

# 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):

.....  
.....  
.....

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

.....  
Signature

.....  
Date