American International Group, Inc. (AIG) is a leading global insurance organization. Building on 100 years of experience, today AIG member companies provide a wide range of property casualty insurance, life insurance, retirement solutions, and other financial services to customers in in approximately 70 countries and jurisdictions. These diverse offerings include products and services that help businesses and individuals protect their assets, manage risks and provide for retirement security. AIG common stock is listed on the New York Stock Exchange.

AIG Insurance Hong Kong Limited is a wholly owned subsidiary of the American International Group Inc.

 $\label{local-problem} Additional information about AIG can be found at www.aig.com \mid YouTube: www.youtube.com/aig \mid Twitter: @AIGinsurance www.twitter.com/AIGinsurance \mid LinkedIn: www.linkedin.com/company/aig$

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美國國際集團(AIG)為全球保險業界之翹楚。建基於100年的經驗,時至今日AIG 成員公司為約70個國家和地區的客戶提供廣泛的財產保險、人壽保險、退休產品及 其他金融服務。這些多樣的產品及服務幫助企業和個人保護其資產、管理風險和提 供退休保障。AIG 的股票在紐約證券交易所上市。

美亞保險香港有限公司為美國國際集團(AIG)成員。

本公司相關資料,詳列於本公司網站

www.aig.com | YouTube: www.youtube.com/aig | Twitter: @AlGinsurance www.twitter.com/AlGinsurance | LinkedIn: www.linkedin.com/company/aig

AIG為美國國際集團之全球產物保險、壽險與退休險及保險營運之行銷品牌。更多有關資訊,請造訪集團網站 www.aig.com。美國國際集團的各項保險產品與服務是透過其子公司或關係企業提供,但並非於所有國家及地區皆有提供,且實際承保範圍應以保單條款為準。非保險之產品與服務可能由獨立第三方提供。特定財產傷無保可能由其他保險公司提供,而該類公司一般不參與國家擔保資金,因此受保人不受該類資金保護。



AIG Insurance Hong Kong Limited (Macau Branch)
Unit 506, 5/F, AIA Tower,
No. 251A-301, Avenida Comercial de Macau
美亞保險香港有限公司 (澳門分行)
澳門商業大馬路251A至301號友邦廣場5樓506室

Hotline 客戶熱線: 2835 5602 / 6321 3633 / 0800227 Fax 傳真號碼: 2835 5299

Email 電郵:enquiry.mo@aig.com Website 網站:www.aig.com.mo Personal Insurance 個人保險



Claim Procedure 索償程序



This brochure provides only a summary of the policy benefits. Coverage under the policy shall be subject to the terms, conditions and exclusions of the policy. A copy of the policy is available from AIG Insurance Hong Kong Limited. 本單張僅提供保單摘要,有關保單條款及不承保事項請參看保單條款及細則。如需要保單條款及細則,歡迎向本公司索取。





Golf Insurance

高爾夫球保障計劃



30LF (MGCC) 03/2023

Summary of Coverage 保障範圍	Maximum Limit pe 每年最高保障	
	Standard Plan 基本保障	Deluxe Plan 超級保障
Third Party Legal Liability 第三者公眾法律責任	\$3,000,000	\$6,000,000
Covers legal liability to third party for accidental bodily injury and/or damage to property while playing or practicing golf at any regulated golf course, subject to Macau laws and jurisdiction. (Property damage deductible of MOP\$500 in respect of each and every loss) 於認可高爾夫球球會中練習或打球時因意外導致第三者受傷及/或財物損毀之法律責任,並以澳門法律為準。 (投保人須自負每次財物索償之首MOP\$500)		

(□) 個人財物

Covers accidental damage to clubs and loss of golf bags, trolleys and personal effects, caused by insured perils at regulated golf course 於認可高爾夫球球會內因承保風險 而損毀球桿、或損失球袋、高爾夫球 手推車及隨身私人物品。

- Golf Equipment 高爾夫球用具 • Iron Max Limit / Item 鐵桿每件最高賠償額 • Wood Mox Limit / Item 木桿每件最高賠償額 - Personal Effects 個人財物 • Max Limit / Item 每件最高賠償額	\$20,000 \$1,000 \$2,000 \$5,000 \$1,000	\$30,000 \$1,500 \$2,500 \$7,500 \$1,500
3. Hole-In-One 一桿入洞 Indemnifies you for expenses incurred for hospitality as a result of scoring a hole-in-one at any regulated golf course with a par of 65 or more. 於認可高爾夫球球會內 (以多於標準桿65桿或以上設計為準) 創下一桿入洞的佳績,支付所需的祝捷費用。	\$15,000	\$20,000
- 1st "Hole-In-One"Max Limit 首文 "一桿入洞" 最高賠償額 - 2nd"Hole-In-One"Max Limit 第二次 "一桿入洞" 最高賠償額 - 3rd"Hole-In-One"Max Limit 第三次 "一桿入洞" 最高賠償額	\$3,000 \$5,000 \$7,000	\$5,000 \$7,000 \$8,000
4. Personal Accident	\$300,000	\$600,000

