Whereas the Assured/Insured Person, with a view to effecting an insurance as hereinafter provided with the Underwriters. We, the Underwriting Members (hereinafter referred to as "the Underwriters"), hereby agree, in consideration of the payment of premium to us as specified in the Schedule, to insure or compensate or indemnify the Assured/Insured Person or to the Assured's/Insured Person's Heirs, Estate, Executors and Administrators as specified herein in respect of Bodily Injury, Medical Expenses, Loss, Damage occurring during an Insured Journey stated in Policy Definitions and within the Period of Insurance stated in the Schedule and Schedule of Benefits to the extent and in the manner set forth within each Section insured.

The Policy including Endorsements (if any), and the Schedule constitute the entire contract between Underwriters and the Assured/Insured Person as specified in the Schedule.

The Policy including endorsements (if any), the Schedule and the Schedule of Benefits shall be read together as one contract and any word or expression to which a specific meaning has been given in any part of this Policy, the Schedule or of the Schedule of Benefits shall bear the same meaning wherever it may appear unless otherwise provided.

The insurance by each Section is subject to the terms, conditions, provisions, specific exclusions and specific conditions of each such Section and to the Policy Definitions, General Policy Exclusion and General Policy Conditions.

The liability of the Underwriters shall not exceed the Benefits or Limit of Liability specified as being covered in the Schedule of Benefits.

SECTION 1 - PERSONAL ACCIDENT

If the Assured/Insured Person sustains Bodily Injury caused by an Accident during an Insured Journey, the Underwriters will pay Sum Insured as specified in the Schedule of Benefits to the Assured/Insured Person or to Assured's/Insured Person's Legal Heirs, Estate, Executors and Administrators.

Provided Always That:

1. benefit shall not be payable under more than one of the items of the benefits as outlined below in respect of the consequences of one Accident,
2. the total sum payable under this Insurance in respect of any one or more claims in respect of any one Assured/Insured Person shall not exceed in all the largest benefit under any one of the items within this Section.
3. if an Accident causes the death of the Assured/Insured Person during an Insured Journey following the date of the Accident and prior to the definite settlement of the benefit for disablement provided for under Items 2 to 7 below, there shall be paid only the benefit provided for in the case of death.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Percentage of Sum Insured</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Accidental Death</td>
<td>100%</td>
</tr>
<tr>
<td>2. Total and irrecoverable loss of sight of both eyes</td>
<td>100%</td>
</tr>
<tr>
<td>3. Total and irrecoverable loss of sight of one eye</td>
<td>25%</td>
</tr>
<tr>
<td>4. Loss of two limbs</td>
<td>70%</td>
</tr>
<tr>
<td>5. Loss of one limb</td>
<td>50%</td>
</tr>
<tr>
<td>6. Total and irrecoverable loss of sight of one eye and loss of one limb</td>
<td>100%</td>
</tr>
<tr>
<td>7a. Permanent Total Disablement (other than Benefits 2 to 6 above and 7b below)</td>
<td>100%</td>
</tr>
<tr>
<td>7b. Permanent Disablement</td>
<td></td>
</tr>
<tr>
<td>Complete deafness of both ears of traumatic origin</td>
<td>40%</td>
</tr>
<tr>
<td>Loss of speech</td>
<td>100%</td>
</tr>
</tbody>
</table>

*In respect of Section 1 - Personal Accident – Percentage of the Sum Insured will be limited to:

10% per person in respect of Children up to the age of 18 years or age of 23 years who are in full time education

Further, Benefit 7a and 7b under Section 1 – Personal Accident – No cover is given to Children.

Specific Exclusions in respect of Section 1 – Personal Accident (in addition to General Exclusions)

This Section does not cover death or disablement directly or indirectly in any way caused or contributed to by:

1. Any Sickness, Disease or Illness or bacterial infection except this exclusion shall not apply to medically acquired infections or blood poisoning including pyogenic infections which may result from an accidental cut or wound
2. the Assured/Insured Person’s suicide or attempted suicide or intentional self-injury or the Assured/Insured Person being in a state of insanity;
3. venereal disease or Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC) or Human Immuno-deficiency Virus (HIV) howsoever these have been acquired or may be named;
4. the Assured/Insured Person’s deliberate exposure to exceptional danger (except in an attempt to save human life);
5. the Assured/Insured Person being under the influence of alcohol or solvents;
6. the Assured/Insured Person being under the influence or the use of drugs (except those prescribed by a Registered Medical Practitioner but not those prescribed in the treatment of drug addiction);
7. normal pregnancy or childbirth, without any accompanying complications of pregnancy and childbirth. This policy is to provide cover for unforeseen events, accidents, and normal childbirth would not constitute an unforeseen event;

Conditions specific to Section 1 – Personal Accident (in addition to General Conditions)

1. Unless otherwise declared and agreed by the Underwriters no benefit will be payable for any condition for which the Assured/Insured Person has sought advice, diagnosis, treatment or counselling or of which the Assured/Insured Person was or should reasonably have been aware at inception of this policy or for which the Assured/Insured Person has been treated at any time prior to inception.

All medical records, notes and correspondence referring to the subject of a claim or a related pre-existing condition shall be made available on request to any medical adviser appointed by or on behalf of the Underwriters and such medical adviser shall, for the purpose of reviewing the claim, be allowed so often as may be deemed necessary to make an examination of the Assured/Insured Person.

SECTION 2 - MEDICAL AND EMERGENCY EXPENSES

A. If the Assured/Insured Person suffers an Accident or first contracts Sickness during an Insured Journey, the Underwriters will pay all reasonable and customary charges, costs and expenses as follows providing that they are reasonably and necessarily incurred from the date of the Accident or first manifestation of Sickness within the Insured Journey during Period of Insurance and not exceeding the amount including the sub-limit amounts specified in the Schedule of Benefits for:

(i) Reasonable medical, surgical, specialist's fees, hospital, nursing home, nursing attendance charges, costs of physiotherapy, massage and manipulative treatment, surgical and medical requisites and ambulance charges, and

(ii) actual cost of dispatching Essential medicines which have been prescribed by Registered Medical Practitioner (subject to exclusion 21), and

(iii) additional hotel and repatriation expenses incurred by the Assured/Insured Person and any members of his/her family or party who have to remain with or travel with the
Assured/Insured Person, However, such costs and expenses will be at the discretion and must be agreed by the Underwriters or the Assistance Company, and

(iv) travel and hotel expenses of upto 4 persons to travel from the Assured/Insured Person's normal country of residence/domicile if their presence is certified as necessary by a Registered Medical Practitioner, However, such costs and expenses will be at the discretion and must be agreed by the Underwriters or the Assistance Company, and

(v) reasonable cost of funeral expenses and the cost of transporting the remains or ashes of the Assured's/Insured Person's to their normal Country of Domicile/Residence up to the maximum amount specified in the Schedule, OR alternatively, the cost of cremation or burial abroad in the country where the death occurs up to maximum amount as specified in the Schedule, subject to an excess. However, such costs and expenses will be at the discretion and must be agreed by the Underwriters or the Assistance Company, and

(vi) charter of an air ambulance or the use of air transport including qualified attendants certified by a Registered Medical Practitioner to be necessary for evacuation to the nearest medical facility or for the repatriation back to the Assured's/Insured Person's Country of Domicile/Residence or treatment of the Assured/Insured Person and

B. IN RESPECT OF DENTAL CARE
Underwriters will pay sum insured up to the amount as specified in schedule for medical treatment and pharmaceutical expenses incurred by the Assured/ an Insured Person on medical prescription for the emergency relief of pain regardless of cause; provided however that the pain is not a pre-existing condition, and excluding general dental examination including X-Rays, costs of providing, repairing or replacing dentures, dental work involving use of the precious metals, extractions fillings & general dental care.

Specific conditions in respect of Section 2 – Medical and Emergency Expenses (in addition to General Conditions)

1. It is important that the Assured/Insured Person declares all medical conditions under this policy.

2. In the event of a claim made for a pre-existing medical condition that the Assured/Insured Person have not declared to the Underwriters and has not been accepted by the Underwriters in writing then the claim will be declined.

3. If the Assured/Insured Person do not comply with the conditions, Underwriters may at their option cancel the policy or refuse to deal with the claim or reduce the amount of any claim payment.

4. Assured/Insured Person must give notice as soon as possible to the Assistance Company as per Claims Procedure A under Claims Procedure section.

5. Underwriters and/or the Assistance Company reserve the right to relocate the Assured/Insured Person from one hospital to another and arrange for the Assured's/Insured Person’s repatriation or evacuation to their Country of Domicile/Residence at any time during the Journey/Trip. Underwriters or the Assistance Company will do this if in the opinion of the Registered Medical Practitioner can be moved safely and/or travel safely to the Country of Domicile/Residence to continue treatment.

MEDICAL HEALTH REQUIREMENTS - PREGNANCY
As is consistent with the treatment of all Pre-Existing Medical Conditions and Exclusions under the Policy, the Policy does not intend to cover the normal costs or losses otherwise associated with pregnancy (including multiple pregnancies) or childbirth. This includes, but is not limited to, delivery by caesarean section or any other medically or surgically assisted delivery which does not cause medical complications. The Policy does, however, cover the Assured/Insured Person should complications arise with the pregnancy due to Accidental injury or unexpected illness which occurs whilst on Journey/Trip.

Specific Exclusions in respect of Section 2 – Medical and Emergency Expenses (in addition to General Exclusions)

This Section does not cover costs or expenses directly or indirectly arising out of or consequent upon or contributed to by:

1. the Assured’s/Insured Person’s suicide or attempted suicide or intentional self-injury or the Insured Person being in a state of insanity;

2. venereal disease or Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC) or Human Immuno-deficiency Virus (HIV) however these have been acquired or may be named;

3. the Assured’s/Insured Person’s deliberate exposure to exceptional danger (except in an attempt to save human life);

4. the Assured’s/Insured Person’s own criminal act;

5. the Assured/Insured Person being under the influence of alcohol or solvent or under the influence of drugs other than those drugs taken under the direction of a Registered Medical Practitioner but not those prescribed in the treatment of drug addiction;

6. normal pregnancy or childbirth, without any accompanying complications of pregnancy and childbirth. This policy is to provide cover for unforeseen events, accidents, sickness and diseases and normal childbirth would not constitute an unforeseen event;

7. costs and expenses for medical treatment for any complication as a result of a voluntary termination of pregnancy;

8. for rest cures, sanitorial or custodial care;

9. for treatment in a private hospital or clinic abroad where a public or state facility is available;

10. for costs and expenses of supplying or fitting of eye glasses or hearing aids unless necessitated by Bodily Injury;

11. for costs of cosmetic or plastic surgery or prosthetics, orthopaedic material or orthosis and osteosynthesis material unless necessitated by Bodily Injury;

12. for examination for check up purposes not incidental to, or necessary to diagnose Sickness or Bodily Injury or for general health examinations;

13. any Pre-existing medical condition, disability, Accident, or Sickness or services or treatment which originated prior to an Insured Journey or prior to period of insurance; convalescence or relapses;

14. for the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim;

15. any further costs and expenses incurred after return to the Assured’s/Insured Person’s country of domicile / country of residence for continuation of any treatment received abroad;

16. expenses incurred for any In-Patient treatment or evacuation/repatriation which have not been notified to and authorized by the Assistance Company;

