

Hanse Merkur オンライン契約方法

35～75 歳未満の方の長期旅行・留学・研究滞在およびそのご家族のための保険



① ご滞在データ（入力・表示データはサンプルです。）

Travel data

When does your stay begin and end? (i)

Date of entry into host country	DD/MM/YYYY	←	ドイツ入国日	
Commencement of the insurance	DD/MM/YYYY	←	保険開始日	
Expiry of insurance / end of trip	DD/MM/YYYY	←	保険解約日	

Who is travelling?

No. of persons 契約者人数
ご自身の契約のみであれば1,
ご家族の場合は人数に応じ選択

上記項目入力
後クリック

Who is travelling?















No. of persons	-	1	+
Date of Birth 1. Person	DD	✓	MM
Home Country 1. Person			

ご契約者の生年月日

国籍

What is the purpose of your trip?

旅行目的の選択
下記いずれかのタブを選択

 Holiday / visit e.g. on a round trip	観光	
 Science, research, training e.g. as a post-doc or guest lecturer	研究・調査	
 Student at a public university	国公立大留学	
 Student at a private university	私立大学留学	
 Expat, business traveller, freelancer e.g. a posting	海外駐在・フリーランス	
 Au pair, student exchange, language school e.g. to learn German	オーペア・交換留学・語学留学	
 Harvest worker / seasonal employment e.g. at a grape harvest	季節労働者	

More

上記項目入力
後クリック

② 補償内容の選択

Select your offer

Foreign travel health insurance (Advigon Versicherung AG)

旅行医療保険プランの選択



Advigon BASIC
Foreign Health Insurance



Advigon PROFI
Foreign Health Insurance

Your price

878,40 €

1.244,40 €

Rates & services



Please select your rate



Select now



Select now

Additional package (HanseMercur Reiseversicherung AG)

旅行保険パッケージプランの選択



HanseMercur BASIC
Travel liability insurance, Travel Accident Insurance, Emergency Insurance



HanseMercur PROFI
Luggage Insurance, Travel liability insurance, Travel Accident Insurance, Emergency Insurance

Your price

98,82 €

219,60 €

Rates & services



Please select your rate



Select now



Select now

Your Total Price

Advigon BASIC

878,40 €

No Property Insurance

0,00 €

Total price for all travellers

878,40 €

Back

Select

プランを選択後クリック

③ 補償内容の確認、契約者・お支払い情報入力

Please enter your personal and payment data

Insured person(s)

Mr. Ms. Child

Title

First Name

Last Name

Date of Birth 01 01 1970

House No. and Street

Postal/Zip Code

Place

Home Country Japan

Transfer data for the person making the booking

被保険者様の情報を入力

Data for Person Booking
(Policy Holder)

Mr. Ms. Company

Title

Title (optional)

First Name

Last Name

Date of Birth DD MM YYYY

House No. and Street

Postal/Zip Code

Place

Country

Phone no. (optional)

E-mail

Repeat e-mail address

契約者本人の名前を入力
ご家族の場合は主契約者の名前

ドイツでの滞在先住所を入力
(アパート・寮・ホストファミリー等)
ドイツでの滞在先が未定の場合のみ、日本の住所、またはドイツ国内の他の連絡先（郵便物が届く住所）を入力

※住所が変更になった場合は必ず保険会社または弊社へご連絡下さい

メールアドレスは必ずご入力下さい。保険証券はメールにて発行となります。

メールアドレス再入力
(確認用)

Payment data

Credit card  ← Credit Card を選択下さい

SEPA (basic direct debit)  ⓘ

Credit card

First Name ← クレジットカードの名義はご家族など、ご本人様以外でも可

Last Name

Credit card ✓

Card Number
To protect your data, your credit card number will be only shown in an encoded form after sending the booking request.

Valid Until ✓ ✓

Card check number ← クレジットカード裏側のセキュリティコード

Methods of Payment

Methods of Payment ⓘ ← お支払い方法 once only (一括を選択)

[Back](#)

[Check Data](#) ← お支払い情報を入力クリック

④ 契約確認画面（入力・表示データはサンプルです）



Please check your data

Your Particulars [Change](#) ⓘ

Please note that providing false information may result in loss of insurance cover.



Ins. begin: 05/03/2018	Expiry of insurance / end of trip: 05/03/2019	Arrival on: 05/03/2018
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Your Choice [Change](#) ⓘ

 Advigon Travel Health Insurance for foreign guests up to 5 years Basic 03/05/2018 - 03/05/2019  Insurance product information document (PDF)	878,40 € Price for all travellers Price details
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以下に氏名等入力されたデータが表示されます。内容をご確認下さい。

STB

- I have read and accept
-  [the terms and conditions of insurance \(PDF\)](#)
 -  [the cancellation right and the consumer information \(PDF\)](#)

必ず約款 (the terms and conditions of insurance(PDF)) と重要説明事項 (the cancellation right and consumer (PDF)) をお読み下さい。その後同意のチェック

Data Protection

- I have taken note of the [notes on data protection](#).

個人情報の取り扱いについて必ずお読み下さい。その後了承のチェック

Following this booking, you will receive the advisory protocol by email. In addition, you can request a hard copy of the advisory protocol from our service hotline (+49 (0)40 5555 4020). Your insurance confirmation, the general insurance terms and conditions, the product information sheet (IPID) and consumer protection information will be sent to you in a separate email after your data has been verified. The emails are sent in accordance with the valid standardised conditions for email distribution (TLS encryption).

Residence

- I confirm that the stay of the insured person(s) (the persons who travel) in Germany is only temporary. Their place of residence will continue to be in their home country and they plan to return to their home country when the trip is over.

ドイツ滞在は一時的なものであるという承認。チェック。

Security Check

Please enter the letters from the image shown below.




セキュリティのため、画面に実際に表示される文字を入力して下さい。

Your Choice

[Change](#) 



Advigon Travel Health Insurance for foreign guests up to 5 years Basic
03/05/2018 - 03/05/2019
 [Insurance product information document \(PDF\)](#)

878,40 €

Price for all travellers
[Price details](#)

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[Booking against a charge](#)

契約・
カード決済