

statement of insurance group policy travel insurance gap travel

group policyholder: **Projects Abroad** issued on: 1st December 2015 NG9 0013359 policy number: reason for issue: new business

This statement of insurance forms part of the group policy travel insurance. Please check these details carefully and let us know immediately of any errors.

group policyholder details

group policyholder Projects Abroad

Aldsworth Parade, Goring, Sussex, BN12 4TX address

cover

trip

For bookings made between 1st December 2015 until 31st December 2016 with all policy term

travel having been completed by 30th November 2018.

group policy insurer

gap travel Zurich Insurance plc

Beneficiaries are covered for trips booked within the policy term that are completed by

30th November 2018 for which the appropriate premium has been paid and for which

they have been accepted for cover.

Each person travelling on a trip arranged by the group policyholder who is eligible to be beneficiary

covered under this group policy and for which details have been provided to us by the

group policyholder.

cover essential cover

Beneficiaries are covered for travel to the destination for which the appropriate premium cover area

has been paid and for which they have been accepted for cover.

trip option volunteer

sports and activities option standard

beneficiaries

Beneficiaries receive cover benefits by virtue of the group policy issued to the group policyholder. Only the group policyholder has direct rights against the insurer. The benefits received by the beneficiaries do not give them direct rights under this group policy of insurance but enable them to receive the benefits described below. Beneficiaries must notify us of any incident that they feel could give rise to a claim under these terms and conditions. Strict compliance with these terms and conditions is required if the beneficiaries are to receive their benefits.

All beneficiaries must be registered under the health care system in their home country.

cover - more details

gap travel - table of benefits

The following table is a summary of cover only and the group policy is subject to terms, conditions, limits and exclusions. Please refer to the applicable sections of the group policy wording. The benefits set out below are the maximum amount we will pay under each section per beneficiary per trip unless otherwise noted.

Section	Essential Benefits	Maximum Amount	Excess
1	Cancellation or curtailment charges	£2,000	£50
	Excursions	£250	
2	Emergency medical & other expenses	£2,000,000	£50
	Emergency dental treatment	£200	
	Search and rescue	no cover	-
3	Hospital benefit	no cover	-
4	Personal accident		£0
	i. Death benefit (aged under 16)	£1,000	
	Death benefit (aged 16 to 64)	£15,000	
	Death benefit (aged 65 and over)	£1,000	
	ii. Loss of limbs or sight (aged under 65)	£15,000	
	iii. Permanent total disablement (aged under 65)	£15,000	
5	Baggage		
	Baggage (Including valuables)	£2,000	£50
	a) Single article, pair or set limit	£500	
	b) Valuables limit in total	£500	
	Baggage delay	no cover	-
6	Personal money, passport & documents		£50
	1. a) Currency, notes and coins	£200	
	b) Currency, notes and coins (aged under 16)	£50	
	c) Other personal money and documents	£200	
	2. Passport or visa	£250	
7	Personal liability	£1,000,000	£100
8	Delayed departure	no cover	-
9	Missed departure	£250	£50
10	Hijack and hostage	no cover	-
11	Catastrophes and natural disasters	no cover	-
12	Air rage	no cover	-
13	Incarceration	no cover	-
14	Overseas legal expenses & assistance	£10,000	£0
	Aggregate limit	£10,000	
15	Extended kennel and/or cattery fees	no cover	-

Sports and activities covered

Please refer to the general exclusions in the group policy wording with reference to participation in or practice of sports and activities.

No cover under section 7 – Personal liability for pursuit of any business, trade, profession or occupation.

The following list details the sports and activities that this group policy will cover in addition to those listed as standard in the group policy wording.

Supplementary sports and activities

Please note that cover under section 7 - Personal liability is excluded where a beneficiary is participating in any sport or activity marked with *.

- abseiling
- · activity centre holidays
- athletics
- bungee jumping (within professional organiser's guidelines and wearing appropriate safety equipment)
- · canoeing (up to grade 3 rivers)
- * casual work (including manual work)
- cycle touring (wearing a helmet)
- · farm holidays
- football (amateur only and main purpose of the trip)
- frisbee
- · hockey (field only)
- ice skating
- · kayaking (up to grade 3 rivers)
- lacrosse
- · marathon / triathlon
- * moped riding (wearing a crash helmet and maximum 50cc)
- * motorcycle casual riding (wearing a crash helmet and maximum 50cc)
- outward-bound
- · parasailing (behind a boat)
- parascending (behind motorised vehicle)
- power boating (as a passenger)
- · regular sports
- rugby
- sailboarding
- scrambling

- scuba diving to max depth 30 metres below sea level if appropriate PADI or BSAC qualified or other diving recognised International Authoritative or Affiliate qualified and provided you are diving under the direction and/or instruction of an accredited/qualified instructor.
 - The Beneficiary will not be covered under this policy if they travel by air within 24 hours of participating in scuba diving.
- scuba diving If appropriate PADI or BSAC qualified or other diving recognised International Authoritative or Affiliate qualified and without the direction and/or instruction of an accredited/qualified instructor, depth limited to:
 - PADI Open Water to max depth 18 metres below sea level only.
 - PADI Advanced Open Water to max depth 30 metres below sea level only.
 - BSAC Ocean Diver to max depth 20 metres below sea level only.
 - BSAC Sports Diver to max depth 20 metres below sea level only.
 - BSAC Dive Leader to max depth 30 metres below sea level only.
 - Maximum depth of any other recognised diving qualification.

The Beneficiary will not be covered under this policy if they travel by air within 24 hours of participating in scuba diving.

- skin diving
- solo sailing (inshore waters)
- · trekking up to 5,400 metres altitude
- weightlifting
- white water rafting up to level 4 (within organisers quidelines)
- · yachting (in territorial waters)
- zip climbing
- zip wiring

Volunteer sports and activities

Covered if the volunteer trip option has been selected:

All volunteering work must be organised by a professional organisation operating from the United Kingdom offering support and advice to the Beneficiary.

Please note that cover under section 7 - Personal liability is excluded for each of these activities.

caring / nursing (excluding the administering of drugs or medicine), classroom teacher, child care, counselling or mentoring youngsters, farm work (but not including the use of plant or power tools and machinery), field work, fruit or vegetable picking, general classroom duties, manual work (but not including the use of plant or power tools and machinery), orphanage work (excluding the administering of drugs or medicine), occasional light manual work (but not including the use of plant or power tools and machinery), ranch work (but not including the use of plant or power tools and machinery), retail trade including manual work (but not including the use of plant or power tools and machinery), sports coach (general sports including: football, netball, athletics, basketball, swimming, cricket, volleyball, rugby, tennis), superintendence of manual work, supervised construction duties (but not including the use of plant or power tools, and machinery), working with animals and wildlife (excluding hunting and direct contact with snakes, crocodiles, alligators, sharks, hippos, elephants and lions) under the constant supervision of the conservation staff in a controlled environment and working within the guidelines of the organisation that the beneficiary is working with.

policy endorsements

Details of the changes to the group policy are shown below. The sections shown replace or change those of the same name in the Statement of Insurance or any previously issued endorsements. This should be read in conjunction with the group policy.

Section 5 - Baggage

There is an additional premium for this endorsement and cover is only applicable if the appropriate premium has been paid.

- a) the single article limit; and
- b) the valuables limit

are each increased to £1,000 in respect of the Beneficiary's computers and computer equipment (including iPads, tablets, PDAs, personal organisers, laptops, notebooks, netbooks and the like) provided that the total for all Valuables does not exceed £1,000.

Any conditions, limitations and exclusions under Section 5 - Baggage apply to this endorsement.

General conditions and general exclusions apply to the whole of the group policy and all levels of cover.

obligations

It is important that the group policyholder checks that the information given in the Statement of Insurance is, to the best of their knowledge and belief, complete and correct as this forms the basis of the insurance contract.

Each beneficiary must tell the Group Policyholder immediately on finding that any information in relation to their cover under this group policy has changed. The group policyholder must tell us immediately if at any time any of the information is incorrect or changes. Failure to do so may result in the insurance no longer being valid and claims not being met or not being met in full. If in doubt about any change please contact us as soon as possible.

All beneficiaries should refer to the conditions in the group policy wording for details of how any changes in circumstances may affect their cover under this insurance.

excesses and special terms and conditions applicable to the whole group policy

Each beneficiary is responsible for paying the first amount of each and every claim under each section for which an excess applies. The standard excesses payable in the event of a claim are shown in the table of benefits.

declarations made

The group policyholder declares that to the best of their knowledge all the information provided in connection with this proposal is correct and complete.

Beneficiaries agree to the important conditions in relation to health shown within the group policy wording document.

Beneficiaries are:

Registered under the health care system in their home country Travelling from and returning to their home country

Status Disclosure

about the Insurers

Zurich Insurance plc FCA Register No: 203093

Zurich House, Ballsbridge Park, Dublin 4, Ireland

Zurich Insurance plc, is authorised by the Central Bank of Ireland and subject to limited regulation by the Financial Conduct Authority. Details about the extent of our regulation by the Financial Conduct Authority are available from us on request.