(Age Limit 受保年齡: 16-65) Covers accidental death and

disablement which you may suffer while playing or practicing golf at any regulated golf course. 於認可高爾夫球球會中練習或打球時因

意外導致身故或傷殘。

	Standard Plan 基本保障	Deluxe Plan 超級保障
Minimum Premium (MOP\$) 最低保費額 (澳門幣\$)	\$300	\$680

Family Extension	Standard Plan	Deluxe Plan	
加購家庭成員計劃保障	基本保障	超級保障	
Minimum Premium per member (MOP\$) 每位家庭成員的最低保費(澳門幣\$)	\$150	\$150	

Discount offer for	Standard Plan
Macau Golf & Country Club Members*	15% off
澳門高爾夫球鄉村俱樂部會員	基本保障
專享折扣優惠*	85折

- *Applicable for AIG Direct sales channel (non-intermediated) customers only.
- *只限AIG直接銷售渠道(不經中介人)之客戶。

The "Family Extension" is only available to the following immediate family members who are living in the same household and *have not had any claim under any golf insurance cover during the past three (3) years:

家庭計劃成員須為與閣下同住的以下人士,*並在過去三(3)年內,未曾於任何高 爾夫球保險計劃提出索償:

- 11 Spouse 配偶:
- 2) Children (aged 3 or above) 子女 (年齡為3歲或以上);
- Parents / Parents-in-law 父母 / 配偶父母 31
- Siblings (aged 3 or above) 兄弟姊妹 (年齡為3歲或以上)

The coverages and limits of your Golf Policy will remain unchanged. 保單的保障範圍及保額均維持不變。

Note 注意:

- 1. Professional golfer is not covered under this plan. 此保障計劃不承保職業高爾夫球員。
- 2. The Proposer must be (1) a Macau resident and is normally residing in Macau, or (2) a holder of a valid identification document issued by the Macau government to allow the Proposer to normally reside in Macau during the policy period 投保人必須(1)為澳門居民及經常居住於澳門,或(2)持有由澳門政府簽發的有效身份證 明文件以容許該投保人於保單有效期間經常居住於澳門。
- 3. The Proposer must be aged 18 or above. (For Personal Accident coverage, age limit is from 16 to 65.) 投保人必須年滿18歲或以上(個人意外保障受保年齡為16至65歲)。
- 4. The benefit for "Hole-In-One" is limited to one hospitality for each hole-in-one scoring 每次 "一桿入洞" 之獎賞只限於一次祝捷飲食之費用。
- 5. Except for Children and Siblings, who must in each case be aged 3 or above, we accept insureds at any age. However, in such case, if the age of an insured is less than 16, or at 66 or above, Golf Insurance Section 4 – Personal Accident cover will be excluded from that insured person. Please refer to Golf Insurance Policy wordings for details.

除子女及兄弟姊妹須各自為3歲或以上,參與計劃的家庭成員並沒有年齡限制。如受 保人的年龄在 16-65 歲的範圍以外,高爾夫球保障計劃中第四項「個人意外保障」 將不適用於該受保人。詳情請參閱保單條款內容及細則。

6. *If your family member has had any claim under any golf insurance cover during the past three (3) years, please apply for a standalone golf insurance policy separately. *如閣下的家庭成員在過去三(3)年內曾於任何高爾夫球保險計劃提出索償,請分別 申請個人獨立的高爾夫球保險。

> 澳門高爾夫球 鄉村俱樂部會員



Macau Golf & Country Club Members'discount offer

Deluxe Plan 20% off 超級保障 8折



Golf Insurance Proposal Form

宫爾夫球保障計劃投保表格

(For Macau Golf & Country Club Members)

