

Declaration of beneficiary

	Policy no:
Name:	Birth date:
Address:	Postal code / Town:
I wish to deviate from the standard beneficiary mentioned in the insurance terms of my insurance placed with Gouda Travel insurance.	

In case of my death, the sum insured is to be paid to the following beneficiary(ies):

Name:	%	Birth date:
Name:	%	Birth date:
Name:	%	Birth date:
Name:	%	Birth date:

If the policyholder is married, he/she is recommended to notify the spouse of the appointment of beneficiary. Cf. the Insurance Contracts Act section 15-3 (Forsikringsavtalelovens § 15-3).

Unless otherwise noted, the sum insured will be distributed amongst the persons listed above. If the beneficiary listed is deceased, the insured heirs will be appointed beneficiaries.

Date:	Signature
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Please send this declaration to Gouda Reiseforsikring, P.O.box 700, Sentrum, 0106 Oslo.
Alternatively the declaration can be sent as an attachment to post@gouda.no.