The group policyholder's rights under the FSCS are not affected by this.

about Our Services

Our current fee for payment by credit card is 1.5%. We reserve the right to change our credit card fee without prior notice. This charge does not apply to debit cards.

Endsleigh Insurance Services Limited, Shurdington Road, Cheltenham, GL51 4UE is authorised and regulated by the Financial Conduct Authority. Our Financial Services Register number is 304295. The group policyholder can check this on the Financial Services Register by visiting the FCA's web site www.fca.org.uk/register do or by contacting the FCA on 0800 111 6768. Zurich Holdings (UK) Ltd owns 100% of our share capital.

Any information we provide the group policyholder does not constitute advice or a personal recommendation and the group policyholder agrees to make their own choice about how to proceed. We may ask questions to narrow down the selection of products that we will provide information on.

The parties to a contract of insurance covering a risk situated in the United Kingdom are permitted to choose the law applicable to the contract. This group travel insurance policy is governed by English law. English law will also apply prior to the conclusion of the group policyholder's contract of insurance.

Should the beneficiary require emergency medical assistance abroad or in the event of them wanting to make a legal expenses claim against this group policy, the assistance company or the legal expenses claims handler (as appropriate) will provide the necessary service or arrange settlement of the claim subject to the terms and conditions of the group policy. For all other claims, Endsleigh will be acting on behalf of the insurer in negotiating and settling the claim with them. To make a claim, phone the telephone number detailed in the 'How to make a claim' section of the group policy summary and explain what has happened and when and where the incident took place. If possible, please have the policy number to hand when the call is made.



group policy summary gap travel



policyholder: Projects Abroad

This summary contains the key features of the group policy. It does not contain the full terms and conditions, which can be found in the group policy.

It is particularly important that the group policyholder and beneficiaries read the sections on key exclusions. Cancellation cover starts from the date the beneficiary is accepted for cover, all other cover is for the duration of the beneficiary's trip.

Conditions - It is essential that beneficiaries refer to the Important conditions relating to health section in the group policy wording as failure to comply with these conditions may jeopardise a claim or cover. If a beneficiary is travelling to Australia and they require medical treatment they must enrol with a local Medicare office.

Age Eligibility – This group policy is not available to anyone aged 66 or over. Benefits and excess may be subject to age.

Beneficiary – Each person travelling on a trip arranged by the group policyholder who is eligible to be covered under this group policy.

Policy Term - This group policy is valid from the date stated on the Statement of Insurance. Cover under this group policy is available to each beneficiary from the time that beneficiary is accepted by the group policyholder for the period of cover.

gap travel - essential

insured by insured by Zurich Insurance plc

key benefits

- Emergency and medical service Medical expertise to arrange emergency medical assistance or transport home following an accident or illness or if a beneficiary is informed of a serious illness of a close relative at home whilst on their trip.
- Section 1, Cancellation or curtailment charges Cover for costs against unavoidable or necessary cancellation or curtailment of the trip before completion due to, death, bodily injury or illness.
 The maximum we will pay under this section is shown in the statement of insurance.
- Section 2, Emergency medical and other expenses -Emergency medical, surgical, hospital, ambulance and nursing fees up to the amount shown in the statement of insurance outside of the beneficiary's home country.
- Section 4, Personal accident Up to the amount shown in the statement of insurance for death, loss of limb or sight and permanent total disablement, subject to age - Please refer to group policy wording and the statement of insurance for full details of the cover available.
- Section 5, Baggage Accidental loss, theft or damage to baggage
 up to the amount shown in the statement of insurance. Up to the
 amounts shown in the statement of insurance for any one article and
 for all valuables Please refer to the group policy wording for the
 definition of valuables.
- Section 6, Personal money, passport and documents Accidental loss, theft of or damage to personal money including foreign currency up to 72 hours prior to departure - Please refer to group policy wording for full details of the cover available. Up to the amount shown in the statement of insurance for reasonable additional costs for travel and accommodation incurred whilst obtaining a replacement passport or visa abroad.
- Section 7, Personal liability for any compensation a beneficiary becomes legally liable to pay up to the amount shown in the statement of insurance.

reference no: NG9 0013359

- Section 9, Missed departure Up to the amount shown in the statement of insurance for additional room only accommodation and travel expense should a beneficiary miss their departure due to the failure of public transport or an accident or breakdown of the vehicle they are travelling in or strike.
- Section 14, Overseas legal expenses and assistance Legal expenses and costs in pursuit of a civil action up to the amount shown in the statement of insurance.

key exclusions

General exclusions applicable to all sections of the group policy

- War risks, civil commotion, sonic bangs, radioactive contamination.
- Terrorism, (except under sections 1, 2 and 3 unless caused by nuclear, chemical or biological attack).
- · Wilful, self inflicted injury, solvent, drug or alcohol abuse.
- Unlawful actions and any subsequent legal proceedings brought against a beneficiary.
- Travel to a country or specific area or event which the Foreign and Commonwealth office or the World Health Organisation has advised the public not to travel to.

See the group policy: Section 1 - What is not covered

- Redundancy caused by misconduct, resignation, voluntary redundancy or where notification of redundancy was given prior to the beneficiary being accepted for cover.
- Any circumstances known prior to booking the trip that could reasonably be expected to give rise to a claim.

See the group policy: Section 2 - What is not covered

- Treatment or surgery which in the opinion of the medical practitioner in attendance can wait until a beneficiary's return home.
- Medication, which prior to departure is known to be required.
- Expenses incurred as a result of a tropical disease where the required inoculations have not been undertaken.

See the group policy: Section 5 - What is not covered

- Valuables left unattended at any time unless in a hotel safe, safety deposit box or in the beneficiary's locked accommodation.
- Baggage contained in an unattended motor vehicle between 9 p.m. and 9 a.m. or between 9 a.m. and 9 p.m. unless it is in a locked boot or covered from view in a locked car.
- Contact or corneal lenses, hearing aids, dental or medical fittings, ski equipment and other items are excluded - See the group policy wording for the full list.
- Business goods, samples or tools used in connection with the beneficiary's occupation.
- Any loss or theft which is not reported to the police in the country where the incident occurred - see the group policy wording for the full details.

See the group policy: Section 6 - What is not covered

- Personal money or passport left unattended at any time unless in a hotel safe, safety deposit box or in a beneficiary's locked accommodation.
- Loss or theft of traveller's cheques where a beneficiary has not complied with the issuing agents conditions

See the group policy: Section 7 - What is not covered

 Pursuit of any trade, business or profession, or the ownership, possession or use of any vehicles, aircraft or mechanically operated watercraft. See the group policy: Section 9 - What is not covered

 Strike or industrial action publicly known by the date the beneficiary is accepted for cover.

excess

The excess is the amount shown in the statement of insurance of each claim which the beneficiary will pay under each section for which an excess applies.

how to make a complaint

If the group policyholder and/or a beneficiary wish to make a complaint, in the first instance, please contact the person who originally dealt with the enquiry. They will aim to resolve the complaint on the same day. Alternatively the group policyholder and/or a beneficiary can contact us:

by post Customer Liaison Department Endsleigh

Insurance Services Ltd. Shurdington Road, Cheltenham GL51 4UE

by phone 0800 085 8698

If we cannot settle a complaint, the group policyholder and/or a beneficiary has the right to ask the Financial Ombudsman Service to review their case. Contacting the Ombudsman will not affect their rights to take legal action against us.

Financial Services Compensation Scheme

Endsleigh is covered by the Financial Services Compensation Scheme (FSCS). The group policyholder and/or a beneficiary may be entitled to compensation from the scheme if we cannot meet our obligations

Further information about compensation scheme arrangements can be obtained from the FSCS at www.fscs.org.uk

how to cancel

Cancellation:

It is IMPORTANT to know that there will not be a refund of premium if there has been a claim on this group policy which the insurer will have to settle. If a refund is processed within 30 days of the original payment being made we will usually refund the credit or debit card originally used to pay for this group policy. If an outstanding amount is payable, unless we are contacted to make alternative payment arrangements, we will collect the payment owed to us using the debit/credit card details provided when this group policy was arranged. The group policyholder can cancel this group policy by contacting us on 0800 121 6560.

Fees and Charges

Cancellation Fee:

If the group policyholder wishes to cancel this group policy at any time a charge will be made for any period for which cover applied, unless a beneficiary has travelled or a claim or an incident likely to give rise to a claim has occurred, in which case no refund will be due. We will also charge a cancellation fee of £20.00. There will be no refund for any additional optional cover.

how to make a claim

Claims can be reported 24 hours a day, via Our website: www.endsleigh.co.uk

To make a claim please phone:

gap travel – essential **0800 923 4046** from abroad **+44(0) 1242 217301**

medical assistance +44(0) 1243 621058 (24hr)

legal expenses 0800 923 4046 from abroad +44(0) 1242 217301



Projects Abroad Group Policy Travel Insurance Gap Travel



Introduction

This **Group Policy** travel insurance has been arranged by Endsleigh on behalf of the **Group Policyholder** for the benefit of the **Group Policyholder** and the **Beneficiaries**. It contains details of the cover, conditions and exclusions applicable and is the basis on which all claims will be settled.

In return for having accepted the premium **We** will provide cover to the **Group Policyholder** and **Beneficiaries** in accordance with the operative sections of this **Group Policy** as referred to in the **Statement of Insurance**.