1月17日ンマール・ア・バー・エーニュ			
(澳門高爾夫球鄉村俱經	幹部會員專用)		
Information of the Proposer 投行 Macau Golf & Country Club Member No.: 澳門高爾夫球鄉村俱樂部會員編號: _	呆人資料 (USE BLOCK L	ETTER 請以英	文正楷填寫)
Name 姓名:			
Macau ID Card No. 澳門身份證號碼: _	()	Sex 性別:	
Occupation 職業:			
Email 電郵地址:			
*Date of Birth(MM/DD/YYYY) *出生日期	(月/日/年):		
*Please note: Section 4 Personal Accident co		sured(s)	
whose age is less than 16, or at 66 or abov *請注意: 如受保人的年齡在 16-65 歲的 「個人意外保障」將不適用於該受保人	範圍以外,高爾夫球保障	章計劃中第四	四項
Home Tel. No. 住宅電話號碼:			
Mobile Phone No. 手提電話號碼:			
Mailing Address 通訊地址:			
From 由 (Backdating is not allowed. 不可追溯保 Please choose the appropriate of 請選擇以下一項保障:	單生效日期)	M月/DD日/	
□ Standard Plan 基本保障 MOP\$300	□ Deluxe Plan # MOP\$680	超級保障	
□ Family Extension 加購家庭成員計畫 Per Person 每位 MOP\$150	リ保障 × ₋		Person 人
Total Premium 保費總額 MOP\$	Discounted Premium* 折扣後保費*	мор\$	
*Applicable for AIG Direct sales channel (ne *只限AIG直接銷售渠道(不經中介人)。		s only.	
Please answer the following que	estions 請回答	下列問題	題:
1. Have you, or has any family member in th had a "hole-in-one" during the past three		Yes 是	No否
If "Yes", please state player's name, golf o			
and date(s). (MM/DD/YYYY) 閣下,或本申請表內的任何家庭成員, 創下一桿入洞的佳績?如「是」者,請		3期(月/日/4	丰)。
2. Have you, or has any family member in th			
sustained any loss, damage, liability or accurate under any golf insurance cover during the			
閣下,或本申請表內的任何家庭成員,	曾否在過去三(3)年內,		_
因遺失、損毀、法律責任或意外而於任 If you answer "Yes" to any of the above, pl			

如以上問題之答案為「是」者,請另加紙說明。

Family Extension 加購家庭成員計劃保障

Eamily mambar's Nama

	家庭成員英文姓名		
1	Macau ID No. / Passport No. 澳門身份證或護照號碼		
	*Date of Birth (MM/DD/YYYY) *出生日期(月/日/年)		
	Relationship 與閣下的關係		
2	Family member's Name 家庭成員英文姓名		
	Macau ID No. / Passport No. 澳門身份證或護照號碼		
	*Date of Birth (MM/DD/YYYY) *出生日期(月/日/年)		
	Relationship 與閣下的關係		
3	Family member's Name 家庭成員英文姓名		
	Macau ID No. / Passport No. 澳門身份證或護照號碼		
	*Date of Birth (MM/DD/YYYY) *出生日期(月/日/年)		
	Relationship 與閣下的關係		
	Family member's Name 家庭成員英文姓名		
4	Macau ID No. / Passport No. 澳門身份證或護照號碼		
4	*Date of Birth (MM/DD/YYYY) *出生日期(月/日/年)		
	Relationship 與閥下的關係		
_			
	Family member's Name 家庭成員英文姓名		
5	Macau ID No. / Passport No. 澳門身份證或護照號碼		
	*Date of Birth (MM/DD/YYYY) *出生日期(月/日/年)		
	Relationship 與閣下的關係		
- 1	ment Method 保費付款方法		
•	yment by Cheque 支票付款		
	que should be crossed and		
nade payable to: " <u>AIG Insurance Hong Kong Limited (Macau Branch)"</u>			
割線支票抬頭請註明 <u>「美亞保險香港有限公司(澳門分行)」</u> Changable 支票蜂種・			
Lile	Cheque No . 支票號碼:		

Payment by Bank Transfer 銀行入數

A/CNO戶口號碼: 780199-001 (MOP)

BANK NAME 銀行名稱: OCBC WING HANG BANK LTD

Please provide bank transfer slip or record. 請提供銀行入數收據或記錄。

A/C NAME 戶口名稱: AIG INSURANCE HONG KONG LIMITED (MACAU BRANCH)

