EUROPESURE

TRAVEL INSURANCE POLICY

Single & Annual Multi-Trip Cover

STATUS EUROPESURE INSURANCE CYPRUS

Table of Contents

THE CONTRACT OF INSURANCE 4
WELCOME 5
IMPORTANT INFORMATION ..... 6 to 7
MAKING A CLAIM 8
TABLE OF BENEFITS 9
OPTIONAL COVER BENEFITS 10
GENERAL DEFINITIONS ..... 11 to 15
GENERAL CONDITIONS. ..... 16 to 17
GENERAL EXCLUSIONS. ..... 18 to 21
COVER OPTIONS. 22
TERRITORIAL AREAS 23
RECIPROCAL HEALTH AGREEMENTS 24

SECTION 1 – CANCELLATION AND DISRUPTION ..... 25 to 27

SECTION 2 – EMERGENCY MEDICAL, REPATRIATION AND OTHER EXPENSES ..... 27 to 28

SECTION 3 – PERSONAL ACCIDENT 29

SECTION 4 – BAGGAGE AND PERSONAL EFFECTS ..... 30 to 31

SECTION 5 – MONEY, DOCUMENTS AND CREDIT/DEBIT CARDS 32

SECTION 6- LEGAL EXPENSES AND PERSONAL LIABILITY ..... 33 to 34
SECTION 6.1 – LEGAL EXPENSES 33
SECTION 6.2 – PERSONAL LIABILITY ..... 33 to 34

SECTION 7 – HI-JACK AND KIDNAP 34

SECTION 8 – WINTER SPORTS ..... 34 to 36
SECTION 8.1 – OWNED AND HIRED SKI EQUIPMENT 34
SECTION 8.2 – HIRING REPLACEMENT SKI EQUIPMENT. 35
SECTION 8.3 – LIFT PASS 35
SECTION 8.4 – PISTE CLOSURE 35
SECTION 8.5 – AVALANCHE COVER 35 to36

SECTION 9 – BUSINESS SUPPLEMENT COVER ..... 36 to 38
SECTION 9.1 – BUSINESS EQUIPMENT, DOCUMENTS AND RECORDS ..... 36 to 37
SECTION 9.2 – BUSINESS MONEY ..... 37 to 38
SECTION 9.3 – REPLACEMENT STAFF 38
SECTION 9.4 – ADDITIONAL PERSONAL ACCIDENT 38

SECTION 10 – GOLF COVER ..... 38 to 40
SECTION 10.1 – OWNED AND HIRED GOLF EQUIPMENT ..... 38 to 39
SECTION 10.2 – HIRING REPLACEMENT GOLF EQUIPMENT 39
SECTION 10.3 – GREEN FEES. 39

SECTION 11 – EXTENSION TO ONE-WAY TRIP ..... 39 to 40

SECTION 12 – TERRORISM DISRUPTION COVER 40

SECTION 13 – SPORTS EQUIPMENT AND CYCLES COVER ……40 to 41
SECTION 13.1 – OWNED AND HIRED SPORTS AND CYCLE EQUIPMENT ……40
SECTION 13.2 – HIRING REPLACEMENT SPORTS/CYCLE EQUIPMENT ……40 to 41

SECTION 14 – GADGET COVER ……41 to 45
SECTION 14.1 – ACCIDENTAL DAMAGE AND MALICIOUS DAMAGE ……42
SECTION 14.2 – THEFT OR LOSS ……43
SECTION 14.3 – LIQUID DAMAGE ……43
SECTION 14.4 – UNAUTHORISED CALLS, TEXTS OR DATA USE…… 43 to 45

SECTION 15 – WEDDING COVER ……46
SECTION 15.1 – WEDDING ATTIRE ……46
SECTION 15.2 – WEDDING RINGS ……46
SECTION 15.3 – WEDDING GIFTS ……46
SECTION 15.4 – WEDDING PHOTOGRAPHS OR VIDEO RECORDINGS ……46

SECTION 16 – CAR HIRE EXCESS WAIVER COVER ……46 to 49
SECTION 16.1 – EXCESS REIMBURSEMENT ……47
SECTION 16.2 – KEY COVER AND LOCK OUT ……48
SECTION 16.3 – CURTAILMENT OF RENTAL……48
SECTION 16.4 – DROP OFF CHARGES …… 48
SECTION 16.5 – MIS-FUELLING ……48 to 49

AMATEUR SPORTING AND HAZARDOUS ACTIVITIES ……50 to 54
DATA PROTECTION AND PRIVACY NOTICE…… 55 to 56
PROFESSIONAL SECRECY WAIVER.. ……57 to 58
COMPLAINTS ……58 to 59
GOVERNING LAW AND JURISDICTION……59

EUROPESURE TRAVEL INSURANCE POLICY

To assist You in finding Your way around this document, We have identified key information for You by the use of colour coding and icons:

- **Sections denoted WHAT IS COVERED are highlighted in green**
- **Sections denoted WHAT IS NOT COVERED are highlighted in red**

Throughout the Policy Wording Your attention is drawn to IMPORTANT INFORMATION by the following icon :

The Contract of Insurance

This document, together with the **Schedule of Insurance** make up the contract between the **Insured Person(s)** and **Us**. The contract does not give, or intend to give, rights to anyone else. No-one else has the right to enforce any part of this contract. The insurance provided by this document covers liability, loss, damage, death or disability that happens during any **Period of Insurance** for which the **Insured Person** has paid, or agreed to pay, the premium. This insurance is provided under the terms and conditions contained in this document or in any amendment made to it. This document and the **Schedule of Insurance** are issued to **Insured Person(s)** resident in the EU or EEA by Status Insurance Agents, Sub-Agents and Consultants CY Ltd, brand name Europesure Insurance Cyprus. Status Insurance Agents, Sub-Agents and Consultants CY Ltd has a delegated authority agreement with SI Insurance (Europe) SA. As such, they represent the insurer when they interact with an **Insured Person** about this policy.

Signed by:

Signature of Coverholder

Welcome

Thank **You** for choosing **Us** for **Your** insurance. This document sets out what is and what is not covered.

Certain words shown in **bold** throughout this document have specific meanings and these are explained in the General Definitions Section. Please contact Europesure if **You** need any documents to be made available in braille and/ or large print and/ or in Audio format.

This policy is issued in the EU and the EEA by Status Insurance Agents, Sub Agents and Consultants CY Limited trading as Status Europesure Insurance Cyprus as Coverholder.

This policy is insured by SI Insurance (Europe), SA. The Insurer is a Luxembourg based insurance company with a registered address at 40 Avenue Monterey, L 2163, Luxembourg and company registration number B221096. The Insurer is authorised by the Luxembourg Ministry of Finance and is supervised by the Luxembourg insurance regulator Commissariat aux Assurances. SI Insurance (Europe), SA is part of the worldwide Sompo International Insurance group.

Please check that the cover explained in this document, and in the **Schedule of Insurance** meets **Your** needs and that **You** understand it. If **You** have any questions about **Your** insurance, please contact **Your** local insurance intermediary who arranged this insurance or Status Europesure Insurance Cyprus.

Address: 5 Rafael Santi, 1st Floor, Office 101, Larnaca 6052, Cyprus

Email: cyprus@statusglobalinsurance.com

Telephone: +357 (0) 24 022303

Subject to the policy terms and conditions, this insurance lasts for either the duration of a Single **Trip** or for a year if **You** have chosen Annual multi-**Trip** cover. **Your Period of Insurance** is shown on the **Schedule of Insurance.**

Please take time to read 'Important Information' (pages 6 and 7) in this document. It tells **You** about things **You** need to check, actions which **You** need to take, and things which **You** need to tell **Us** about once the insurance has started and 'Making a Claim' (pages 8 and 9). This document gives details of many sections of cover. Some sections of cover only apply if **You** have chosen a certain level of cover or type of policy, and/or **You** have paid an additional premium. The sections of cover which **You** have chosen, and the level of benefit which will be payable in the event of a valid claim under each section of cover, are shown in **Your Schedule of Insurance**.

Important Information

COOLING-OFF PERIOD

If this cover does not meet **Your** requirements, **You** may return the insurance documentation to **Your** insurance intermediary within fourteen (14) days of the date of purchase or the day on which **You** receive the documents, whichever is the latter. **We** will refund all premiums paid within thirty (30) days from the date **We** receive the notice of the cancellation from **You**. **We** will not refund premiums if **You** have taken a **Trip** or made a claim within the fourteen (14) days. Please contact **Your** insurance intermediary who issued this Policy to obtain this refund.

CANCELLATION

Your right to cancel this insurance

You may cancel this insurance by giving **Us** 30 days' notice in writing to either **Our** email address or postal address below:

Email address: cyprus@statusglobalinsurance.com

Address: 5 Rafael Santi, 1st Floor, Office 101, Larnaca 6052, Cyprus

If **You** cancel this insurance **We** will pay **You** a refund of any premium paid less a deduction in respect of the time for which **You** have been covered up to the effective date of cancellation in accordance with the terms below.

Our right to cancel this insurance

We may cancel this insurance where there is a valid reason by giving **You** 30 days' notice in writing to **Your** last known address. Examples of valid reasons are as follows:

- A change in risk occurring which means that **You** can no longer be provided with insurance cover;
- Non-cooperation or failure to supply any information or documentation **We** request;
- Failure to inform **Us** of changes to information provided by **You** or that have been requested by **Us**.

If **You** have an annual multi-**Trip** policy, provided no claim has been paid or is payable and no incident has occurred which could give rise to a claim under this Policy **We** will refund **You** for the exact number of days that were left on **Your** Policy. The premium for the period up to the date when the cancellation takes effect will be calculated and the portion of the premium paid by **You** for the unused days of cover remaining will be returned to **You**. However, in calculating the amount of premium to be returned to **You** there will be an additional charge to cover the administration cost of providing this policy and this will be calculated as a minimum amount of one half of the portion of the premium to be returned to **You** or € 50, whichever is the lesser. If a claim has been made during the period of cover provided, **You** must pay the full premium and **You** will not be entitled to any refund.

If **You** wish to cancel **Your** policy please contact the insurance intermediary who arranged this Policy.

If **You** have a Single **Trip** policy and wish to cancel it, **We** will not refund any premium.

SPECIAL NOTICE

This is not a private medical insurance and only gives cover in the event of an **Accident** or **Illness** that requires emergency **Treatment** whilst abroad. In the event of any medical **Treatment** becoming necessary which results in a claim under this insurance, **You** will be expected to allow **Us** or **Our** representatives unrestricted reasonable access to **Your** medical records and information.

PRE-EXISTING MEDICAL CONDITIONS

Please refer to General Exclusion number 28 on page 19 for full details of what the **Pre-Existing Medical Condition** clause says.

ELIGIBILITY

In order be eligible to purchase this insurance **You** must live in **Your** country of residence for 6 months in any 12 consecutive months.

Every **Insured Person** must be part of one of the following groups:
Individual – a single person who is the only person named on the **Schedule of Insurance**.
Couple – Any two adult persons (including same sex) who are married, in a civil partnership or in a **Common-law** relationship or who have co-habited for at least 6 months.
Family – Any adult couple **(**including same sex) who are married, in a civil partnership or in a **Common-law** relationship or who have co-habited for at least 6 months and all dependent children aged up to and including 17 years, or up to and including age 21 if in full time education and living at the same address, at the date of purchasing the travel insurance.
Single-Parent Family – One adult and all dependent children aged up to and including 17 years, or up to and including age 21 if in full time education and living at the same address, at the date of purchasing the travel insurance.

EU COMPENSATION RIGHTS

Under European Union (EU) travel regulations, **You** may be entitled to claim compensation from **Your** carrier if any of the following happen:

1. Denied boarding and cancelled flights - If **You** check in on time but **You** are denied boarding because there are not enough seats available or if **Your** flight is cancelled.

2. Long delays - If **You** are delayed for two hours or more, **You** are entitled to meals and refreshments and communication facilities. If **You** are delayed for more than three hours, **You** may be entitled to compensation, the amount of which depends on the delay and the distance travelled.

3. Luggage - If **Your** checked-in luggage is damaged or lost by an EU airline, **You** should claim compensation from the airline within 7 days. If **Your** checked-in luggage is delayed, **You** should claim compensation from the airline within 21 days of its return.

4. Death or injury - If **You** are injured in an **Accident** on a flight by an EU airline, **You** may claim damages from the airline. If **You** die as a result of these injuries **Your Family** may claim damages from the airline.

Full details are available at:
https://europa.eu/youreurope/citizens/travel/passenger-rights/air/index_en.htm

Making A Claim

CLAIMS PROCEDURE

In the event of any occurrence likely to give rise to a claim under this policy, **You** must notify **Us** ensuring that full details are given to **Us** in writing as soon as reasonably possible after the date of the occurrence and in any event within ninety (90) days. Such notice shall include full particulars of the occurrence.

MEDICAL ASSISTANCE NOTIFICATION

In the event of **Illness** or **Bodily Injury** during **Your Trip** which may require hospitalisation, or if **You** have already been admitted to hospital, **You** must notify **Our** nominated emergency service, Cega Medical Assistance Team. It has the medical expertise, contacts and facilities to help **You**. It will liaise with the hospital and arrange transport to **Your Country of Residence** when this is considered to be medically necessary. It will be entitled to decide, at their discretion, to repatriate **You** to **Your Country of Residence** as soon as **Your** medical condition is stable and **You** are fit to fly.

It will also arrange transport to **Your Country of Residence** when **You** have received notice of **Illness** or death of a **Relative** at home. **You** must contact them before making alternative arrangements if **You** wish to return home by any means other than that originally booked (i.e. curtail **Your Trip**).

You should contact:

Cega Medical Assistance Team

Tel: +44 (0) 1243 975 332 (24 hours)

Email: Assistance@cegagroup.com

You should tell them **You** have a Europesure travel insurance policy and give them the name of the insurer and the policy number, which are shown on **Your Schedule of Insurance.**

FOR ALL OTHER CLAIMS

You should contact Cega Group:

Address: Charles Taylor (CEGA) PO Box 1124, Portsmouth, PO1 9XY UK
Tel: +44 (0) 1243 975412 (UK time 9.00 to 17.00 – Monday to Friday)
Email: Claims@cegagroup.com

CLAIMS CO-OPERATION

You shall provide assistance and co-operate with **Us** or **Our** representatives in obtaining any other records **We** deem necessary to evaluate the incident or claim. In no event shall **We** be liable to pay any claim hereunder unless **You** co-operate with **Us** and/or **Our** representatives as **We** reasonably require in the investigation of the claim. All information, evidence, details of household insurance and medical certificates, as required by **Us**, must be sent at **Your** own expense.

Table of Benefits

Shows the Levels of Cover and alternative excesses you can choose from. Please see **Your** individual **Schedule of Insurance** for the Level of Cover and excesses **You** have chosen. There are four Levels of Cover options for Annual Multi Trip and Single Trip policies – Schengen , Silver, Gold and Platinum.