The **Statement of Insurance** issued together with this **Group Policy** wording and any endorsements, shows which benefits the **Group Policyholder** has chosen, who is covered under this **Group Policy** and when and where cover applies. The **Group Policyholder** and the **Beneficiaries** should take the time to read this **Group Policy** carefully to ensure that it meets their needs.

This **Group Policy** wording, the **Statement of Insurance** and any endorsements all form part of the **Group Policy**. This is a contract between the **Group Policyholder** and **Us**. The **Group Policy** and all communications before and during the **Policy Term** will be provided in English.

Residency

This policy is only available to the **Beneficiary** if the **Beneficiary** is registered under the health care system in their **Home Country**.

The Law applicable to this policy

We and the Group Policyholder are free to choose the laws applicable to this Group Policy. We propose to apply the laws of England and Wales and by purchasing this Group Policy the Group Policyholder has agreed to this.

Age eligibility

Cover under this **Group Policy** is not available to any **Beneficiary** aged 66 or over at the time of departure. Some benefits and **Excess** may be subject to age limitations as stated in the **Statement of Insurance**.

Group Policy excess

Under most sections of this **Group Policy**, claims will be subject to an **Excess**. This means that each **Beneficiary** will be responsible for paying the first part of each and every claim under each section for which an **Excess** applies.

Group Policy information or advice

The **Group Policyholder** <u>MUST</u> give a copy of this **Group Policy** wording, **Statement of Insurance** and any endorsements to each **Beneficiary** at the time they are accepted for cover under this **Group Policy.** If the **Group Policyholder** would like more information or feel that this insurance may not meet their needs, telephone **Our** customer helpline on 0800 121 6560.

If any **Beneficiary** would like more information or feel that this insurance may not meet their needs, contact the **Group Policyholder** at the address shown in the **Statement of Insurance**

The Insurer

This **Group Policy** is underwritten by Zurich Insurance plc, which is authorised by the Central Bank of Ireland and subject to limited regulation by the Financial Conduct Authority. Details about the extent of **Our** regulation bythe Financial Conduct Authority are available from **Us** on request.

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Definitions

Any word or expression to which a specific meaning has been attached will bear the same meaning throughout this **Group Policy**. For ease of reading the definitions are highlighted by the use of bold print and will start with a capital letter.

Baggage – means luggage, clothing, personal effects, **Valuables** and other articles which belong to the **Beneficiary** (or for which the **Beneficiary** is legally responsible) which are worn, used or carried by the **Beneficiary** during any **Trip** but excluding **Personal Money** and documents of any kind.

Beneficiary/Beneficiaries —means each person travelling on a **Trip** arranged by the **Group Policyholder** who is eligible to be covered under this **Group Policy** and for which details have been provided to **Us** by the **Group Policyholder**. A **Beneficiary** is not party to this contract which is solely between the **Group Policyholder** and **Us**.

Bodily Injury – means an identifiable physical injury sustained by the **Beneficiary** caused by sudden, unexpected, external and visible means. Injury as a result of the **Beneficiary's** unavoidable exposure to the elements shall be deemed to have been caused by **Bodily Injury**.

Close Business Associate – means any person whose absence from business for one or more complete days at the same time as the Beneficiary's absence prevents the proper continuation of that business.

Close Relative – means mother, father, sister, brother, wife, husband, daughter, son, grandparent, grandchild, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, step parent, step child, step sister, step brother, foster child, legal guardian, partner, civil partner or fiancé/fiancée or aunt/uncle.

Curtailment/Curtail - means either:

a) abandoning or cutting short the **Trip** by immediate return to the **Beneficiary's Home Country**, in which case claims will be calculated from the day the **Beneficiary** returned to their **Home Country** and based on the number of complete days of the **Beneficiary's Trip** they have not used, or

b) by attending a hospital abroad as an in-patient or being confined to the **Beneficiary's** accommodation abroad on the orders of their treating **Medical Practitioner** whether due to unforeseen **Bodily Injury** or illness and/or compulsory quarantine, in either case for a period in excess of 48 hours. Claims will be calculated from the day the **Beneficiary** was admitted to hospital or confined to their accommodation and based on the number of complete days for which the **Beneficiary** was hospitalised or confined to their accommodation.

Emergency Assistance Service – means the emergency assistance service provider, appointed by Zurich Insurance plc.

Europe – means Republic of Ireland, The Continent of Europe west of the Ural Mountains including all countries with a Mediterranean coastline (except Algeria, Israel, Lebanon and Libya), Iceland, The Mediterranean Islands, Madeira, Azores and the Canary Islands.

Excess – means the first amount stated in the **Statement of Insurance** of each and every claim that each **Beneficiary** will be responsible for paying under each section for which an excess applies.

Group Policy – means the documents consisting of the Group Policy wording, the Statement of Insurance and any applicable endorsements.

Group Policyholder – means the person, firm, company or organisation stated in the Statement of Insurance as being the Group Policyholder, that is resident or incorporated within the United Kingdom and which has entered into this Group Policy for the benefit of itself and the Beneficiaries.

Home - means the Beneficiary's normal place of residence in their Home Country or the Beneficiary's place of residence in the country in which they are a full time Student.

Home Country – means the Beneficiary's normal country of residence or the country in which the Beneficiary is a full time Student studying a recognised course of further education.

 $\label{eq:medical condition-means} \textbf{Medical Condition} - \textbf{means} \ \textbf{any} \ \textbf{disease}, \ \textbf{illness} \ \textbf{or} \ \textbf{injury} \ \textbf{not} \ \textbf{otherwise} \ \textbf{excluded} \ \textbf{under this} \ \textbf{Group Policy}.$

Medical Practitioner – means a registered practising member of the medical profession who is not related to the **Beneficiary** or any person with whom they are travelling.

Period of Cover – Section 1- Cancellation cover shall be operative from the time the Beneficiary is accepted for cover and shall terminate when the Beneficiary leaves their Home or in respect of a business Trip the Beneficiary's place of business in their Home Country (whichever is the later) to commence their Trip. For all other sections of this Group Policy, the insurance commences when the Beneficiary leaves their Home or in respect of a business Trip the Beneficiary's place of business in their Home Country (whichever is the later), to commence their Trip and terminates at the time of the Beneficiary's return to their Home or place of business in their Home Country (whichever is the earlier) on completion of their Trip. Any Trip that had already begun at the time of the Beneficiary being accepted for cover will not be covered. The Period of Cover is automatically extended for the period of the delay (but not exceeding 30 days in total unless otherwise agreed in writing by The Insurer) in the event that the Beneficiary's return to their Home Country is unavoidably delayed due to an event insured by this Group Policy.

Personal Money – means currency, notes and coins in current use, travellers' and other cheques, postal or money orders, pre-paid coupons or vouchers, travel tickets, event and entertainment tickets, phonecards and credit/debit or charge cards all held by the **Beneficiary** for private purposes.

Policy Term - means the period shown in the **Statement of Insurance** for which the **Group Policyholder** has taken out this **Group Policy** and for which the premium has been paid. The **Policy Term** may, at **Our** discretion, be extended subject to payment of any additional premium required.

Public Transport – means any publicly licensed aircraft, sea vessel, train or coach on which the Beneficiary is booked to travel.

Statement of Insurance – means the document detailing the insurer, the policy number, the **Policy Term**, the sections which are operative, benefits for each section of cover and any special terms and conditions which may apply to the **Group Policy**.

Student - means any person studying for a degree or other recognised qualification at a college or university.

Ski Equipment – means skis (including bindings), ski boots, ski poles and snowboards.

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

Trip – means any holiday, business or pleasure trip or journey as shown in the **Statement of Insurance** made by the **Beneficiary** within the cover area shown in the **Statement of Insurance** which begins and ends in the **Beneficiary's Home Country** during the **Period of Cover** but excluding one way trips or journeys.

Unattended – means when the **Beneficiary's** vehicle or property is not in full view of and not in a position to prevent unauthorised interference with their property or vehicle.

United Kingdom/UK - means England, Scotland, Wales and Northern Ireland.

Valuables – means jewellery, watches, furs, precious and semi-precious stones and articles made of or containing gold, silver or other precious metals; mobile phones, smartphones and other telecommunications equipment; cameras and other photographic equipment, telescopes and binoculars; audio/video equipment (including radios, cassette/compact disc players, ipods, mp3 and mp4 players, camcorders, DVD, video, televisions, and other similar audio and video equipment and headphones); satellite navigation equipment; computers and computer equipment (including iPads, tablets, PDAs, personal organisers, laptops, notebooks, netbooks and the like); computer games equipment (including consoles, games and peripherals); CDs, DVDs and recordable media including USB sticks, SD cards, tapes, films, cassettes, cartridges and the like.

We/Us/Our - means Zurich Insurance plc or Endsleigh Insurance Services Limited acting as administrator on its behalf.

General conditions applicable to the Group Policy

Both the **Group Policyholder** and the **Beneficiaries** MUST comply with the following conditions to have the full protection of this **Group Policy**.