Declaration 聲明

- In the event of differences between the English and Chinese version of this Proposal Form, the English version shall
 prevail. It is also understood that the insurance policy relevant to this Proposal Form is issued in English version only
 and will be binding upon this Proposal being accepted and approved.
- 本人/吾等同意如本文之譯本於意義上遇到任何爭議時,一概以英文版本為準;本人/吾等同時明白保 險契約只會以英文發出,並會於本申請獲接納及核實時生效。
- 2. I/we agree that AIG Insurance Hong Kong Limited (Macau Branch) (hereinafter called "AIG Macau Branch"), reserves its right to accept or reject my/our application for insurance. If the Proposal Form is accepted and approved by AIG Macau Branch, the policy will become effective.
- 本人/吾等同意美亞保險香港有限公司 (澳門分行) (以下簡稱為「美亞保險澳門分行」),保留一切接納申請與否之權利;並明白申請經美亞保險澳門分行接納及批核後,保障才正式生效。
- 3. I/we agree that this Proposal Form shall be the basis of the insurance contract between me/us and the insurer, AIG Macau Branch. I/we declare that the statements made in this Proposal Form are true, correct and complete to the best of my/our knowledge and belief.
- 本人/吾等同意此投保表格為本人/吾等與美亞保險澳門分行訂立保險契約之根據。本人/吾等特此聲 明此投保表格內所填報之資料,據本人/吾等所知並確定全部正確無訛、完整及足夠。
- 4. I/We DECLARE and AGREE that any personal data and other information relating to me/us or my/our policy(ies) contained in this application or collected, obtained, complied or held by AIG Macau Branch by any means from time to time may be used, maintained, processed, stored, transferred, disclosed and/or shared by AIG Macau Branch for the purposes of processing, administering, implementing and effecting the requests or transactions contemplated in this application or any other applications made by me/us from time to time, promoting or providing subsequent or other services or products to me/us, direct marketing, data matching and/or communicating with me/us. I/We further DECLARE and AGREE that AIG Macau Branch may transfer, disclose, arant access of or share such personal data and other information to or with individuals, entities and/or organizations associated with AIG Macau Branch and/or to or with third parties (including, without limitation, reinsurance companies, claims investigation companies, industry associations or federations, fund management companies, financial institutions, or service providers) selected by AIG Macau Branch in each case whether within or outside of Macau, for any of the aforesaid purposes and/or for the purposes of providing administrative, data processing, data maintenance or storage, telecommunications, computer, payment or other services to AIG Macau Branch in connection with the operation of its business. I/We understand that I/we have the right to obtain access to and to request correction of my/our personal data held or controlled by AIG Macau Branch. Such request can be made to Data Privacy Officer at Unit 506, 5/F, AIA Tower, No. 251A-301, Avenida Comercial de Macau. If I/We do not wish to receive marketing information or materials, I/We will send an opt-out notice to AIG Macau Branch, in which case my/our personal data and other information would be included in a centralized customer opt-out list that may be shared amongst AIG Macau Branch's associated partners for reference.
- 本人/本公司現聲明並同意美亞保險澳門分行可使用、保留、處理、儲存、轉交、透露及/或共用美亞保險澳門分行所收集、索取、整理或保留在此申請表所載或從其他途徑取得之任何有關本人/本公司的個人資料或其他有關本人/本公司的保留的資料,用作處理、管理、落實及實行在此申請表所載或本/本公司。值接促銷、資料核對及或聯絡本人/本公司之用途。本人/本公司再聲明並同意美亞保險澳門分行可向與美亞保險澳門分行有關的澳門或海外人士、團體及/或機構及/或任何被選的第三機構(包括並不限於再保險及賠償調查公司。及有關的行業協會/聯會·基金管理公司、金融機構或提供有關服務之公司)轉交、透露、授權取得或共用本人/本公司之個。或其他實料,用作以上列明之用选及或或益定除澳門分行業務運作之用,包括行政、資料處理、資料保存或儲存、通訊、電腦、付該或其他服務。本人/本公司明白到本人/本公司有權向等亞保險澳門分行查閱及申請更改美亞保險澳門分行儲存或管理與本人/本公司有關的個人資料。有關的申請可致函澳門商業大馬路251A至301號友邦廣場5樓506室個人資料管理員辦理。若本人/本公司不想收到美亞保險澳門分行的銷售資料或刊物。本人/本公司會發出信函通知美亞保險澳門分行,而本人/本公司的個人或其他資料會存於美亞保險澳門分行之中央資料檔內的非聯絡客戶名單,並會供美亞保險澳門分行及有關人士/機構作為素。

Signature of Proposer 投保人簽署

Date 日期(MM月/DD日/YYYY年)

For office use only 公司專用	
Producer Name	MACAU GOLF & COUNTRY CLUB
Producer Code	64962-010
Producer Contact Tel. No.	

GOLF (MGCC) 06/2023