17. costs of telephone calls, other than calls to the Assistance Company notifying them of the problem or calls received from the Assistance Company to the Assured’s/Insured Person’s mobile telephone for which the Assured/Insured Person are able to provide a receipt or other evidence to show that the call took place, its cost and the number telephoned;

18. the cost of taxi fares, other than those for travel to or from hospital relating to the Assured’s/Insured Person’s admission, discharge, attendance for outpatient treatment or appointments;

19. the cost of treatment or surgery, including exploratory tests, which are not directly related to the Bodily Injury or Illness which necessitated the Assured’s/Insured Person’s admittance into hospital;

20. any form of treatment or surgery which, in the opinion of the Registered Medical Practitioner in attendance and the Underwriters
or the Assistance Company, can be delayed reasonably until the Assured's/Insured Person's return to their Country of Domicile/Residence;

21. medication, which, at the time of departure, is known to be required or to be continued outside the Assured's/Insured Person's Country of Domicile/Residence;

22. treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre unless agreed by the Assistance Company;

23. emotional disorders;

24. expenses incurred as a result of a tropical disease where the recommended inoculations and/or recommended medication have not been undertaken;

25. the Assured's/Insured Person's decision not to be evacuated/repatriated after the date when, in the opinion of the Assistance Company, it is safe to do so;

26. any treatment relating to Mumps, Chicken Pox, Measles, German Measles, Spina Bifida, Whooping Cough, Diphtheria, Poliomyelitis, Meningitis and Scarlet Fever and for consequence attributable thereto, accelerated thereby or arising therefrom in respect of children upto the age of 5 years;

27. any cardiovascular or circulatory condition (example, heart condition, hypertension, blood clots, raised cholesterol, stroke, aneurysm) and Diabetes for persons aged 70 years and over;

28. any outpatient claims/costs above GBP 500 which have not been agreed or approved by the Underwriters or the Assistance Company.

29. anything mentioned in General Exclusions

**SECTION 3 - CANCELLATION AND CURTAILMENT**

The Underwriters will pay the Sum Insured up to the amount as specified in the Schedule of Benefits for all non-recoverable deposits, advance payments (including pre-paid excursions) and other charges paid or due to be paid by or on behalf of the Assured/Insured Person for travel and accommodation and also for reasonable and necessary extra travel or accommodation expenses for return to the Assured's/Insured Person's country of domicile/residence in the event of an Insured Journey being reasonably and necessarily cancelled or curtailed because of:

(i) the death, Bodily Injury, Sickness, redundancy, jury service or witness attendance in a court of the Assured/Insured Person or Close Relative, Close Business Associate, Guardian, travelling companion, or a person with whom the Assured/Insured Person is travelling or whom the Assured/Insured Person intended to visit or with whom the Assured/Insured Person intended to stay or a Close Relative; or

(ii) Government restrictions following an epidemic OR Kidnap of the Assured/Insured Person or a Close Relative, Guardian or a Close Business Associate or travelling companion or the Person with whom the Assured/Insured person is travelling or with whom the Assured/Insured Person had arranged for Temporary residence during the insured journey; or

(iii) the Assured/Insured Person suffers Bodily Injury or Sickness and are in Hospital for the rest of the trip.

(iv) Directive issued by Travel advice unit of the Foreign & Commonwealth Office (FCO) or the World Health Organisation (WHO) or regulatory authority in a country to/from which the Assured/Insured Person is travelling prohibiting all travel or all but essential travel to; or recommending evacuation from the country or specific area or event to which the Assured/Insured Person were travelling providing the directive came into force after the purchase, renewed or extended this insurance policy or booked the trip (whichever is the later) or in case of curtailment after the Assured/Insured Person has left the Country of Domicile/Residence to commence the trip.

(v) Hijack or attempt thereat; or

(vi) adverse weather conditions or mechanical breakdown of a Carrier making it impossible for the Assured/Insured Person to travel on its outward journey from the Assured's/Insured Person's country of domicile/residence at the commencement of the Insured Journey; or

(vii) the Assured's/Insured Person's private residence or place of employment being rendered uninhabitable within 14 days of the commencement of the Insured Journey as a result of physical loss or damage or the Assured's/Insured Person's presence being required by the Police following burglary or attempted burglary at the Assured's/Insured Person's private residence or place of employment; or

(viii) interruption or withdrawal of chartered or scheduled transport services caused by strike, locked out workers, industrial action, riot, civil commotion, hijack, avalanche, landslide, adverse weather or mechanical breakdown of Carrier.

Specific Exclusions in respect of Section 3 - Cancellation & Curtailment (in addition to General Exclusions)

No payment will be made under this Section:

1. under item (i) above for any disability, condition or sickness of the Assured/Insured Person which originated prior to the commencement of an Insured Journey;

2. in respect of any medical condition from which any person specified in item (i) other than the Assured / Insured Person is known to be suffering at the commencement of an Insured Journey;

3. in respect of any person specified in item (i) above arising out of pregnancy within 4 months of the estimated delivery date or childbirth;

4. if any claim arising directly or indirectly from the Assured’s/Insured Person’s failure to comply with the Important Conditions relating to Health as outlined in the policy wording

5. for any claim arising directly or indirectly from Government Regulation or Act, delay or amendment of the itinerary, or failure in provision of any part of the Insured Journey (including error, omission, financial failure or default) of or by the provider of any service forming part of the Trip as well as of the Travel Agent or Tour Operator through whom the Trip was booked

6. for failure of the Assured/Insured Person to provide to the relevant authorities, for whatever the reason the documents which are required to allow travel, such as passport, visa, tickets, identity card or vaccination certificates.

7. For any unused portion of the Original tickets where repatriation or evacuation has occurred.

8. for disinclination to travel

9. for any losses due to the Assured’s/Insured Person's redundancy which is caused by or resulting from misconduct leading to dismissal or from resignation or voluntary redundancy or where a warning or notification of redundancy was given prior to the date the Insurance Policy is purchased and also Prior to booking of any Journey/Trip.

10. for claims for any costs associated with unused timeshare property, holiday property bond, airline mileage reward scheme (airmiles) or any other promotions or rewards scheme.

11. Failure to obtain the required passport or visa

12. Circumstances known to the Assured/Insured Person prior to the booking of the Trip which could reasonably have been expected to give rise to cancellation or Curtailment of the Trip

13. For costs of recoverable Airport Departure Duty/Tax or irrecoverable payments for lost excursions

14. Bodily Injury or Illness unless a Registered Medical Practitioner provides a certificate stating that this necessarily and reasonably prevented the Assured/Insured Person from travelling
15. for any amount recoverable from a travel agent, tour operator, carrier or any other source.

16. for failing to allow sufficient time to reach your departure point from the Country of domicile/Residence.

17. for the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim.

Specific Conditions in respect of Section 3 – Cancellation & Curtailment (in addition to General Conditions)

1. No payment shall be become payable under this Section by the Underwriters until such time the Assured/Insured Person has provided the following:
   A. A copy of the report relating to any incident such as medical report including medical certificate from a Registered Medical Practitioner, death certificate, firefighters report or police report. That document must, show:
      a) the date of the event and if appropriate the date of hospital admission, death or accident;
      b) the diagnosis of the medical condition (if appropriate)
      c) the type of damage caused
      d) the clinical or background history; and where appropriate, the treatment prescribed.
   B. The original copy of the invoice(s) and/or receipts from the travel agent, airline, tour operator, hotel, train company, online travel agency or any other provider for the payment of the trip.
   C. A copy of the cancellation expenses invoice issued by the travel agent, airline or tour operator, hotel, train company, online travel agency or any other provider, as well as the cancellation expenses invoice or payment slip thereof.
   D. The original cancellation document issued by the travel agent, airline, tour operator, hotel, train company, online travel agency or any other provider, prior to any curtailment of the trip.

2. It is a condition of the policy that the Assured/Insured Person contact the Assistance Company prior to any curtailment of the trip.

3. the Assured/Insured Person must obtain a medical certificate from a Registered Medical Practitioner and prior approval of the Assistance Company to confirm the necessity to return to Country of Domicile/Residence prior to Curtailment of the Trip due to medical reasons.

4. If the Assured’s/Insured Person’s fail to notify the Travel Agent, Tour Operator or provider of transport/ accommodation immediately it is found necessary to cancel the Trip, Underwriters liability shall be restricted to the cancellation charges that would have applied had failure not occurred.

5. If the Assured/Insured Person cancels the Trip due to Bodily Injury or a Medical Condition other than medical condition which is not relating to or is a pre-existing medical condition, then the Assured/Insured Person must provide a medical certificate from a Registered Medical Practitioner stating that this necessarily and reasonably prevents the Assured/Insured Person from travelling.

SECTION 4 - BAGGAGE AND PERSONAL EFFECTS

In the event of physical loss of or theft of or damage to baggage or personal effects whilst:

A. Checked-in Baggage with Carrier
or
B. during an Insured Journey,

the Underwriters will indemnify the Assured/the Insured Person in respect of such loss or theft or damage up to the Sum Insured amount as specified in the Schedule of Benefits and as otherwise provided herein.

Underwriters will only indemnify under items A or B above

Specific Exclusions in respect of Section 4 – Baggage & Personal Effects (in addition to General Exclusions)

This Section does not cover:

1. any claim resulting from
   a) valuables left Unattended at any time (including in a motor vehicle or in the custody of carriers) unless deposited in a hotel safe, safety deposit box or left in your locked accommodation which is evident of forced entry confirmed by a Police Report
   b) baggage and Money or documents contained in or stolen from an unattended motor vehicle or left unattended at any time
   c) loss or damage due to delay, confiscation or detention by customs or other authority
   d) depreciation in value or shortages due to error or omission
   e) any loss or damage due to staining or any process of dyeing or cleaning or water damage however caused.
   f) unset precious stones, contact or corneal lenses, hearing aids and dental or medical fittings, antiques, musical instruments, bonds, deeds, manuscripts, securities, perishable goods (such as foodstuffs), ski equipment, golf equipment, bicycles, pushchairs, prams or buggies or wheelchairs and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage)
   g) cracking, scratching, breakage of or damage to china glass, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft or accident to the vessel, aircraft or vehicle in which they are being carried
   h) breakage of sports equipment or damage to sports clothing whilst in use
   i) wear and tear, depreciation, deterioration or loss or damage by atmospheric or climatic conditions by moth, vermin, by any process of cleaning, repairing or restoring, mechanical or electrical breakdown or derangement.
   j) Mobile phones and mobile phone accessories, pre-paid minutes that have not been used, mobile rental charges, or prepayments (example, a contract phone with free minutes and text messages)
   k) loss of, theft to, or attempted theft of all Baggage not reported to the Police or appropriate authority within 24 hours of discovery;
   l) loss of, theft to, or damage to valuables whilst in checked-in Baggage
   m) partial loss or damage to checked in baggage or during the insured journey.

2. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim;

3. Anything mentioned in the General Exclusions

Specific Conditions in respect of Section 4 – Baggage & Personal Effects (in addition to General Conditions)

1. The Assured/Insured Person must take reasonable precautions at all times to ensure the safety and supervision of Baggage and also should take all practicable steps to recover property lost or stolen. If it is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel you must report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If property is lost, stolen or damaged whilst in the care of an carrier or authority or hotel then the Assured/Insured Person must:
   a. Obtain a Property Irregularity Report
b. Give formal written notice of the claim to the common carrier within the time limit contained in their conditions of carriage (Please retain a copy)

c. Retain all travel tickets and tags for submission if a claim is to be made under this Policy

d. Retain receipts for items lost, stolen or damaged as these will help to substantiate the claim

2. Underwriters' liability shall not exceed the amount specified in the Schedule in respect of any one article or pair or set of articles, or

3. The basis of settlement under this Section shall be

   (i) the replacement cost of a comparable item provided that

      (a) it was less than 2 years old at the time of loss or theft or damage, and

      (b) proof of original purchase is provided, and

      (c) the item is actually replaced.

   (ii) the value of the item at the time of loss or theft or damage if it is not actually replaced or is older than 2 years or proof of purchase cannot be supplied.

**SECTION 5 – DELAYED BAGGAGE**

Underwriters will pay sum insured up to the amount specified in the Schedule of Benefits to the Assured/Insured Person for emergency replacement of clothing, medication and toiletries if the Baggage is temporarily lost in transit during the outward journey and not returned to the Assured/Insured Person after the waiting period of the number of hours as stated in the Schedule, provided written confirmation is obtained and sent to the Underwriters from the Carrier, confirming the reason and the number of hours the Baggage was delayed.

If the loss is permanent, the amount paid under this Section will be deducted from the final claim paid by any other Section of the Policy covering the Baggage.

This section will not cover for the amount of the Excess as specified in the Schedule of Benefits in respect of each and every claim

**Specific Conditions in respect of Section 5 – Delayed Baggage (in addition to General Conditions)**

The Assured/Insured Person must provide Original receipts or bills for any expenses claimed under this section.

**Under the European Union (EU) travel regulations, Assured/Insured Person is entitled to claim compensation against the EU Carrier.**

If the checked-in Baggage is damaged or lost by an EU airline, the Assured/Insured Person must claim compensation from the Carrier within seven (7) days. If the Assured’s/Insured Person’s checked bag is delayed then the Assured/Insured Person must claim compensation from the Carrier within 21 days of its return.

The Regulations apply to all flights, whether budget, chartered or scheduled, originating in the EU or flying into the EU using EU carrier.

**SECTION 6 – SECURE WALLET**

A. Credit Card Fraud

The Underwriters will indemnify the Assured/Insured Person up to the Sum Insured as stated in the Schedule of Benefits in respect of any such loss or theft of the Assured’s/Insured Person’s wallet during an Insured Journey within the Period of Insurance whilst withdrawing funds from an automated teller machine (ATM) or within two hours of withdrawing funds from ATM thereafter which results in such loss of or theft of or stolen from the Assured/Insured Person.

**Specific Conditions in respect of Section 6 – Secure Wallet (in addition to General Conditions)**

1. The Assured/Insured Person must take reasonable precautions at all times to ensure the safety and supervision of securing wallet including keys and documents and also should take all practicable steps when withdrawing funds from ATM’s.

2. On discovery by the Assured/Insured Person of their lost or stolen credit card fraudulent payment transaction(s) or cash withdrawals by third party, cover during the Insured Journey within the Period of Insurance would commence from the date of the first fraudulent transaction taken place for up to a maximum of 48 hours or upon notification by the Assured/Insured Person to the bank that their credit card is lost or stolen, whichever the earliest.

3. Retain receipts of cash withdrawals from ATM machines.

4. The Assured/Insured Person must:

   a. Notify to the bank within 24 hours as soon as it is discovered that their Credit Card is lost or stolen in order to block the Credit Card for future transactions being made by the Credit Card.

   b. Inform the bank or credit card company to investigate the fraudulent transaction made on the card

   c. Inform the Police Authorities within 24 hours:

      (i) of lost or stolen Credit Card specifying the theft, date and time of theft, location of the theft or stolen of the card

      (ii) report the assault of violent attack which resulted in theft or stolen of the cash including the location where incident took place, date, time of the assault and the amount of cash stolen

      (iii) of lost keys and official administrative papers and report to indicate the details of the official administrative papers which you were carrying at the time of lost or stolen

5. The Assured/Insured to provide to Underwriters as soon as returning back to their Country of Domicile/Residence written report of such loss or theft along with:

   a. letter from the bank acknowledging receipt of the request to block the card upon discovery of being lost or stolen

   b. letter from the bank or credit card company to state reason for not indemnifying you on the fraudulent transaction in the event they are unable to indemnify the fraudulent transaction charges and their investigative report.

   c. copy of the Police Report

   d. update credit card statement showing the amounts and description of fraudulent transactions made on the card

   e. receipts of cash withdrawals from ATM machine

   f. copy of the locksmith invoice for the replacement of keys and locks

   g. original medical certificate or witness testimony in case of assault of violent attack which resulted in your cash being stolen

   h. any other document Underwriters considers necessary for the validation of the claim and indemnity assessment.

   B. Keys and Papers

The Underwriters will indemnify the Assured/Insured Person up to the Sum Insured as stated in the Schedule of Benefits for costs incurred to replace the keys including locks and official administrative papers in respect of any such loss of or theft of the Assured’s/Insured Person’s house keys, car keys, and official administrative papers during an Insured Journey within the Period of Insurance.
Specific Exclusions in respect of Section 6 – Secure Wallet (in addition to General Conditions)

This Section does not cover:

1. cash in a lost or stolen wallet
2. expired, cancelled or withdrawn credit/debit cards
3. any loss arising from debit cards
4. any loss caused by the Assured’s/Insured Person’s spouse, children or relatives or friends whether intentionally or unintentionally
5. any loss occurring as a result of confiscation by relevant regulatory authorities
6. any loss not reported to the Police or to the Bank or Credit Card Company within 24 hours of discovery
7. any room keys to the house or hotel, pad locks, magnetic keys to the house or hotel or office keys
8. in respect of Children
9. anything mentioned in General Exclusions

SECTION 7 – MONEY, TRAVELLERS CHEQUES & DOCUMENTS/PASSPORT

The Underwriters will indemnify the Assured/Insured Person upto the Sum Insured as stated in the Schedule of Benefits in the event the Assured/Insured Person sustaining loss of or theft of cash (referred to as bank notes, currency notes and coins in current use), travellers’ and other cheques, postal or money orders, prepaid coupons or vouchers, travel tickets, pre-booked event and entertainment tickets, electronic money cards all held for private purposes, or necessary travel documents such as passports, visa documents, identity card, and driving licence:

(i) during an Insured Journey, or
(ii) in the event of cash (referred to as bank notes, currency notes and coins in current use), travellers’ and other cheques, postal or money orders, obtained for the purpose of undertaking the Insured Journey from the time of collection from the bank or 24 hours prior to the Insured Journey (whichever the later) until deposited at the bank or 24 hours after the Insured Journey (whichever the earlier)

For the Loss of Passports:
The cover also includes reasonable extra travel, accommodation and communication expenses which the Assured/Insured Person has to pay to get a temporary or replacement Passport, the cost of the temporary replacement Passport and the cost of re-stamping visas.

In respect of Children upto the age of 18 years, no cover will be provided for Loss of Money and Travellers’ Cheques.

Specific Exclusions in respect of Section 7 – Money, Travellers Cheques & Documents/ Passports (in addition to General Exclusions)

This Section does not cover

1. any claim resulting from
   (a) delay, confiscation, shortages due to errors or omissions in receipts or payments or accountancy, or depreciation in value, or variation in exchange rates;
   (b) loss or theft which is not reported to the Police or appropriate authority within 24 hours of discovery;
2. any loss of travellers cheques or cheques not immediately reported to the local bank or agent of the supplier in accordance with their instructions
3. any loss resulting from loss or theft of credit cards
4. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim;
5. loss directly or indirectly occasioned by, happening through or in consequence of destruction of or damage to property by or under the order of any government or public or local authority;
6. loss of Money, Documents or Passports whilst left unattended at any time or whilst in a suitcase or in the custody of another person or from unattended vehicles.
7. any loss or damage to stamps, documents (other than those covered under this Section), contact or corneal lenses, dentures, hearing aids, fragile items/articles or business goods and samples
8. Passport or any Documents left Unattended at any time (including in a motor vehicle or in the custody of carriers) unless deposited in a hotel safe, safety deposit box or left in your locked accommodation
9. Loss or theft of Passport or Documents not reported to the Police, local embassy, consulate or issuing authority within 24 hours of the discovery of the loss or theft
10. Cost of passport renewal whilst traveling during the trip
11. Fines, penalties, punitive damages

Specific Conditions in respect of Section 7 – Money, Travellers Cheques & Documents/ Passports (in addition to General Conditions)

In respect of Passports
The Assured/Insured Person must take reasonable precautions at all times to ensure the safety and supervision of their Passport and they should take all practicable steps to recover it if lost or stolen. If it is lost or stolen while in the care of a carrier, transport company, authority or hotel, they must report to them, in writing, details of the loss or theft and obtain written confirmation.

If Passport is lost or stolen whilst in the care of an carrier, transport company, authority or hotel:

a. the Assured/Insured Person must obtain a Property Irregularity Report
b. Give formal written notice of the claim to the carrier within the time limit contained in their conditions of carriage (Please retain a copy)
c. Retain all travel tickets and tags for submission if a claim is to be made under this Section of the Policy

SECTION 8 – TRAVEL DELAY AND MISSED DEPARTURE

1. Travel Delay
The Underwriters will pay to the Assured/Insured Person up to the amount specified in the Schedule of Benefits for each complete number of hours as specified in the Schedule for period of delay up to a maximum amount specified in the Schedule of Benefits in respect of any one Insured Journey due to the interruption or withdrawal of chartered or scheduled transport services caused by strike, locked out workers, industrial action, riot, civil commotion, hijack, kidnapping, avalanche, landslide, adverse weather or mechanical breakdown or technical fault of carrier.

OR

2. Missed Departure
The Underwriters will pay to the Assured/Insured Person up to the amount specified in the Schedule of Benefits for costs of an additional travel and accommodation expenses necessary should they arrive at the Assured’s/Insured Person’s departure point too late to commence the trip as a result of failure of carrier due to the interruption or withdrawal of chartered or scheduled transport services caused by strike, locked out workers, industrial action, riot, civil commotion, hijack, kidnapping, avalanche, landslide, adverse weather or mechanical breakdown or technical fault of the vehicle in which the Assured/Insured Person were travelling to reach their Departure Point.

Underwriters will only pay compensation under items 1 or 2 above
Specific Exclusions in respect of Section 8 – Travel Delay, And Missed Departure (in addition to the General Exclusions)

This Section does not cover

1. the Assured's/Insured Person's abandonment of the trip
2. the Assured's/Insured Person's failure to check in according to the itinerary supplied and failure to obtain confirmation from the carriers (or their handling agents) in writing of the number of hours of delay and the reason for such delay
3. failure to comply with the terms of contract of the Travel Agent, Tour Operator or provider of transport
4. Strike or industrial action or air traffic control delay existing or publicly declared by the date this Insurance is effected by the Assured/Insured Person
5. Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Civil Aviation Authority or a Port Authority or any similar body in any country
6. any losses from strike, locked out workers, industrial action, riot, civil commotion, hijack, kidnap, avalanche, landslide, adverse weather or mechanical breakdown which commenced or announced before the date of booking the trip
7. breakdown of any of the vehicle owned or rented or hired by the Assured/Insured Person to reach the departure point
8. any additional expenses where the carrier has offered reasonable alternative travel arrangements
9. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim

Specific Conditions in respect of Section 8 – Travel Delay, And Missed Departure (in addition to the General Conditions)

Any amounts recoverable by the Assured/Insured Person under this Section or under Section 3, Cancellation & Curtailment will be deducted by the Underwriters

Travel Delays – EC Regulations (for travel within the European Union (EU) and with European Union (EU) carriers)

This policy is not designed to cover costs which are met under the EC Regulation no. 261/2004. Under the EC Regulation no. 261/2004, if the Assured/Insured Person have a confirmed reservation on a flight, and that flight is delayed by between 2 and 4 hours (length of time depends on the length of flight) the airline must offer to the Assured/Insured Person meals, refreshments and hotel accommodation.