Section of Cover		Schengen €	Silver €	Gold €	Platinum €	Excess per insured person, per section €
1.1.1 1.1.2 1.1.3	**Cancellation or Curtailment** Travel Disruption Alternative Accommodation	500 150 150	1,500 250 250	3,000 500 500	10,000 1,000 1,000	100 or 50 100 or 50 100 or 50
1.2	Missed Departure and Transport diversion	150	250	500	750	100 or 50
1.3	Travel Delay Inconvenience Benefit	10 per 12 hrs up to 50	10 per 12 hrs up to 100	20 per 12 hrs up to 200	30 per 12 hrs up to 300	Nil
1.4	Alteration of Itinerary	150	250	500	750	100 or 50
2.1	**Emergency Medical and Repatriation Expenses**	50,000	1,000,000	3,500,000	10,000,000	100 or 50
2.2	Hospital Inconvenience Benefit	10 per day up to 200	10 per day up to 300	20 per day up to 600	30 per day up to 900	Nil
2.3	Funeral Expenses	1,000	1,500	3,500	5,000	100 or 50
2.4	Pet Care (Additional Kennel/Cattery)	Not Available	50 per day up to 500	50 per day up to 500	50 per day up to 500	Nil
3	**Personal Accident** With age-related cover limitations Accidental Death Under 16 limit 2,500 Over 65 limit 5,000 1) Loss of one limb or one eye Under 16 or over 65 limited to 50% 2) Loss of two limbs or both eyes or one limb and one eye Under 16 or over 65 limited to 50% 3) Permanent Total Disablement Under 16 limited to 50% Over 65 or not in paid employment - no cover	Ages 16-65 Age-related limitations in column 1 5,000 5,000 5,000 5,000	Ages 16-65 Age-related limitations in column 1 10,000 10,000 10,000 10,000	Ages 16-65 Age-related limitations in column 1 15,000 15,000 15,000 15,000	Ages 16-65 Age-related limitations in column 1 50,000 50,000 50,000 50,000	Nil Nil Nil Nil
4.1 4.2	**Baggage and Personal Effects** Single Item Pair or Set Limit Valuables Total Limit Delayed Baggage	500 100 100 100	750 150 150 150	5,000 300 300 300	7,500 450 450 450	100 or 50 100 or 50 100 or 50 Nil
5.1	**Money and Documents** Cash Limit (aged 18 and above) Cash Limit (under 18)	150 75 50	300 150 100	600 300 150	900 450 225	100 or 50 100 or 50 100 or 50
5.2	**Fraudulent Use of Lost Credit/Debit Card**	100	150	300	450	100 or 50
6.1	**Legal Expenses**	5,000	10,000	15,000	25,000	250
6.2	Personal Liability	100,000	1,000,000	1,500,000	2,000,000	250
7	**Hijack and Kidnap**	25 per day Up to 500	50 per day up to 1,000	75 per day up to 1,500	100 per day up to 2,000	Nil

Optional Cover Benefits

If **You** have chosen any of the optional cover benefits available, and have paid the additional premium required for this cover, the following also applies:

	Optional Cover Benefits	Schengen €	Silver €	Gold €	Platinum €	Excess per insured person, per section €
8	**Winter Sports**	Not Available				
	Includes all Benefits of Section 2 - Emergency Medical, Repatriation and other expenses		1,000,000	3,500,000	10,000,000	100 or 50
8.1	Owned and Hired Ski Equipment		500	500	500	100 or 50
	Single Item Limit		200	200	200	100 or 50
8.2	Hiring Replacement Ski Equipment		40 per day up to 800	40 per day up to 800	40 per day up to 800	Nil
8.3	Lift Pass		300	300	300	Nil
8.4	Piste Closure		30 per day up to 300	30 per day up to 300	30 per day up to 300	Nil
8.5	Avalanche Cover		500	500	500	100 or 50
9.1.1	**Business Equipment**	Not Available	2,000	2,000	2,000	100 or 50
	Single Item Limit		500	500	500	100 or 50
9.1.2	Business Documents and Records		50	50	50	Nil
9.2	Business Money		200	200	200	Nil
9.3	Replacement Staff		1,500	1,500	1,500	100 or 50
9.4	Additional Personal Accident		Normal Benefit x 2	Normal Benefit x 2	Normal Benefit x 2	Nil
10.1	**Owned and Hired Golf Equipment**	Not Available	1,000	1,000	1,000	100 or 50
	Single Item Limit		500	500	500	100 or 50
10.2	Hiring Replacement Golf Equipment		40 per day up to 800	40 per day up to 800	40 per day up to 800	Nil
10.3	Green Fees		300	300	300	Nil
11	**One Way Trip** – Extend Cover by up to 31 Days (Limitations apply)	Not Available	Option	Option	Option	Nil
12	**Terrorism Disruption** (Extended Cancellation or Curtailment)	Not Available	1,500	3,000	10,000	100 or 50
13.1	**Owned and Hired Sports and Cycle Equipment**	Not Available	1,500	1,500	1,500	100 or 50
	Single Item Limit		500	500	500	100 or 50
13.2	Hiring Replacement Equipment		40 per day up to 800	40 per day up to 800	40 per day up to 800	Nil
14	**Gadget Cover** (Up to 4 Gadgets)					
14.1	Accidental & Malicious Damage	Not Available	Not Available	1,000	2,000	100 or 50
14.2	Theft or Loss			1,000	2,000	100 or 50
14.3	Liquid Damage			1,000	2,000	100 or 50
14.4	Unauthorised Usage			500 Limit 100 per occurrence	500 Limit 100 per occurrence	100 or 50 100 or 50
	Single Item Limit all sections			500	500	100 or 50
15	**Wedding Cover**					
15.1	Attire	Not Available	2,000	2,000	2,000	100 or 50
	Single Item Limit		500	500	500	100 or 50
15.2	Rings		500	500	500	100 or 50
15.3	Gifts		1,000	1,000	1,000	100 or 50
	Single Item Limit		250	250	250	100 or 50
	Gift Cash Limit		150	150	150	Nil
15.4	Photographs and Video		750	750	750	100 or 50
16	**Car Hire Excess Waiver Cover**	Not Available	Annual Policies only	Annual Policies only	Annual Policies only	
16.1	Excess Reimbursement					
	Europe		5,000	5,000	5,000	Nil
	Worldwide		50,000	50,000	50,000	Nil
	Towing Costs (following an accident)		500	500	500	Nil
16.2	Key Cover and Lock-Out		500 (per year)	500 (per year)	500 (per year)	Nil
16.3	Curtailment of Rental					
	Per day		30	30	30	Nil
	Per Car Hire Agreement		300	300	300	Nil
16.4	Drop-off Charges		300	300	300	Nil
16.5	Mis-Fueling		500 (per year)	500 (per year)	500 (per year)	Nil

General Definitions

Certain words in this policy have a specific meaning. They have this specific meaning wherever they appear in this policy, the **Schedule of Insurance** or endorsements and are shown in **bold** print.

1. **Accident**
   A sudden and unforeseen event including **Exposure** and the word "accidental" shall be construed accordingly.

2. **Bodily Injury**
   A **Bodily Injury** caused solely by **Accidental** means and occurring solely and directly and independently of any other cause which occurs at an identifiable time and place within twelve (12) calendar months of the date of the **Accident**.

3. **Business Documents and Records**
   Any **Document** related to **Your** business that provides details related to **Your** business's internal and external transactions and which are written or printed on paper. **Business Documents and Records** include but are not limited to letters, invoices, order sheets, printed emails, notes, reports, financial or otherwise, which belong to **Your** business and are in **Your** custody and are taken on or acquired during a business **Trip** undertaken by **You**.

4. **Business Equipment**
   Any equipment used in the support of **Your** business, which is portable by design, including but not limited to personal computers, telephones and calculators, trade samples, or articles which belong to **Your** business and are in **Your** custody and are taken on or acquired during a business **Trip** undertaken by **You**.

5. **Business Money**
   Money which belongs to **Your** business and which **You** have in **Your** possession for the purpose of paying expenses related to **Your** business and which **You** have taken on or acquired during a business **Trip** undertaken by **You**.

6. **Complications of Pregnancy and Childbirth**
   In this policy **Complications of Pregnancy and Childbirth** will only include the following:
   i. Toxaemia (toxins in the blood);
   ii. Gestational hypertension (high blood pressure arising as a result of pregnancy);
   iii. Pre-eclampsia (where **You** develop high blood pressure, carry abnormal fluid and have protein in **Your** urine during the last 18 weeks of **Your** pregnancy);
   iv. Ectopic pregnancy (a pregnancy that develops outside of the uterus);
   v. Molar pregnancy or hydatidiform mole (a pregnancy in which a tumour develops from the placental tissue);
   vi. Post-partum haemorrhage (excessive bleeding following childbirth);
   vii. Retained placenta membrane (part or all of the placenta is left behind in the uterus after delivery);
   viii. Placental abruption (part or all of the placenta separates from the wall of the uterus);
   ix. Hyperemesis gravidarum (excessive vomiting as a result of pregnancy);
   x. Placenta praevia (when the placenta is in the lower part of the uterus and covers part or all of the cervix);
   xi. Stillbirth;
   xii. Miscarriage;
   xiii. Emergency Caesarean section;
   xiv. A termination needed for medical reasons;

xv. Premature birth more than 8 weeks (or 16 weeks if **You** know **You** are having more than one baby) before the expected delivery date.

7. **Common Law Spouse**
   A partner, including a civil partner, with whom **You** have co-habited continuously for 6 months on a permanent basis.
8. **Computer Equipment**
   any computer, hardware, software, communications system, electronic device (including, but not limited to, smart phone, laptop, tablet, wearable device), server, cloud or microcontroller including any similar system or any configuration of the aforementioned and including any associated input, output, data storage device, networking equipment or back up facility, owned or operated by the Insured or any other party.
9. **Country of Residence**
   Any country within the European Union and/or European Economic Area in which **You** habitually reside for more than six months in any twelve-month period.
10. **Document**
    Passport, Driving License, Visa, Green Card, pre-paid travel tickets, accommodation vouchers, car-hire vouchers, excursion vouchers and qualification certificates.
11. **Employee**
    Any person under a contract of employment, service or apprenticeship with **You**.
12. **Excess**
    The first amount of each and every loss that each **Insured Person** shall pay for each section of cover.
13. **Exposure**
    Death or **Permanent Total Disablement** solely as a result of unavoidable **e**xposure to severe weather conditions.
14. **Illness/Ill**
    Any disease, infection or bodily disorder which is unexpectedly contracted by **You** or which unexpectedly manifests itself for the first time during the **Period of Insurance**.
15. **Manual/Manual Labour**
    Work that involves:
    i. hands-on use, installation, assembly, maintenance or repair of electrical, mechanical or hydraulic plant, heavy power tools and industrial machinery;
    ii. hands-on electrical and construction work or work above two storeys or 3 metres above ground level (whichever is the lower), building sites, any occupation involving heavy lifting;
    iii. supervised animal sanctuary work that has interaction with dangerous wild animals such as lions, tigers or big cats of any kind, elephants, unless under the constant supervision of a trained member of staff;
    iv. professional entertaining except singers and musicians.
16. **Medical Practitioner**
    Any suitably qualified **Medical Practitioner** registered by the General Medical Council (or equivalent in the destination country); or in respect of dental **Treatment** only, a dental practitioner who is registered with the British Dental Association (or equivalent in the destination country); excluding an **Insured Person**, a **Relative** of an **Insured Person** or **Your Employee**.
17. **Money**
    Cash consisting of: Coins, bank and currency notes, signed travellers' cheques, and pre-loaded debit or credit cards.
18. **One-Way Trip**
    A single outward journey beginning in **Your Country of Residence** and ending 24 hours after **You** leave immigration control in the country of final destination.

19. Period of Insurance

The period of time when **You** will have cover under **Your** policy.

The **Period of Insurance** varies depending on whether you have purchased a Single Trip Insurance, an Annual Multi-Trip Insurance, a Stay Longer Single Trip Insurance or a One-Way trip insurance as set out below:

Single **Trip** insurance: the **Period of Insurance** commences on the date the premium is paid and finishes on the final date shown against the **Period of Insurance** on **Your Schedule of Insurance**.

Cover for cancellation of a **Trip** commences at the time **You** book the **Trip** or the premium paid, whichever is the latter.

Cover for a **Trip** commences on the date shown against the **Period of Insurance** on **Your Schedule of Insurance** or when **You** leave **Your** home or place of work whichever occurs last and ends when **You** return to **Your** home or place of work, or the end date of the **Period of Insurance** shown on **Your Schedule of Insurance** whichever occurs first.

Annual multi-**Trip** insurance: the **Period of Insurance** commences on the date shown against the **Period of Insurance** on **Your Schedule of Insurance.**

Cover for cancellation of a **Trip** commences at the time **You** book the **Trip** or at the start of the **Period of Insurance** whichever is the latter.

Cover for a **Trip** commences during the **Period of Insurance** when **You** leave **Your** home or place of work whichever occurs last and ends when **You** return to **You**r home or place of work, or the end date of the **Period of Insurance** shown on **Your Schedule of Insurance** whichever occurs first.

Stay Longer single **Trip** insurance: Notwithstanding the above, if **Your** previous Europesure policy is about to expire or has recently expired and **You** wish to extend **Your Period of Insurance,** cover is provided subject to the following conditions:

i. cover will start on the day following the purchase of **Your** Single **Trip** insurance or expiry of **Your** previous Single **Trip** or Annual multi-**Trip** insurance, whichever is later;
ii. in respect of **Pre-Existing Medical Condition(s),** Definition 21 and Exclusion 28 of the policy wording apply;
iii. no cover relating to any **Illness** or **Bodily Injury** suffered during the **Period of Insurance** of your previous Europesure policy or since it expired, whether or not you have received treatment, claimed or intend to claim;
iv. the 14 day 'cooling off period' for cancelling the policy does not apply;
v. the overall period of **Your Trip** outside **Your Country of Residence** does not exceed the policy maximum for **Your** age, including any **Period of Insurance** under this policy. In the event of a claim **You** will be required to provide evidence of the day **You** first left **Your Country of Residence**;
vi. this insurance being a Single **Trip** insurance policy covering the remaining period of **Your Trip** including return to **Your Country of Residence**.

One-way **Trip** insurance: the **Period of Insurance** commences at the time **You** book the journey or the date this policy is issued and the premium paid, whichever is the latter, and ends 24 hours after **You** leave immigration control unless **You** have purchased the One-Way Trip extension option.

20. Permanent Total Disablement

Total Disablement which has lasted for twelve (12) consecutive calendar months and entirely prevents **You** from engaging in any occupation for which **You** are suited by education, training or experience for the remainder of **Your** life.

21. Pre-Existing Medical Condition

i. Any respiratory condition (relating to the lungs or breathing), heart condition, stroke, Crohn's disease, epilepsy or cancer for which **You** have received **Treatment** during the last 60 consecutive months (including surgery, tests or investigations by **Your** doctor or a consultant/specialist and been prescribed drugs or medication);
ii. Any medical condition for which **You** have received surgery, in-patient **Treatment** or investigations in a hospital or clinic within the last twelve months, including any medical condition which may arise from the surgery, **Treatment** or investigation. Any medical condition for which **You** are on a waiting list, or have knowledge of the need for: surgery, **Treatment** or investigation at a hospital, clinic or nursing home;
iii. Any medical condition for which **You** are taking prescribed drugs or medication;
iv. Any medical condition for which **You** have received a terminal prognosis;
v. Any medical condition that **You** are aware of but for which **You** have not had a diagnosis.

22. Property

Personal effects owned by **You** or which are **Your** responsibility, which are taken by **You** on, or acquired during a **Trip**. **Property** excludes **Valuables, Money** and **Documents**, which are insured separately by this policy.

23. Relative

Spouse, parent, parent-in-law, son, son-in-law, daughter, daughter-in-law, grandchild, brother, brother-in-law, sister, sister-in-law, fiancé(e) or **Common-Law Spouse**

24. Schedule of Insurance

The document showing details of **Your** cover.

25. Schengen Zone

All countries which have abolished internal border controls between them under the Schengen Agreement at the time of the purchase of the insurance **Policy** and which the **Insured Person** can, therefore, access via a Schengen Zone visa.

26. Ski Equipment

Skis (including bindings), ski boots, ski poles and snowboards.

27. Sports Equipment

Items of a personal nature specifically designed and intended to be used for participation in a particular sport, game or leisure activity.

28. Terrorist Activity

An act, or acts, of any person, or group(s) of persons, committed for political, religious, ideological or similar purposes with the intention to influence any government and/or to put the public, or any section of the public, in fear. **Terrorist Activity** can include, but not be limited to, the actual use of force or violence and/or the threat of such use. Furthermore, the perpetrators of a **Terrorist Activity** can either be acting alone, or on behalf of, or in connection with any organisation(s) or government(s). Terrorist shall be construed accordingly.

29. Treatment

Medical care given to a patient for illness or injury. During **Your Trip, Treatment** is limited to emergency or urgent care for the unexpected occurrence of a medical condition first occurring during **Your Trip**.

30. Trip

A journey, including a cruise holiday, or a non-**Manual Labour** business **Trip** which commences and ends in the **Country of Residence,** or a **One-way Trip** which commences in the **Country of Residence,** is within the geographical areas stated in **Your Schedule of Insurance** and is due to commence within the **Period of Insurance**. For an Annual Multi-**Trip** policy, any individual **Trip** must be completed within the maximum number of days per **Trip** shown on **Your Schedule of Insurance.**

31. Valuables

Jewellery, antiques, articles made of gold or silver or other precious metals, precious or semi-precious stones set in an item of jewellery, musical instruments that can be carried by hand, furs or leather clothing, watches, smart watches, health and fitness trackers, binoculars, telescopes, photographic equipment, electronic audio or digital media, games consoles, laptops, tablets and other **Computer Equipment** and hand-held electronic devices including but not limited to MP3 and MP4 players, mobile and smart phones, Satellite Navigation Devices, Blackberries, iPods, iPads, Kindles and the like and associated software, which are taken by **You** on, or acquired during, the **Trip**.

32. War

Any activity arising out of or attempt to participate in the use of military force between nations and will include:

i. Hostilities or warlike operations (whether **War** be declared or not).
ii. Invasion, civil **War**, rebellion, insurrection, revolution.
iii. Act of an enemy foreign to **Your** nationality, or the country in, or over, which the act occurs.
iv. Civil commotion assuming the proportions of, or amounting to, an uprising.
v. Overthrow of the legally constituted government.
vi. Military or usurped power.
vii. Explosions of weapons of **War**.

