



DECLARATION ON TRAVEL HEALTH INSURANCE

Surname: _____

First name: _____

Date of birth: _____

Place of birth: _____

Having been provided with the relevant information by the Embassy of the Federal Republik in Pretoria I hereby declare:

"The enclosed travel health insurance policy (original and copy) is proof of the required travel health insurance cover for the duration of my first stay in the Schengen area, should I be granted the visa applied for on _____."

Furthermore, I expressly declare that I have been informed that for every future stay in the Schengen area I must take out a travel health insurance policy which fulfils the criteria listed below, and that I must always carry with me proof of insurance cover in the original for presentation on request during any border controls."

Criteria for travel health insurance:

- Minimum insurance cover per person must be EUR 30,000;
- The policy must be valid in all Schengen states;
- The insurance company must have an office in a Schengen state, Switzerland or in Liechtenstein;
- The policy must cover the cost of possible repatriation in the event of illness, urgent medical treatment and/or emergency hospital treatment.

Note: In cases where the purpose of the stay is to undergo medical treatment, proof of ability to pay the cost of any treatment not covered by the above mentioned insurance policy must be provided separately.

Pretoria, _____
(Date)

(Signature)