If the delay is more than 5 hours, the airline must offer to refund the ticket. The Regulations should apply to all flights, whether budget, chartered or scheduled, originating in the EU, or flying into the EU using EU carrier.

In the event the Assured's/Insured Person's flight is cancelled or delayed, Assured/Insured Person in the first instance must contact the airline and clarify with them what costs they will pay under the Regulation.

Should the Assured/Insured Person require to know their rights under this Regulation, additional useful information can be found on the Civil Aviation Authority website www.caa.co.uk.

SECTION 9 – LEGAL EXPENSES

The Underwriters will indemnify to the Assured/Insured Person for costs and expenses incurred by the Assured's/Insured Person's legal representative for legal proceedings for compensation and/or damages arising from or out of the Assured's/Insured Person's bodily injury or death during an Insured Journey, provided that the Underwriters shall have the complete control of the proceedings and/or the selection, appointment and control of all legal advisers.

Provisions

The liability of the Underwriters for costs and expenses payable shall not exceed in respect of any one occurrence or series of occurrences arising out of one source or original cause up to maximum Limit of Indemnity as specified in the Schedule of Benefits.

Specific Exclusions in respect of Section 9 – Legal Expenses (in addition to General Exclusions)

This Section does not cover for:

1. any costs or expenses incurred by the Assured/Insured Person for any claim brought against any Tour Operator, travel agent, carrier or Underwriters.
2. any costs or expenses incurred before granting of the Underwriters support which they would not unreasonably withhold. Underwriters reserve the right to withdraw at any stage and shall not then be liable for any further expenses.
3. any incident reported more than 90 days after the event occurs which gives rise to such claim
4. any claim where Underwriters consider the prospects of success in obtaining a satisfactory settlement.
5. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim

SECTION 10 – ADVANCE OF BAIL FUNDS

Subject to prior approval by the Underwriters, Underwriters will agree to provide in advance funds for a bail up to maximum amount as Specified in the Schedule of Benefits if required by criminal judicial authorities for provisional release from custody of the Assured or on an Insured Person following any inadvertent contravention or infringement in a visiting country, the necessary amount being made available as an advance.

Specific Conditions in respect of Section 10 – Advance of Bail Funds (in addition to General Conditions)

The Assured/Insured Person or the Assured's/Insured Person's must report the matter to the Underwriters as soon as possible following the Assured's/Insured Person's arrest and provide Underwriters with a police report confirming that the Assured/Insured Person have been lawfully imprisoned and the date of such imprisonment.

Specific Exclusions in respect of Section 10 – Advance of Bail Funds (in addition to General Exclusions)

This Section does not cover for:

1. any costs incurred by the Assured/Insured Person in relation to their imprisonment
2. Assured's/Insured Person's Parents or Immediate Family costs before the Assured's/Insured Person's were in prison for the total duration of imprisonment.
3. Any claim arising from a trip taken within the Country of Domicile/Residence.
4. Any amount that can be recovered by the Assured/Insured Person from other sources.
5. Anything mentioned in General Exclusions.

SECTION 11 - HIJACK AND KIDNAP

The Underwriters will pay to the Assured/Insured up to the amount specified in the Schedule of Benefits for each complete day the Assured/Insured Person is detained in excess of hours as stated in the Schedule of Benefits for up to maximum number of days as specified in the Schedule should the Assured's/Insured Person's means of Transport be subject to a Hi-Jack or Kidnap during a planned trip.

The Period of Insurance is automatically extended in the event of Hi-Jack
Specific Exclusions in respect of Section 11 – Hijack and Kidnap (in addition to General Exclusions)

This Section does not cover:
1. any claim relating to payment of ransom monies
2. any claim where the detainment, internment, hijack or kidnap of the Assured/Insured Person has not been reported or investigated by the police or local authority
3. anything mentioned in General Exclusions

Specific Conditions in respect of Section 11 – Hijack and Kidnap (in addition to General Conditions)

1. Claims will not be accepted for Hijack or Kidnap that have directly resulted from the activities of the Assured/Insured Person
2. Assured/Insured Person have no family or business connections that have directly led to a claim under this section
3. All of the Assured/s/Insured Person’s visas are in order
4. Assured/Insured Person must report any hijack or kidnap to the police as soon as possible upon their release and provide Underwriters within 30 days of returning from the trip with a police report confirming that the Assured/Insured Person were unlawfully detained and the dates of such detention.

OPTIONAL COVERS

SECTION 12 – TERRORISM COVER

Provided that the Assured/Insured Person has paid additional premium and that the Assured/Insured is an innocent bystander by an act of Terrorism and not participating in active war. Underwriters will extend the cover under the following Sections:

Section 1 – Personal Accident
Section 2 – Medical and Emergency Expenses

Specific Conditions in respect of Section 12 –Terrorism Cover (In addition to General Conditions)

1. Underwriters shall not be liable for any consequence of any act of terrorism involving the release or threat of release of germ disease or other chemical or biological contagions or contaminants the use of threat of use of any nuclear device or radioactive substance.
2. There must otherwise be a valid claim under the Terms and Conditions applicable to the relevant Section(s).
3. The maximum liability in the aggregate under this Policy shall not exceed the amount under relevant Section(s) covered as stated in the Schedule of Benefits for the Assured / Insured Person during the Period of Insurance/Insured Journey.

SECTION 13 – SPORTS, LEISURE ACTIVITIES & WINTER SPORTS

Provided that the Assured/Insured Person has paid additional premium, Underwriters will extend the cover under Section 1 – Personal Accident and Section 2 – Medical and Emergency Expenses to include Sports, Leisure Activities & Winter Sports as defined below provided that the activity is on an incidental basis during an Insured Journey:


Water Sports: Angling, Jet Ski, Parasailing, Snorkelling, Scuba Diving (upto 30 metres depth, dives only under the constant supervision of a properly licensed diving school and follows their rules and instructions at all times and provided being accompanied by a qualified instructors), Surfing, Swimming, Waterskiing, Rafting or Canoeing (including white water rapids up to Grade 3 – Life jacket and helmet must be worn), Yachting/Boating or Windsurfing in inland or coastal waters (12 mile limit).

Winter Sports: Cross Country skiing, bob sleighing, Ice Hockey, ice skating, (no speed skating), mono skiing, ski boarding, sledging, snowboarding or surfing, snow shoeing, snow skiing, snowmobiling as a passenger only

First Aid and/or Rescue Cover

Underwriters will reimburse the Assured / Insured Person up to the amount stated in the Schedule of Benefits in respect of the costs of first aid and rescue at sea and/or in the mountains executed by official bodies to save the life or physical integrity of the Assured / Insured Person.

Ski Equipment

Underwriters will pay up to the amount as specified in the Schedule of Benefits for the accidental loss of, theft of, or damage to ski equipment which is owned by the Assured/Insured Person.

The amount payable for the ski equipment will be the value at price on the date of loss less a deduction for wear and tear and depreciation (loss of value – calculated from the table below), or at Underwriters option replace, reinstate or repair the lost or damaged ski equipment.

<table>
<thead>
<tr>
<th>Age of Item</th>
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<tr>
<td>Upto 12 months old</td>
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<td>Over 60 months old</td>
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</tr>
</tbody>
</table>

The maximum amount Underwriters will pay for any Single Article Limit as specified in the Schedule of Benefits

Specific Conditions to Ski Equipment:

1. Assured/Insured Person must report to the local Police in the country where the incident occurred within 24 hours of discovery and get a written report of the loss, theft or attempted theft of all ski equipment.
2. For items damaged whilst on the trip, the Assured/Insured Person must obtain an official report from a retailer confirming the item is damaged and beyond repair.
3. If the ski equipment is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or any other accommodation provider, the Assured/Insured Person must report to them, in writing, details of the loss, theft or damage and get written confirmation. If ski equipment is lost, stolen or damaged whilst in the care of a carrier, the Assured/Insured Person must:
   a. obtain a Property Irregularity Report from the carrier
   b. give formal written notice of the claim to the carrier within the time limit set out in their conditions of carriage (please keep a copy)
   c. keep all travel tickets and tags for submission if the claim is to be made under this policy.
4. Assured/Insured Person must provide proof of ownership for items lost, stolen or damaged.

Specific Exclusions to Ski Equipment

Underwriters will not cover for:
1. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim
2. loss, theft or damage to ski equipment contained in or stolen from an unattended vehicle.
3. more than the Assured's/Insured Person's liability for the loss or damage to any hired ski equipment.
4. loss or damage due to delay, detention, seizure or confiscation by customs or any other authority officials
5. any claim for loss or theft of ski equipment, if the Assured/Insured Person has not notified or reported to the police within 24 hours of its discovery and obtained written report which includes the crime reference number
6. any claim, if the loss or theft or damage occurs during the trip or whilst in the custody of an airline or other carrier and the Assured/Insured Person have not notified/reported to the carrier or their handling agent of the incident and obtained an official report or a Property Irregularity Report
7. more than the single article limit as specified in the Schedule of Benefits
8. any claim which the Assured/Insured Person is not able to provide the original receipt, proof of purchase along with an insurance valuation which was obtained prior to the loss
9. claims for loss, theft or damage to anything being shipped as freight or under the Bill of Lading.
10. any ski equipment that was damaged while in use
11. loss or damage caused by wear and tear, depreciation (loss of value), deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning, repairing or restoring, mechanical or electrical breakdown
12. loss of or theft of or damage to ski equipment left unattended in public place or if it has been left in the custody of anyone.
13. loss of or theft of or damage from the Assured's/Insured Person's accommodation unless there is evidence of forced entry which is confirmed by a Police Report
14. anything mentioned in General Exclusions

**Ski Equipment Hire**

In the event that the Assured's/Insured Person's own ski equipment is delayed in transit by more than 24 hours or loss, theft or damage to the Assured/Insured Person's own ski equipment then Underwriters will pay the sum insured up to the amount as specified in the Schedule of Benefits per day, and up to the maximum number of days as specified in the Schedule of Benefits for the cost of necessary ski equipment hire for replacement where the Assured/Insured Person are without their own ski equipment.