33. We, Us, Our

SI Insurance (Europe), SA.

33. Winter Sports

Skiing; sledging; snowboarding; off-piste skiing and snowboarding except in areas considered to be unsafe by resort management and unless with a qualified guide; blade skating; cross-country skiing; dry skiing; heli-skiing; inner tubing; langlauf; mono- skiing; snow mobile; snow shoeing; tobogganing and glacier walking up to 4,000 metres.

34. You, Your, Insured Person(s)

The person or persons named in the **Schedule of Insurance** who are all domiciled in the same **Country of Residence**.

General Conditions

These Conditions apply to all sections of the Policy.

1. **Observance – Failure to Comply with Policy Conditions**
   Our liability to make any payment under this policy shall be conditional upon **Your** observance of all terms, provisions, conditions and endorsements of this policy. If **You** do not comply with **Your** obligations specified in this policy, this may prejudice **Your** position to recover under any claim and **Your** claim may be rejected or not paid in full.
2. **Information and changes We need to know about**
   You must take reasonable care to provide complete and accurate answers to the questions **We** ask when **You** take out **Your** policy and not to make a misrepresentation to **Us**. Please tell Europesure Insurance if there are any changes required to the information set out in **Your Schedule of Insurance**.
   You must tell **Us** as soon as possible about any changes in the information **You** have provided to **Us** which occurs before or during any **Period of Insurance**. When **We** are notified of a change, **We** will tell **You** if this affects **Your** policy, for example whether **We** are able to accept the change and if so, whether the change will result in revised terms and/or premium being applied to **Your** policy. If **You** do not inform **Us** about a change it may affect any claim **You** make or could result in **Your** insurance being invalid.
3. **Fraudulent Claims**
   i. **If You make a fraudulent claim under this insurance contract, We:**
      a) are not liable to pay the claim; and
      b) may recover from **You** any sums paid by **Us** to **You** in respect of the claim; and
      c) may by notice to **You** treat the contract as having been terminated with effect from the time of the fraudulent act.

   ii. **If We exercise Our right under clause i. c) above:**
      a) **We** shall not be liable to **You** in respect of a relevant event occurring after the time of the fraudulent act. A relevant event is whatever gives rise to **Our** liability under the insurance contract (such as the occurrence of a loss, the making of a claim, or the notification of a potential claim); and
      b) **We** need not return any of the premiums paid.

4. **Access to Additional Materials**
   You shall provide **Us**, or **Our** designated representatives, with all information, documentation, and medical information that **We** may reasonably require during the term of this policy, or until resolution of all claims, whichever is the latter.
5. **Right to Medical Records and Medical Examination**
   Following notice of a claim, **You** shall provide, when requested by **Us**, all authorisations necessary to obtain **Your** medical records. **We** may request that **You** are examined by a medical expert of **Our** choice, and at **Our** expense, in relation to **Your** claim only.
6. **Limitation**
   You are covered up to the amount shown in the **Your Schedule of Insurance**.
7. **Language**
   The language of this policy and any communication throughout the duration of the **Period of Insurance** will be English. **You** have declared **Your** understanding of, and have requested for the contract of insurance to be provided in, the English language. **You** confirm **You** understand such contract and agree to be bound by its terms and Conditions.

8. Sanctions Suspension Clause

It is a condition of this insurance, and the **Insured Person** agrees, that the provision of any cover, the payment of any claim and the provision of any benefit hereunder shall be suspended, to the extent that the provision of such cover, payment of such claim or provision of such benefit by the insurer would expose that insurer to any sanction, prohibition or restriction under any:

a) United Nations' resolution(s); or

b) the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America. Such suspension shall continue until such time as the insurer would no longer be exposed to any such sanction, prohibition or restriction.

9. Taxes

There may be circumstances where taxes may be due that are not paid via **Us**. If this occurs then it is **Your** responsibility to ensure that these are paid direct to the appropriate authority.

10. Other Insurance

If any claim is covered by any other insurance policy, **We** will not pay more than a fair proportion of the claim.

General Exclusions

WHAT IS NOT COVERED

A. **We** will not pay any claim directly or indirectly caused by or contributed to by:

1. **War**. (This does not apply to SECTION 2 – EMERGENCY MEDICAL EXPENSES) while **You** are away from **Your Country of Residence**. **You** must follow any relevant suggestions or recommendations made by any government or other authority during the **Period of Insurance**.
2. **Terrorist Activity.** (This does not apply to Item 4 – Alteration of Itinerary under SECTION 1 - CANCELLATION AND DISRUPTION or SECTION 2 – EMERGENCY MEDICAL EXPENSES or if **You** have chosen to purchase the optional Terrorism Disruption cover and it is shown in **Your Schedule of Insurance**) while **You** are away from **Your Country of Residence. You** must follow any relevant suggestions or recommendations made by any government or other authority during the **Period of Insurance**.
3. the use, release or escape of nuclear materials that directly or indirectly results in nuclear reaction or radiation or radioactive contamination; or
   - 3.1 the dispersal or application of pathogenic or poisonous biological or chemical materials; or
   - 3.2 the release of pathogenic or poisonous biological or chemical materials.
4. This policy excludes any claim directly or indirectly consequent upon or contributed by
   - a) Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
   - b) Radioactive toxic explosion or other hazardous properties of any explosion, nuclear assembly, or nuclear component thereof, howsoever such release or explosion is caused.
5. **Winter Sports (**unless if You have chosen to purchase an optional Annual multi-**Trip** policy or a Single **Trip** policy **Winter Sports** extension and it is shown in **Your Schedule of Insurance**).

Certain amateur sports and hazardous activities are only covered if additional conditions are met and/ or an additional premium is paid. Please refer to the Amateur Sports and Hazardous Activities Section for full details.

6. motor cycling except as shown in Amateur Sporting and Hazardous Activities on pages 50 to 54.
7. **Your** participation in activities of a hazardous nature except as shown in Amateur Sporting and Hazardous Activities on pages 50 to 54 unless declared to and agreed by **Us.**
8. mountaineering or rock climbing normally requiring the use of ropes or guides.
9. driving a mechanically propelled vehicle in any kind of race.
10. **You** travelling against medical advice.
11. **You** travelling for the purpose of receiving **Treatment.**
12. **You** travelling for the purpose of receiving cosmetic or elective surgery.
13. **You** being aware of any medical condition which could reasonably be expected to lead to a claim.
14. **You** flying, except as a passenger in an aircraft licensed to carry passengers.
15. **You** travelling to any country, destination or region where the advice from the State Ministry of Foreign Affairs or equivalent in **Your Country of Residence**, is against all travel.
16. Any claim arising directly or indirectly from **Your** drug addiction, solvent abuse, alcohol

intake or **You** being under the influence of drugs (unless such drug has been prescribed by a qualified **Medical Practitioner** but not for the **Treatment** of drug addiction).

17. **You** attempting to commit or committing intentional self-Injury or suicide.
18. the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfil any part of their obligation or advertised facilities to **You**.
19. **You** taking part in **Manual Labour.**
20. any sport or activity not shown in the Activity and Sports List or **You** participating in any competitive or professional sports.
21. **You** falling as a result of **You** climbing or moving around the outside of a building (apart from access ways), sitting, planking, balconing, owling or lying on any part of any building, and **You** jumping from any height (unless in an attempt to save someone's life).
22. any criminal or illegal act by **You**.
23. **Your** operational duties as a member of the armed forces.
24. **Your** deliberate exposure to exceptional danger (other than in an attempt to save human life).
25. losses occurring after the expiry of the **Period of Insurance.**
26. loss which at the time of happening is insured by, or would, but for the existence of this policy, be covered by any other existing guarantee, insurance, compensation scheme or any motoring organisation's service. If **You** have any other policy in force, which may cover the event for which **You** are claiming, **You** must tell **Us**. This exclusion shall not apply to personal accident cover. Where **You** are able to claim from another insurance covering the risk of the airline or other carrier, with which **You** have travelled, **We** will only pay for the outstanding balance.
27. a pandemic or epidemic illness, as declared by the World Health Organisation (WHO).
28. any **Pre-Existing Medical Condition** known about at the inception date of travel. See Definition 21 on page 14.

However, provided you have not received a terminal prognosis in relation to the condition, if:

i. any of the **Pre-Existing Medical Conditions** that **You** have are included in the following list;
and
ii. the words in brackets apply to **Your Pre-Existing Medical Condition**;
or
iii. the **Pre-Existing Medical Condition** has been stable and well-controlled for the last 24 months (60 months in the case of any respiratory condition relating to the lungs and breathing, heart condition, stroke, Crohn's disease, epilepsy or cancer unless specifically referred to below) on **Medical Practitioner** administered medication and has not required a hospital admission or referral to a specialist because of a worsening of **Your** condition;

then this exclusion will not apply and **You** will be covered by the normal terms of the policy.

- Acne
- ADHD (Attention Deficit Hyperactivity Disorder)
- Any disabilities impairing mobility, vision or mental health providing an **Insured Person** is accompanied by an appropriate carer for when any assistance is required

- Arthritis - Juvenile, Osteoarthritis, Rheumatoid or Psoriatic arthritis, Reiter's Syndrome, Rheumatism. (There must have been no hospital admissions within the last 12 months. The arthritis must not affect the back more than any other area of the body. The **Insured Person** must not be taking more than 2 medications. The **Insured Person** must not require any mobility aids, other than a walking stick. There must have been no dislocations or any joint replacements. The **Insured Person** must not be awaiting surgery. The **Insured Person** must have no lung problems/respiratory disorders.)
- Allergies (limited to Rhinitis, Chronic Sinusitis, Eczema, Food intolerance & Hay Fever)
- Asthma (providing it was diagnosed before age 50, and the **Insured Person** is taking/using no more than 2 medications/inhalers and has not been admitted to hospital in the last year)
- Bell's Palsy
- Benign Positional Vertigo
- Bladder Infection
- Breast Cancer/Prostate Cancer (provided the **Insured Person**: -was diagnosed more than 12 months ago; -has not had any chemotherapy or radiotherapy in the last 12 months and the cancer has not spread outside the breast or prostate at any time; - in the case of cancer of the prostate the **Insured Person** must have a PSA of 3.0 or less)
- Bunions
- Carpal Tunnel Syndrome
- Cataracts
- Coeliac Disease
- Congenital Blindness
- Corneal Graft
- Cystitis (provided no ongoing **Treatment**)
- Deafness
- Diabetes (providing there have been no complications such as impaired kidney function, heart disease, peripheral vascular disease, leg or foot ulcers, retinal damage, nerve damage, leg or foot amputation, liver damage).
- Dry Eye Syndrome
- Eczema
- Enlarged Prostate (benign only)
- Essential Tremor
- Folate Deficiency
- Fungal Nail Infection
- Gallbladder Removal (no complications)
- Gastric Reflux

- Glaucoma
- Goitre
- Gout
- Hay Fever
- Hiatus Hernia
- High Cholesterol
- Hormone Replacement Therapy - HRT
- Hypertension - High Blood Pressure
- Hypotension - Low Blood Pressure (Must not be associated with any underlying condition)
- Impetigo
- Insulin Resistance
- Macular Degeneration
- Meniere's disease
- Migraine
- Osteoporosis - Osteopenia, Fragile Bones (There must have been no broken bones within the last 5 years)
- Pernicious Anaemia
- Raynaud Disease
- RSI (Repetitive strain injury/Tendinitis)
- Sinusitis
- Tendonitis
- Tinnitus
- Tonsillitis
- Underactive or Overactive Thyroid

B. **We** will not pay for any indirect losses which result from the incident that caused **You** to make a claim. Examples of losses **We** will not pay for include loss of earnings due to being unable to return to work following **Injury** or **Illness** happening while on a **Trip** or replacing locks if **You** lose **You**r keys.

C. **We** will not pay for any costs of telephone calls or faxes, meals, taxi fares (with the sole exception of the taxi costs incurred for travel to or from hospital relating to **Your** admission, discharge, attendance for outpatient **Treatment,** or appointments, or for collection of medication prescribed by the hospital only), interpreters' fees, inconvenience, distress, loss of earnings, loss of enjoyment of holiday, time-share maintenance fees, holiday property bonds or points and any additional travel or accommodation costs unless pre-authorised by **Us**.

Cover Options

The Cover Option purchased by **You** will be shown in **Your Schedule of Insurance**.

ANNUAL MULTI-TRIP

Provides unlimited travel cover during the **Period of Insurance** provided no Single **Trip** lasts longer than the number of days per **Trip** chosen by **You** when the cover was purchased and shown on **Your Schedule of Insurance**. If the **Trip** is not completed within the chosen **Trip** length due to circumstances outside **Your** control, cover will continue for an additional maximum of 30 days at no additional premium. Adults and children between the ages of 18 and 21 named on the policy may travel separately and children named on the policy, who are under 18 at the time the policy is purchased, are insured when travelling with one or both of the insured adults or accompanied by another responsible adult who is over 25 years of age. Cover is provided for up to 17 days in total for **Winter Sports** within the **Period of Insurance** upon payment of the appropriate premium.

SINGLE TRIP

Provides cover for one **Trip** up to a maximum period of 180 days (age limitations apply). The **Trip** length **You** have chosen is shown on **Your Schedule of Insurance** as the **Period of Insurance**. If the **Trip** is not completed by the end of the **Period of Insurance** shown on **Your Schedule of Insurance** due to circumstances outside **Your** control, cover will continue for an additional maximum of 30 days at no additional premium.

If **Your** cover is only one way, coverage ceases after 24 hours from **Your** arrival in the country of **Your** final destination unless **You** have purchased the optional One-Way **Trip** extension.

OPTIONAL EXTENSIONS

Winter Sports Not available for Schengen Level benefits - See Section 8 for details of the cover provided.

Business Cover – Not available for Schengen Level Benefits - See Section 9 for details of the cover provided.

Golf Cover – Not available for Schengen Level Benefits - See Section 10 for details of the cover provided.

One-Way Trip Extension Cover – Not available for Schengen Level Benefits - See Section 11 for details of the cover provided. Single Trip policies only.

Terrorism Disruption Cover – Not available for Schengen Level Benefits - See Section 12 for details of the cover provided.

Sports Equipment and Cycle Cover – Not available for Schengen Level Benefits - See Section 13 for details of the cover provided.

Gadget Cover – Not available for Schengen and Silver Level Benefits - See Section 14 for details of the cover provided.

Wedding Cover – Not available for Schengen Level Benefits - See Section 15 for details of the cover provided**.**

Car Hire Excess Waiver Cover – Not available for Single Trip policies or Annual Multi-trip polices with Schengen Level Benefits - See Section 16 for details of the cover provided.

Reduced Excess - See Table of Benefits to view excess options.

ANNUAL MULTI-TRIP

Some Cover Options can be amended, and Optional Extensions added after the policy is issued and during the validity period of the policy. However, no changes or additions can be made whilst the policy is being used during a **Trip**.

SINGLE TRIP

Some Cover Options can be amended, and Optional Extensions added after the policy is issued and during the validity period of the policy. However, no changes or additions can be made once the **Trip** has commenced.

Territorial Areas

You are covered for **Trips** to countries within the following areas provided that **You** have paid the appropriate premium, as shown in **Your Schedule of Insurance**:

Cover whilst travelling within Your Country of Residence

There is no cover under Section 2 in **Your Country of Residence**. Cover under all other sections applies if **Your Trip** is away from **Your** home and involves at least two nights stay in pre-booked accommodation or travel arrangements that have been pre-booked with a commercial carrier.

Europe

Albania, Andorra, Austria, Azores, Balearic Islands, Belarus, Belgium, Bosnia Herzegovina, Bulgaria, Canary Islands, Corsica, Croatia, Cyprus, Czech Republic, Denmark, Egypt, Estonia, Finland, France, Germany, Georgia, Gibraltar, Greece, Hungary, Iceland, Isle of Man, Irish Republic, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Macedonia, Madeira, Malta, Moldova, Monaco, Morocco, Netherlands, Norway, Poland, Portugal, Romania, San Marino, Serbia & Montenegro, Slovakia, Slovenia, Spain, Sweden, Switzerland, Tunisia, Turkey, United Kingdom including the Channel Islands.

Schengen Zone

Austria, Belgium, Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland

Worldwide excluding USA and Canada

Anywhere in the world apart from Cuba, Iran, North Korea, USA, Canada, Russia and Ukraine.

Worldwide including USA and Canada

Anywhere in the world apart from Cuba, Iran, North Korea, Russia and Ukraine.