If the **Group Policyholder** or the **Beneficiaries** do not comply with such conditions **We** may at **Our** option cancel this **Group Policy**, refuse to deal with any claim or reduce the amount of any claim payment.

1. Dual insurance

If at the time of any incident which results in a claim under this **Group Policy**, there is another insurance covering the same loss, damage, expense or liability **We** will not pay more than **Our** proportional share (not applicable to section 4 – Personal accident).

2. Reasonable precautions

Both the **Group Policyholder** and the **Beneficiary** <u>MUST</u> take and cause to be taken all reasonable precautions to avoid injury, illness, disease, loss, theft or damage and also take and cause to be taken all practicable steps to safeguard property from loss or damage and to recover property lost or stolen.

3. Cancellation of the Group Policy

14 Day Cooling Off Period

The **Group Policyholder** may cancel this **Group Policy** and all associated cover sections within 14 days starting from the day the **Group Policyholder** received the **Group Policy** by writing to the address shown the **Statement of Insurance**. We will refund the premium less a charge for any period for which cover applied. We also reserve the right to charge a cancellation fee as shown in the **Group Policy** summary. In the event any **Beneficiaries** have travelled or a claim or an incident likely to give rise to a claim has occurred during the period for which cover applied, no refund of premium will be given.

Cancellation Outside the 14 Day Cooling Off Period

This **Group Policy** may be cancelled:

- a) by the **Group Policyholder** sending **Us** notice to the address shown on the **Statement of Insurance**. **We** will return a proportionate refund of the premium paid in respect of the unexpired term of this **Group Policy**. We also reserve the right to charge a cancellation fee as shown in the **Group Policy** summary. In the event any **Beneficiary** has travelled or a claim or an incident likely to give rise to a claim has occurred during the current **Policy Term**, no refund of premium will be given.
- b) by **Us** or **Our** authorised underwriting agents where there is a valid reason for doing so by giving the **Group Policyholder** 21 days' notice in writing to their last known address. **We** will refund any premium which may be due to the **Group Policyholder** in accordance with the terms of this condition. Valid reasons for cancellation may include but are not limited to:
- If the Group Policyholder advises Us of a change of risk under this Group Policy which We are unable to insure;
- Where the **Group Policyholder** fails to respond to requests from **Us** for further information or documentation;
- Where the Group Policyholder has given incorrect information and fails to provide clarification when requested;
- Where the **Group Policyholder** is in breach of any of the terms and conditions which apply to this **Group Policy**;
- Where We reasonably suspect fraud; or
- The use of threatening or abusive behaviour or language, or intimidation or bullying of **Our** staff or suppliers, by the **Group Policyholder** or any person acting on their behalf.

c) by **Us** or **Our** authorised underwriting agents if **We** have been unable to collect a premium payment. In this case the **Group Policyholder** will be notified in writing requesting payment by a specific date. If payment is not received by this date the **Group Policyholder** will be written to again notifying them that payment has not been received and giving them seven days' notice for a final payment. If payment is not received by that date **We** will cancel this **Group Policy** with immediate effect and notify the **Group Policyholder** in writing that such cancellation has taken place.

4. Withdrawal of Participation by a Beneficiary

A Beneficiary may withdraw from participation in the Group Policy by giving written notice of that intention to the Group Policyholder specified in the Statement of Insurance. Any return of premium due to the Group Policyholder as a result of a Beneficiary's withdrawal from participation in the Group Policy will be calculated from the date such participation ceases or the date We have received written notice whichever is the later. No return of premium will be paid or allowed where such Beneficiary has travelled on a Trip covered under this Group Policy or been the subject of a claim during any period for which cover was provided. We also reserve the right to charge a reasonable administration fee.

5. Sanctions

We will not be held liable to provide cover or make any payments or provide any service or benefit to any **Group Policyholder**, **Beneficiary** or other party to the extent that such cover, payment, service, benefit and/or business or activity of the **Group Policyholder** or **Beneficiary** would violate any applicable trade or economic sanctions law or regulation.

Claims conditions

In the event of the **Group Policyholder** or any **Beneficiary** wanting to make a claim against the **Group Policy**, Endsleigh will be acting on behalf of the insurer on negotiating and settling the claim with them. To make a claim, phone the telephone number detailed in the 'How to make a claim' section of the policy summary.

If the **Group Policyholder** or any **Beneficiary** does not comply with the claims conditions **We** may at **Our** option cancel the **Group** Policy, refuse to deal with any claim or reduce the amount of any claim payment.

1. Claims

Depending on the type of claim **We** should be notified preferably via **Our** website www.endsleigh.co.uk. Alternatively notify **Us** by email, phone or write to **Us** at the address given below:

All claims except legal expenses

Endsleigh Insurance, Shurdington Road, Cheltenham Spa, Gloucestershire GL51 4UE

Tel: 0800 923 4046 or from abroad Tel: +44(0) 1242 217301

Email: travel.claims@endsleigh.co.uk

Legal expenses only

Lyons Davidson Limited, 51 Victoria Street, Bristol, BS1 6AD

Tel: 0800 923 4046 or from abroad - Tel: +44(0) 1242 217301

Email: zurichtravelclaims@lyonsdavidson.co.uk

The notification <u>MUST</u> be made within 31 days or as soon as possible thereafter following any **Bodily Injury**, illness, disease, incident, event, redundancy or the discovery of any loss, theft or damage which may give rise to a claim under this policy.

The **Group Policyholder** and/or the **Beneficiary** <u>MUST</u> also inform **Us** if they are aware of any writ, summons or impending prosecution. Every communication relating to a claim <u>MUST</u> be sent to **Us** without delay. The **Group Policyholder**, the **Beneficiary** and/or anyone acting on their behalf <u>MUST</u> not negotiate, admit or repudiate any claim without **Our** written consent.

The **Group Policyholder**, the **Beneficiary** and/or their legal representatives <u>MUST</u> supply at their own expense all information, evidence, details of household insurance and medical certificates as required by **Us**. **We** reserve the right to require the **Beneficiary** to undergo an independent medical examination at **Our** expense. **We** may also request and will pay for a post-mortem examination where necessary.

All claimants under this **Group Policy** <u>MUST</u> retain any property which is damaged, and, if requested, send it to **Us** at their own expense. If **We** pay a claim for the full value of the property and it is subsequently recovered or there is any salvage then it will become **Our** property. **We** may refuse to reimburse a claimant for any expenses for which they cannot provide receipts or bills.

2. Subrogation

We are entitled to take over any rights in the defence or settlement of any claim and to take proceedings in the **Group Policyholder** or the **Beneficiary's** name for **Our** benefit against any other party.

3. Fraud

The Group Policyholder and the Beneficiaries MUST not act in a fraudulent manner. If the Group Policyholder, a Beneficiary or anyone acting for them

a) Make a claim under the **Group Policy** knowing the claim to be false or fraudulently exaggerated in any respect

or

- b) Make a statement in support of a claim knowing the statement to be false in any respect or
- c) Submit a document in support of a claim knowing the document to be forged or false in any respect or
- d) Make a claim in respect of any loss or damage caused by the Group Policyholder or a Beneficiary's wilful act or with their connivance

Then

- a) We shall not pay the claim
- b) We shall reserve the right not to pay any other claim which has been or will be made under the Group Policy
- c) We may at Our option declare the Group Policy void
- d) We shall be entitled to recover from the Group Policyholder and/or the Beneficiary the amount of any claim already paid under the Group Policy
- e) We shall not make any return of premium
- f) We may inform the Police of the circumstances.

4. Paying Claims

1. Death

- a) If a **Beneficiary** is 18 years old or over, **We** will pay the claim to the **Beneficiary**'s estate and the receipt given to **Us** by the **Beneficiary**'s personal representatives shall be a full discharge of all liability by **Us** in respect of the claim.
- b) If a **Beneficiary** is aged under 18 years **We** will pay any claim for death to the **Beneficiary**'s parent or legal guardian. The **Beneficiary**'s parent or legal guardian. The **Beneficiary**'s parent or legal guardian's receipt shall be a full discharge of all liability by **Us** in respect of the claim.

2. All other claims

- a) If a **Beneficiary** is 18 years or over, **We** will pay the claim to the **Beneficiary** and the **Beneficiary**'s receipt shall be a full discharge of all liability by **Us** in respect of the claim.
- b) If a **Beneficiary** is aged under 18 **We** will pay the appropriate benefit amount to the **Beneficiary**'s parent or legal guardian for the **Beneficiary**'s benefit. The **Beneficiary**'s parent or legal guardian's receipt shall be a full discharge of all liability by **Us** in respect of the claim.

Important conditions relating to health

The **Beneficiaries** MUST comply with the following conditions to have full protection of the **Group Policy**. If the **Beneficiaries** do not comply **We** may at **Our** option cancel the **Group Policy** or refuse to deal with any claim or reduce the amount of any claim payment.

