

Shield Protection Application Form

I, the undersigned, select one of the following options

SHIELD MY SHIPMENT

In consideration of paying the Shield service fees, Aramex will compensate me for the declared value of my shipment, up to a maximum of USD 10,000, in the event of loss or damage to my shipment during shipping. I hereby confirm that I have read and agreed to the **Shield Terms and Conditions** on the back of this form.

Name of Applicant

Asset Matrix

Destination

Unit 6, Imperial office park, 9-11 University Road, S.A

Description of Goods

Double Relay Testing Kit

Declared Value of Goods & Currency

\$500 USD

Waybill Number

By signing this application, I apply for the Shield Protection program and I have read and agreed to the **Terms and Conditions**.

In addition, I hereby confirm and acknowledge that the value I declared above is a reflection of the true value of the goods and that all statements and information in this application are complete and true.



Applicant's Signature



Date Signed (Day/Month/Year)

DO NOT SHIELD MY SHIPMENT

In the event of loss or damage to my shipment during shipping, I accept Aramex's limitation of liability as set forth in the **Standard Terms and Conditions of Carriage*** on the reverse side of the Aramex waybill.

* USD 25 for domestic express shipments, USD 100 for international express shipments, or as per any applicable international convention as per the terms and conditions of the Aramex international air waybill.

Applicant's Signature

Date Signed (Day/Month/Year)

A copy of this application is considered as valid as the original