Cover in Countries where the Government of your country of Residence advises against travel

You will have no cover under the policy if you travel to any country, destination or region where the State Ministry of Foreign Affairs or equivalent in **Your Country of Residence** advises against all travel, apart from cover under Section 2 - Medical Expenses and item 4 (Alteration of Itinerary) of Section 1- Cancellation and Curtailment if a sudden and unexpected act of **War** or **Terrorism** occurs during **Your Trip** after **You** have left your **Country of Residence.**

Reciprocal Health Agreements

If **You** are travelling to countries within the European Union (EU), the European Economic Area (EEA) or Switzerland **You** are strongly advised to obtain a European Health Insurance Card from **Your** local Health Authority.

This will entitle **You** to benefits from the reciprocal health care arrangements which exist between countries within the EU/EEA or Switzerland.

Australia

If **You** need medical **Treatment** in Australia and reciprocal arrangements are in place, **You** may be eligible for medical care under Medicare if **You** enrol with a local MEDICARE office. **You** do not need to enrol when **You** arrive, but **You** should do this after the first occasion **You** receive **Treatment**.

In-patient and out-patient **Treatment** at a public hospital will then be available free of charge. For UK residents details of how to enrol and the free **Treatment** available can be found in the Health Advice for Travellers booklet available from **Your** local Post Office in the UK or by visiting either www.dh.gov.uk/travellers or the MEDICARE website on www.servicesaustralia.gov.au/medicare or www.servicesaustralia.gov.au/reciprocal-health-care-agreements .

If **You** are admitted to hospital **You** must contact **Our** Medical Assistance company as soon as possible and get their authorisation in respect of any **Treatment** NOT available under MEDICARE.

SECTION 1 – CANCELLATION AND DISRUPTION

There is no cover under this section if **You** opted to remove the cover when **You** purchased the insurance, it is not shown on **Your Schedule of Insurance** and **You** have not paid the appropriate premium**.**

WHAT IS COVERED

1. Cancellation Curtailment and Travel Disruption

1.1.1 If **You** are required to cancel or curtail a **Trip** as a result of any of the Specified Occurrences below **We** will pay any irrecoverable and unused **Trip** expenses for which **You** have paid in advance or for which **You** have contracted to pay, up to the sum insured shown on **Your Schedule of Insurance.**

1.1.2 If due to Specified Occurrence d) below, a **Trip** is not cancelled but **Your** travel is disrupted, **We** will pay **Your** reasonable additional travel and accommodation expenses (room only) which are of a similar standard to that of **Your** pre-booked travel and accommodation and which are necessary to get **You** to **Your** destination up to the sum insured shown in **Your Schedule of Insurance**.

1.1.3 If due to Specified Occurrence e) below, a **Trip** is not cancelled but **You** have to change accommodation, **We** will pay for the cost of equivalent local accommodation up to the sum insured shown in **Your Schedule of Insurance.**

Specified Occurrences:-

a) **Your** death or sustaining **Bodily Injury** or becoming **Ill**.

b) the death, **Bodily Injury** or **Illness** of **Your Relative** or business colleague or of any person with whom **You** had arranged to travel, reside or conduct business or the immediate **Relative** or business colleague of such person.

c) **You** or any person with whom **You** had arranged to travel, reside or conduct business being:

   i. quarantined or called for witness or jury service;

   ii. made redundant, provided that such redundancy qualifies for payment under **Your Country of Residence's** Redundancy Payments Act;

   iii. called for emergency duty as a member of the armed forces, the defence or civil administration, the police force, or the fire, rescue, public utility or medical services;

   iv. required to be present at **Your** home or place of business in the **Country of Residence** following a burglary or major damage caused by storm, flood or fire;

d) the cancellation or delayed departure for 24 hours or more of an aircraft, sea vessel or other publicly licensed form of passenger transport in which **You** had previously booked to travel, resulting from any of the following contingencies: strike, industrial action, avalanche, volcanic eruption, adverse weather conditions, or **Accident** or mechanical breakdown provided always that such contingency had not occurred, commenced or been announced before the booking was made in respect of the flight, voyage or journey thus affected;

e) major damage caused by storm, flood or fire rendering uninhabitable the accommodation in which **You** had previously booked to reside during the **Trip**, excluding any waterborne vessel or craft.

1.2 Missed Departure and Transport Diversion

We will pay **You** up to the sum insured shown in **Your Schedule of Insurance** in respect of reasonable additional travel and accommodation expenses (room only) which are of a similar standard to that of **Your** pre-booked travel and accommodation and which are necessarily incurred by **You**:

a) if at any time during a **Trip You** miss **Your** pre-booked international travel connection

through **Your** journey to the departure point being disrupted as the direct result of:

i. a fellow passenger or a crew member of the conveyance in which **You** are travelling sustaining a **Bodily Injury** or becoming **Ill** after such journey has commenced; or
ii. strike, industrial action, avalanche, volcanic eruption, adverse weather conditions provided always that such contingency had not occurred, commenced or been announced before the relevant international travel booking was made; or
iii. an **Accident** to or mechanical breakdown of the vehicle **You** are travelling in.

b) if at any time during the **Trip** an aircraft, sea vessel or other publicly licensed passenger conveyance in which **You** are travelling has to be diverted from its pre-arranged destination as the result of:
i. a fellow passenger or a crew member sustaining **Bodily Injury** or becoming **Ill**; or
ii. strike, industrial action, avalanche, volcanic eruption, adverse weather conditions, **Accident** or mechanical breakdown, provided always that such contingency has not occurred, commenced or been announced before the booking was made in respect of the flight, voyage or journey thus affected.

1.3 Travel Delay Inconvenience Benefit

If **You** are delayed because of the late departure of an aircraft, sea vessel or other publicly licensed form of passenger transport in which **You** had previously booked to travel as the result of strike, industrial action, avalanche, volcanic eruption, adverse weather conditions, **Accident** or mechanical breakdown, **We** will pay **You**:

On the outward journey at commencement of the **Trip,** for the first completed 12-hour period that transport is delayed and for each subsequent completed 12-hour period, the sum insured and limitations shown in **Your Schedule of Insurance**.

And again, for all subsequent journeys during the **Trip**.

1.4 Alteration of Itinerary

We will pay **You** up to the sum insured shown in **Your Schedule of Insurance** for reasonable additional travel and accommodation expenses (room only) necessarily incurred by **You** in the alteration of the arrangements of the **Trip** consequent upon **You** being the victim of a hi-jack, kidnap, **Terrorist Activity** or criminal act.

WHAT IS NOT COVERED UNDER SECTION 1

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in **Your Schedule of Insurance**, except in respect of the Travel Delay Inconvenience Benefit payable under sub-section 1.3 above.
2. under subsections c) of Specified Occurrences above, (ii) and (iii) for claims arising out of any contingency that had occurred, commenced or been announced before this policy was effected.
3. claims for cancelling or curtailing **Your Trip** due to any medical condition or set of circumstances known to **You** at the time that the insurance was effected or at the time that the **Trip** was booked, whichever is the latter, where such condition or circumstances could reasonably have been expected to give rise to cancellation or curtailment of the **Trip**.
4. claims for **You** not wanting to travel.
5. any claims for redundancy where the termination of **Your** employment was caused by **Your** misconduct, resignation or voluntary redundancy, or if **You** knew or where under threat of the redundancy at the time **You** booked **Your Trip** or the start date of the **Trip**.

6. claims for unused travel or accommodation arranged by using Air Miles, timeshare or similar promotions.

7. any claim that occurs due to pregnancy or childbirth, except as provided for under the benefits in section 2, unless a **Medical Practitioner** confirms that the claim comes from the **Complications of Pregnancy or Childbirth**.

8. claims arising from delay caused by strike or industrial action known to the public and already notified at the time **You** booked **Your Trip** or **You** purchased **Your** policy, whichever is the latter.

   No claim can be made for Travel Delay and full cancellation of the **Trip.**

SPECIAL CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION 1

In addition to the General Conditions and Exclusions on pages 16 to 21 above **We** shall only be liable:

1. for claims arising from delayed departure under Subsection d) of Specified Occurrences above and 3. if **You** have obtained written confirmation from the Carriers or their Agents stating the actual date and time of departure and the reason for the delay. For the purposes of claims payment under these Subsections the period of delay shall be taken as commencing at the departure time of the conveyance as specified in the booking confirmation supplied to **You**.

   Under Subsection 1.2.a) if in the selection of the route, means of travel and time of departure **You** have done all things reasonably practicable to minimise the possibility of late arrival at the departure point and allowing reasonable time to make an onward connection. This is defined as 120 minutes before the final check-in time as specified in the booking confirmation supplied to **You** for the flight, rail or sea journey.

2. for claims under Subsection 1.2.a) iii. attributable to mechanical breakdown, if **You** have obtained a garage or motoring organisation report confirming the date, cause and time of such breakdown.

3. Any claim arising out of a contingency that had occurred, commenced, been announced or of which **You** were aware of before this policy was effected.

SECTION 2 – EMERGENCY MEDICAL, REPATRIATION AND OTHER EXPENSES

WHAT IS COVERED

We will pay up to the sum insured shown in the **Your Schedule of Insurance** in respect of:

2.1 Emergency Medical and Repatriation Expenses

Expenses necessarily incurred outside **Your Country of Residence** as the result of **You** sustaining **Bodily Injury** or becoming **Ill** during the **Trip** for:

2.1.1 **Your** medical, hospital and **Treatment** expenses (including reasonable additional travel, evacuation, ambulance transportation costs and accommodation expenses).

2.1.2 **Your** additional repatriation expenses; including compulsory quarantine.

2.1.3 emergency dental **Treatment** for the immediate relief of pain only.

2.1.4 accompanying medical attendants if agreed by prior consultation between **Your** attending physicians and **Us** or **Our** appointed advisors.

2.1.5 Reasonable travel and accommodation expenses of a **Relative** or friend who, on medical advice is required to travel to, remain with, or escort **You**.

Emergency Return to Your Country of Residence

We will pay reasonable additional travel and accommodation expenses necessarily incurred by **You** following:

2.1.6 The death or **Illness** or **Bodily Injury** of **Your Relative** or business colleague necessitating **Your** return to **Your Country of Residence**.

2.1.7 Burglary or major damage at **Your** home or place of business in **Your Country of Residence**.

The death or **Illness** or **Bodily Injury** of an accompanying **Insured Person**, or the repatriation of such person as provided for in Subsections 2.1.1 and 2.1.2 above.

We will also pay:

2.2 Hospital Inconvenience Benefit

We will pay the sum insured shown in **Your Schedule of Insurance** for each completed 24 hour period that **You** spend as a hospital in-patient outside the **Country of Residence** as the result of **You** sustaining a **Bodily Injury** or becoming **Ill** during the **Trip**, up to a maximum of the sum insured shown in **Your Schedule of Insurance**.

2.3 Funeral Expenses

We will pay up to the sum insured in **Your Schedule of Insurance** for the cost of transporting **Your** remains or ashes to **Your** former place of residence in the **Country of Residence** if **You** die during the **Trip**, and/or the cost of burial or cremation if this takes place in the country abroad where the death occurred.

2.4 Pet Care

We will pay up to the sum insured shown in **Your Schedule of Insurance** for extra kennel and/or cattery costs for **Your** dog or cat if **You** are delayed in returning from **Your Trip** due to **Your** death, **Bodily Injury** or **Illness**. **We** will only pay for each complete 24-hour period and for a maximum of 10 such 24-hour periods in total.

Not available where Schengen Level cover has been purchased

WHAT IS NOT COVERED UNDER SECTION 2

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in **Your Schedule of Insurance**
2. any expenses incurred inside **Your Country of Residence.**
3. the cost of any medication, visit to a **Medical Practitioner** or **Treatment** the need for which could reasonably have been foreseen by **You** at the time that the **Trip** commenced, nor for any travel, accommodation or other expense incurred in connection therewith.
4. any expense incurred after **You** have returned to the **Country of Residence.**
5. any claim as a result of pregnancy or childbirth, unless a **Medical Practitioner** confirms that the claim is a result of **Complications of Pregnancy or Childbirth**.
6. any medical expenses incurred more than 12 months after incurring the first expense.
7. any **Treatment** or surgery which the treating **Medical Practitioner** believes is not essential or could wait until **You** return to **Your Country of Residence**.

SPECIAL CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION 2

In addition to the General Conditions and Exclusions on pages 16 to 21 above **We** shall only be liable:

1. If **You** can provide medical evidence to confirm such death, **Bodily Injury** or **Illness**.

SECTION 3 – PERSONAL ACCIDENT

WHAT IS COVERED

We will pay **You** one of the **Personal Accident** benefits shown in **Your Schedule of Insurance** if at any time during the **Trip You** sustain **Bodily Injury** including **Exposure**, which results in **Your** death or disablement.

If **You** disappear during the **Trip** and if, after 12 months has elapsed and all available evidence has been examined, there is reason to presume that **Your** death has occurred in accordance with the terms, provisions and conditions of this section of the policy, the **Accidental** Death Benefit shall become payable. If at any time after such payment **You** are found to be living, the **Accidental** Death Benefit sum paid shall be refunded to **Us**.

IMPORTANT

For **Insured Persons** under the age of 16 years the **Accidental** Death Benefit is limited to € 2,500 and all other benefits are reduced by 50%.

For **Insured Persons** over the age of 65 years the **Accidental** Death Benefit is limited to € 5,000 and benefits 2 and 3 are reduced by 50%.

For **Insured Persons** over the age of 65, or any age between 17 and 65 who are not in paid employment - benefit 4 (**Permanent Total Disablement**) is deleted.

SPECIAL CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION 3

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. In no case shall **Our** liability in respect of **You** exceed in all the largest sum insured applicable under the benefits shown in **Your Schedule of Insurance**.
2. No claim shall be payable under more than one item in the Personal **Accident** Table of Benefits in respect of the same **Bodily Injury**.
3. In the event that **Bodily Injury** results in **Your** death within thirteen weeks of the date of **Bodily Injury** and prior to the settlement of a claim for disablement under Items 2, 3 or 4 of the Personal **Accident** Table of Benefits, the **Accidental** Death Benefit shall be payable.
4. In the event of a claim **Our** appointed medical adviser(s) shall be allowed to examine **You** as often as may be deemed necessary.
5. For the purpose of this section:
   - **5.1** Loss of a limb shall mean the permanent and complete loss of or loss of use of a limb or limbs at or above the ankle or wrist.
   - **5.2** Loss of an eye shall mean permanent and total loss of sight without hope of improvement and where the degree of sight remaining after correction is 3/60 or less on the Snellen Scale.
   - **5.3** Loss of both eyes shall mean permanent and total loss of sight without hope of improvement and where **Your** name is added to the Register of Blind Persons on the authority of a registered qualified ophthalmic specialist.

SECTION 4 – BAGGAGE AND PERSONAL EFFECTS

There is no cover under this section if **You** opted to remove the cover when **You** purchased the insurance, it is not shown on **Your Schedule of Insurance** and **You** have not paid the appropriate premium**.**

WHAT IS COVERED

4.1 Baggage and Personal Effects

We will pay **You** up to the sum insured shown in **Your Schedule of Insurance** in respect of loss of or damage to **Property** and / or **Valuables**.

4.2 Delayed Baggage

We will pay up to the sum insured shown in **Your Schedule of Insurance** in respect of the cost of immediate necessities purchased or hired by **You** if on arrival at **Your** outward destination **You** are deprived of **Your** travel baggage for more than 12 hours because of temporary loss or mis-direction by the carriers (provided always that any amounts paid, other than hire charges, shall be deducted from the total of any claim payable under this section if the baggage proves to be permanently lost).

WHAT IS NOT COVERED UNDER SECTION 4

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in **Your Schedule of Insurance,** except in respect of the Delayed Baggage and General Average and Salvage provisions of section 4.
2. claims for theft which are not reported to any appropriate police authority within 24 hours of discovery and an official report obtained.
3. claims for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official report obtained and specifically for claims arising against common carriers and hotels. In the case of an airline, a Property Irregularity Report will be required.
4. Any loss of, theft of or damage to **Property** or **Valuables,** left unattended by **You** in a public place, or location that the public has access to at any time.
5. any loss of, theft of or damage to **Property** or **Valuables** left in an unattended motor vehicle if:
   i. they have not been locked out of sight in a secure baggage area of the vehicle;
   ii. no forcible and violent means have been used by an unauthorized person to gain entry into the vehicle; and
   iii. no evidence of such entry is available.
6. any loss of, theft of or damage to **Valuables**
   i. left in checked-in baggage, whilst in the custody of a carrier; and/or
   ii. packed in baggage left in the baggage hold, or storage area of a carrier; or
   iii. left in a left baggage facility, which incudes, but is not limited to, the left baggage storage area of a hotel or other accommodation supplier; a locked left luggage locker.
7. any loss of, theft or damage to **Property** or **Valuables** left unattended at **Your** accommodation other than in securely locked accommodation which is for **Your** sole use.
8. liability in respect of a pair or set of articles; **We** will be liable only for the value of that part of the pair or set which is lost or damaged.
9. any loss of, theft of, or damage to any item including clothing and equipment of any kind which has been loaned, hired or entrusted to **You** unless more specifically covered under Sections 8, 9 or 10 of this policy and the required additional premium paid.
10. loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning, repairing or restoring, or any gradual occurrence.
11. any claim for loss or damage to **Property** or **Valuables**, in a suitcase, bag or other item of luggage

caused by contact with perishable goods or powder or liquid which has leaked from its bottle, jar or other receptacle.

