

Traveler's Emergency Contact and Beneficiary Designation



EMERGENCY CONTACT

Must be someone **not** going on trip.

Name of Emergency Contact Relationship to Traveler

Home Phone (include area code) Cell Phone (include area code) Work Phone (include area code)

Travelers under the age of 18 do **not** need to complete the section below.

ACE/CHUBB INSURANCE BENEFICIARY DESIGNATION

Benefits payable for loss of life are payable to the first surviving classes of the covered person: spouse; child; parent; sibling; then estate, unless indicated otherwise below.

Policy Number: ADDN10846419

Beneficiary:

First Name Middle Name Last Name

Street Address City State Zip

Relationship to Insured

Traveler's Signature and Date