優質服務,產品包括財產、家居、貨運、汽車、個人及團 體醫療保障、個人意外以至旅遊保險等。

僱員福利#

富衛退休金信託有限公司致力以其專才為企業及個人客戶提供優質的退休金計劃信託服務(強積金及公積金)。

財務策劃

富衛財務策劃有限公司致力建構獨立理財建議的行業領導者標準, 以及吸納行業中最優秀的理財顧問,為客戶提供專業的財務意見。 我們秉承「以客為先」的服務理念,確保客戶獲得最適切的理財 方案。

#僅於香港提供

CARING Family Medical Insurance Application Form 安康寶家庭醫療保障申請表

Cardholder's Name 持卡人姓名



| Choice of Benefit 保障選擇 | | | Please | tick as an | ropriated | 請選擇並加 | 「、/ . ඈ |
|---|--|--|--|---|--|---|---|
| | | | | | _ | _ | _ |
| Basic Hospitalisation Benefits 基本住院保障 | | | 00S 🔲 | HS1200S | = | 1700S 🔲 | HS2600S 🛄 |
| Supplementary Major Medical Benefits (Optional Supplementary Outpatient Benefits (Optional | | | 905 🔲 | MC2S OP220S | = | C3S | MC4S U |
| Note: The level of optional Supplementary Major Medical 附註: 自選附加額外醫療保障之等級必須與基本住院保限 | | as the Basic Hospitalis | ation Benef | | ffective Date (呆日期 (日 / 月 | | |
| Applicant's Name 申請人姓名 | | HKID/Passport No. 身份證 / 護照號码 | | | Contac 聯絡電 | | |
| Applicant's Address 申請人地址 | | | | Email ac 電郵地 | | | |
| Name of Family Members to be Insured 投保之家庭成員姓名 | HKID/Passport No. 身份證 / 護照號碼 | Date of Birth (D/M/ 出生日期 (日/月/ | | Height(m) 身高 (米) | Weight(kg) 體重 (千克) | Occupation 職業 | Total Premium 保費總額 |
| Applicant 申請人 | | | | | | | |
| Spouse 配偶 | | | | | | | |
| Children 子女 | | | | | | | |
| Please read the following questions carefully & ansi | | | | | | Grand Total: I 總數: 決 | |
| Have you or any of your family members to be insured e or sanatorium? 您或任何投保之家庭成員有否任何疾病、受傷、接受 Have you or any of your family members to be insured | 外科手術或在醫院或療養 | 院內接受治療或觀察 | ? | | | Yes 是 🔲 | No 否 🔲 |
| test) in the last 5 years? 在過去五年内·您或任何投保之家庭成員有否接受或 3. Are you or any of your family members to be insured cu any symptoms which may indicate a health disorder? | rrently under medical obse | ervation or receiving a | | , | on or having | Yes 是 🔲 | No 否 🔲 |
| 您或任何投保之家庭成員是否正接受醫療觀察、治療 If your answer is"Yes" for any of the above questions (1) to (3 | | | ፭ 3 的答案為 | う「是」者・ | 請詳述如下: | Yes 是 🔲 | No 否 □ |
| | agnosis & Treatment 及治療詳述 | Period of Tro 治療期 | | _ | of Recovery 癒程度 | Ph | ress of Attending ysician E姓名及地址 |
| 4. Have you or any of your family members to be insured ev | er had any medical, accidei | nt or life insurance app | olication reje | cted or insura | nce policy | | |
| cancelled, rated or restricted or renewal declined? If yes, 您或任何投保之家庭成員有否在投保醫療、意外或人 若答案為是,請詳述: | | 保單被取消・増加保 | 費或附加限 | 制或拒絕續例 | ₹? | Yes 是 🔲 | No 否 🔲 |
| 5. Please provide place of Residence of the Person(s) to be i | | | Hong Kon | g 香港 |] Other 其他 | | |
| Average stay of the person(s) to be insured in Hong Kong Bank Name & Account No. for claim settlement (Account- | | | | 月 5蛯雄(5ロ | | 3.由慧人\ | |
| Bank Name | | anch Code 分行編號 | | | | | |
| Declaration and Authorisation 聲明及授權 1. I hereby declare that, to the best of my knowledge and belief, all pand FWD General Insurance Company Limited ("FWD"). I furthe information in respect of consultations, diagnostic test results, presconsidered as effective and valid as the original. 本人蓬比曼明在本中請表內填報之一切,就本人之所知所信,或機構,可以將部分或全部有關本人傷患之病歷 (包括但不限抗 Lereby confirm that I have read the attached Personal Informatic personal data may be used or dealt with as specified in the PICS. | er authorise any physician, ho criptions or treatment) with res 全部真實無訛。本人同意此申 於診症、診斷性檢驗結果、藥 | spital, insurance compai pect to any illness or injui i請表為本人與富衛保險 方或治療資料) 給予富衛 | ny or organiza ry of me to FW 有限公司 (「 ī或其已獲授相 | tion to furnish D or its authoris 富衛」) 之間序 堂之代理人。此 | part of or all me ed representative 听訂立合約之依 授權書之副本與 | edical history (inclue. A photocopy of th 據。本人授權任何]]正本具同等效力。 | ding but not limited to nis authorisation shall be 醫生、醫院、保險公司 |
| 本人確認已関畢夾附的收集個人資料聲明·並明白本人就本人的 Applicable to Insurance Broker only: The applicant understands, acknowledges and agrees that, as a result | | | | | | | commission during the |
| continuance of the policy including renewals, for arranging the said po s authorised to do so. The applicant further understands that the above agreement is neces 只應用於保險經紀: | | | orised person | who signs on be | half of the appli | cant further confirm | s to FWD that he or she |
| ^{た版円形 5 応放性処 申請人明白・確知及同意・富衛會就申請人購買及接受其簽發的係 員在此向富衛確認他 / 她已獲該法人團體授權。 申請人亦明白富衛必須取得申請人的同意・才可以處理其保險申記} | | [保期) 向負責安排有關 | 保單的獲授權 | 保險經紀支付伽 | 用金。如申請人 | 為法人團體・代表 | 申請人簽署的獲授權人 |
| | | Adviser/Agent/Bro | ker 理財顧同 | 引/代理人/約 | · · · · · · · · · · · · · · · · · · · | | |
| pplicant's Signature 申請人簽署 Date 日期 |] | Account Code 賬戶 | 號碼 | | | Contact Tel | 維絡電話 |
| Credit Card Payment Authorisation: 信用卡付款授權: ☐ VISA ☐ MasterCard Card Exp 信用卡有 | м 月 ү 年 | Credit Card No. 信用卡號碼 | | | | | |
| Mode of Payment付款期數: U Yearly 年繳 U Month I hereby authorise FWD General Insurance Company Limited to charge r | 註: 如選擇每月 | nt mode is monthly, the 付款, 月費等於年費乘以 the premium of this insura | 0.09. | • | | | 又此保險所應繳之保費。 |