12. any loss of, theft of, or damage to household effects.
13. any loss of, theft of, or damage to food, drink or tobacco products.
14. electrical or mechanical breakdown or malfunction.

15. any loss of, theft of, or damage to securities, deeds, **Documents**, or **Property** held for business purposes unless more specifically covered under Section 9.
16. any damage to china, pottery, glass or other fragile or brittle articles, other than photographic equipment and telescopic lenses, unless by fire, or resulting from an **Accident** to a seagoing vessel, aircraft or vehicle.
17. any loss of, theft of, or damage to the following items:
    i. contact or corneal lenses, dentures, hearing aids, cycles, unset precious stones, mobility scooters, motor vehicles and their accessories, water craft and their accessories, trailers and trailer tents and their accessories and **Property**, carried in connection with any business, profession or trade unless **You** have requested cover under Sections 9 or 13 and paid the required additional premium.
    ii. accessories and/or subscriptions, unused rental charges, or pre-payments of mobile or satellite phones
18. any theft, loss of or damage to **Sports Equipment** whilst in use or in transit, unless **You** have requested cover under Sections 8, 10 or 13 and paid the required additional premium.
19. any loss of, theft of, or damage to **Winter Sports Equipment**, unless **You** have requested cover under SECTION 8 – **WINTER SPORTS** and paid the required additional premium.
20. confiscation, detention, damage or destruction by customs, governmental or other authority.
21. checked-in baggage that has not been retrieved and taken to **Your** accommodation address.
22. general average or salvage charges which are covered or would, but for the existence of this policy, be covered by any other insurer or indemnifying organisation, except in respect of any excess beyond the amount payable by such other insurer or organisation.
23. any loss or damage to any reeds, strings or other replaceable accessory needed to play any musical instrument or to the musical instrument while it is in use.

SPECIAL CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION 4

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. **You** shall at all times exercise reasonable care in the supervision of the **Property**.
2. Claims settlements for articles lost or destroyed will be based on the cost price of comparable new articles, less an appropriate allowance for age and condition as follows:
   Up to 1 year 85%
   Up to 2 years 65%
   Up to 3 years 45%
   Up to 4 years 30%
   Up to 5 years 20%
   Over 5 years NIL
3. The limit for any single item or pair or set of items is shown in **Your Schedule of Insurance**.

SECTION 5 – MONEY, DOCUMENTS AND CREDIT/DEBIT CARDS

WHAT IS COVERED

We will pay **You** up to the sum insured shown in **Your Schedule of Insurance** in respect of:

5.1 Money and Documents

Loss of personal **Money**, and/or **Documents** occurring during the **Trip**, including expenses directly consequent upon such loss.

5.2 Fraudulent Use of Lost Credit/Debit Card

Loss resulting from the fraudulent use of any personal credit card, debit card, or charge card held by **You**, following loss of such card during the **Trip,** which is not reclaimable elsewhere. Cover in respect of **Money** and **Documents** shall commence at the time of their collection or receipt by **You**, or 72 hours prior to planned commencement of the **Trip**, whichever is the latter.

WHAT IS NOT COVERED UNDER SECTION 5

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in **Your Schedule of Insurance**.
2. any loss or theft not reported to the local police within 24 hours of discovery and where **You** have not obtained an official police report.
3. **Money** lost in currency exchange, depreciation in value or through errors or omissions in transactions or purchases.
4. loss of, theft of or damage to personal **Money**, **Documents** or Credit/Debit card(s)
   i. from a motor vehicle left unattended at any time; or
   ii. left in checked-in baggage, whilst in the custody of a carrier; and/or
   iii. packed in baggage left in the baggage hold, or storage area of a carrier; or
   iv. left in a left baggage facility, which incudes, but is not limited to, the left baggage storage area of a hotel or other accommodation supplier; a locked left luggage locker.
5. loss of, theft of or damage to **Money**, **Documents** or Credit/Debit card(s) left unattended by **You** in a public place, or location that the public has access to or unattended at any other time unless deposited in a hotel safe, or safety deposit box.
6. any claim for loss or damage to **Money, Documents** or Credit/Debit card(s) in a suitcase, bag or other item of luggage caused by contact with perishable goods or liquid which has escaped from its bottle, jar or other receptacle.
7. any loss, theft or damage to **Money, Documents** or Credit/Debit card(s) carried in connection with any business, profession or trade unless **You** have requested cover under Section 9 and paid the required additional premium.
8. loss of **Money** where **You** have not produced evidence of the withdrawal of cash.
9. confiscation or detention by customs or other governmental authority.
10. any loss in respect of the fraudulent use of **Your** credit card, charge card or bankers' card if **You** have not complied with the terms and conditions under which the card was issued, including those relating to the safe-keeping and use of the card and the reporting to the Issuing Company or Bank of any misplacement or loss.
11. loss of, theft of or damage to travellers' cheques and pre-loaded credit cards if **You** have not complied with the issuer's conditions or where the issuer provides a replacement service.
12. daily living expenses when obtaining any replacement **Document**.
13. expenses arising whilst **You** are in **Your Country of Residence**.
14. Any extra travel and accommodation expenses incurred in returning to **Your Country of Residence**.

SECTION 6 – LEGAL EXPENSES AND PERSONAL LIABILITY

6.1 Legal Expenses

WHAT IS COVERED

We will pay up to the sum insured shown in **Your Schedule of Insurance** in respect of **Your** incurred Legal Expenses in the pursuit of claims for damages against third parties who have caused an **Insured Person's** death, **Bodily Injury** or **Illness** through incidents occurring during the **Trip**. **We** shall only be liable for expenses incurred with **Our** prior written consent, which will not be unreasonably withheld, but **We** reserve the right to withdraw from the proceedings at any stage and to limit **Our** liability to the expenses incurred during the period up to but not beyond the date of such withdrawal.

WHAT IS NOT COVERED UNDER SECTION 6.1

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in **Your Schedule of Insurance**.
2. Legal Expenses incurred without **Our** prior written approval.
3. claims against **Us** or anyone acting on **Our** behalf, or a travel agent, tour operator or carrier.
4. the continued pursuit of any claim where **We** consider **You** do not have a likely prospect of establishing a legal liability against the party being pursued and of recovering charges from such party.
5. legal actions between **Insured Persons**.
6. legal actions to obtain a judgment or legally binding decision, or legal proceedings brought in more than one country.
7. Legal Expenses which constitute a valid claim under any other insurance policy beyond **Our** proportionate share of any claim costs.

6.2 Personal Liability

WHAT IS COVERED

We will pay **You** up to the sum insured shown **Your Schedule of Insurance** If **You** become legally liable to pay damages in respect of:

a) **Bodily Injury** to third parties during the **Trip**; and/or

b) for **Property Damage** to the property of third parties occurring during the **Trip, We** will:

   i. indemnify **You** for any such damages;
   ii. pay any claimant costs and/or expenses which the claimant is able to recover from **You**; and
   iii. pay any costs and expenses incurred in defense of the claim with **Our** consent up to but not exceeding the sum insured shown in **Your Schedule of Insurance.**

WHAT IS NOT COVERED UNDER SECTION 6.2

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in the **Your Schedule of Insurance**.
2. liability for **Bodily Injury** to **Your Employees** or to any **Relative**.
3. liability for damage to **Property** owned by, or in the care, custody or control of, **You** or any **Relative**, except for damage to the structure or contents of any building or permanently or seasonally sited cabin, caravan or tent temporarily hired or let to **You** for the sole purpose of **Your** personal occupancy during the **Trip**.
4. liability arising out of the ownership, possession, custody or use of any aircraft, horse drawn or mechanically propelled vehicle waterborne craft or firearm.
5. liability that is covered under any other insurance, except for any excess beyond the amount which would have been covered under such other insurance had this insurance not been in force.
6. fines, penalties or liquidated damages.

7. compensation ordered or awarded by a Court of criminal jurisdiction.
8. punitive and exemplary damages awarded by any Court outside of the United Kingdom.
9. injury, illness or disease caused directly or indirectly by an infectious disease.
10. employer's liability or liability caused by **You** carrying out contracts, supplying goods and services, or doing any paid or voluntary work.
11. Liability for any claim arising from any deliberate act or omission by **You**.
12. liability arising directly or indirectly from taking part in any of the Amateur Sports or Hazardous Activities listed on pages 50 to 54.
13. liability arising directly or indirectly in connection with:
    i. any malicious or unlawful act;
    ii. any deliberate act that is intended by **You**, other than where **You** use reasonable force to protect persons or tangible property;
    iii. **You** being under the influence of alcohol;
    iv. asbestos;
    v. **Your** violation of any Road Traffic Acts.

SPECIAL CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION 6.2

In addition to the General Conditions and Exclusions on pages 16 to 21

1. **You** shall not admit any liability nor agree to settle any claim without **Our** prior written consent.

SECTION 7 – HI-JACK AND KIDNAP

WHAT IS COVERED

We will pay **You** up to the sum insured shown in **Your Schedule of Insurance** for each complete day that **You** are hijacked or kidnapped during the **Trip**, up to the maximum sum shown in **Your Schedule of Insurance**.

SECTION 8 – WINTER SPORTS

NOTE: Section 8 only applies if **You** have opted to purchase the **Winter Sports** Extension and it is shown in **Your Schedule of Insurance**.

If **You** have opted to purchase the **Winter Sports** Extension, **Section 2 – Emergency Medical and Repatriation Expenses** will be extended to cover **You** whilst you are taking part in **Winter Sports** - activities.

Cover under **Section 2 – Emergency Medical and Repatriation Expenses** includes evacuation from a mountain slope. The injury will be medically assessed and the appropriate mode of transport provided. Cover does not include "Search and Rescue".

SECTION 8.1 – Owned and Hired Ski Equipment

WHAT IS COVERED

In addition to Section 4, Baggage and Personal Effects, **We** will pay up to the sum insured shown in the **Your Schedule of Insurance** for theft or **Accidental** damage to **Your Ski Equipment** which **You** have taken on the **Trip** or hired **Ski Equipment** for which **You** are responsible.

WHAT IS NOT COVERED UNDER SECTION 8.1

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in **Your Schedule of Insurance**.
2. more than € 200 for any single article or pair.
3. claims arising from loss, theft or attempted theft or damage to **Ski Equipment** left unattended and/or out of **Your** sight unless it is securely locked in a building.
4. any **Accidental** damage whilst **Your Ski Equipment** is in use.

SECTION 8.2 – Hiring Replacement Ski Equipment

WHAT IS COVERED

We will pay up to the sum insured shown in **Your Schedule of Insurance** per day to a maximum of the sum insured shown in the **Your Schedule of Insurance** for the hiring of replacement equipment if **Your Ski Equipment** is lost or damaged or delayed for more than 12 hours, during **Your** outward or onward **Trip**.

WHAT IS NOT COVERED UNDER SECTION 8.2

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. any claim not supported by a written report from the carrier responsible for the delay or damage to **Your Ski Equipment**.

SECTION 8.3 – Lift Pass

WHAT IS COVERED

We will pay up to the sum insured shown in **Your Schedule of Insurance** in respect of any unexpired period of **Your** lift pass (based on a pro-rata calculation on the original value of the lift pass), following **Your Bodily Injury** or an **Illness** where **You** have made a successful claim under Section 2- Emergency Medical, Repatriation and Other Expenses, or should **Your** lift pass be lost or stolen which is confirmed by a Police report.

WHAT IS NOT COVERED UNDER SECTION 8.3

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in **Your Schedule of Insurance**.

SECTION 8.4 – Piste Closure

WHAT IS COVERED

If all lifts in **Your** pre-booked ski resort are closed due to a lack of snow or because there is a dangerous level of snow leading to avalanche risk, which means **You** have to travel to an alternative resort for skiing, **We** will pay up to the sum insured shown in **Your Schedule of Insurance** per day to a maximum of the sum insured shown in **Your Schedule of Insurance** for one of the following:

- **8.4.1** travel costs to the nearest available ski resort; or
- **8.4.2** the extra cost of acquiring a new or extended ski pass.

If all lifts in **Your** pre-booked ski resort are closed due to lack of snow or because there is a dangerous level of snow leading to avalanche risk and **You** are unable to ski at a different resort, **We** will pay up to a maximum of the sum insured shown in the **Your Schedule of Insurance.**

WHAT IS NOT COVERED UNDER SECTION 8.4

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. any claim not supported by a written statement from the management of the resort confirming the reason for the piste closure and the duration of the piste closure.
2. any costs incurred due to lack of snow at ski resorts less than 1,000 metres above sea level.
3. any claim where the piste closure was public knowledge prior to the booking of **Your Trip**.

SECTION 8.5 – Avalanche cover

WHAT IS COVERED

We will pay up to the sum insured shown in **Your Schedule of Insurance** for necessary and reasonable extra travelling and accommodation expenses if **Your** arrival or departure from **Your** pre-booked ski resort is delayed by more than 12 hours due to an avalanche.

WHAT IS NOTCOVERED UNDER SECTION 8.5

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in **Your Schedule of Insurance**.
2. any costs incurred at ski resorts due to avalanche at less than 1,000 metres above sea level.

SECTION 9 – BUSINESS SUPPLEMENT COVER

NOTE: Section 9 only applies if **You** have opted to purchase the Business Supplement Cover and this is shown in **Your Schedule of Insurance.**

SECTION 9.1 – Business Equipment Documents and Records

WHAT IS COVERED

9.1.1 Business Equipment

We will reimburse **You** up to the sum insured shown in **Your Schedule of Insurance** in respect of the cost of the repair or replacement for **Business Equipment** in **Your** care, custody or control which is lost, damaged, stolen or destroyed.

9.1.2 Business Documents and Records

We will indemnify **You** up to the sum insured shown in **Your Schedule of Insurance** in respect of the cost of replacing or restoring **Business Documents and Records** which are **Your Property** or responsibility, following loss or damage during the **Trip**.

WHAT IS NOT COVERED UNDER SECTION 9.1.1

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in **Your Schedule of Insurance**.
2. claims arising for theft which are not reported to any appropriate police authority within 24 hours of discovery and an official report obtained.
3. claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official report obtained and specifically for claims arising against common carriers and hotels. In the case of an airline, a Property Irregularity Report will be required.
4. loss, theft of or damage to **Business Equipment** left unattended by **You** in a public place, or location that the public has access to at any time.
5. any loss of, theft of or damage to **Business Equipment** left in an unattended motor vehicle if:
   i. it has not been locked out of sight in a secure baggage area of the vehicle;
   ii. no forcible and violent means have been used by an unauthorized person to gain entry into the vehicle; and
   iii. no evidence of such entry is available.
6. any loss of, theft of or damage to **Business Equipment**:
   i. left in checked-in baggage, whilst in the custody of a carrier; and/or
   ii. packed in baggage left in the baggage hold, or storage area of a carrier; or
   iii. left in a left baggage facility, which includes, but is not limited to, the left baggage storage area of a hotel or other accommodation supplier; a locked left luggage locker.
7. any loss of, theft of or damage to **Business Equipment** left unattended at **Your** accommodation other than in securely locked accommodation which is for **Your** sole use.
8. liability in respect of a pair or set of articles, **We** will be liable only for the value of that part of the pair or set which is lost or damaged.
9. loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning, repairing or restoring, or any gradual occurrence.

10. any claim for loss or damage to **Business Equipment** in a suitcase, bag or other item of luggage caused by contact with perishable goods or liquid which has escaped from its bottle, jar or other receptacle.
11. Electrical or mechanical breakdown or malfunction.
12. damage to china, pottery, glass or other fragile or brittle articles, other than photographic equipment and telescopic lenses, unless by fire, or resulting from an **Accident** to a seagoing vessel, aircraft or vehicle.
13. any loss of, theft of or damage to the following items:
    a. cycles, jewellery or unset precious stones,
    b. accessories and/or subscriptions, unused rental charges, or pre-payments of mobile or satellite phones.
14. confiscation or detention by customs or other governmental authority.
15. **Business Equipment** in checked-in baggage that has not been retrieved and taken to **Your** accommodation address.
16. in respect of musical instruments loss or damage to any reeds, strings or other replaceable accessory needed to play the instrument or to the instrument while it is in use.