**Specific Conditions to Ski Equipment Hire:**

1. Assured/Insured Person must report to the local Police in the country where the incident occurred within 24 hours of discovery and get a written report of the loss, theft or attempted theft of all ski equipment.
2. If the ski equipment is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or any other accommodation provider, the Assured/Insured Person must report to them, in writing, details of the loss, theft or damage and get written confirmation. If ski equipment is lost, stolen or damaged whilst in the care of a carrier, the Assured/Insured Person must:
   a. obtain a Property Irregularity Report from the carrier
   b. give formal written notice of the claim to the carrier within the time limit set out in their conditions of carriage (please keep a copy)
   c. keep all travel tickets and tags for submission if the claim is to be made under this policy.
3. Assured/Insured Person must provide proof of ownership for items lost, stolen or damaged.
4. Cover will cease upon the Assured/Insured Person receiving their own ski equipment whichever the earliest.

**Specific Exclusions to Ski Equipment Hire**

Underwriters will not cover for:

1. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim
2. loss, theft or damage to ski equipment contained in or stolen from an unattended vehicle.
3. more than the Assured's/Insured Person's liability for the loss or damage to any hired ski equipment.
4. loss or damage due to delay, detention, seizure or confiscation by customs or any other authority officials
5. any claim for loss or theft of ski equipment, if the Assured/Insured Person has not notified or reported to the police within 24 hours of its discovery and obtained written report which includes the crime reference number
6. any claim, if the loss or theft or damage occurs during the trip or whilst in the custody of an airline or other carrier and the Assured/Insured Person have not notified/reported to the carrier or their handling agent of the incident and obtained an official report or a Property Irregularity Report
7. any claim which the Assured/Insured Person is not able to provide the original receipt, proof of purchase along with an insurance valuation which was obtained prior to the loss
8. claims for loss, theft or damage to anything being shipped as freight or under the Bill of Lading.
9. any ski equipment that was damaged while in use
10. loss or damage caused by wear and tear, depreciation (loss of value), deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning, repairing or restoring, mechanical or electrical breakdown
11. loss of or theft of or damage to ski equipment left unattended in public place or if it has been left in the custody of anyone.
12. anything mentioned in General Exclusions

**Ski Pack**

In the event the Assured/Insured Person is unable to use their unused portion of ski pack (ski school fees, lift passes, or tuition fees and hired ski equipment due to an Accident or Sickness, Underwriters will pay the sum insured up to the amount as specified in the Schedule of Benefits for the proportionate value of any unused ski pack.

**Specific Conditions to Ski Pack:**

1. Assured/Insured Person must obtain report from the Registered Medical Practitioner including medical certificate explaining the reasons why the Assured/Insured Person were unable to use their ski pack
2. Any other relevant information relating to the claim that Underwriters may ask the Assured/Insured Person for.

**Piste Closure**

Underwriters will pay the sum insured up to the amount as specified in the Schedule of Benefits per day, and up to the maximum number of days as specified in the Schedule of Benefits for transport costs necessarily incurred by the Assured/Insured Person to travel to and from an alternative site if either lack of or excess of snow, or an avalanche, results in the skiing facilities (excluding cross-country skiing) in the Assured's/Insured Person's ski resort being closed and it is not possible to ski.

The cover only applies:
a. to the ski resort which the Assured/Insured Person has pre-booked for a period more than 24 hours and for so long as these conditions continue at the resort but not more than the pre-booked period of the trip, and

b. to the trip taken outside the Assured's/Insured Person's Country of Domicile/Residence during the published ski season for the ski resort.

In the event that no alternative sites are available, Underwriters will pay the sum insured up to the amount as specified in the Schedule of Benefits per day and up to the maximum number of days as specified in the Schedule of Benefits.

Specific Conditions to Piste Closure:
The Assured/Insured Person must obtain written confirmation from the relevant authority, ski lift operator, ski resort management, or the Assured’s/Insured Person’s tour operator of the number of days that skiing facilities were closed at the ski resort where the Assured/Insured Person has pre-booked and the reason for the closure.

Specific Exclusions to Piste Closure:
Underwriters will not cover for:

1. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim
2. any benefit, if the Assured/Insured Person are not skiing in a pre-booked ski resort which is more than 1,000m above sea level
3. any benefit, if the Assured/Insured Person are unable to provide written report from either relevant authority, ski lift operator, ski resort management or from the Assured’s/Insured Person’s Tour Operator with whom the ski resort was booked to substantiate the claim
4. any benefit, if any circumstances where the Assured/Insured Person has been offered a reasonable alternative destination due to piste closure in their pre-booked ski resort for transport costs, compensation or alternative skiing resort facilities which are available and provided to the Assured/Insured Person
5. claims for loss of enjoyment, however caused
6. any benefit if the Assured/Insured Person were aware of or it was publicly known there was likely to be lack of snow at the time of booking the ski resort or taking out this insurance.

Avalanche or Landslide
Underwriters will pay the sum insured up to the amount as specified in the Schedule of Benefits per day, and up to the maximum number of days as specified in the Schedule of Benefits for reasonable additional accommodation (room only) and travel expenses necessarily incurred in the event the Assured's/Insured Person's outward journey or return trip back to the Assured’s/Insured Person's Country of Domicile/Residence is delayed by at least minimum of 12 hours and beyond the schedule departure time as a direct result of an avalanche or landslide at the Assured’s/Insured Person's pre-booked ski resort during the published ski season.

Specific Exclusions to Avalanche or Landslide:
Underwriters will not cover for:

1. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim
2. any benefit, if the Assured/Insured Person are unable to provide written report from either relevant authority, ski lift operator, ski resort management or from the Assured’s/Insured Person’s Tour Operator with whom the ski resort was booked to substantiate the claim

GOLF COVER

1. Golf Equipment
Underwriters will pay the sum insured up to the amount as specified in the Schedule of Benefits for the loss of, theft of, or damage to golf equipment which is owned by the Assured/Insured Person

The amount payable for the golf equipment will be the value at price on the date of loss less a deduction for wear and tear and depreciation (loss of value – calculated from the table below), or at Underwriters’ option replace, reinstate or repair the lost or damaged golf equipment.

<table>
<thead>
<tr>
<th>Age of Item</th>
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<tbody>
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The maximum amount Underwriters will pay for any Single Article Limit as specified in the Schedule of Benefits

Specific Conditions to Golf Equipment:
1. Assured/Insured Person must report to the local Police in the country where the incident occurred within 24 hours of discovery and get a written report of the loss, theft or attempted theft of all golf equipment. A holiday representatives report or from golf club report is not sufficient.

2. For items damaged whilst on the trip, the Assured/Insured Person must obtain an official report from a retailer confirming the item is damaged and beyond repair.

3. If the golf equipment is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or any other accommodation provider, the Assured/Insured Person must report to them, in writing, details of the loss, theft or damage and get written confirmation. If golf equipment is lost, stolen or damaged whilst in the care of a carrier, the Assured/Insured Person must:
   a. obtain a Property Irregularity Report from the carrier
   b. give formal written notice of the claim to the carrier within the time limit set out in their conditions of carriage (please keep a copy)
   c. keep all travel tickets and tags for submission if the claim is to be made under this policy.

4. Assured/Insured Person must provide proof of ownership for items lost, stolen or damaged.

Specific Exclusions to Golf Equipment
Underwriters will not cover for:

1. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim
2. loss, theft or damage to golf equipment contained in or stolen from an unattended vehicle.
3. loss, theft or damage of golf equipment being carried on a vehicle roof rack.
4. loss arising from damage caused by leakage of powder or liquid carried within personal effects or golf equipment.
5. loss or damage due to delay, detention, seizure or confiscation by customs or any other authority officials
6. any claim for loss or theft of ski equipment, if the Assured/Insured Person has not notified or reported to the police within 24 hours of its discovery and obtained written report which includes the crime reference number
7. any claim, if the loss or theft or damage occurs during the trip or whilst in the custody of an airline or other carrier and the Assured/Insured Person have not notified/reported to the carrier or their handling agent of the incident and obtained an official report or a Property Irregularity Report
8. more than the single article limit as specified in the Schedule
any claim which the Assured/Insured Person is not able to provide the original receipt, proof of purchase along with an insurance valuation which was obtained prior to the loss

claims for loss, theft or damage to anything being shipped as freight or under the Bill of Lading.

any golf equipment that was damaged while in use

loss or damage caused by wear and tear, depreciation (loss of value), deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning, repairing or restoring, mechanical or electrical breakdown

loss of or theft of or damage to golf equipment left unattended in public place or if it has been left in the custody of anyone.

loss of or theft of or damage from the Assured's/Insured Person's accommodation unless there is evidence of forced entry which is confirmed by a Police Report

anything mentioned in General Exclusions

**Golf Equipment Hire**

In the event that the Assured's/Insured Person's own ski equipment is delayed in transit by more than 24 hours or loss, theft of or damage to the Assured's/Insured Person's own golf equipment then Underwriters will pay the sum insured up to the amount as specified in the Schedule of Benefits per day, and up to the maximum number of days as specified in the Schedule of Benefits for the cost of necessary golf equipment hire for replacement where the Assured/Insured Person are without their own golf equipment.

**Specific Conditions to Golf Equipment Hire:**

1. Assured/Insured Person must report to the local Police in the country where the incident occurred within 24 hours of discovery and get a written report of the loss, theft or attempted theft of all golf equipment.

2. If the golf equipment is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or any other accommodation provider, the Assured/Insured Person must report to them, in writing, details of the loss, theft or damage and get written confirmation. If golf equipment is lost, stolen or damaged whilst in the care of a carrier, the Assured/Insured Person must:

   a. obtain a Property Irregularity Report from the carrier
   b. give formal written notice of the claim to the carrier within the time limit set out in their conditions of carriage (please keep a copy)
   c. keep all travel tickets and tags for submission if the claim is to be made under this policy.

3. Assured/Insured Person must provide proof of ownership for items lost, stolen or damaged.

4. Cover will cease upon the Assured/Insured Person receiving their own golf equipment whichever is the earliest.

**Specific Exclusions to Golf Equipment Hire**

Underwriters will not cover for:

1. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim

2. loss, theft or damage to golf equipment contained in or stolen from an unattended vehicle.

3. loss, theft or damage of golf equipment being carried on a vehicle roof rack.

4. more than the Assured's/Insured Person's liability for the loss or damage to any hired golf equipment.

5. loss or damage due to delay, detention, seizure or confiscation by customs or any other authority officials

6. any claim for loss or theft of golf equipment, if the Assured/Insured Person has not notified or reported to the police within 24 hours of its discovery and obtained written report which includes the crime reference number

7. any claim, if the loss or theft or damage occurs during the trip or whilst in the custody of an airline or other carrier and the Assured/Insured Person have not notified/report to the carrier or their handling agent of the incident and obtained an official report or a Property Irregularity Report

8. any claim which the Assured/Insured Person is not able to provide the original receipt, proof of purchase along with an insurance valuation which was obtained prior to the loss

9. claims for loss, theft or damage to anything being shipped as freight or under the Bill of Lading.

10. any golf equipment that was damaged while in use

11. loss or damage caused by wear and tear, depreciation (loss of value), deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning, repairing or restoring, mechanical or electrical breakdown

12. loss of or theft of or damage to golf equipment left unattended in public place or if it has been left in the custody of anyone.

13. loss arising from damage caused by leakage of powder or liquid carried within personal effects or golf equipment.

14. more than the single article limit as specified in the Schedule of Benefits

15. anything mentioned in General Exclusions

**Non-Refundable Golfing Fees**

Underwriters will pay the sum insured up to the amount specified in the Schedule of Benefits for the proportionate value of any non-refundable pre-paid green fees, or golf equipment hire, or tuition fees which are not used due to the Assured/Insured Person being involved in an Accident or first contracts Sickness or loss of or theft of the Assured's/Insured Person's documentation which prevents their participation in the pre-paid golfing activity and/or closure of the golf course caused by adverse weather.