Cardholder's Signature 持卡人簽署

Date 日期:

CARING Family Medical Insurance Application Form 安康寶家庭醫療保障申請表



Subscription for Optional Health Check-up Profile 自選健康檢查計劃參加表格

| Name of Applicant 申請人 | |
|--|--|
| Policy No. (for existing client only) 保單號碼 (只供現有客戶填寫) | |

| Name 姓名 | Comprehensive Check-up Profile (CP) 詳細檢查計劃 HK\$650 | Gentleman Check-up Profile (GP) 男仕檢查計劃 HK\$680 | Lady Check-up Profile (LP) 女士檢查計劃 HK\$680 | Cancer Markers (CM) 癌症測試 HK\$900 | Total Subscription (HK\$) 費用 (港幣) |
|---------|---|---|--|--|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | I . | l | I | Grand Total: HK\$ 總數:港幣 | |

Terms and Conditions:

- 1. The subscriber must be the insured person covered under a medical insurance policy with entitlement of the free annual Basic Health Check-up Profile.
- 2. This subscription form must be completed and submitted together with
 - a. the new application form; and
 - b. a cheque in amount of the total subscription fees make payable to "FWD General Insurance Company Limited".
- 3. All check-ups must be completed at the designated laboratory centre following the procedures of the user guide.
- 4. The subscription fees are non-refundable.

規則及條款:

- 1. 申請成員須為附設有每年免費基本檢查之醫療保障計劃之受保人。
- 2. 遞交填妥後之參加表格請連同:
 - a. 醫療保險之申請表;及
 - b. 面額為申請表格上總數之支票·請以「富衛保險有限公司」抬頭。
- 3. 所有健康檢查服務須依照服務使用指南在指定化驗中心完成。
- 4. 申請自選健康檢查計劃之費用不可退回。

| Applicant's/Policyholder's Signature 投保人 / 保單持有人簽署 | Date 日期 |
|--|-------------|