WHAT IS NOT COVERED UNDER 9.1.2

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. any loss or theft not reported to the local Police within 24 hours of discovery and an official report obtained.
2. loss, theft or damage to **Business Documents and Records**:
    i. from a motor vehicle left unattended at any time; or
    ii. left in checked-in baggage, whilst in the custody of a carrier; and/or
    iii. packed in baggage left in the baggage hold, or storage area of a carrier; or
    iv. left in a left baggage facility, which incudes, but is not limited to, the left baggage storage area of a hotel or other accommodation supplier; a locked left luggage locker.
3. Loss, theft of or damage to **Business Documents and Records** left unattended by **You** in a public place, or location that the public has access to.
4. any claim for loss or damage to **Business Documents and Records** in a suitcase, bag or other item of luggage caused by contact with perishable goods or liquid which has escaped from its bottle, jar or other receptacle.
5. confiscation or detention by customs or other governmental authority.

SECTION 9.2 – Business Money

WHAT IS COVERED

We will reimburse **You**, up to an amount not exceeding the sum insured shown in the **Your Schedule of Insurance**, if during the **Trip**, **Business Money** is lost, stolen or destroyed.

WHAT IS NOT COVERED UNDER SECTION 9.2

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. any loss not reported to the local Police within 24 hours of discovery and an official report obtained.
2. loss of, theft of or damage to **Business Money**:
    i. from a motor vehicle left unattended at any time; or
    ii. left in checked-in baggage, whilst in the custody of a carrier; and/or
    iii. packed in baggage left in the baggage hold, or storage area of a carrier; or
    iv. left in a left baggage facility, which incudes, but is not limited to, the left baggage storage area of a hotel or other accommodation supplier; a locked left luggage locker.
3. loss of, theft of or damage to **Business Money** left unattended by **You** in a public place, or location that the public has access to or unattended at any other time unless deposited in

a hotel safe, or safety deposit box.

4. any claim for loss or damage to **Business Money** in a suitcase, bag or other item of luggage caused by contact with perishable goods or liquid which has escaped from its bottle, jar or other receptacle.
5. **Business Money** lost in currency exchange, or through errors or omissions in transactions or purchases.
6. loss of **Business Money** contained in baggage whilst such baggage is in the custody of Carriers and outside **Your** control.
7. confiscation or detention by customs or other governmental authority.
8. **Business Money** for which **You** have not provided evidence of its withdrawal from a bank or other financial institution or other evidence of its existence.

SECTION 9.3 – Replacement Staff

WHAT IS COVERED

We will reimburse **You** up to an amount not exceeding the sum insured shown in the **Your Schedule of Insurance** for any costs reasonably and necessarily incurred during the **Trip** as a direct result of **Your Bodily Injury** or **Illness** which, in the opinion of a **Medical Practitioner**, will last for a period of more than seventy two (72) hours, to send one substitute person to complete **Your** original business commitments and objectives.

WHAT IS NOT COVERED UNDER SECTION 9.3

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** amount shown in the **Your Schedule of Insurance**.
2. Expenses that **You** have paid or budgeted to be pay before the commencement of the **Trip**.

SECTION 9.4 – Additional Personal Accident

WHAT IS COVERED

The Benefits provided under Section 3 – Personal **Accident** are multiplied by two when **You** are travelling on a pre-arranged business **Trip** in which **Your** transportation and accommodation expenses have been paid for by **Your** employer or **You**, if **You** are self- employed, and proof is provided that the primary purpose of the **Trip** was the furtherance of **Your** business. All other terms, conditions and exclusions apply as per Section 3.

SECTION 10 – GOLF COVER

NOTE: Section 10 only applies if **You** have opted to purchase the **Golf Cover** Extension and this is shown in the **Your Schedule of Insurance**.

SECTION 10.1 – Owned and Hired Golf Equipment

WHAT IS COVERED

We will indemnify **You** in respect of loss or breakage of Golf Equipment up to the amount shown in the **Your Schedule of Insurance** for owned and hired Golf Equipment. In the case of owned Golf Equipment, each claim is subject to a maximum payment for any Single Item as shown in the **Your Schedule of Insurance**.
The maximum payment for any single Item for which an original receipt, proof of purchase or insurance valuation (obtained prior to the loss) is not supplied is € 50, subject to a maximum of € 200 for all such items.

WHAT IS NOT COVERED UNDER SECTION 10.1

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. The **Excess** as shown in **Your Schedule of Insurance**.
2. claims arising from theft which is not reported to a police authority within 24 hours of

discovery and an official report obtained.

3. claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official report obtained, and specifically for claims arising against common carriers and hotels. In the case of an airline, a Property Irregularity Report will be required.
4. claims arising from delay, detention, seizure or confiscation by Customs or other officials.
5. claims arising for loss, theft or damage to anything shipped as freight or under a Bill of Lading.
6. claims arising for Golf Equipment left unattended in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the **Property**.
7. claims arising for loss, theft or damage of **Property** from an unattended motor vehicle, unless taken from a locked boot or lockable roof rack between 8am and 8pm local time and there is evidence of damage or forced entry which is confirmed by a police report.

SECTION 10.2 – Hiring Replacement Golf Equipment

WHAT IS COVERED

We will reimburse **You** up to the amount shown in the **Your Schedule of Insurance** for each 24-hour period for the cost of necessary hire of replacement Golf Equipment following:

a) loss, theft or breakage of **Your** Golf Equipment, following a valid claim under 10.1; or

b) the mis-direction or delay in transit of **Your** Golf Equipment for 12 hours.

WHAT IS NOT COVERED UNDER SECTION 10.2

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the **Excess** as shown in **Your Schedule of Insurance**.
2. claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official report obtained and specifically for claims arising against common carriers. In the case of an airline, a property Irregularity Report will be required.
3. claims arising for loss, theft or damage to anything shipped as freight or under a Bill of Lading.
4. claims arising from delay, detention, seizure or confiscation by Customs or other officials.

SECTION 10.3 – Green Fees

WHAT IS COVERED

We will indemnify **You** up to the amount shown in the **Your Schedule of Insurance** for the proportionate value of any non-refundable, pre-paid green fees or tuition fees necessarily unused due to the following:-

a) **Accident** or **Illness** of the **Insured Person;**

b) loss or theft of documentation which prevents the participation in the pre-paid golfing activity.

SECTION 11 - EXTENSION TO ONE-WAY TRIP – Single Trip policies only

WHAT IS COVERED

If **You** have opted to purchase the **One-Way Trip** extended cover option and this is shown in **Your Schedule of Insurance**, **Your** cover is extended to finish no later than 31 days after the end date **You** have selected which will be the date of arrival in the country of final destination. In no event can the duration of cover exceed the maximum **Trip** duration allowed under **Your p**olicy in respect of **Your** age and area of cover.

WHAT IS NOT COVERED UNDER SECTION 11

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. This benefit is not available where the final destination is the USA, Canada or Australia;
2. Repatriation expenses of any kind;
3. Any expenses for Emergency Return to **Your Country of Residence** cover under Section 2.

SECTION 12 - TERRORISM DISRUPTION COVER

Note: Section 12 only applies if **You** have opted to purchase the Terrorism Disruption Cover and this is shown in **Your Schedule of Insurance**.

WHAT IS COVERED

We will pay up to the amount shown in **Your Schedule of Insurance** for **Your** part of the unused travel and accommodation costs (including unused pre-booked excursions) that have been paid or, where there is a contract to pay that cannot be recovered from anywhere else, if it is necessary to cancel or curtail the planned **Trip** because of either of the following events involving **You** or a travelling companion that first occur during the **Period of Insurance**:

a. **You** were not able to travel and use **Your** pre-booked accommodation; or
b. the **Trip** was cancelled or curtailed before completion as a result of the travel advice unit of the State Ministry of Foreign Affairs or equivalent , the World Health Organisation (WHO) or any other regulatory authority in a country to/from which **You** are travelling issuing a directive prohibiting all travel or all but essential travel to, or recommending evacuation from, the country or specific area or event to which **You** are travelling due to **Terrorist Activity**, providing the directive came into force after **You** purchased this insurance or booked the **Trip** (whichever is the latter), or in the case of curtailment, after **You** had left **Your Country of Residence** to commence the **Trip**.

WHAT IS NOT COVERED UNDER SECTION 12

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. Package holidays are not covered by this section of cover.

SECTION 13 – SPORTS EQUIPMENT AND CYCLES COVER

Note: Section 13 only applies if **You** have opted to purchase the Sports Equipment and Cycles Cover Extension and this is shown in **Your Schedule of Insurance**.

SECTION 13.1 - Owned and Hired Sports and Cycle Equipment

WHAT IS COVERED

In addition to Section 4 Baggage and Personal Effects, **We** will pay up to the amount shown in **Your Schedule of Insurance** after making reasonable allowance for wear, tear and depreciation and subject to the special condition shown below for loss or theft of, or damage to **Sports Equipment** or cycles owned, hired or borrowed by **You**.

SECTION 13.2 - Hiring Replacement Sports/Cycle Equipment

WHAT IS COVERED

We will pay up to the sum insured shown in the **Your Schedule of Insurance** per day to a maximum of the sum insured shown in the **Your Schedule of Insurance** for the hiring of replacement equipment if **Your Sports Equipment** or cycles are lost or damaged or delayed for more than 12 hours, during **Your** outward or onward **Trip.**

WHAT IS NOT COVERED UNDER SECTION 13

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the amount of the **Excess** shown in **Your Schedule of Insurance** for each claim.
2. loss or theft of **Sports Equipment** or cycles stolen from an unattended motor vehicle if:
   i. they have not been locked out of sight in a secure baggage area of the vehicle or to a purpose designed cycle rack;
   ii. no forcible and violent means have been used by an unauthorised person to gain entry into the vehicle; and
   iii. no evidence of such entry is available.
3. damage to **Sports Equipment** or cycles whilst in use for race training or racing.
4. **Your** damaged **Sports Equipment** or cycles if not submitted to **Us** for **Our** inspection.
5. loss or theft of **Sports Equipment** or cycles not reported to the police within 24 hours of discovering the loss, or as soon as possible after that, and a written report or reference obtained in the country where the incident occurred.
6. loss or theft of, or damage to, **Sports Equipment** or cycles whilst in transit unless reported to the carrier and a property irregularity report obtained.
7. delay, detention, seizure or confiscation by customs or other officials.
8. loss or theft of, or damage to, **Sports Equipment** or cycles over 5 years old.
9. loss or theft of **Sports Equipment** or cycles left unattended in a public place unless securely locked to a fixed object and evidence of forcible removal is provided.
10. loss or theft of, or damage to, waterborne craft of any description or any road-going vehicle other than cycles.
11. **Ski Equipment**

SPECIAL CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION 13

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. **We** will not pay more than the proportion shown below depending on the age of the equipment. It is a requirement of this insurance that **You** must, in the event of a claim, provide receipts or other documentation to prove ownership and value, especially in respect of any items for which **You** are claiming more than € 100.

   Up to 1 year 85%

   Up to 2 years 65%

   Up to 3 years 45%

   Up to 4 years 30%

   Up to 5 years 20%

   Over 5 years NIL

SECTION 14 - GADGET COVER

Section 14 only applies if **You** have opted to purchase the **Gadget** Cover Extension and it is shown in **Your Schedule of Insurance. We** will pay **You** up to the Sum Insured shown in **Your Schedule of Insurance**

Definitions applicable to this section only:

1. **Accessories**
   Any item that **You** may attach or connect to **Your Gadget** (for example a phone charger).

2. **Accidental Damage**
   The unintentional and unforeseen failure, breakage or destruction of **Your Gadget**, with visible evidence of an external force being applied and which results in the **Gadget** being unusable.

3. **Cosmetic Damage**
   Any damage which is non-structural, including but not limited to scratches, dents and marks, which does not affect the usage of the **Gadget**.

4. **Gadget**
   The portable electronic equipment item(s) owned by **You**, the replacement value of which must not exceed the **Gadget** Single Item Limit and shown within the relevant proof of purchase, that is in good condition and in full working order at the time of **Your Trip**, including Laptops, Mobile Phones, Smart Phones, iPhones, iPads, Tablets, e-readers, MP3 Players, CD/DVD Players, Head/Ear Phones, Satellite Navigation Devices, PDAs, handheld games, consoles, cameras, video cameras and wearable technology (e.g. smart watch or health and fitness tracker) but excluding drones.

5. **Liquid Damage**
   Damage caused by **Your Gadget Accidently** coming into contact with any liquid which results in the **Gadget** being unusable.

6. **Loss**
   Gadget has been **Accidently** lost by **You** and **You** are permanently deprived of its use.

7. **Malicious Damage**
   The intentional or deliberate actions of another party which causes damage of **Your Gadget**.

8. **Proof of Purchase**
   An original receipt and any other documentation required to prove **Your Gadget** was purchased from an UK VAT or EU, EEA or Gibraltar registered company and that it is owned by **You** - including the date of purchase, make and model of **Your Gadget**, where applicable.

9. **Proof of Usage**
   Evidence that shows **Your Gadget** has been in use before the event giving rise to the claim. Where the **Gadget** is a mobile phone this evidence can be obtained from **Your** Airtime provider. For other **Gadgets**, such as laptops or tablets, in the event of **Accidental Damage** claims this may be determined through inspection by **Our** repairers.

10. **Replacement Item(s)**
    An identical **Gadget** of the same age and condition, or if not available, one of comparable specification or the equivalent value taking into account the age and condition of the original **Gadget**. Replacement Items will only be delivered to a EU or EEA address of **Your** choice.

11. **Theft**
    The unlawful taking of **Your Gadget** against **Your** will by another party using force or threat of violence, with the intent to permanently deprive **You** of that **Property**, or burglary by forcible and violent entry, as confirmed by a Police crime report.

12. **Unauthorised Calls, Texts or Data Use**
    Any calls, texts or data use made from **Your Gadget** after the time that it was stolen, to the time that it was blacklisted by **Your** airtime provider.

WHAT IS COVERED

We will pay up to the amount shown in **Your Schedule of Insurance** in respect of **Gadgets** owned by **You** against **Theft**, **Loss**, **Accidental Damage** and **Malicious Damage**, **Liquid Damage** and **Unauthorised Calls, Texts or Data Use**, while **You** are on a **Trip**.

Cover is provided per policy and applies to all persons listed on the **Schedule of Insurance.** The limit applies per policy not per person insured.

SECTION 14.1 - Accidental Damage and Malicious Damage

WHAT IS COVERED

You are covered up to the amount shown in **Your Schedule of Insurance** for the costs of repairing **Your Gadget** as a result of **Accidental Damage** or **Malicious Damage**, which was not expected or bound to

happen. If **We** are unable to economically repair **Your Gadget** then, at **Our** discretion, a **Replacement Item** will be provided by **Us**.

WHAT IS NOT COVERED UNDER SECTION 14.1

1. deliberate damage or neglect of the **Gadget**;
2. failure on **Your** part to follow the manufacturer's instructions;
3. inspection, maintenance, routine servicing or cleaning.
4. **Malicious Damage** caused by **You**, **Your Family** or any of **Your** travelling companions.

SECTION 14.2 – Theft or Loss

WHAT IS COVERED

You are covered up to the amount shown in **Your Schedule of Insurance** to replace **Your Gadget** with a **Replacement Item** if it is stolen or lost. Where only part or parts of **Your Gadget** have been stolen or lost, **We** will only **replace** that part or parts.

WHAT IS NOT COVERED UNDER SECTION 14.2

1. where the **Theft** has occurred from any motor vehicle where **You** or someone acting on **Your** behalf is not in the vehicle, unless the **Gadget** has been concealed in a locked boot, locked glove compartment or other locked internal compartment and all the vehicle's windows and doors were closed and locked and all security systems had been activated;
2. for **Theft** from any premises, building, land or vehicle unless force resulting in damage to the building, premises or vehicle was used to gain entry or exit;
3. where the **Gadget** has been removed from **Your** control or the control of a member of **Your Family** unless it was concealed either on or about **Your** person or on or about the person of a member of **Your Family** and has not been left unattended.
4. where the **Gadget** has been left unattended when it is away from **Your** home;
5. where all precautions have not been taken;
6. where the following actions are not undertaken:

    i. **You** must report the **Theft** or **Loss** of **Your Gadget** to the police within 24 hours of discovery and obtain a written police report or crime reference number in relation to the **Theft** of the item. Lost property numbers are not acceptable in support of a **Theft** claim.
    ii. **You** must report the **Theft** or **Loss** of **Your** mobile phone within 12 hours of discovery of the occurrence of the **Theft** or **Loss** to **Your** airtime provider and instruct them to blacklist **Your** handset.
    iii. if **Your** claim is for a mobile phone or smartphone, **We** will request **Your** call records to prove the **Gadget** has been in use since policy inception and up to the event giving rise to the claim.

