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CUSTOM QUOTE QUESTIONNAIRE

1. Tour Operator Name: _____

Address: _____

_____ Phone #: _____

2. What type of organization is to be insured? Wholesale Tour Operator
 Cruise Line Association Other _____
 (Describe Other)

3. Is there a travel protection plan currently in force? Yes No If Yes:

Carrier _____ Claims Administrator _____

Group/Individual Policy _____ Anniversary Date _____

Years in Force _____ Annual Premium \$ _____

Protection Plan Sales Method: Mandatory Voluntary Direct Invoice

Please provide a copy of promotional materials on any existing program, including current and prior years claims experience and premiums.

4. Tour Destinations: Domestic: _____% Foreign _____% (Include copies of brochures)

_____ % Japan _____ % Central/South America _____ % Canada

_____ % China _____ % Australia/New Zealand _____ % Hawaii

_____ % Africa _____ % Middle East _____ % Asia

_____ % Mexico _____ % Western Europe _____ % Easter Europe

_____ % Caribbean _____ % Other (Please Specify _____)

5. Average Age Group _____

6. Total Number of Passengers:

Annually _____ Any Specific Tour _____ On One Common Carrier _____

Land _____% Cruise _____% Schedule Air _____% Charter _____%

7. Specify Large Concentration of Travelers in any of the following categories:

Occupational _____ Destination _____ Transportation _____ Age _____

8. Average Trip Duration: _____ Maximum Days _____ Minimum Days _____ Avg: _____

9. Average Trip Cost: \$ _____ Maximum Cost _____ Minimum Cost _____ Avg: _____

10. Average Air Cost: \$ _____ Average Land Cost: \$ _____ Average Cruise Cost: \$ _____

11. Type of Arrangements: Land Only Air Only Cruise Land & Air

Other (Please Specify) _____

12. Class of Airfare: First Class Economy Business Class Charters

13. Tour Operator's refund policy for trip interruption (i.e., unused air, land, cruise, etc.):

14. Tour Operator's refund policy for pre-departure cancellation (Explain): _____

15. Do you use computerized facilities? Yes No

If so, can we customize our travel protection plan into the invoicing Yes No

16. Briefly describe how these tours are marketed (provide materials): _____

Please complete the above information and return it to our office along with a copy of your terms and conditions for both domestic and international travel.

Thank you.