FWD General Insurance Company Limited

Personal Information Collection Statement

- From time to time, it is necessary for you to supply <u>FWD General Insurance Company Limited</u> (the "Company") with personal information and particulars in connection with the provision, continuation and administration of insurance or other financial services and products by the Company. Failure to provide the necessary information and particulars may result in the Company being unable to provide or continue to provide these services and products to you.
- The Company may also generate and compile information about you. Personal information and particulars provided by you and all information generated and compiled by the Company about you from time to time is collectively referred to as "Your Personal Data".
- 3. The purposes for which Your Personal Data may be used are as follows:
 - offering and providing services and products to you, and administering, implementing, maintaining, managing and operating such services and products which may include, without limitation, insurance, financial and wealth management services and products;
 - processing, assessing and determining any applications or requests made by you in connection with the Company's services or products, issuing or arranging insurance contracts and maintaining your account with the Company;
 - (iii) designing insurance and other financial services and products for customers;
 - (iv) marketing services and products to you (please see further details in paragraphs 5 to 8 below);
 - operating, maintaining and providing subsequent services in relation to the applications for services and/or products;
 - (vi) creating and maintaining the credit and risk related models of the Company:
 - (vii) processing and implementing payment instructions;
 - (viii) determining any amount of indebtedness owing to or from you, and collecting and recovering any amount owing from you or any person who has provided any security or undertaking for your liabilities;
 - (ix) exercising any rights that the Company may have in connection with the services and/or products provided to you;
 - verifying and conducting any eligibility, credit, physical, medical, security, underwriting and/or identity checks in connection with provision of services or products;
 - (xi) any purposes in connection with any claims made by or against or otherwise involving you in respect of any services and/or products provided by the Company, including, without limitation, making, defending, analysing, investigating, processing, assessing, determining, responding to, resolving or settling such claims;
 - (xii) performing policy review and needs analysis (whether or not on a regular basis);
 - (xiii) meeting disclosure obligations or requirements imposed by or for the purposes of any law, rules, regulations, codes of practice or guidelines (whether applicable in or outside Hong Kong) binding on the Company or any of its subsidiaries, holding companies, associated or affiliated companies of, or companies controlled by, or under common control with the Company (collectively, "the Group") including, without limitation, making disclosure to any legal, regulatory, governmental, tax, law enforcement or other authorities, self-regulatory or industry bodies such as federations or associations of insurers;
 - (xiv) meeting any present or future contractual or other commitment with any legal, regulatory, governmental, tax, law enforcement or other authorities, self-regulatory or industry bodies such as federations or associations of insurers in Hong Kong or any other jurisdictions that is assumed by or imposed on the Company or any member of the Group by reason of its financial, commercial, business or other interests or activities in or related to the relevant jurisdiction;
 - (xv) complying with any obligations, requirements, policies, procedures, measures or arrangement for sharing data and information within the Group and/or other use of data and information in accordance with any group-wide programmes from time to time for compliance with sanctions or prevention or detection of money laundering, terrorist financing or other unlawful activities; and
 - (xvi) fulfilling any other purposes directly related to (i) to (xv) above.
- 4. To facilitate the purposes set out in paragraph 3 above, the Company may transfer, disclose, grant access to or share Your Personal Data with the following parties (whether within or outside Hong Kong) and Your Personal Data may be transferred outside Hong Kong:
 - (i) members of the Group;
 - (ii) any person or company which is acting for or on behalf of the Company, or jointly with the Company, in respect of a purpose or a directly related purpose for which Your Personal Data was provided;
 - (iii) any person or company which is under a duty of confidentiality to the Company and has undertaken to keep such information confidential, provided that such person or company has a legitimate right to access such information (e.g. professional advisors of the Company);
 - (iv) any person or company carrying on insurance-related and/or reinsurance-related business which is engaged by the Company in connection with the Company's business;

- (v) any physicians, hospitals, clinics, medical practitioners, laboratories, technicians, loss adjustors, risk intelligence providers, claim investigation companies, administrators or other professional advisors which are engaged by the Company in connection with the Company's business:
- vi) any business partners of the Company ("Our Partners");
- (vii) any agents, contractors or service providers which provide administrative, credit reference, debt collection, telecommunications, computer, payment, printing, redemption or other services in relation to the operation of businesses of the Company; and/or
- (viii) any person or company to whom the Company or the Group is under an obligation or otherwise required or expected to make disclosure under the requirements of any law, rules, regulations, codes of practice or guidelines (whether applicable in or outside Hong Kong) including, without limitation, any legal, regulatory, governmental, tax, law enforcement or other authorities, self-regulatory or industry bodies such as federations or associations of insurers.
- The Company is allowed to (i) use Your Personal Data in direct marketing only if you consent or do not object, or (ii) provide Your Personal Data to another person or company for its use in direct marketing only if you consent or do not object in writing.
- 6. In connection with direct marketing, the Company intends:
 - to use your name, contact details, services and products portfolio information, financial background and demographic data held by the Company from time to time in direct marketing;
 - (ii) to market the following classes of services and products offered by the Company, other members of the Group and/or Our Partners from time to time:
 - a. insurance services and products;
 - b. wealth management services and products;
 - c. financial services and products:
 - d. reward, loyalty or privileges programmes and related services and products; and
 - e. donations and contributions for charitable and/or non-profit making purposes.
 - (iii) to provide Your Personal Data described in paragraph 6(i) above to any members of the Group and/or Our Partners for their use in direct marketing the classes of services and products described in paragraph 6(ii) above.
- If you do NOT wish the Company to use Your Personal Data in direct marketing or provide Your Personal Data to other persons or companies for their use in direct marketing, please tick (\(\sigma\)) the appropriate box(es) below to exercise your opt-out right.