SECTION 14.3 – Liquid Damage

WHAT IS COVERED

You are covered up to the amount shown in **Your Schedule of Insurance** to repair or provide a replacement item for **Your Gadget** as a result of **Liquid Damage**.

SECTION 14.4 – Unauthorised Calls, Texts or Data Use

Where **Your Gadget** is a device where **You** are charged for **Unauthorised Calls, Texts or Data Use** and it is lost or stolen.

WHAT IS COVERED

You are covered up to the amount shown in **Your Schedule of Insurance** for cost of any calls, texts or data used after the time it was lost or stolen to the time it was blacklisted by **Your** airtime provider. This is subject to **You** providing an itemised bill. The maximum **We** will pay for any one occurrence is €100.

You are not covered for any **Unauthorised Calls, Texts or Data Use** where the **Theft** has not been

reported to **Your** airtime provider within 12 hours of the **Theft** and there is no protection from such losses from them.

WHAT IS NOT COVERED UNDER SECTION 14

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the amount of the **Excess** shown in **Your Schedule of Insurance.**
2. any **Loss**, T**heft** or **Accidental Damage** to a **Gadget** left as 'checked in' baggage.
3. any **Loss**, **Theft** or **Accidental Damage** to a **Gadget** prior to **Your Trip**.
4. any claim for **Loss** where the circumstances of the **Loss** cannot be clearly identified i.e. where **You** are unable to confirm the time and place of the **Loss**.
5. any claim where proof of usage cannot be provided or evidenced.
6. loss, damage, destruction, distortion, erasure, corruption or alteration of electronic data from any computer virus or similar mechanism or as a result of any failure of the internet, or loss of use, reduction in functionality, cost, expense of whatsoever nature resulting therefrom, regardless of any other cause or event contributing concurrently or in any other sequence to the loss.
7. any kind of damage whatsoever unless the damaged **Gadget** is provided for repair.
8. any expense incurred as a result of not being able to use the **Gadget**, or any **Loss** other than the repair or replacement costs of the **Gadget**.
9. repairs or any other costs for:
   a. cleaning, inspection, routine servicing or maintenance;
   b. **Loss** or damage arising from a manufacturer's defect or recall of the **Gadget**;
   c. replacement of or adjustment to fittings, control knobs or buttons, batteries or aerials;
   d. any repairs carried out without prior authorisation from **Us**;
   e. claims arising from abuse, misuse or neglect;
   f. wear and tear to the **Gadget** and/or gradual deterioration of performance;
   g. **Cosmetic Damage**;
   h. sudden and unforeseen electrical or mechanical breakdown.
10. any claim if the serial number, IMEI (international mobile equipment identity) or simgate has been tampered with in any way or deleted.
11. any claim made, or any event causing the need for a claim to be made, which occurred prior to the commencement date of the **Period of Insurance**.
12. any claim for a mobile phone which has not been used for its core purpose since the inception of **Your** policy, or since it was added to **Your** policy, as verified by **Your** airtime provider.
13. any claim arising whilst **You** are not on a **Trip**.
14. any repair or replacement if a SIM card registered to **You** was not in the insured mobile phone or **Gadget** the time of the **Accidental Damage**, **Theft, Loss**, breakdown, or **Liquid Damage**.
15. any expense incurred arising from not being able to use the **Gadget**, or any costs other than the repair or replacement costs of the **Gadget**.
16. **Accidental Damage**, **Malicious Damage**, **Theft**, **Loss**, or **Liquid Damage** to accessories of any kind.
17. any breakdown arising from the failure of any electrical or computer equipment, software, micro-controller, microchip, accessories or associated equipment to correctly recognise and process any calendar date or time.
18. reconnection costs or subscription fees of any kind.
19. costs arising from the replacement of any personalised ring tones, graphics, downloaded material or software.
20. items purchased from an on-line auction site unless from a UK VAT or EU, EEA or Gibraltar registered company.
21. any costs for **Loss** or damage to information or data or software contained in or stored on the **Gadget** whether arising as a result of a claim paid by this insurance or otherwise.
22. any other costs that arise directly or indirectly from the event which led to **Your** claim unless specifically stated in this policy.
23. liability of whatsoever nature arising from ownership or use of the **Gadget**, including any **Illness** or injury resulting from it.
24. Value Added Tax (VAT) where **You** are registered with HM Revenue & Customs for VAT.
25. any **Loss**, **Theft** or **Accidental Damage** due to confiscation or detention by customs, other officials or

authorities.

26. any **Gadget** more specifically insured elsewhere, or costs or payments recoverable from any party, under the terms of any other contract, guarantee or warranty.

SPECIAL CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION 14

1. cover is limited to one claim per item during any single **Period of Insurance**. Cover is limited to one replacement per **Period of Insurance** per item, up to the amount specified **Your Schedule of Insurance**.
2. cover includes the use of the Gadget for the period and Territorial Area shown on **Your Schedule of Insurance**. Any repairs or replacements must be carried out in the EU or EEA by repairers or retailers approved by **Us** will be supplied and configured to EU or EEA specification and set- up in the English language.
3. the **Gadget** must be less than 6 years old (except for laptops which must be less than 3 years old) at the start date of the insurance, with valid proof of purchase. All items must have been purchased as new from a EU or EEA registered company and must be in full working order at the start date of this policy.
4. **You** must provide **Us** with any receipts, proof of usage or documents to support **Your** claim as requested. All proof of purchase must include the make and model of the **Gadget** and must be in **Your** name. If **We** do not receive the documents **We** have requested from **You** or if any documents submitted by **You** are not acceptable to **Us**, it may delay **Your** claim or **We** may decline to pay **Your** claim.
5. **You** must take all precautions to prevent any Damage to **Your Gadget**.
6. if **Your Gadget** is damaged whilst in the custody of a carrier (i.e. airline, railway, shipping company, bus company. etc), **You** must notify such carrier immediately and obtain a copy of their report.
7. **We** will process **Your** claim under the terms and conditions of this insurance based on the first reason notified to **Us** for the claim. Please note that it may be necessary for **Us** to contact **Your** airtime provider in order to validate **Your** claim.
8. the benefits of this policy cannot be transferred to someone else or to any other **Gadget** without **Our** written permission.

Repairs and Replacement Conditions applicable to Section 14 :

Where **We** are able to provide a **Replacement Item**, this is not on a 'new for old' basis. If **Your Gadget** cannot be replaced with an identical **Gadget** of the same age and condition, **We** will replace it with one of comparable specification or the equivalent value taking into account the age and condition of the original **Gadget** subject to the following depreciation scale (laptops limited to three years):

20% over one year old and less than two years old

30% over two years old and less than three years old

40% over three years old and less than four years old

60% over four years old and less than five years old

80% over five years old and less than six years old

Please note :

a. if **We** replace **Your Gadget** the damaged or lost items becomes **Ours**. If it is returned or found **You** must notify **Us** and send it to **Us** if **We** ask **You** to.
b. it may not always be possible or economical to replace **Your Gadget** with the same colour or finish, in which case an alternative colour/finish will be provided.

SECTION 15 - WEDDING COVER

Section 15 only applies if **You** have opted to purchase the Wedding Cover Extension and it is shown in **Your Schedule of Insurance.**

Definitions applicable to this section

Wedding attire

Clothing and shoes bought specifically for the occasion and the cost of make-up, hair styling and flowers paid for or bought for the occasion.

WHAT IS COVERED

SECTION 15.1 - Wedding Attire

We will pay up to the amount shown in **Your Schedule of Insurance** following the loss or theft of, or damage to **Your Wedding Attire** in respect of the repair or replacement of the lost or damaged items.

SECTION 15.2 - Wedding Rings

We will pay up to the amount shown in **Your Schedule of Insurance** loss or theft of, or damage to one or both of **Your** wedding rings taken on, sent in advance or bought during the wedding **Trip.**

SECTION 15.3 - Wedding Gifts

We will pay up to the amount shown in **Your Schedule of Insurance** for the loss or theft of, or damage to **Your** wedding gifts taken on, sent up to 14 days in advance or bought during the **Trip**.

SECTION 15.4 - Wedding Photographs or Video Recordings

We will pay up to the amount shown in **Your Schedule of Insurance** for the necessary additional costs **You** incur to reproduce the photographs or retake the video recordings if:

a. the professional photographer who was pre-booked to take the photographs or video recording on **Your** wedding day is unable to fulfil such obligations due to **Illness**, injury or unavoidable and unforeseen transport problems; or
b. the photographs or video recordings of the wedding day taken by a professional photographer are lost, damaged or destroyed within 14 days after the wedding day and whilst **You** are still at the wedding/honeymoon location.

Provided a local wedding planning service was used at the wedding venue.

WHAT IS NOT COVERED UNDER SECTION 15

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. the amount of the **Excess** shown in **Your Schedule of Insurance** in respect of each claim;
2. claims excluded under the standard terms of section 4 – Baggage and Personal Effects.

SECTION 16 – CAR HIRE EXCESS WAIVER COVER – Not available on single trip policies

Section 16 only applies if **You** have opted to purchase the Car Hire **Excess** Waiver Cover Extension and it is shown in **Your Schedule of Insurance.**

This insurance is valid for one **Rental Vehicle** at any one time, which may be driven and operated by **You.**

Definitions applicable to this section only

Accident

Accident means a sudden, unexpected event caused by something external and visible, which results directly in loss or damage.

Car Rental Agreement

Car Rental Agreement means the contract of hire between the vehicle rental company and the person insured, which is signed by **You** and that states the **Excess You** are responsible for, following **Damage** to the **Insured Vehicle** during the **Rental Period**.

Damage

Means **Damage** to the **Insured Vehicle** caused by fire, vandalism, **Accident** or theft occurring during **Your Rental Period.**

Excess

The amount stated in **Your Car Rental Agreement** that **You** are responsible for in the event of **Damage** to the **Insured Vehicle**

Insured Vehicle

The vehicle rented under a **Car Rental Agreement** within the area of cover detailed on **Your Schedule of Insurance** and which **You** have agreed to hire from them according to the terms of **Your Car Rental Agreement**. The vehicle must:

a. be no more than 10 years old;
b. have no more than 9 seats;
c. not be driven off a public highway;
d. not be a motor home, campervan, commercial vehicle, minibus, motorcycle or moped;
e. have a retail purchase price of less than € 50,000.

Rental Period

Rental Period means the dates **You** have arranged to hire the **Insured Vehicle**, as confirmed on **Your Car Rental Agreement**.

a. **You** will only be covered if **You** are aged between 21 and 65 at the date **Your** policy was issued.
b. A **Rental Period** booked to last longer than **Your Period of Insurance** is not covered.

WHAT IS COVERED

SECTION 16.1 – Excess Reimbursement

We will pay up to the amounts shown in **Your Schedule of Insurance** if the **Insured Vehicle** is **Accident**ally **Damage**d, involved in an **Accident** or stolen during the **Rental Period** in respect of:

a. the **Accident**al **Damage Excess** amount applied to **Your** vehicle hire insurance and specified in **Your Car Rental Agreement** following **Damage** to the **Insured Vehicle**'s tyres, wheels, windscreen, bodywork, undercarriage, exhaust or suspension.

b. towing costs incurred following physical loss or **Damage** of the **Insured Vehicle** following an **Accident**.

WHAT IS NOT COVERED UNDER SECTION 16.1

You are not covered for:

a. any claim where **You** have not followed the terms of **Your Car Rental Agreement**.
b. the actual cost of the **Damage** to the **Insured Vehicle**.
c. any claim relating to **Damage** to the **Insured Vehicle** interior.
d. mechanical failure of the **Insured Vehicle**.
e. general wear and tear.
f. any **Damage** or costs covered by **Your Car Rental Agreement**.

Please note: This section provides reimbursement of the **Excess** that **You** are responsible for under the terms of **Your Car Rental Agreement** (up to the limits of this policy). It does not cover the full value of the **Insured Vehicle** or the actual cost of the **Damage** to the **Insured Vehicle**.

SECTION 16.2 – Key Cover and Lock Out

We will pay up to the amount shown in **Your Schedule of Insurance** (sum insured is per policy per policy period) to replace the **Insured Vehicle** keys if these are lost, stolen, or **Damage**d during the **Rental Period**.

This will also include where necessary:

a. the costs to replace locks or for a locksmith to break into the **Insured Vehicle** or
b. for a locksmith to gain entry to the **Insured Vehicle** in the event that **You** are locked out of the **Insured Vehicle** because the keys are inside.

All without causing **Damage** to the vehicle.

SPECIAL CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION 16.2

1. **You** are not covered unless the locksmith has been approved by the vehicle rental company prior to call out.

SECTION 16.3 – Curtailment of Rental

We will pay up to the amount shown in **Your Schedule of Insurance** if the **Car Rental Agreement** is cancelled or cut short after the start of your **Trip** on the advice of a medical practitioner. **You** must be confined to a bed in a hospital, hotel or in private accommodation during such time that the vehicle rental was booked and paid for.

WHAT IS NOT COVERED UNDER SECTION 16.3

1. any pre-existing medical condition as defined in General Definition 21 and General Exclusion – 28
2. any claim if the **Car Rental Agreement** was for less than 7 days.

SPECIAL CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION 16.3

1. **You** are not covered for any claim if **You** are unable to provide a copy of:
   i. the **Car Rental Agreement**, and
   ii. a medical certificate from a medical practitioner confirming the nature of the illness, dates of the illness and the dates **You** were confined to bed.

SECTION 16.4 – Drop off Charges

We will pay up to the amount shown in **Your Schedule of Insurance** for any drop off charges **You** incur through the vehicle rental company in the event of there being no one on the **Car Rental Agreement** available to return the **Insured Vehicle** to the originally intended car rental station following an **Accident**/illness for which at least one night's hospitalisation takes place.

WHAT IS NOT COVERED UNDER SECTION 16.4

a. any claim if **You**r **Car Rental Agreement** is a one-way rental.
b. any pre-existing medical condition as defined in General Definition - 21 and General Exclusion – 28

SPECIAL CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION 16.4

1. You are not covered unless **You** can provide written evidence from a doctor or hospital to confirm the reason for **You**r inability to drive the **Insured Vehicle**.

SECTION 16.5 – Mis-Fuelling

We will pay up to the amount shown in the **Your Schedule of Insurance** (sum insured is per policy and per policy period) for each mis-fuel incident for one of the following if **You** accidentally add the wrong fuel to the **Insured Vehicle** and it is at risk of being **Damage**d:

a. The cost to take **You**, the **Insured Vehicle** and up to 8 passengers to a garage to drain the

contaminated fuel and flush the fuel system; or

b. The cost for a technician to attend the **Insured Vehicle** at the roadside to drain the contaminated fuel and flush the fuel system

WHAT IS NOT COVERED UNDER SECTION 16.5

You are not covered for

a. Any claims for the cost of repair or replacement of any mechanical part or **Damage** to the engine arising from the use of the incorrect fuel; or
b. Any costs associated with any missed departure; or
c. Any costs from any consequential loss whatsoever. Claims shall only be paid for those losses which are specifically stated under the terms of this insurance.

WHAT IS NOT COVERED UNDER SECTION 16

In addition to the General Conditions and Exclusions on pages 16 to 21:

We will not pay any claim directly or indirectly caused by or contributed to:

1. If **You** do not hold a full, valid and internationally recognised driving license.
2. If the driver at the time the claim arises is not a named person on the **Schedule of Insurance.**
3. If the driver at the time the claim arises is not a named person on the **Car Rental Agreement.**
4. If the **Car Rental Agreement** is for longer than the period for which cover has been purchased.
5. The **Insured Vehicle** is being used in or training for racing competitions, trials, rallies or speed testing
6. Driving the **Insured Vehicle** in violation of the terms of the **Car Rental Agreement.**
7. Any claim relating to persons who are not named on the **Car Rental Agreement.**
8. Drivers who are aged under twenty-one (21) years or over sixty-five (65) years at the date **Your** policy is issued.
9. If the **Insured Vehicle** has a retail purchase price in excess of € 50,000 or is over ten years (10)
10. The rental of a motor home, trailer, caravan, van, truck, non-passenger carrying vehicle, vehicle that carries more than nine (9) people including the driver, motorcycle, moped, motorbike, off-road vehicle or a recreational vehicle
11. Automobiles or other vehicles which are not **Insured Vehicle**s which are rented from a car rental company
12. Claims arising whilst driving on safaris or adventure trails
13. Claims arising from driving whilst not on a Public Highway, except when travelling to and from accommodation that is only accessible by a road surface not defined as a Public Highway and, in these circumstances, due care and attention must be exercised to minimise risk of any **Damage** to the **Insured Vehicle**
14. Any expenses assumed, waived or paid by the Car Rental Company or its own insurers
15. Claims for wear and tear, gradual deterioration, insect or vermin, inherent vice or **Damage**
16. Any expenses reimbursed from any other source or any other insurance.
17. For any claim or incident occurring prior to the date of the **Car Rental Agreement**

Amateur Sporting and Hazardous Activities

The following activities listed in the table below are covered under **Your** policy. The conditions and exclusion, indicated by numbers within the table, are listed on page 54. **W/S** indicates that a **Winter Sports** premium must be paid for cover to apply. There is no cover under the Personal Liability section whilst taking part in any of the activities listed except where a **Winter Sports** or **Golf** premium has been paid.

