
EARLY BOOKING OF RISKS

You should only book in risks you currently hold

To:	From:	Name: _____
		Company Name: _____
		Telephone No: _____

*Name of risk :	
Profession:	Current Insurer:
**Address:	
*Renewal Date:	

*Required field **Post code at least to avoid confusion with similar named risks

Once completed, please either: Post to -

Charles Insurance,

**29 Hickman Road, Penarth,
Vale of Glamorgan
CF64 2AL**

OR fax to -

029 2071 2919

OR scan and e-mail to

chris@pro-indemnity.co.uk

In case of difficulty with these forms, please ring

029 2070 2333

for assistance