| | Please do | not send | direct | marketing | information | to ı | me. |
|--|-----------|----------|--------|-----------|-------------|------|-----|
|--|-----------|----------|--------|-----------|-------------|------|-----|

- ☐ Please do not provide my personal data to other persons or companies for their use in direct marketing.
- 8. You may also write to the Company at the address below to opt out from direct marketing at any time.
- 9. Under the Personal Data (Privacy) Ordinance:
 - you have the right to request access to Your Personal Data held by the Company and request correction of any of Your Personal Data which is incorrect; and
 - (ii) the Company has the right to charge you a reasonable fee for processing and complying with your data access request.
- 10. Requests for access to or correction of Your Personal Data should be made in writing to:

Corporate Data Protection Officer

FWD General Insurance Company Limited

1st Floor, FWD Financial Centre

308 Des Voeux Road Central

Hong Kong

Should you have any queries, please do not he sitate to call our Customer Service Hotline 3123 3123.

11. In case of discrepancies between the English and Chinese versions, the English version shall apply and prevail.

I have read and I understand and accept this Personal Information Collection Statement.

| Signature: |
|---|
| Name: |
| Name of applicant/individual to whom this Statement is given) |
| HKID/Passport number |

富衛保險有限公司

<u>收集個人資料聲</u>明

- 1. 在<u>富衛保險有限公司(「本公司」)</u>提供、延續及管理保險或其他 金融服務及產品時、閣下需要不時向本公司提供個人資料及詳情。 如未能提供所需資料及詳情、可能會導致本公司無法向閣下提供或 繼續提供有關服務及產品。
- 本公司亦可製作及匯編與閣下有關的資料。閣下提供的個人資料及 詳情以及本公司不時製作及匯編與閣下有關的所有資料,以下統稱 為「閣下的個人資料」。
- 3. 閣下的個人資料可能用於以下用途:
 - (i) 向閣下要約及提供服務及產品·管理、執行、維持、處理及運 作有關服務及產品·包括但不限於保險、金融及財富管理服務 及產品:
 - (ii) 處理、評估及決定閣下就本公司的服務或產品而提出的任何申 請或要求;發出或安排保險合約,以及維持閣下在本公司的 賬戶:
 - (iii) 為客戶設計保險及其他金融服務及產品;
 - (iv) 向閣下提供服務及產品銷售(有關詳情·請參閱下文第5至 8段);
 - (v) 運作、維持有關申請之服務及/或產品及提供相關之後續 服務;
 - (vi) 建立及維持本公司的信貸及風險相關模型;
 - (vii) 處理及執行付款指示;
 - (viii) 釐訂任何欠付閣下或閣下所欠的負債金額·及向閣下或任何為 閣下的債務提供擔保或承諾的人士收取及追討欠款;
 - (ix) 行使本公司就向閣下提供服務及/或產品而可能享有的任何 權利:
 - (x) 就提供之服務或產品作出及進行資格、信貸、身體、醫療、 擔保、承保及/或身份核証;
 - (xi) 用於任何因本公司提供的產品及/或服務而由閣下提出或本公司對閣下提出的申索·包括但不限於作出、抗辯、分析、調查、 處理、評核、決定、回應、解決或和解有關申索;
 - (xii) 進行保單審閱及需求分析(不論是否定期進行);
 - (xiii) 本公司或其任何附屬公司、控股公司、聯營或聯屬公司·或本公司控制的公司或與本公司受共同控制的公司(統稱「本集團」)根據任何法律、規則、規例、實務守則或指引(不論在香港境內或境外適用)要求而須作出披露·包括但不限於向任何法定機構、監管機構、政府機構、稅務機構、執法機構或其他機構、獨立監管或行業團體(如保險業聯會或協會等)作出披露;
 - (xiv)履行任何本公司或本集團任何成員機構現有或將來之合約義務 或與其他在香港或其他區域的法定機構、監管機構、政府機 構、稅務機構、執法機構或其他機構、獨立監管或行業團體(如 保險業聯會或協會等).因其相關之金融、商業、業務或其他 利益或活動而承擔之義務;
 - (xv) 遵守任何於本集團內進行的數據及資料共享及/或其他數據及 資料用途的責任、要求、政策、程序、措施或安排以符合任何 制裁、防止或偵查洗黑錢、恐怖分子資金籌集或其他非法活動; 及
 - (xvi) 履行與上文第 (i) 至 (xv) 段直接有關的其他用途。
- 4. 為達成上文第3段列出的用途·本公司可能將閣下的個人資料轉移、 披露、讓其查閱或與以下各方(不論在香港境內或境外者)共同使 用,而閣下的個人資料有可能被轉移往香港境外:
 - (i) 本集團的成員機構;
 - (ii) 任何人士或公司受本公司指示或代表本公司或與本公司共同處理閣下提供的個人資料以達到提供有關資料之目的或直接相關之目的;
 - (iii) 對本公司負有保密責任並承諾將有關資料保密的任何人士或公司·而此人士或公司須有合法權利查閱有關資料(例如:本公司的專業顧問);
 - (iv) 任何因本公司業務而聘用之經營保險相關及/或再保險相關業務之人士或公司;