**Specific Conditions to Non-Refundable Golfing Fees:**

1. Assured/Insured Person must obtain report from the Registered Medical Practitioner including medical certificate explaining the reasons why the Assured's/Insured Person's inability to play golf.

2. Any other relevant information relating to the claim that Underwriters may ask the Assured/Insured Person for.

**Specific Exclusions to Non-Refundable Golfing Fees:**

Underwriters will not cover for:

1. the amount of the Excess specified in the Schedule of Benefits in respect of each and every claim

2. anything mentioned in General Exclusions

**Hole in One**

Underwriters will pay the sum insured up to the amount as specified in the Schedule of Benefits for customary celebratory expenses the Assured/Insured Person has incurred within the golf club premises immediately following the Assured's/Insured Person's achieving hole-in-one (gross score).

**Specific Conditions to Hole in One:**

1. the hole in one must be achieved at the first stroke of the ball from the appropriate tee and not be subject to any stroke index allowance

2. the secretary or other appropriate official of the club must certify in writing that the Assured/Insured Person achieved hole in one
POLICY DEFINITIONS

'ASSURED/INSURED PERSON' means each person who is travelling on a Trip whose name(s) appears in the Policy Schedule.

'ACCIDENT' means a sudden, unexpected, unusual, violent, external, and visible means, specific event which occurs at a single identifiable time and place during an Insured Journey within the Period of Insurance.

Accident shall also include
(a) exposure resulting from a mishap to a conveyance in which the Assured/Insured Person is travelling;
(b) disappearance. If the Assured/Insured Person has disappeared during an Insured Journey within the Period of Insurance and the Assured/Insured Person is not found within twelve months of disappearing, and sufficient evidence is produced satisfactory to the Underwriters that leads them inevitably to the conclusion that the Assured/Insured Person has sustained Bodily Injury and that such injury has caused the Assured's/Insured Person's death, the Underwriters shall forthwith pay any death benefit, where applicable, under this policy, provided that the person or persons to whom such sum is paid shall sign an undertaking to refund such sum to the Underwriters if the Assured/Insured Person is subsequently found to be living.
(c) Asphyxia or injuries caused by gases or vapours, immersion or submersion, or from the consumption of liquid or solid matter other than foodstuffs.
(d) Infections resulting from an accident covered by the policy
(e) Injuries which are a direct result of surgical operations or medical treatments undertaken as a result of an accident covered by the policy
(f) Injuries sustained as a result of self-defence

'AIDS' means an opportunistic infection or a malignant neoplasm. For the purpose of this definition, the term "Acquired Immune Deficiency Syndrome" shall have the meaning assigned to it by the World Health Organization. "Acquired Immune Deficiency Syndrome" shall include H.I.V. (Human Immune Deficiency Virus), encephalitis (dementia) or H.I.V. wasting syndrome.

'ARTICLE OR PAIR OR SET OF ARTICLES' means a number of items of Baggage, Personal Effects and valuables considered as being similar or complementary to one another or used together

'ASSISTANCE COMPANY' means the name of the Company as shown on the Claims Procedure whose services are requisitioned by the Underwriters for rendering emergency assistance to the Assured/Insured Persons. The contact details of the Assistance Company are given on the Claims Procedure.

'BAGGAGE' means the Assured's/Insured Person's suitcase, luggage, business goods or equipment, clothing, personal effects, Valuables and other articles which belongs to the Assured/Insured Person (or for which they are legally responsible) and are worn, used or carried by the Assured/Insured Person during the Trip.

'BODILY INJURY' means identifiable physical injury which
(a) is caused by an Accident, and
(b) solely and independently of any other cause, except sickness directly resulting from, or medical or surgical treatment rendered necessary by such injury, occasions the death or dismemberment of the Assured/Insured Person within twelve months from the date of the Accident.

'BUSINESS GOODS OR EQUIPMENT' means the items used by the Assured/Insured Person and which belongs to the Assured/Insured Person in support of the Assured's/Insured Person's business activity including office equipment which is portable by design including but not restricted to, personal computers, telephones and calculators.

'CANCELLATION COSTS' shall mean Unused and irrecoverable travel, car hire, excursions and accommodation expenses paid or contracted to be paid by the Assured/Insured Person in respect of Journey/Trip.

'CARRIER' any publicly licensed aircraft, sea vessel, train or coach, pre-booked Taxis, Limousine service on which the Assured/Insured Person have booked to travel.

'CHECKED-IN BAGGAGE' means the baggage of the Assured/Insured Person under the care, custody and control of Common Carrier for the purposes of transit and which is not under the immediate supervision of the Assured/Insured Person concerned.

'CHILDREN' means the Assured's/Insured Person's dependent children who are not in full-time employment and who are between the ages of 3 months and 18 years (or under the age of 23 years provided they are in full-time education), unmarried, not pregnant, without children and primarily dependent on the Assured/Insured Person for support.

'CLOSE BUSINESS ASSOCIATE' shall mean Any person whose absence from the Assured's/Insured Person's normal place of business for one or more complete days at the same time as Assured's/Insured Person's absence prevents the proper continuation of that business.

'CLOSE RELATIVE' shall mean the Assured’s/Insured Person's spouse living at the same address, child, parent, brother or sister, or brother-in-law or sister-in-law, Fiancée, Step Parent, Step Child, Grandparents, Grand Child, Step Brother or Step Sister. Spouse shall include any partner living in a relationship with the Assured/Insured Person at the same address, whether married or not and irrespective of gender. Assured/Insured Person may be required to demonstrate the existence of the relationship.

'COMPLICATIONS OF PREGNANCY AND CHILDBIRTH' for the purposes of this policy, complications of pregnancy and childbirth shall only be deemed to include the following: toxaemia, gestational hypertension, pre-eclampsia, ectopic pregnancy, hydatidiform mole (molar pregnancy), post partum haemorrhage, retained placenta membrane, placental abruption, hyperemesis gravidarum, placenta praevia, stillbirths, miscarriage, medically necessary emergency Caesarean sections/medically necessary termination and pre-mature births more than 8 weeks (or 16 weeks in the case of a known multiple pregnancy) prior to the expected delivery date.

'CURTAILMENT COSTS' shall mean Travel costs necessarily incurred to return the Assured/Insured Person back to Country of Domicile/Residence before the booked return date and a pro rata amount representing the unused and irrecoverable costs of accommodation, car hire and excursions attributable to each complete day which is not spent overseas. This pro rata refund excludes all costs attributable to the outward and return travel tickets, whether used or unused.

'EXCESS or DEDUCTIBLE' shall mean an amount deducted per Assured/Insured Person, per policy section for each incident which results in a claim.

'GOLF EQUIPMENT' means golf clubs, golf balls, golf bag, golf shoes, and non-motorised golf trollies.

'GUARDIAN' shall mean the person with a legal duty of care for a child or group of children aged under 18 years or the person with a legal duty of care for a disabled person or group of disabled persons during the period of the policy.

'HIJACK/KIDNAP' means unlawful seizure or wrongful exercise of control of an aircraft or conveyance, or the crew thereof, in which the Assured/Insured Person is travelling as a passenger.

'HOMESTAY' means an establishment which meets all of the following requirements: (1) holds a licence as a hospital, if licensing is required in the country or governmental jurisdiction; (2) operates primarily for the reception, care and treatment of sick, ailing or injured persons as in-
patients; (3) provides 24 hour a day nursing service registered or graduate nurses; (4) has a staff of one or more physicians available at all times; (5) provides organised facilities for diagnosis and major surgical procedures; (6) is not primarily a clinic, nursing, rest or convalescent home or similar establishment and is not, other than incidentally, a place for alcoholics or drug addicts; and (7) maintains X-ray equipment and operating room facilities.

‘INSURED CREDIT CARD’ means all Credit Cards held by the Assured/Insured Person but not by those under the age of 18 years of age.

‘INSURED JOURNEY’ shall mean any Trip/journey falling within and commencing during the Period of Insurance and shall be deemed to start from the time the Assured / Insured Person leaves his home or, if later, his place of business to travel outside the limits of the Assured’s Insured Person’s country of domicile and continues during the entire period of the Trip/journey. Includes whilst temporarily staying/residing during the journey/trip, and shall finish at the time of return to his home or, if earlier, his place of business.

The Period of Insurance is automatically extended for the period of the delay in the event that your return to Home is unavoidably delayed due to an event insured by this Policy.

‘JOURNEY/TRIP’ means any holiday, pleasure trip or business or journey made by the Assured/Insured Person within the Area of Travel shown in the Schedule which begins and ends in the Country of Domicile/Residence during the Period of Insurance but excluding one-way trips or journeys.

Any Trip or Journey solely within the Country of Domicile/Residence is not covered.

Any such Trip/Journey shall not exceed 90 days

‘LOSS OF A LIMB’ means permanent loss by physical separation of a hand at or above the wrist or of a foot at or above the ankle and includes permanent total and irrecoverable loss of use of hand, arm or leg.

‘LOSS OF SIGHT’ means total and irrecoverable loss of vision in one or both eyes.

‘MEDICAL CONDITION’ means any medical or psychological disease, sickness, condition, illness or injury that has affected the Assured/Insured Person or any close relative, close business associate, travelling companion or person with whom the Assured/Insured Person intended to stay whilst on the trip.

‘MEDICAL DECLARATION’ means medical information that needs to be declared to Underwriters before each period of insurance by the Assured/Insured Person who has suffered from a pre-existing medical condition. Refer to Important Conditions relating to Health.

‘MUGGING’ means a violent, threatening attack by a third party causing actual bodily harm.

‘ORTHOPAEDIC MATERIAL OR ORTHESIS’ means anatomical parts or items of any kind used to prevent or correct temporary or permanent deformations of the body (including but not limited to walking sticks, cervical collars and wheelchairs).

‘OSTEOSYNTHESIS MATERIAL’ means parts or pieces of metal or of any other kind used to join together the ends of a fractured bone, or to knit together the tips of joints, by surgical operation and which can be reused.

‘PERIOD OF INSURANCE’ means

Annual multi-trip cover

the period for which as specified in the Schedule. During this period any trip not to exceed 90 days is covered as indicated on the Schedule.

Annual Policy will not be automatically renewed.

Under these Policies, Cancellation Cover under Section 3, shall be operative from the time of booking any Trip or the date of policy is issued whichever the latter, and terminates on commencement of any Trip.

In any event, no Cover shall commence more than 24 hours prior to booked departure time or terminate more than 24 hours after booked return to Home/Country of Domicile/Residence.

For all other Sections of the Policy, the Insurance commences during the Insured Journey

Single trip cover

the period of the trip and terminating upon it’s completion, but not in any case exceeding the period as specified in the Schedule

Under these Policies, Cancellation Cover under Section 3, shall be operative from the time of booking any Trip or the date of policy is issued or the date the premium is paid to the Underwriters whichever the later, and terminates on commencement of any Trip.

In any event, no Cover shall commence more than 24 hours prior to booked departure time or terminate more than 24 hours after booked return to Home/Country of Domicile/Residence.