It is a condition of this **Group Policy** that a **Beneficiary** will not be covered under section 1 – Cancellation or curtailment charges, section 2 – Emergency medical and other expenses, section 3 – Hospital benefit, section 4 – Personal accident and section 12 – Air Rage for any claims arising directly or indirectly from:

A) At the time of being accepted for cover:

- 1. Any Medical Condition the Beneficiary has or has had for which:
 - a) symptoms or diagnosis has occurred within the last 12 months or
 - b) there has been a change in treatment (including medication, dosage, surgery, tests, investigations or diet) in the last 12 months
- Any Medical Condition where the Beneficiary, their Close Relative or Close Business Associate is waiting for an operation, hospital consultation (other than for regular check-ups), or other hospital treatment or investigation.
- 3. Any Medical Condition where the Beneficiary, their Close Relative or Close Business Associate has, within the last 6 months, been seen by a specialist (other than for regular check-ups), had an operation or other hospital treatment or investigation.
- Any Medical Condition where the Beneficiary, their Close Relative or Close Business Associate has received a terminal prognosis.
- Any Medical Condition where the Beneficiary, their Close Relative or Close Business Associate has not had a diagnosis.
- Any circumstances the Beneficiary is aware of that could reasonably be expected to give rise to a claim on this Group Policy.

B) At any time:

- Any Medical Condition the Beneficiary has in respect of which a Medical Practitioner has advised the Beneficiary not to travel or would have done so had they sought his/her advice.
- Any Medical Condition for which the Beneficiary is travelling with the intention of obtaining medical treatment (including surgery or investigation) or advice.
- Any Medical Condition for which the Beneficiary is not taking the recommended treatment or prescribed medication as directed by a Medical Practitioner.
- 4. The **Beneficiary** is travelling against any health requirements stipulated by the carrier, their handling agents or other **Public Transport** provider.

The **Group Policyholder** and **Beneficiaries** should also refer to the general exclusions on page 11.

General exclusions applicable to all sections of the Group Policy

We will not pay for claims arising directly or indirectly from or in connection with:

- 1. a) War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power.
- b) **Terrorism**, but this exclusion shall not apply to losses under section 2 Emergency medical and other expenses, section 3 Hospital benefit and section 4 Personal accident unless such losses are caused by nuclear, chemical or biological attack, or the disturbances were already taking place at the beginning of any **Trip**.
- 2. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste, from combustion of nuclear fuel, the radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly.
- 3. Loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.
- 4. The **Beneficiary's** pursuit of winter sports unless sections 16, 17, 18, 19 and 20 are shown as operative in the **Statement of Insurance**, in which case cover will apply to:
 - a) the winter sports shown in the list on page 12 and
 - b) any other winter sports shown as covered in the **Statement of Insurance**.
- 5. The Beneficiary's participation in or practice of any professional entertaining or professional sports.
- 6. The Beneficiary's participation in or practice of any other sport or activity, manual work or racing unless:
 - a) shown as covered without charge in the list on page 12 or
 - b) shown as covered in the **Statement of Insurance**.
- 7. The **Beneficiary's** wilfully, self-inflicted injury or illness, suicide or attempted suicide, sexually transmitted diseases, solvent abuse, alcohol abuse, the use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a **Medical Practitioner**, but not for the treatment of drug addiction), self-exposure to needless peril (except in an attempt to save human life).
- 8. The Beneficiary's own unlawful action or any criminal proceedings against them.
- 9. Unless specifically covered under this insurance, any other loss, damage or additional expense following on from the event for which the Beneficiary is claiming unless we provide cover under this insurance. Examples of such loss, damage or additional expenses would be the cost of replacing locks after losing keys, costs incurred in preparing a claim or loss of earnings following **Bodily Injury** or disease.
- 10. Operational duties of a member of the Armed Forces (other than claims arising from authorised leave being cancelled due to operational reasons, as provided for under sub section 4. of section 1 Cancellation or curtailment charges).
- 11. The **Beneficiary's** use of a motorised vehicle on a **Trip** covered under this **Group Policy** unless a full driving licence is held permitting the use of such vehicles in the country concerned.
- 12. The **Beneficiary's** travel to a country or specific area or event to which the Travel Advice Unit of the Foreign & Commonwealth Office or the World Health Organisation has advised the public not to travel.
- 13. Any circumstances the Group Policyholder or Beneficiary is aware of that could reasonably be expected to give rise to a claim on this Group Policy.

Sports and activities covered

The following lists detail the sports and activities that this **Group Policy** will cover. If a **Beneficiary** is participating in any other sports or activities not mentioned, please telephone the Group Policyholder shown in the Statement of Insurance as they may be able to offer cover for an additional premium. Details of those sports and activities for which additional cover has been purchased will be added to the **Statement of Insurance**.

Please note that cover under section 7 – Personal liability is excluded where a **Beneficiary** is participating in any sport or activity marked with *.

Covered as standard

administrative or clerical occupations aerobics

archery badminton

banana boating baseball

basketball

bmx biking (wearing a helmet and no stunting)

body boarding (boogie boarding)

bowls

bungee jumping (1jump only within professional organiser's guidelines and wearing appropriate safety equipment)

*camel riding

canoeing (up to grade 2 rivers) *catamaran sailing (if qualified)

*clay pigeon shooting

climbing (on indoor climbing wall only)

cricket croquet curling

cycling (wearing a helmet)

deep sea fishing

*dinghy sailing

*driving any motorised vehicle for which You are licensed to drive in Your Home Country (other than in motor rallies or

competitions) elephant riding

fell walking/running

fencing fishing

flying as a fare paying passenger in a fully licensed passenger carrying aircraft

football (amateur only and not main purpose of Trip)

glacier walking

*go karting (within organisers guidelines)

golf hiking

> horse riding (wearing a helmet and excluding competitions, jumping and

hunting)

hot air ballooning (organised pleasure rides only)

hydro zorbing *jet boating *iet skiing

kayaking (up to grade 2 rivers)

mountain biking (wearing a helmet, casual or off road)

netball octopush

jogging

open water swimming (professionally

escorted tours only) orienteering

overlanding *paint balling (wearing eye protection)

pony trekking

*quad biking (wearing a helmet)

racket ball rambling

*rifle range shooting

roller skating and blading (wearing pads & helmets)

rounders rowing

running (non-competitive and not marathon)

safari trekking in a vehicle (must be organised tour)

safari trekking on foot (must be organised

*sailing (if qualified or accompanied by a qualified person)

sandboarding

sand dune surfing/skiing

*sand vachting

scuba diving to max depth 18 metres below sea level (if qualified scuba diver and not diving alone, or accompanied by qualified instructor)

* shooting/small bore target shooting (within organisers guidelines)

skateboarding (wearing pads & helmets)

snorkelling softball squash

students working as counsellors or university exchanges for practical course

work (non manual)

surfing swimming

> swimming with dolphins Sydney harbour bridge walk

table tennis ten pin bowling

tennis trampolining

trekking up to 2,500 metres altitude

tug of war volleyball wake boarding walking

*war games (wearing eye protection)

water polo

water skiing whale watching

wind surfing *yachting (if qualified)

Zorbing

Covered if the appropriate winter sports premium has been paid

dry slope skiing ice skating kick sledging ski – blading skiing on piste

skiing - mono

skiing - off piste with a guide

* sledging pulled by horse, dog or reindeer as a passenger

snow boarding snow shoe walking

Emergency and medical service

In the event of a serious illness or accident which may lead to in-patient hospital treatment or before any arrangements are made for repatriation or in the event of **Curtailment** necessitating the **Beneficiary's** early return **Home** the **Beneficiary** <u>MUST</u> contact the Emergency Assistance Service. The service is available to the **Beneficiary** and operates 24 hours a day, 365 days a year for advice, assistance, making arrangements for hospital admission, repatriation and authorisation of medical expenses. If this is not possible because the condition requires immediate emergency treatment the **Beneficiary** <u>MUST</u> contact the **Emergency Assistance Service** as soon as possible. Private medical treatment is not covered unless authorised specifically by the **Emergency Assistance Service** or if stated.

Medical assistance abroad

The **Emergency Assistance Service** has the medical expertise, contacts and facilities to help should the **Beneficiary** be injured in an accident or fall ill. The **Emergency Assistance Service** will also arrange transport **Home** when this is considered to be medically necessary or when the **Beneficiary** has notice of serious illness or death of a **Close Relative** at **Home**.

Payment for medical treatment abroad

If the **Beneficiary** is admitted to a hospital/clinic while abroad, the **Emergency Assistance Service** will arrange for medical expenses covered by the **Group Policy** to be paid direct to the hospital/clinic. To take advantage of this benefit someone <u>MUST</u> contact the **Emergency Assistance Service** for the **Beneficiary** as soon as possible.

For simple out-patient treatment, the **Beneficiary** should pay the hospital/clinic and submit a claim for reimbursement under this **Group Policy**. The **Beneficiary** should beware of requests to sign for excessive treatment or charges. If in doubt regarding any such requests, please call the **Emergency Assistance Service** for guidance.

Reciprocal health agreements

EU, EEA or Switzerland

If the **Beneficiary** is travelling to countries within the European Union (EU), the European Economic Area (EEA) or Switzerland they are strongly advised to check if they are entitled to benefit from the reciprocal health care arrangements which exist between countries within the EU/EEA or Switzerland.

In the event of liability being accepted for a medical expense which has been reduced by the use of either a reciprocal health care arrangement or private health insurance, **We** will not apply the deduction of **Excess** under section 2 - Emergency medical and other expenses.