Activity	Acceptability	Condition number
Abseiling	Covered	2, 5, 6
Aerobics	Covered	
Archery	Covered	2
Assault Course	Covered	2, 7
Athletics	Covered	2, 4
Badminton	Covered	
Ballooning (Hot Air)	Covered	2, 3
Banana boat rides (Beach activity)	Covered	
Baseball	Covered	
Basketball	Covered	
Blade skating	Covered **W/S**	4, 6
Bone fishing (see Deep Sea Fishing)	Covered	
BOSS (Breathing Observation Submersible Scooter)	Covered	1, 2
Bowls	Covered	
Bungee Jumping (incidental 1- 3 jumps)	Covered	2, 8
Camel riding	Covered	
Canoeing (grades 1 -3)	Covered	
Catamaran sailing (Coastal waters only)	Covered	1, 4
Clay pigeon shooting	Covered	1, 5
Climbing wall	Covered	2, 7
Cricket	Covered	4, 6, 7
Cross country skiing (on recognised paths)	Covered **W/S**	
Curling	Covered	4, 6
Cycling (excluding BMX)	Covered	4, 7
Deep sea fishing (recreational inside 12-mile limit)	Covered	1, 2
Dinghy Sailing (inside 12-mile limit)	Covered	1, 4

Dry skiing	Covered **W/S**	
Fell running	Covered	
Fell walking	Covered	
Fencing	Covered	1, 6, 7, 8
Fishing (see Deep Sea Fishing)	Covered	
Flying (as passenger)	Covered	3
Football (amateur soccer not American football)	Covered	2, 7
Glacier Walking (under 4000m)	Covered **W/S**	
Gliding	Covered	1, 3, 8
Go karting (up to 250 cc)	Covered	2, 6
Golf	Covered	
Gymnastics	Covered	
Handball	Covered	
Heli skiing	Covered **W/S**	1, 3, 6
Heptathlon	Covered	
Hiking/Walking up to 1,500m on recognised hiking trails or footpaths	Covered	
Hobie catting (Coastal waters only)	Covered	1, 4
Horse Riding (no racing, jumping, hunting eventing)	Covered	4, 7
Hot dogging (Grades 1, 2 & 3)	Covered	1, 7
Ice skating	Covered	4, 6
Indoor climbing	Covered	1, 5, 7
Inner tubing (in snow)	Covered **W/S**	4, 5
Inner tubing (on land or water)	Covered	2
Jeep/Car trekking	Covered	2, 3
Jet boating	Covered	2
Jet skiing	Covered	4, 6
Jungle surfing	Covered	5, 7
Kayaking (up to grade 2)	Covered	1, 4
Kite buggying	Covered	4, 6, 7
Kite surfing (water)	Covered	4

Langlauf	Covered **W/S**	
Mono skiing (on Snow)	Covered **W/S**	
Mopeds/Motor Cycles (hired during **Trip)**	Covered (up to 125cc with license)	7
Motor Cycles (Owned) – On road only, full license to be held, safety helmet worn and used in Europe only (as defined on page 23)	Covered	7
Netball	Covered	
Off-piste skiing	Covered **W/S**	1, 4
Orienteering	Covered	
Paintballing	Covered	2, 7
Parasailing (over water)	Covered	2, 7, 8
Parascending (over water)	Covered	2
Passenger sledge (Horse and Carriage)	Covered	
Pedalos	Covered	
Polo	Covered	4, 8
Pony trekking	Covered	
Quad Biking	Covered	2, 4
Racket ball	Covered	
Rambling	Covered	
Rifle range	Covered	5
Roller skating/Blading	Covered	
Rounders	Covered	
Rowing	Covered	4
Rubber ring rides (Beach Activity)	Covered	
Running	Covered	4
Safari/Gorilla trekking	Covered	2
Sail boarding	Covered	
Sailing (including Flotilla. Coastal waters only)	Covered	1, 4
Sand yachting	Covered	
Scuba diving (to 10 metres deep)	Covered	1
Skateboarding	Covered	4
Skiing	Covered **W/S**	

Sky diving indoor	Covered	2, 7
Sledging	Covered **W/S**	
Snorkeling (to 10 metres deep)	Covered	
Snow boarding	Covered **W/S**	
Snow mobile	Covered **W/S**	
Snow shoeing	Covered **W/S**	
Softball	Covered	
Sphering/Zorbing (including aqua)	Covered	2
Squash	Covered	
Street hockey	Covered	
Surfing	Covered	
Swimming	Covered	
Table tennis	Covered	
Ten pin bowling	Covered	
Tennis	Covered	
Tobogganing	Covered **W/S**	
Tree trekking	Covered	2
Trekking (up to 4000 metres)	Covered	1, 2
Volleyball	Covered	
Wake Boarding	Covered	
War games	Covered	7
Water polo	Covered	4
Water skiing	Covered	
White water rafting (Grades 1 - 4)	Covered	7, 8
Windsurfing (inside 12-mile limit)	Covered	
Yachting (Coastal Waters only)	Covered	1, 4
Zorbing/Sphering (including aqua)	Covered	2

Basic Conditions

In addition to the General Conditions and Exclusions on pages 16 to 21:

1. **You** are accompanied by, or accessible to, an experienced and/or suitable qualified instructor or guide.
2. **You** are adequately supervised, taking part in an organised event, session or excursion.
3. **You** must be a fare-paying passenger in a chartered craft.
4. **You** are not taking part in a league or competition.
5. **You** are using natural or purpose/built facilities approved for use for the activity by a local or national regulatory authority.
6. This does not constitute the main purpose of the **Trip**.
7. Protective safety clothing and/or headgear must always be worn.

Exclusion

For certain activities cover under some sections of the policy is excluded :

8. Cover under the Personal **Accident** section is excluded.

Data Protection and Privacy Notice

The Insurer, SI Insurance (Europe), SA ("**SIIE**") is authorised to provide non-life insurance services in the local market and outside the Grand Duchy of Luxembourg. In accordance with the Regulation (EU) 2016/679 of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data (GDPR), **SIIE** is the Data Controller of the data collected about **You**. As such, **SIIE** is responsible for the way in which this data is processed. **SIIE** will use personal information and special category data given by **You**, together with other information for, amongst other things, the administration of this policy, the handling of claims, the provision of customer services, credit checks and to prevent and detect fraud. **SIIE** is a member of the Sompo International[1] group; as such, the information you provide may also be disclosed to **SIIE**'s affiliates or parent, service providers and agents for these purposes. It may also be disclosed to the insured's insurance advisor, where appointed.

SIIE may need to collect and process information relating to individuals who may benefit from this policy, which may include both personal data and special category data (such as medical history). **You** must ensure that **You** have explicit verbal or written consent from these individuals to such information being processed by **SIIE.**

In collecting or processing personal data, including special category data, about the insured or related third parties under this policy, **SIIE** shall comply with applicable data protection legislation. **SIIE** is committed to protecting **Your** personal information and respecting **Your** data protection and privacy rights **You** have under applicable law and regulations.
When **You** submit any information to **SIIE** for the purpose of requesting information from **SIIE** about, or obtaining, **SIIE's** products or services or otherwise **SIIE** will use the information **You** provide, including any personal information, in its insurance business to conduct its business and perform its legal obligations, including:

i verifying **Your** identity;
ii preventing, investigating or reporting fraud or potential fraud, money laundering, terrorism, misrepresentation, security incidents, sanctions violations or any crime, all in accordance with applicable law and regulations;
iii assessing, establishing and managing claims and arranging or entering into any appropriate settlements;
iv managing, reporting and auditing **SIIE's** business operations;
v recovering debt;
vi developing, improving and protecting **SIIE's** products, services, website, systems and relationships with **You**;
vii research, risk management and statistical analyses;
viii establishing, exercising or defending legal claims; and
ix meeting regulatory and compliance requirements.

SIIE will ensure that **Your** personal data is processed in a manner consistent with the purposes set above. **SIIE** will retain **Your** personal data for as long as it is necessary for the purposes mentioned above or as long as required by law.

With **Your** permission, **SIIE** may also use **Your** contact details (including email address(es)) to send **You**

information about products and services or other products and services provided by **SIIE** or one of its group companies.

SIIE may share **Your** information for the purposes outlined above with:

i **SIIE's** group companies;
ii brokers, other insurers and underwriters;
iii healthcare professionals;
iv law enforcement authorities;
v other government authorities;
vi fraud prevention agencies; and
vii third parties involved in any aspect of claims management including surveyors, loss adjusters, claims agents, solicitors and private investigators;
viii parties that may have a financial interest in the insurance policy or claim;
ix other service providers that may process **Your** personal information on **SIIE's** behalf (for example, IT service providers that host or support **SIIE's** business and may have data that includes **Your** personal information); and
x others with **Your** consent or in accordance with applicable law and regulations.

If You have provided information about another person, in doing so You confirm that you have such person's consent to provide the personal information to SIIE, that You have told such person that You have provided the information to SIIE, and how SIIE will use the personal information as described in this notice.

To the extent **You** have provided **Your** consent, and **Your** consent provides the basis for **SIIE** use of the information, **You** may withdraw **Your** consent at any time by contacting **SIIE** as described below.
More details about how **SIIE** uses **Your** personal information may be found in the Sompo International General Privacy Policy, available on **SIIE**'s at https://www.sompo-intl.com/privacy-policies/.
The website also provides additional information about **Your** data protection rights, how **You** may access and update **Your** personal information and other choices **You** have about how **SIIE** use **Your** personal information (including how to object to processing or withdrawing your consent at any time). If **You** have any questions regarding this notice, please contact **SIIE** at:

Attn: Chief Compliance Officer
SI Insurance (Europe), SA
1221 Avenue of the Americas
New York City, NY 10020
Privacy@sompo-intl.com

Any complaints regarding the processing of **Your** personal data can be sent to the postal and email addresses mentioned above or to the Luxembourg Data Protection Authority (Commission Nationale pour la Protection des Données), 15 Boulevard du Jazz L-4370 Belvaux, Luxembourg (cnpd.public.lu).

[1] The term "Sompo International" refers to and includes each and every subsidiary of Sompo International Holdings Ltd., a Bermuda exempted company ("SIHL"). To the extent, however, that an affiliate of SIHL that is not a subsidiary of SIHL receives or uses personal information that is covered by this policy and requires protection under the Data Protection Legislation, then such affiliate is included within "Sompo International" for purposes of protecting the data that such affiliate receives or uses. For a list of Sompo International offices, please see https://www.sompo-intl.com/location/corporate. For a list of affiliates that are included in the Sompo Group, please see https://www.sompo-hd.com/en/group/group_list/.

Professional Secrecy Waiver

As a Luxembourg insurance undertaking, SI Insurance (Europe), SA (**SIIE**) is subject to an obligation to preserve insurance secrecy under Article 300 of the Luxembourg Act of 7 December 2015 on the insurance sector, as amended (the **Act**).

Under the Act, **SIIE** as well as its directors, officers, managers, employees and other persons in the service of **SIIE** are, prevented from disclosing the information confided to them in the course of their professional activity or in the exercise of their mandate, carried out either in or from the Grand Duchy of Luxembourg under the freedom to provide services (the Protected Information). However, **SIIE** might have to communicate data covered by professional secrecy to Luxembourg or foreign: (i) authorities; (ii) intermediaries; (iii) reinsurers; (iv) retrocessionaires; (v) entities of the **SIIE** group; or (vi) other third parties, based on legal, regulatory or contractual requirements (under Luxembourg or foreign laws, either pre-existing or introduced in the future).

In addition, **SIIE** outsources services or functions to external service providers (the **Service Providers**) and is required, in this context, to transfer to them data covered by professional secrecy in the conditions hereafter.

Types of Service Outsourced

The types of services that **SIIE** may outsource include all tasks necessary to perform the offer, distribution, management and termination of **Our** insurance products or services, as well as the compliance with **Our** obligations under corporate governance and regulatory provisions. Such tasks include insurance distribution, underwriting support, client on-boarding, policy administration, claims' handling, client contact and relationships, legal assistance, actuarial and reserving, finance and accounting, risk management, compliance, HR/administration, IT, regulatory reporting and internal audit, while retaining the final responsibility with Luxembourg based relevant (key) function holders.

Types of Information Transmitted

Information that might be transmitted to a **Service Provider** and requires protection including any data which may directly or indirectly identify policies, policyholder(s), insured person(s), beneficiary(ies) or any representative of such persons. It may also include (without being limited to) the following:

- name(s), date(s) of birth, contact details (address, email address, phone number), financial, banking, personal and tax information of the policyholder(s), the insured person(s) and the beneficiary(ies) of the insurance contract;
- risk, business and health data, appropriate to product type and collected for underwriting purposes; and
- insurance contract information (such as number, effective date and duration, amount of premiums paid, transactions, contract value),

collectively referred to as '**Protected Information**'.

Countries Where the Service Providers Are Located

Countries that are part of the European Economic Area and Bermuda, India, Mexico, Serbia, Singapore, Switzerland, South Africa, United Kingdom and United States of America. The list is not fixed and can be updated on an ongoing basis if there is a change in the **Service Providers** or their locations.

Waiver

By providing information to **SIIE,** completing an application or making an offer for insurance, agreeing to an insurance contract, paying a premium, or otherwise entering into a relationship with SIIE, the provider of **Protected Information** declares:

i) to have read the foregoing and to consent to the transmission of **Protected Information** to the different types of third parties, located in various countries, as detailed above; and
ii) to accept that **SIIE** cannot be held liable for any loss, damage or costs resulting from the transmission of **Protected Information**, except in the case of intentional or gross negligence on the part of **SIIE**.

Notwithstanding the above, **SIIE** shall comply with all other legal and regulatory obligations including but not limited to data protection.

Complaints

Our aim is to provide an excellent standard of service to **Our** customers and treat them fairly at all times. If **You** have a complaint about the service provided to Y**ou**, please let **Us** know immediately. **You** can contact **Us** in one of the following ways:

For Emergency Assistance related complaints:
Call: +44 (0) 1243 975 332
Email: assistance@cegagroup.com

For travel claim related complaints, contact CEGA on:
Call: +44 (0) 1243 975 412
Email: claims@cegagroup.com

For complaints on either of the above, you can also write to: Europesure Complaints Department, CEGA Group Services, Building 1000, Lakeside North Harbour, Portsmouth, PO6 3 EN, United Kingdom.

For all other complaints, contact the Insurer:
The Compliance Officer
SI Insurance (Europe), SA
40 avenue Monterey
L-2163 Luxembourg
Grand Duchy of Luxembourg
Email: complaints@sompo-intl.com

If **We** can't respond fully to **Your** complaint after **You** contact **Us**, or **You** are unhappy with **Our** final response, **You** can submit **Your** complaint to the competent supervisory authority or, if **You** are a consumer, to the insurance mediation organization, before starting the legal proceedings.

In case **You** have not received a response or a satisfactory solution within 90 days of **Your** complaint to the Insurer, **You** can contact the Commissariat aux Assurances (the CAA) in Luxembourg for the out-of-court complaint resolution within one year (12 months) term from the date of **Your** complaint to the Insurer.

Commissariat aux Assurances
11, rue Robert Stumper,
L-2557 Luxembourg
GD de Luxembourg
(+352) 22 69 11 - 1
Email: caa@caa.lu
Website: www.caa.lu
You may also use the Complaint Form available at the following address:
http://www.caa.lu/uploads/documents/files/DRER_EN.pdf

Alternatively, **You** can refer your complaint to an Ombudsman in **Your Country of Residence** or an Insurance Ombudsman in Luxembourg:

Association des Compagnies d'Assurances (ACA)
c/o Médiateur en Assurance
B.P. 448
L-2014 Luxembourg
Grand Duchy of Luxembourg
Fax: +352 44 02 89
Email: mediateur@aca.lu
Website: https://www.aca.lu/

Governing Law and Jurisdiction

This policy, and any dispute or claim arising from this policy will be governed by the laws of **Your Country of Residence**. **You** and **We** shall submit to the exclusive jurisdiction of **Your Country of Residence**.