

AUTHORISATION FORM



I, the undersigned, Mr./Mrs./Miss, residing at, holding a valid Passport/National Identity Card bearing number*, authorise Mr./Mrs/Miss, residing at, holding a valid Passport/National Identity Card number*, to

(please tick as appropriate)

- subscribe an insurance
- collect my vignette/ insurance certificate ;
- other (please specify) :

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*Kindly submit a copy of Passports/National Identity Cards along with this Form.

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Signature

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Date