Australia

If the **Beneficiary** requires medical treatment in Australia they <u>MUST</u> enrol with a local MEDICARE office. The **Beneficiary** does not need to enrol on arrival but they <u>MUST</u> do this after the first occasion they receive treatment. In-patient and out-patient treatment at a public hospital is then available free of charge. Details of how to enrol and the free treatment available can be found by visiting the MEDICARE website on

http://www.humanservices.gov.au. Alternatively please call the **Emergency Assistance Service** for guidance.

If the **Beneficiary** is admitted to hospital contact <u>MUST</u> be made with the **Emergency Assistance Service** as soon as possible and their authority obtained in respect of any treatment NOT available under MEDICARE.

Group Policy cover

There are two levels of cover for sections 1, 2, 4, 5, 6, 7, 9, 14, 17, 19 and 20 which are:

- Essential cover
- Comprehensive cover

The benefits under Comprehensive cover are generally higher than Essential cover. The level of benefit is shown for each level of cover within each section. The cover under sections 15, 16 and 18 is the same under Essential cover and Comprehensive cover.

The cover under sections 3, 8 and 10 to 13 apply to Comprehensive cover only.

The level of cover which the **Beneficiary** has chosen is shown in their **Statement of Insurance**.

The General conditions on page 6 and General exclusions on page 11 apply to the whole of the **Group Policy** and all levels of cover. Each section states the level of benefits payable and any limits, conditions and exclusions applying specifically to that section. The level of benefits for which the **Beneficiary** is eligible will depend upon the level of cover they have chosen. Please consult the relevant sections of this policy for details of the maximum sums payable and limitations applying to the **Beneficiary's** chosen level of cover.

Section 1 - Cancellation and curtailment charges

What is covered

We will reimburse the **Beneficiary** up to the amount stated in the **Statement of Insurance** for any irrecoverable unused travel and accommodation costs and other pre-paid charges which the **Beneficiary** has paid or is contracted to pay together with any reasonable additional travel expenses incurred if

- a) cancellation of the Trip is necessary and unavoidable or
- b) the Trip is Curtailed before completion

as a result of any of the following events occurring during the **Period** of Cover:

- 1. The death, **Bodily Injury** or illness of:
 - a) the Beneficiary
 - b) any person with whom the **Beneficiary** is travelling or has arranged to travel with
 - c) any person with whom the **Beneficiary** has arranged to reside temporarily
 - d) the Beneficiary's Close Relative
 - e) the Beneficiary's Close Business Associate.
- Compulsory quarantine on the order of a treating medical practitioner, jury service attendance or being called as a witness at a Court of Law of the **Beneficiary** or any person with whom they are travelling or have arranged to travel with.
- 3. Redundancy (which qualifies for payment under current redundancy payment legislation of the **Beneficiary's Home Country** and at the time of booking the **Trip** there was no reason to believe anyone would be made redundant) of the **Beneficiary** or any person with whom they are travelling or have arranged to travel with.

What is not covered

- 1. The Excess amount as stated in the Statement of Insurance.
- 2. The cost of Airport Departure Duty.
- 3. Any claims arising directly or indirectly from:
 - a) Redundancy caused by or resulting from misconduct leading to dismissal or from resignation or voluntary redundancy or where a warning or notification of redundancy was given prior to the date this insurance is purchased by the **Beneficiary** or the time of booking any **Trip**.
 - b) Circumstances known to the Group Policyholder or the Beneficiary prior to the date any such Beneficiary is accepted for cover or the time of booking any Trip (whichever is the earlier) which could reasonably have been expected to give rise to cancellation or Curtailment of the Trip.
 - c) Normal pregnancy, without accompanying **Bodily Injury**, illness, disease or complication. This section is designed to provide cover for unforeseen events, accidents, illnesses and diseases and normal childbirth would not constitute an unforeseen event
- Travel tickets paid for using any airline mileage reward scheme, for example Air Miles.
- 5. Anything mentioned in the general exclusions on page 11.

The **Group Policyholder** and the **Beneficiaries** should also refer to the important conditions relating to health on page 10.

What is covered What is not covered

- 4. The Beneficiary or any person with whom they are travelling or have arranged to travel with if such person is a member of the Armed Forces, Police, Fire, Nursing or Ambulance Services or employees of a Government Department and has their authorised annual leave cancelled for operational reasons, provided that such cancellations or Curtailment could not reasonably have been expected at the time when the Beneficiary purchased this insurance or at the time of booking any Trip.
- 5. The Police requesting the **Beneficiary** to remain at or return to their **Home** due to serious damage to their **Home** caused by fire, aircraft, explosion, storm, flood, subsidence, malicious persons or theft.

The Beneficiary may only claim under section 1 - Cancellation or curtailment or section 11 - Catastrophes and natural disasters for the same event.

- 1. The **Beneficiary** <u>MUST</u> obtain (at their own expense) a medical certificate from a **Medical Practitioner** in attendance and prior approval of the **Emergency Assistance Service** to confirm the necessity to return **Home** prior to **Curtailment** of the **Trip** due to death, **Bodily Injury** or illness.
- 2. If the **Beneficiary** fails to notify the travel agent, tour operator or provider of transport/accommodation immediately it is found necessary to cancel the **Trip Our** liability shall be restricted to the cancellation charges that would have applied had failure not occurred.
- 3. If the **Beneficiary** cancels the **Trip** due to
 - a) Stress, anxiety, depression or any other mental or nervous disorder that they are suffering from they <u>MUST</u> provide a medical certificate from a consultant specialising in the relevant field
 - b) Any other illness or a **Bodily Injury** they <u>MUST</u> provide a medical certificate from a **Medical Practitioner** stating that this necessarily and reasonably prevented them from travelling.

Section 2 - Emergency medical and other expenses

What is covered

We will pay up to the amount stated in the **Statement of Insurance** for the following expenses which are necessarily incurred within 12 months of the incident as a result of the **Beneficiary** suffering unforeseen **Bodily Injury** or illness and/or being compulsorily quarantined on the orders of a treating **Medical Practitioner** whilst on a **Trip** during the **Period of Cover**

- 1. Emergency medical, surgical, hospital, ambulance and nursing fees and charges incurred outside the **Beneficiary's Home Country**.
- Emergency dental treatment for the immediate relief of pain (to natural teeth only) up to the amount stated in the **Statement of Insurance** incurred outside the **Beneficiary's Home Country**.
- 3. In the event of the Beneficiary's death outside their Home Country the reasonable additional cost of funeral expenses abroad plus the reasonable cost of conveying their ashes to their Home, or the additional costs of returning their body to their Home. This includes, with the prior authorisation of the Emergency Assistance Service, reasonable transport and accommodation expenses for Close Relatives to travel to the Beneficiary plus the reasonable cost of their return Home.
- 4. Reasonable additional transport (economy class) or accommodation expenses incurred, up to the standard of the **Beneficiary's** original booking, if it is medically necessary for the **Beneficiary** to stay beyond their scheduled return date.

This includes, with the prior authorisation of the **Emergency Assistance Service**, reasonable additional transport and/or accommodation expenses for one friend or **Close Relative** to remain with the **Beneficiary** or travel to them from their **Home Country** or escort them, and additional travel expenses to return the **Beneficiary** to their **Home** if they are unable to use the return ticket.

What is not covered

- 1. The Excess amount as stated in the Statement of Insurance.
- 2. Any claims arising directly or indirectly in respect of:
 - a) Costs of telephone calls, other than calls to the Emergency
 Assistance Service notifying them of the problem for which the
 Beneficiary is able to provide a receipt or other evidence to show
 the cost of the call and the number telephoned.
 - b) The cost of treatment or surgery, including exploratory tests, which are not directly related to the **Bodily Injury** or illness which necessitated the **Beneficiary's** admittance into hospital.
 - c) Any expenses which are not usual, reasonable or customary to treat the Beneficiary's Bodily Injury or illness.
 - d) Any form of treatment or surgery which in the opinion of the Medical Practitioner in attendance and the Emergency Assistance Service can be delayed reasonably until the Beneficiary's return to their Home Country.
 - e) Expenses incurred in obtaining or replacing medication or obtaining treatment or ongoing regular therapy, which at the time of departure is known to be required or to be continued outside the **Beneficiary's Home Country**.
 - f) Additional costs arising from single or private room accommodation.
 - g) Treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre unless agreed by the Emergency Assistance Service.
 - h) Any expenses incurred after the **Beneficiary** has returned to their Home Country.
 - Expenses incurred as a result of a tropical disease where the Beneficiary has not had the recommended inoculations and/or taken the recommended medication.
 - j) The Beneficiary's decision not to be repatriated after the date when in the opinion of the Emergency Assistance Service it is safe to do so.
 - k) Normal pregnancy, without any accompanying Bodily Injury, illness, disease or complication. This section is designed to provide cover for unforeseen events, accidents, illnesses and diseases and normal childbirth would not constitute an unforeseen event.

What is covered

5. With the prior authorisation of the Emergency Assistance Service, the additional costs incurred in the use of air transport or other suitable means, including qualified attendants, to repatriate the **Beneficiary** to their **Home** if it is medically necessary. Repatriation expenses will be in respect only of the identical class of travel utilised on the outward journey unless the **Emergency Assistance Service** agree otherwise.