For all other Sections of the Policy, the Insurance commences during the Insured Journey

‘PERMANENT TOTAL DISABLEMENT’ means disablement which entirely prevents the Assured/Insured Person from attending to any business or occupation for which lasts twelve months and at the end of that period is beyond hope of improvement.

‘PERMANENT DISABLEMENT’ means disablement which lasts twelve months and at the expiry of that period is beyond hope of improvement.

‘PROSTHESSES’ means the replacement (whether on a temporary or permanent basis) of a missing body part including but not limited to, mechanical or biological items such as cardiac valve parts, joint replacements, synthetic skin, intraocular lenses, biological materials (cornea), fluids, gels and synthetic or semi-synthetic liquids that replace organic humours or liquids, medicine reservoirs and mobile oxygen therapy systems.

‘PRE-EXISTING MEDICAL CONDITION’ means

• an ongoing or recurring Medical Condition (or any medical complication directly attributable to that Condition) investigated by a Registered Medical Practitioner (whether diagnosed or not) and/or

• a Medical Condition (other than a minor non recurring ailment) for which there has been a prescribed medication or treatment by a Registered Medical Practitioner.

‘REASONABLE AND CUSTOMARY CHARGES/COSTS’ means the charges which: (a) are medically required for the treatment, supplies or medical service to treat Assured’s / Insured Person’s condition; (b) do not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expenses are incurred, and (c) do not exceed the charges for treatment that would have been made if no insurance existed.

‘REGISTERED MEDICAL PRACTITIONER’ means a registered practising member of the medical profession recognised by the law of the country in which they are practising, who is not related or known personally to the Assured/Insured Person.

‘REDUNDANCY’ means loss of paid employment (provided employment has been on a continuous basis with the same employer for at least 24 months; and you qualify for payment under current redundancy payment legislation in your Country of Domicile/Residence; and at the time of booking the journey/trip or purchasing this policy, whichever is the later, there was no reason to believe anyone would be made redundant) of you or any person who are travelling or have arranged to travel with

‘SICKNESS’ means any condition, sickness, disease or illness, including compulsory quarantine following such sickness, disease or illness, set of symptoms or sickness leading to a change in the Assured’s/Insured Person’s health and as diagnosed and confirmed by a Registered Medical Practitioner during the period of insurance and which is not a pre-existing medical condition

‘SINGLE ARTICLE LIMIT’ means any one article pair or set of articles (including golf clubs, ski equipment) or collection which is used or worn together

‘SKI EQUIPMENT’ means skis, poles, boots and bindings, snow boards or ice skates
‘SKI PACK’ means hired ski equipment, ski school fees and lift passes

‘STRIKE or INDUSTRIAL ACTION’ shall mean any form of industrial action, whether organised by a trade union or not, which is carried on with the intention of preventing, restricting, or otherwise interfering with the production of goods or the provision of services.

‘TERRORISM’ means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or governments, committed for political, religious, ideological, or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.

‘THIRD PARTY’ means any person other than the Assured/Insured Person’s spouse or common-law partner, child or parent or relative or friend

‘TRAVELLING COMPANION’ means a person(s) with whom the Assured/Insured Person have booked to travel on the same travel itinerary and without whom the Assured's/Insured Person’s travel plans would be impossible.

‘UNATTENDED’ means when the Assured/Insured Person cannot see and/or are not close enough to the Assured/Insured Person’s property or vehicle to prevent unauthorised interference or theft of the Assured/Insured Person’s property or vehicle.

‘UNDERWRITERS’ means certain Underwriters at Lloyd’s

‘VALUABLES’ means jewellery, antiques, articles made of gold or silver or other precious metals, or semi-precious stones, musical instruments, watches, furs, perfumes, leather clothing or goods, silks, spectacles, sunglasses, photographic including equipments, cameras and camcorders, binoculars, telescopes, audio or digital media, electronic and electrical equipment of any kind (including any portable personal computer or laptop or tablets of any kind Kindles, Tablets or any hand-held electronic devices, iPods, iPads, CDs, DVD's, computer games, game consoles, video and audio tapes, cartridges and headphones), mobile phones and other mobile communication.

‘WAR’ means war whether declared or not or any warlike activities (including use of military force) by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends

Words in the masculine gender shall include the feminine.

GENERAL POLICY EXCLUSION – APPLICABLE TO ALL SECTIONS

This policy shall not cover:

1. War risks, civil commotion and terrorism
   War, invasion, act of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, or military or usurped power riot or civil commotion, terrorism. However, this exclusion shall not apply in respect of terrorism only subject to additional premium paid under Section 12 to losses occurring under Sections 1- Personal Accident, and Section 2- Medical and Emergency Expenses, unless such losses are caused by nuclear, chemical or biological attack, or the disturbances were already taking place at the beginning of any trip and also the Assured/Insured Person are not actively participating.

2. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste, from combustion of nuclear fuel, the radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly

3. Loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds

4. Losses arising, directly or indirectly from the loss of, alteration of, or damage to or a reduction in the functionality, availability or operation of a computer system, hardware, programme, software, data information repository, microchip, integrated circuit or similar device in computer equipment, that results from the malicious or negligent transfer (electronic or otherwise) of a computer programme that contains any malicious and or damaging code, including but not limited to computer virus, worm, logic bomb, or trojan horse and which can be identified as the cause of loss

5. Pursuit of Sports, Leisure Activities & Winter Sports including Trekking except Safari (unless this extension has been purchased and specifically stated as covered in the Schedule but, in any case, excluding the professional practice of these activities in competition)

6. Engagement in or practice for:
   base jumping, bungee jumping, expeditions, jet skiing, mountaineering requiring the use of guides or ropes, shark diving unless specifically agreed as special acceptance by the Underwriters in advance and subject to appropriate additional premium paid or underwater activities other than as specified in Water Sports

7. Engagement in or practice for:
   boxing, canyoning, caving, flying in unlicensed aircraft or as a learner, competitive football, gliding, gymnastics, hang gliding, horse riding in competitions, hot air ballooning, hunting, ice hockey, karate, kayaking, martial arts, microlighting, paragliding, parasailing, polo, potholing, rugby, sky diving, sky surfing, or wrestling

8. Engagement in or practice for: manual work in connection with a profession, business or trade, the use of motorised two or three-wheeled vehicles unless a full driving licence is held permitting the use of such vehicles in those countries which the Assured/Insured Person is visiting/travelling through, motor competitions, rallies, professional entertaining, professional sports or racing

9. the Assured/Insured Person wilfully, self-inflicted injury or Illness, sexually transmitted diseases, solvent abuse, alcoholism, the use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a Registered Medical Practitioner, but not for the treatment of drug addiction), self-exposure to needless peril (except in an attempt to save human life)

10. the Assured's/Insured Person’s own unlawful action or any criminal proceedings against them

11. Bodily Injury, Illness, sickness, death, loss, disablement, expense or other liability attributable to HIV (Human Immunodeficiency Virus) and/or any HIV-related illness

12. Consequential loss of any kind

13. A Trip or Journey from which has not been booked to return within the Period of Insurance

14. Incidents which may give rise to a claim not notified to Underwriters in writing within 31 days from the date of accident, sickness or date of claim

15. the Assured/Insured Person engaging in or taking part in armed forces service or operations or operational duties as a member of the Armed Forces;

16. any suffering from stress, anxiety, depression or any other mental or nervous disorder.

17. for any travel in Car Hire or Rental Vehicles

18. for Sanction limitation or Exclusion as defined below:
   No Underwriter shall be deemed to provide cover and no Underwriter shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that Underwriter to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

19. the Assured/Insured Person engaging in flying of any kind other than as a passenger;

20. the Assured/Insured Person travelling to a country or a specific area of travel which the travel advice unit of the Foreign & Commonwealth Office or the World Health Organisation (WHO) or similar body has advised against all or all but essential travel.
21. the Assured/Insured Person’s failure to get the relevant inoculation or vaccinations that the Assured/Insured Person require for the trip as recommended by the World Health Organisation (WHO) or other government authority.

IMPORTANT CONDITIONS RELATING TO HEALTH AND HEALTH AGREEMENTS

It is a condition of this Policy that no Trip will be covered if at the time of taking out this Policy or any new trips during policy on Annual multi-trip purchased, if the Assured/Insured Person:

1. upon whom the Trip plans depend has a Pre-Existing Medical Condition.
2. upon whom the Trip plans depend has received a terminal prognosis.
3. upon whom the Trip plans depend are on a waiting list for, or have knowledge of the need for, in-patient treatment at a hospital, clinic or nursing home.
4. is travelling against the advice of a Medical Practitioner or would be travelling against the advice of a Medical Practitioner had you sought his/her advice.
5. is travelling with the intention of obtaining medical advice outside of the Country of Domicile/Residence.
6. upon whom the Trip plans depend is expected to give birth before, during or within 4 months of the Trip.
7. is aware of any circumstances that could reasonably be expected to give rise to a claim on this Policy.

The Assured / Insured Person must be able to comply with these conditions to have the full protection of this Policy. Otherwise, unless the Assured/Insured Person have been given Underwriters prior written agreement, then Assured / Insured Person will not be covered under the following Sections:

Section 1: Personal Accident
Section 2: Medical and other Expenses
Section 3: Cancellation or Curtailment

Health Agreements for European Citizens (including UK)

When travelling to a country in the European Union (EU) Iceland, Norway, Liechtenstein or Switzerland, the Assured/Insured Person should receive inpatient treatment in a public hospital.

Assured/Insured Person must therefore obtain a European Health Insurance Card (EHIC) prior to travelling by completing an application form via www.ehic.org.uk as this will allow European Citizens to benefit from the health agreements between countries.

In the event that the Assured/Insured Person is admitted to a public hospital, EHIC should be presented to the hospital. If the Assured/Insured Person is unable to do so, Assured/Insured Person must co-operate with the medical assistance service in order to obtain one.

If the EHIC is presented to the treating doctor or hospital when requesting medical treatment within the European Union and the medical costs are reduced, the policy excess applicable under Section 2 – Medical and other expenses will be waived.

When travelling to Australia or New Zealand and the Assured/Insured Person requires medical treatment in hospital then Assured/Insured Person must register for treatment under the national Medicare or equivalent scheme of those countries.

If the Assured/Insured Person is admitted to hospital, contact must be made to Assistance Company as soon as possible.

GENERAL POLICY CONDITIONS - APPLICABLE TO ALL SECTIONS

The Assured / Insured Person must comply with the following conditions to have the full protection of the Policy. Failure to comply Underwriters may, at their discretion cancel the Policy or refuse to deal with the claim or reduce the amount of any claim payment.

1. Eligibility
   Assured/Insured Person must be a permanent resident of the United Kingdom, Channel Islands or Isle of Man or a permanent resident in the European Union. Assured/Insured Person must also be registered with a Doctor, and If they live in England, Scotland, Wales or Northern Ireland they must also have a National Insurance Number (if aged 16 years and above). Assured/Insured Person must purchase the policy before the trip starts. Trip must also start and end in the United Kingdom, Channel Islands or Isle of Man or from European Union country depending on their permanent residency.

2. Age Limits
   The Assured/Insured Person must be between 3 months to 75 years. Any person age 76 years and above, may be eligible for insurance subject to referral to Underwriters for acceptance of cover.

Children aged 3 months to 18 years must be accompanied by Parent(s) or if they travel alone must be dropped off and picked up by a responsible adult aged 18 years and above.

