



TRAVEL INSURANCE POLICY

This is your travel insurance cover from Solidarity - First Insurance. Please ensure that you print this and take with you when you travel. Please read this policy certificate carefully as well the policy wording, which was included with this certificate. The certificate and policy wording includes details of all persons insured on this policy and the terms and conditions that apply.

Policy Holder :	KHALED KHADER ABDELKARIM KAFABI	Policy Number :	2022 / 36579
Passport :	P481837	N. Passengers :	1
Mobile Number :	962796666830		
Address :	5 Ibn Rushod St, Amman		
Nationality :	Jordan		
Date Of Birth :	17/05/2000		
Coverage Period		Premium :	As Agreed
Effective from :	12/09/2022	Country of Origin :	Jordan
Expiry :	02/10/2022		
Policy period :	21		
Destination Area: :	Schengen Countries		
Product :	Schengen		

Name of Insured Person	Gender	Nationality	Passport	Date Of Birth
KHALED KHADER ABDELKARIM KAFABI	Male	Jordan	P481837	17/05/2000

Cover Table/Schedule of Covers Product Benefits & Limitations "Schengen " Personal Assistance

Guarantees	Limit Up to (EUR)
1- Medical, Hospitalization and Surgical expenses abroad, due to illness. Including COVID- 19 (Ages above 75 years are not covered).	30,000 Deductible: 75
2- Pharmaceutical expenses abroad, due to illness.	30,000 Deductible: 75
3- Medical, Hospitalization and Surgical expenses abroad, due to accident	30,000 Deductible: 75
4- Pharmaceutical expenses abroad, due to accident	30,000 Deductible: 75
5- Transport to a properly equipped medical facility in case of illness.	30,000
6 - Transport to a properly equipped medical facility in case of accident.	30,000
7 - Emergency dental care abroad	750
8 - Repatriation of mortal remains to the country of residence	Actual expenses
Personal Accidents	
Guarantees	Limit Up to (EUR)
1 - Personal Accidents	30,000

For assistance 24/7 and 365 days please call

Arab Assist - Jordan

- +962 6 5008119

-travela@mapfre.com

Note : This Policy cannot be cancelled by the insured

AUTHORIZED SIGNATORY AND STAMP



INSURED PERSON SIGNATURE