

# TRAVELGUARD PRO

Adventure & Extreme Sports Division

**Invoice #:** [Invoice Number]

**Date:** [Date]

## Policy Holder:

[Full Name]

[Address Line 1]

[City, Postcode]

[Email/Phone]

## Policy Details:

Plan: [Elite Adventure Plus]

Start Date: [DD/MM/YYYY]

End Date: [DD/MM/YYYY]

Destination: [Region/Worldwide]

Coverage Description	Activity Tier	Subtotal
Base Travel Medical Insurance	Standard	[\$0.00]
Search & Rescue / Evacuation Rider	High-Risk	[\$0.00]
Equipment Protection (Theft/Damage)	N/A	[\$0.00]
Adventure Activity Add-on (Includes: [Skydiving, Mountaineering, Scuba])	Tier 4	[\$0.00]

Subtotal: [\$0.00]

Taxes & Fees: [\$0.00]

**Grand Total: [\$0.00]**

**Note:** This policy is subject to the Terms and Conditions of the Adventure Sports Endorsement. Emergency Assistance 24/7: +1 (800) XXX-XXXX.

Thank you for choosing TravelGuard Pro for your journey.