3. Duty of Disclosure
   It is a condition of this Insurance that the Assured/Insured Person has disclosed all material facts to Underwriters. Failure to do so may affect your rights under this Insurance. If you are in any doubt about what was material then you should declare it to Underwriters.

4. Compliance
   The Assured/Insured Person must comply with all the terms, provisions, conditions and endorsements of this Insurance. Failure to do so may result in a claim being declined or reduce the amount of any claim payment.

5. Dual Insurance
   If at the time of any incident which results in a claim under this Policy, there is another insurance covering the same loss, damage, expense or liability Underwriters will not pay more than their proportional share.

6. Reasonable Precautions
   The Assured / Insured Person must take all reasonable steps to prevent and minimise accident, injury, loss or damage and at all times act as if uninsured.

7. Subrogation
   Underwriters are entitled to take over and conduct in your name the defence and settlement of any legal action. Also, Underwriters may take proceedings at our own expense and for our own benefit, but in your name, to recover any payment that have been made under this Policy to anyone else.

8. Fraud
   The Assured/Insured Person must not act in a fraudulent manner. If the Assured/Insured Person or anyone acting for them:
   • Makes a claim under the Policy knowing the same to be false or fraudulently exaggerated in any respect or
   • Makes a statement in support of a claim knowing the statement to be false in any respect or
   • Submits a document in support of a claim knowing the document to be forged or false in any respect or
   • Makes a claim in respect of any Bodily Injury, Illness, loss or damage caused by your willful act or with your connivance

Then Underwriters:
• shall not pay the claim
• shall not pay any other claim which has been or will be made under the Policy
• may, at our option, declare the Policy void
• shall be entitled to recover from you the amount of any claim already paid under the Policy
• shall not make any return of premium
• may inform the Police of the circumstances.

9. Cancellation of Policy & ‘Cooling-off’ Period
   If this Policy is not suitable for the Assured/Insured Person and want to cancel this Policy, Assured/Insured Person must contact the issuing agent, VASCO UK who issued this insurance within 14 days of purchasing this Policy.
In line with the conditions below, Underwriters will refund all the premiums the Assured/Insured Person has paid within 30 days of the date the Assured/Insured Person has contacted VASCO UK to ask to cancel the policy.

Refund of premium within 14 days of date of buying this policy (whether it is a single trip or an annual multi-trip policy) shall be entitled to refund of premium provided that no claim has been made under the Policy and the Assured/Insured Person have not travelled during the Period of Insurance.

For all Single trip or Annual Multi-Trip policies
If the notice of cancellation is received from 15th day from the date of the purchase of this policy, there will be no cancellation cooling off period applicable and no refund will be payable on these policies at any time. However, discretion may be exercised in exceptional circumstances such as bereavement or a change to the policy resulting in Underwriters declining to cover the Assured’s/Insured Person’s medical conditions.

To request cancellation of this Policy, please contact VASCO UK on:
Customer Services
0207 247 3708

Cancellation of Policy by the Underwriters
Underwriters may give the Assured/Insured Person 14 days’ notice of cancellation of this Policy by Recorded Delivery letter to the Assured’s/Insured Person’s last known address.

Underwriters will refund to the Assured/Insured Person the proportionate amount of premium left on the Policy. If the Assured/Insured Person has passed away, the entitled premium refund will be paid to the Assured’s/Insured Person’s Legal Heirs, or Estate, or Executors and or Administrators. In all cases, if an incident has arisen during the period of insurance which has or will give rise to a claim, then no refund will be made.

10. Health
This Policy contains restrictions and conditions regarding pre-existing medical problems concerning the health of the people travelling and of other people not travelling upon whose health the booking or continuation of the Trip may depend. The Assured/Insured Person are advised to read carefully the Conditions relating to Health.

11. Law and Jurisdiction
This insurance shall be governed by and construed in accordance with the law of England and Wales and agree to submit to the exclusive jurisdiction of the Courts of England and Wales where the policy is issued in any dispute arising hereunder.

Unless, at the commencement of the policy the Assured’s/Insured Person’s home is in Scotland, Northern Ireland, the Channel Islands or the Isle of Man in which case the law and jurisdiction of courts of that country will apply.

12. Language
The terms and conditions of this Insurance Policy will only be available in English and all communications relating to this Policy will be in English.

13. Travel to any War Zone or High Risk Areas
In the interest of the Assured/Insured Person and for their safety, Underwriters would advise caution if the Assured/Insured Person are travelling to any dangerous areas where there is known to be war or civil commotion or unrest or terrorist activity. Unless specifically mentioned in the Schedule, the cover does not apply to Iraq, Iran, Afghanistan, Syria, Somalia, Sudan, or to any other countries where war has been declared or after it has been recognized as a war zone by the United Nations.

COMPLAINTS AND DISPUTES
Underwriters will do everything possible to ensure that the Assured/Insured Person receive a high standard of service. If the Assured/Insured Person are not satisfied with the service received:

Complaints related to the Insurance Policy or Claim:

Please forward details in writing of the complaint or claim to: Customer Service Manager.

All Seasons Underwriting Insurance Brokers Ltd.
4th Floor, 6-8 Fenchurch Buildings, Fenchurch Street, London. EC3M 5HT. United Kingdom.
Email: claims@asuia.com

Or
please write to:
The Complaints Department
Lloyd’s
One Lime Street, London, EC3M 7HA. United Kingdom.

E-mail: complaints@Lloyd’s.com
Please ensure that in the letter copy of the full Policy document including Policy Schedule is enclosed and Policy Number is quoted along with your full contact details including telephone number and email address in all correspondence to assist in a quick and efficient response.

A written acknowledgement will be sent either by letter or by email within 5 business days of the receipt of the letter and details will be provided of your complaint or claims handler.

Resolving of complaint or claim or response will be made within 4 weeks of the complaint or claim.

In the event the Complaint remains still unresolved and the Assured/Insured Person may refer the matter further to The Financial Ombudsman Service who will investigate your complaint at:
The Financial Ombudsman Service
Exchange Tower, Harbour Exchange Square, London. E14 9ST.
Telephone: 0845 080 1800

In the event the Complaint remains still unresolved upon the decision of The Financial Ombudsman Service and the Assured/Insured Person are not bound by their decision. Assured’s/Insured Person’s legal rights to take subsequent action against Underwriters are not affected.

CLAIMS PROCEDURES
The Assured / Insured Person must notify us in respect of the following:

a. For Section 2, Medical and Other Expenses - Apply Procedure A as shown below

b. For Section 3, Cancellation & Curtailment - Apply Procedure A as shown below only in respect of Curtailment of Trip (as per Specific Conditions 2 & 3 outlined in the wording under Section 3)

c. For all other Sections: Apply Procedure B as shown below, as soon as possible, but not later than 31 days of the end of the Trip or Journey.

The Assured / Insured Person or their legal representatives must supply, at their own expense, all information, evidence, details of other insurances (if any) and medical certificates as required by Underwriters.

Underwriters reserve the right to require the Assured / Insured Person to undergo an independent medical examination at cost and expense of Underwriters. Underwriters may also request and will pay for a Post Mortem examination.

The Assured / Insured Person must retain any property which is damaged, and, if requested, send it to Underwriters at their own expense. If Underwriters pay a claim for the full value of the property and it is subsequently recovered or there is any salvage, then it will become property of the Underwriters. Underwriters may refuse to reimburse the Assured / Insured Person for any expenses for which they cannot provide proof of receipts or bills.

PROCEDURE A

Situations that require immediate assistance
If you are in need of:

• Emergency Medical Treatment
• Emergency Medical Treatment for outpatient costs which is more than GBP 500
• Emergency Dental Care
• Dispatching of Essential Medicines (subject to exclusion 21 as outlined under Section 2 of the wording)
• Medical Transportation
• Repatriation of other Insured Persons
• Repatriation of mortal remains
• Premature return due to death of Close Relative
• Visit of a Close Relative
• First aid and/or rescue (Only applicable if the Optional taken on Sports, Leisure Activities & Winter Sports)

Immediately after the occurrence of any event the consequence of which could result in a claim, the Assured / Insured Person or any other person acting on their behalf should contact the Assistance Company as soon as possible in order to receive Underwriters/Assistance Companies prior approval and indication on the procedure to follow.

Contact
Mayday Assistance
16-17 Queens Road, Brighton, East Sussex. BN1 3WA. United Kingdom.
Telephone Number: + 44 (0) 1273 624 661
Fax Number: + 44 (0) 1273 606 390
Email: operations@maydayassistance.com

The Assured / Insured Person should state:
• Family name and first name;
• Policy Purchased from ASUIA as well as the Policy Number and Period of Insurance;
• The date of entry in the visited country;
• The name, address and telephone number of the Medical Centre to which the Assured / Insured Person has been admitted;
• The name and address of the Medical Practitioner in charge of the Assured / Insured Person;
• A brief description of the problems encountered.

A medical expert appointed by the Underwriters will have free access to the Assured / Insured Person and his/her medical file to assess the validity of the claim.

In the event of a medical transfer or repatriation, the means of transportation will be ambulance, train or scheduled flight. Air ambulance transportation is limited to intra-continental transportations and to critical cases which cannot be accommodated by any of the above mentioned means of transportation.

In any case, Underwriters, upon agreement with the treating physician, will choose the means of transportation to be used.

In any case of Illness or Bodily Injury requiring hospitalization, the Assured / Insured Person or any person acting on his/her behalf must inform the assistance company within 48 hours from the time of occurrence.

When the Assistance Company / Underwriters take care of the repatriation of the Assured / Insured Person, the Assured/ Insured Person shall return the ticket or the refund thereon to the Underwriters.

As soon as a claim occurs, the Assured / Insured Person must make every endeavor to limit or stop its consequences.

If during an emergency, or due to any valid reason, the assistance company, cannot be contacted for prior approval, the claim may still be considered subject otherwise to the policy terms and conditions. In all such cases, the expenses must be reasonable and customary and all documents (medical report, bills, etc) must be forwarded to the Assistance Company and copy to the Underwriters for their approval and acceptance. No claim will be considered if the Assistance Company have not been contacted within 30 days of the accident or illness.

PROCEDURE B
Travel inconvenience that does not require immediate assistance

What kind of situations?

For all other Sections of the Policy, Except for Section 2 Medical & Other Expenses and Section 3, Cancellation & Curtailment - in respect of Curtailment of Trip (as per Specific Conditions 2 & 3 outlined in the wording under Section 3)

For Section 1 – Personal Accident

In case of death of the Assured/Insured Person following an Accident, documents for claim to be submitted should include, policy document, schedule, application form, Birth certificate, National Registration Card or Passport and literal Death certificate.

Also, Proof of the Beneficiaries identity, should they be the legal heirs, it shall also prove necessary to present the declaration of heirs decreed by the competent Court.

Where the beneficiaries are duly designated in a will, a certification from the General Registry of Last Wills and Testaments or local equivalent Authority, together with a first copy thereof, will be required.

Please contact:
All Seasons Underwriting Insurance Brokers Ltd
4th Floor, 6-8 Fenchurch Buildings, Fenchurch Street, London. EC3M 5HT. United Kingdom.
Email: claims@asuia.com

Please contact ASUIA above for claim form and complete the claim form for the relevant claim being made under the policy.