For Comprehensive cover only

6. We will pay up to the amount stated in the Statement of Insurance towards the costs incurred by official bodies involved in searching for the Beneficiary or rescuing or recovering them if they are reported missing or have suffered Bodily Injury.

What is not covered

- Any claim for search and rescue not supported by a written statement from the appropriate authority involved in the search and/or rescue.
- 4. Anything mentioned in the general exclusions on page 11.

The **Group Policyholder** and the **Beneficiaries** should also refer to the important conditions relating to health on page 10.

- 1. The **Beneficiary** (or someone on **their** behalf) <u>MUST</u> give notice as soon as possible to the **Emergency Assistance Service** of any **Bodily Injury** or illness which necessitates the **Beneficiary's** admittance to hospital as an in-patient or before any arrangements are made for the **Beneficiary's** repatriation.
- 2. In the event of the **Beneficiary's Bodily Injury** or illness **We** reserve the right to relocate them from one hospital to another and arrange for their repatriation to their **Home Country** at any time during the **Trip**. **We** will do this if in the opinion of the **Medical Practitioner** in attendance or the **Emergency Assistance Service** the **Beneficiary** can be moved safely and/or travel safely to the their **Home Country** to continue treatment.

Section 3 - Hospital Benefit

This section is applicable to Comprehensive cover only

What is covered

We will pay the **Beneficiary** up to the amount stated in the **Statement of Insurance** for every complete 24 hours they have to stay in hospital as an in-patient outside their **Home Country** as a result of **Bodily Injury** or illness they sustain whilst on a **Trip** during the **Period of Cover**.

We will pay the amount stated in the **Statement of Insurance** in addition to any amount payable under section 2 – Emergency medical and other expenses.

What is not covered

- 1. Any claims arising directly or indirectly from:
 - a) Any additional period of hospitalisation relating to treatment or surgery, including exploratory tests, which are not directly related to the **Bodily Injury** or illness which necessitated the **Beneficiary's** admittance into hospital.
 - b) Hospitalisation relating to any form of treatment or surgery which in the opinion of the **Medical Practitioner** in attendance and the **Emergency Assistance Service** can be delayed reasonably until the **Beneficiary's** return to their **Home Country**.
 - c) Any additional period of hospitalisation relating to treatment or services provided by a convalescent or nursing home or any rehabilitation centre.
 - d) Hospitalisation as a result of a tropical disease where the Beneficiary has not had the recommended inoculations and/or taken the recommended medication.
 - e) Any additional period of hospitalisation following the Beneficiary's decision not to be repatriated after the date when in the opinion of the Emergency Assistance Service it is safe to do so.
- 2. Anything mentioned in the general exclusions on page 11.

Special conditions relating to claims

The Beneficiary MUST give notice as soon as possible to the Emergency Assistance Service or Us of any Bodily Injury or illness which necessitates
their admittance to hospital as an in-patient.

Section 4 - Personal accident

Special Definitions relating to this section (which are shown in bold italics)

Loss of limb – means loss by permanent severance of an entire hand or foot or the total and permanent loss of use of an entire hand or foot.

Loss of sight – means total and irrecoverable loss of sight which shall be considered. as having occurred:

- a) in both eyes if the **Beneficiary's** name is added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist and
- b) in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen scale

What is covered

We will pay one of the benefits shown stated in the **Statement of Insurance** if the **Beneficiary** sustains **Bodily Injury** whilst on a **Trip** during the **Period of Cover** which shall solely and independently of any other cause, result within two years in the **Beneficiary's** death, **Loss of limb**, **Loss of sight** or permanent total disablement.

What is not covered

1. Anything mentioned in the general exclusions on page 11.

The **Group Policyholder** and the **Beneficiaries** should also refer to the Important conditions relating to health on page 10.

You may claim only under section 4 – Personal accident or 12 – Air Rage for the same event, not both.

Special conditions relating to claims

1. Our Medical Practitioner may examine the Beneficiary as often as they deem necessary in the event of a claim.

Provisions

- 1. Benefit is not payable to the **Beneficiary**:
 - a) Under more than one of items i, ii, or iii as stated in the Statement of Insurance.
- b) Under item iii as stated in the Statement of Insurance until one year after the date they sustain Bodily Injury.
- c) Under item iii as stated in the Statement of Insurance if they are able or may be able to carry out any relevant employment or relevant occupation.

Section 5 - Baggage

What is covered

 We will pay the Beneficiary up to the amount stated in the Statement of Insurance for the accidental loss of, theft of or damage to the Beneficiary's Baggage, including Valuables whilst on a Trip during the Period of Cover.

The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (or **We** may at **Our** option replace, reinstate or repair the lost or damaged **Baggage**).

The maximum We will pay for the following items is stated in the Statement of Insurance:

- a) for any one article, pair or set of articles
- b) the total for all Valuables

For Comprehensive cover only

2. We will also pay the Beneficiary up to the amount stated in the Statement of Insurance for the emergency replacement of clothing, medication and toiletries if the Baggage is temporarily lost in transit whilst on a Trip during the Policy Term during the outward journey and not returned to the Beneficiary within 12 hours, provided written confirmation is obtained and sent to Us from the carrier, confirming the number of hours the Baggage was delayed.

If the loss is permanent the amount paid will be deducted from the final amount to be paid under this section.

What is not covered

- 1. The Excess amount as stated in the Statement of Insurance.
- Loss, theft of or damage to Valuables left Unattended at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe, safety deposit box or left in the Beneficiary's locked accommodation.
- Loss, theft of or damage to Baggage contained in an Unattended vehicle:
 a) overnight between 9 p.m. and 9 a.m. (local time) or
 - b) at any time between 9 a.m. and 9 p.m. (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view.
- Loss or damage due to delay, confiscation or detention by customs or any other authority.
- 5. Any loss, theft of or damage to unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, documents of any kind, bonds, securities, perishable goods, bicycles, **Ski Equipment** and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).
- 6. Loss or damage due to cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or accident to the aircraft, sea vessel, train or vehicle in which they are being carried.
- Loss or damage due to breakage of sports equipment or damage to sports clothing whilst in use.

What is covered

What is not covered

- Loss, theft of or damage to business goods, samples, tools of trade, motor accessories and other items used in connection with the Beneficiary's business, trade, profession or occupation.
- Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
- 10. Anything mentioned in the general exclusions on page 11.

- 1. The **Beneficiary** MUST report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Baggage**.
- If Baggage is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel the Beneficiary MUST report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If Baggage is lost, stolen or damaged whilst in the care of an airline the Beneficiary MUST:
 - a) obtain a Property Irregularity Report from the airline.
 - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
 - c) retain all travel tickets and tags for submission if a claim is to be made under this Group Policy.
- 3. Receipts for items lost, stolen or damaged <u>MUST</u> be retained as these will help the **Beneficiary** to substantiate their claim.

Section 6 - Personal money, passport and documents

What is covered

1. We will pay the Beneficiary up to the amounts stated in the Statement of Insurance for the accidental loss of, theft of or damage to Personal Money and documents (including passports, visas and driving licence) whilst on a Trip during the Period of Cover. In respect of foreign currency cover is also operative during the 72 hours immediately preceding the Beneficiary's departure on the outward journey.

The maximum **We** will pay for the following items is stated in the **Statement of Insurance**:

- a) For bank notes currency notes and coins
- b) For all other Personal Money and documents
- 2. We will pay the **Beneficiary** up to the amount stated in the **Statement of Insurance** for reasonable additional travel and accommodation expenses incurred necessarily abroad to obtain a replacement of the **Beneficiary's** lost or stolen passport or Visa whilst on a **Trip** during the **Period of Cover**.

What is not covered

- 1. The Excess amount as stated in the Statement of Insurance.
- 2. Loss, theft of or damage to Personal Money or the Beneficiary's passport or visa left Unattended at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe, safety deposit box or left in the Beneficiary's locked accommodation.
- Loss, theft of or damage to travellers' cheques if the Beneficiary has not complied with the issuers conditions or where the issuer provides a replacement service.
- Loss or damage due to delay, confiscation or detention by customs or other authority.
- Loss or damage due to depreciation in value, variations in exchange rates or shortages due to error or omission.
- 6. Anything mentioned in the general exclusions on page 11.

- 1. The **Beneficiary** MUST report to the local Police within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Personal Money**, passport or documents.
- 2. If Personal Money, passport or documents are lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel the Beneficiary MUST report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If Personal Money, passport or documents are lost, stolen or damaged whilst in the care of an airline the Beneficiary MUST:
 - a) obtain a Property Irregularity Report from the airline.
 - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
 - c) retain all travel tickets and tags for submission if a claim is to be made under this Group Policy.
- 3. Receipts for items lost, stolen or damaged <u>MUST</u> be retained as these will help the **Beneficiary** to substantiate their claim.

