



Berkshire Hathaway
Specialty Insurance

BERKSHIRE HATHAWAY SPECIALTY INSURANCE COMPANY

The Macau Square 14C, Avenida do Infante Dom Henrique No. 47, Macau

**Personal Accident Insurance (Top Up Cover)
for University of Macau Students**

Application Form

NOTICE

THE COMPLETION OF THIS APPLICATION FORM DOES NOT BIND BERKSHIRE HATHAWAY SPECIALTY INSURANCE COMPANY TO PROVIDE COVERAGE. IF COVERAGE IS PROVIDED, IT IS PROVIDED IN RELIANCE UPON THIS APPLICATION FORM, ALONG WITH ANY ATTACHMENTS, MATERIALS SUBMITTED THEREWITH OR INCORPORATED THEREIN, AND ANY PUBLICLY AVAILABLE DOCUMENTS. FURTHERMORE, IT IS AGREED THAT SUCH STATEMENTS, ATTACHMENTS, DOCUMENTS, AND MATERIALS ARE THE BASIS OF THE PROPOSED COVERAGE.

Item 1. Insured: University of Macau

Item 2. Applicant (Student) Information:

Surname	First Name	Student ID No.	Date of Birth (DD/MM/YYYY)	Year of Education (Year 1/2/3/4)

Item 3. Telephone No.:

Item 4. E-mail Address:

Item 5. Plan:

Plan 1 – Accidental Death & Disablement MOP500,000
Accidental Medical Expenses MOP20,000

Plan 2 – Accidental Death & Disablement MOP500,000;
Accidental Medical Expenses MOP50,000

Item 6. Premium: Plan 1 – MOP 70 per Year per Applicant
Plan 2 – MOP 143 per Year per Applicant

SUBMISSION AND ENQUIRY

Applicant should fill in this form and return to us by email address below, together with bank-in slip of corresponding premium payment during the enrolment period. In case of enquiry, please contact us by email address below.

Macau.Info@bhspecialty.com



DECLARATIONS

Disclosure

The undersigned Applicant is a student enrolled with the Insured, and hereby certifies and represents that the answers, information and documentation are true, accurate and complete to the best of his/her knowledge and belief.

Privacy

Berkshire Hathaway Specialty Insurance Company ("BHSIC") is committed to the protecting the privacy, confidentiality and security of Personal Data which you provide to us. Our policies and procedures have been designed to ensure that your Personal Data is lawfully collected, used and protected. The very nature of BHSIC's business is such that the collection, use and disclosure of personal information is fundamental to the products and services we provide. We work hard to respect and maintain personal privacy and accordingly align this policy with the Personal Data Protection Act, Law No. 8/2005 ("PDPA") when collecting, holding, processing or using Personal Data in Macau. We are equally committed to ensuring that all our employees and agents uphold these obligations.

BHSIC will collect Personal Data (as defined by the PDPA) from you for the purpose of assessing your application for insurance and/or administering your insurance policy, including managing and administering any claim made by you. It is voluntary for you to provide the Personal Data requested. However, if you fail to do so, we may not be able to issue insurance cover, administer your insurance or process your claim.

Personal Data collected in Macau by BHSIC may be transferred to other parties in order to carry out the purposes or directly related purposes for which the Personal Data was collected, such as to other BHSIC branches; BHSIC secure data centers; BHSIC affiliates, reinsurers, lawyers, auditors, service providers and business partners; governmental or regulatory authorities; and/or providers of risk intelligence for the purpose of customer due diligence or anti-money laundering screening (all of which may be located in Macau or overseas). Where such a transfer is performed, it will be done in compliance with this Personal Information Collection Statement, BHSIC's Privacy Policy and applicable law. By providing the requested Personal Data, you consent to the transfer of your data to these parties, which may be located in Macau or overseas.

With your consent, we may also use your name, contact details and policy details to contact you with direct marketing communications regarding financial and insurance products by postal mail, email, telephone or SMS. With your consent, we may also provide your name, contact details and policy details to our related companies, who may send you direct marketing communications regarding financial and insurance products by postal mail, email, telephone or SMS.

If you do not wish us to use your Personal Data in direct marketing as described above, you may exercise your opt-out right by checking the box below and providing the following information:

I, <insert full name> _____, do not wish for BHSIC to use my personal data for direct marketing communications.

Phone Number:

Student ID No.: (for identification purposes):

Policy Number (if you have one):

You may also opt out by sending an email to asia.privacy.compliance@bhspecialty.com with the same information requested above.



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Please refer to the full version of BHSI's Privacy Policy at: <https://bhspecialty.com/privacy-policy/privacy-policy-macau/> or contact our Privacy/Compliance Officer at asia.privacy.compliance@bhspecialty.com before providing your consent and/or the above representation and warranty.

The Applicant further understands that the above agreement is necessary for BHSIC to proceed with the application.

Signature of Applicant

Name

Date