- (v) 任何因本公司業務而聘用的治療師、醫院、診所、醫生、化驗所、技師、損失理算人、風險情報供應商、索賠調查公司、行政管理人士或其他專業顧問;
- (vi) 任何本公司的業務夥伴(「本公司之夥伴」);
- (vii) 向本公司之經營業務提供行政、信貸資料庫、債務追討、電訊、電腦、付款、印刷、贖回或其他服務的任何代理人、承包商或服務供應商;及/或
- (viii) 任何本公司或本集團負有責任或須要或預期要根據任何法律、規則、規例、實務守則或指引(不論在香港境內或境外適用) 作出披露的人士或公司·包括但不限於任何法律機構、監管機構、政府機構、稅務機構、執法機構或其他機構、獨立監管或行業團體(如保險業聯會或協會等)。
- 5. 容許本公司 (i) 在閣下同意或不反對的情況下,使用閣下的個人資料 作直接促銷用途,或 (ii) 在閣下以書面方式同意或不反對的情況下, 將閣下的個人資料提供予其他人士或公司作其直接促銷用途。
- 6. 就直接促銷而言,本公司擬:
 - (i) 使用本公司不時持有的閣下姓名、聯絡資料、服務及產品組合 資料、財務背景及人口統計資料作直接促銷用途;
 - (ii) 銷售本公司、本集團其他成員機構及/或本公司之夥伴不時提供的下列服務及產品:
 - a. 保險服務及產品;
 - b. 財富管理服務及產品;
 - c. 金融服務及產品;
 - d. 獎賞、客戶忠誠或優惠計劃及相關服務及產品;及
 - e. 為慈善及/或非牟利用途的捐款及捐贈。
 - (iii) 將上文第 6(i) 段所載閣下的個人資料提供予本集團成員機構及 / 或本公司之夥伴,讓其用於直接促銷上文第 6(ii) 段所載的服務或產品。
- 7. 若閣下不希望本公司使用閣下的個人資料,或將閣下的個人資料提供予其他人士或公司作直接促銷用途,請在以下有關方格內加上剔(V)號,藉以行使閣下不同意此項安排的權利。
 - □ 請不要將直接促銷資料發給本人。
 - □ 請不要將本人的個人資料提供予其他人士或公司作其直接促銷 用途。
- 8. 閣下亦可於任何時間致函本公司以下地址,藉以拒絕直接促銷。
- 9. 根據《個人資料(私隱)條例》:
 - (i) 閣下有權要求查閱本公司所持有閣下的個人資料·並要求改正 閣下的不正確個人資料;及
 - (ii) 本公司有權就處理及遵行閣下的查閱資料要求而收取合理費用。
- 10. 查閱或改正閣下的個人資料要求·應以書面形式向下列人士提出:

資料保護主任

富衛保險有限公司

香港德輔道中308號富衛金融中心1樓

如閣下有任何疑問,敬請致電本公司之客戶服務熱線 3123 3123。

- 11. 中英文本如有歧異,概以英文本為準。
- 本人已細閱及本人明白及接受本收集個人資料聲明。

| 名: | _ |
|-------------------|---|
| | |
| 名: | |
| 申請人 / 獲發本聲明人士姓名) | |
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| | |