Health Policy Declaration

mily Name:
rst Name:
ate of Birth:
ace of Birth:
Declaration
ith regard to my visa application dated I rewith declare that according to the Schengen regulations (CCI), I ll be in possession of an adequate travel health insurance valid for e complete duration of my stay(s) in Schengen-Territory. In thermore, I understand that for any stay in Schengen-Territory I lust be prepared to present the relevant travel health insurance rtificate to the Schengen immigration authorities within the validity the visa.
ealth insurance requirements:
- Minimum insurance coverage: 30.000, - € per person
- Claims against the insurance company must be recoverable in Schengen.
 Coverage of all expenses which might arise in connection with repatriation for medical reasons, urgent medical attention and/or emergency hospital treatment.
ew Delhi, Signature