Section 7 - Personal Liability

What is covered

We will pay up to the amount stated in the **Statement of Insurance** (inclusive of legal costs and expenses) against any amount the **Beneficiary** becomes legally liable to pay as compensation for any claim or series of claims arising from any one event or source of original cause in respect of accidental:

- Bodily Injury, death, illness or disease to any person who is not in the Beneficiary's employment or who is not a Close Relative or member of their household
- 2. Loss of or damage to property that does not belong to and is neither in the charge of or under the control of the **Beneficiary**, a **Close Relative**, anyone in their employment or any member of their household other than any temporary holiday accommodation occupied (but not owned) by the **Beneficiary** occurring whilst on a **Trip** during the **Period of Cover**.

What is not covered

- 1. Compensation or legal costs arising directly or indirectly from:
- a) Liability which has been assumed by the **Beneficiary** under agreement unless the liability would have attached in the absence of such agreement.
- b) Pursuit of any business, trade, profession or occupation or the supply of goods or services.
- c) Ownership possession or use of firearms, vehicles aircraft or watercraft (other than surfboards, canoes, kayaks or manually propelled rowboats or punts).
- d) The transmission of any communicable disease or virus.
- e) Ownership or occupation of land or buildings (other than occupation only of any temporary holiday accommodation where We will not pay the Excess).
- f) Participation in any sport or activity marked with an * as detailed under the Sports and activities covered section of this Group Policy.
- Payment of any fines or exemplary damages (punishing, or aimed at punishing, the person responsible rather than awarding compensation) the Beneficiary has to pay.
- 3. Anything mentioned in the general exclusions on page 11.

- 1. The Beneficiary MUST give Us written notice as soon as possible of any incident, which may give rise to a claim.
- 2. The Beneficiary MUST send Us every court claim form, summons, letter of claim or other document as soon as they receive it.
- 3. The Beneficiary MUST not admit any liability or pay, offer to pay, promise to pay or negotiate any claim without Our written consent.
- 4. We will be entitled if We so desire to take over and conduct in the Beneficiary's name the defence of any claims for indemnity or damages or otherwise against any third party. We shall have full discretion in the conduct of any negotiation or proceedings or in the settlement of any claim and the Beneficiary shall give Us all necessary information and assistance which We may require.
- 5. In the event of the **Beneficiary's** death, their legal representative(s) will have the protection of this cover provided that such representative(s) comply(ies) with the terms and conditions outlined in this **Group Policy**.

Section 8 - Delayed departure

This section is applicable to Comprehensive cover only.

What is covered

If departure of the **Public Transport** on which the **Beneficiary** has booked to travel on a **Trip** during the **Period of Cover** is delayed at the final departure point from or **to** their **Home Country** for at least 12 hours from the scheduled time of departure due to:

- a) strike or
- b) industrial action or
- c) adverse weather conditions or
- d) mechanical breakdown of or a technical fault occurring in the Public Transport on which the Beneficiary is booked to travel

We will pay the Beneficiary

- 1. Up to the amount stated in the Statement of Insurance or
- 2.Up to the amount stated in the **Statement of Insurance** for any irrecoverable unused travel and accommodation costs and other pre-paid charges which the **Beneficiary** has paid or are contracted to pay if after a minimum 12 hours has elapsed, they choose to cancel their **Trip**.

What is not covered

- The Excess amount as stated in the Statement of Insurance.
- 2. Claims arising directly or indirectly from:
- a) Strike or industrial action or air traffic control delay existing or publicly declared by the date the **Beneficiary** purchased this insurance or at the time of booking any **Trip**.
- b) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Civil Aviation Authority or a Port Authority or any similar body in any country.
- c) Any delays to any subsequent outbound or return connecting Public Transport following the Beneficiary's departure from the final departure point from or to their Home Country.
- 3. Anything mentioned in the general exclusions on page 11.

The **Beneficiary** may claim only under subsection 1. or 2. above for the same event, not both.

The **Beneficiary** may claim only under section 8 – Delayed departure or section 9 – Missed departure for the same event, not both.

- 1. The **Beneficiary** <u>MUST</u> check in according to the itinerary supplied to them.
- 2. The Beneficiary MUST obtain confirmation from the carriers (or their handling agents) in writing of the number of hours of delay and the reason for the delay.
- 3. The **Beneficiary** MUST comply with the terms of contract of the travel agent, tour operator or provider of transport.

Section 9 - Missed Departure

What is covered

We will pay the **Beneficiary** up to the amount stated in the **Statement of Insurance** for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching their overseas destination or returning to their **Home Country** if they fail to arrive at the international departure point in time to board the **Public Transport** on which they are booked to travel on the initial international journey of the **Trip** during the **Period of Cover** as a result of:

- 1. the failure of other Public Transport or
- 2. an accident to or breakdown of the vehicle in which the **Beneficiary** is travelling or
- an accident or breakdown occurring ahead of the **Beneficiary** on a motorway or dual carriage way which causes an unexpected delay to the vehicle in which they are travelling or
- 4. strike, industrial action or adverse weather conditions.

The **Beneficiary** may claim only under section 9 – Missed departure or section 8 – Delayed departure for the same event, not both.

What is not covered

- 1. The Excess amount as stated in the Statement of Insurance.
- 2. Claims arising directly or indirectly from:
 - a) Strike or industrial action existing or declared publicly by the date the **Beneficiary** is accepted for cover.
 - b) An accident to or breakdown of the vehicle in which the **Beneficiary** is travelling for which a professional repairers report is not provided.
 - c) Breakdown of any vehicle in which the **Beneficiary** is travelling if the vehicle is owned by the **Beneficiary** and has not been serviced properly and maintained in accordance with manufacturer's instructions.
 - d) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Civil Aviation Authority or a Port Authority or any similar body in any country.
 - e) The **Beneficiary's** failure to arrive at the departure point in time to board any connecting **Public Transport** after their departure on the initial international outbound and return legs of the **Trip**.
- Additional expenses where the scheduled Public Transport operator has offered reasonable alternative travel arrangements.
- 4. Anything mentioned in the general exclusions on page 11.

- 1. In the event of a claim arising from any delay occurring on a motorway or dual carriage way the **Beneficiary MUST** obtain written confirmation from the Police or emergency breakdown services of the location, reason for and duration of the delay.
- 2. The Beneficiary MUST allow sufficient time for the Public Transport or other transport to arrive on schedule and to deliver them to the departure point.

Section 10 - Hijack and hostage

This section is applicable to Comprehensive cover only.

Special Definitions relating to this section (which are shown in bold italics)

Hijack – means the unlawful seizure or wrongful exercise of control of an aircraft or conveyance that the **Beneficiary** is travelling in as a passenger on a **Trip** during the **Period of Cover**

What is covered

- We will pay the Beneficiary up to the amount stated in the Statement of Insurance for the duration of the Hijack.
 - We will also extend the geographical limits of the **Beneficiary's**cover as necessary without extra charge.
- 2. We will pay the Beneficiary up to the amount stated in the Statement of Insurance if they are taken hostage or disappear whilst on their Trip for reasonable travelling expenses (economy class) and accommodation costs (room only) for one Close Relative or close friend to travel out to the last place the Beneficiary was seen.

You may claim only under section 1. or 2. above for the same event, not both.

Special conditions relating to claims

1. If the transport on which the **Beneficiary** is travelling is Hijacked they <u>MUST</u> provide a written statement from an appropriate authority to confirm the duration of the Hijacking.

What is not covered

- 1. The Excess amount as stated in the Statement of Insurance.
- 2. Any costs under section 2 of What is covered where the **Beneficiary** has been missing or taken hostage for less than 1 month.
- If the **Beneficiary** or their family or business connections have engaged in any political or other activity that could be expected to increase the risk of *Hijack* or hostage.
- 4. Anything mentioned in the general exclusions on page 11.

Section 11 - Catastrophes and natural disasters

This section is applicable to Comprehensive cover only.

What is covered

We will pay the **Beneficiary** up the amount stated in the **Statement of Insurance** should they be forced to move from their pre- paid accommodation whilst on a **Trip** during the **Period of Cover** as a result of fire, explosion, storm, flood, earthquake, medical epidemic, or the local or national government directive for the following:

- a) the cost of alternative accommodation of a similar standard to that the Beneficiary has booked if they have been advised by their tour operator, hotelier or the local authority to leave their booked accommodation
- b) necessary additional travelling expenses incurred so the **Beneficiary** can continue their **Trip**.

What is not covered

- The Excess amount as stated in the Statement of Insurance.
- Any expense following the **Beneficiary's** disinclination to travel or to continue with their **Trip** when official directives from the local authorities state that it is safe to do so.
- Any event that was publicised prior to the Beneficiary's departure from their Home Country.
- Any costs incurred by the **Beneficiary** which are recoverable from their tour operator, hotel, airline, company providing the accommodation, or other provider of services for which the **Beneficiary** receives or is expected to receive compensation or reimbursement.
- Any costs which the **Beneficiary** would have expected to pay during their **Trip**.
- 6. Anything mentioned in the general exclusions on page 11.

The Beneficiary may only claim under section under section 11 - Catastrophes and natural disasters or section 1 - Cancellation or curtailment for the same event.

- 1. In the event of a claim the **Beneficiary** MUST get either:
 - a) written confirmation and proof from the hotel management of the loss of use of the pre-booked accommodation or
 - b) a report from the local or national authority stating that it was not acceptable for the Beneficiary to remain in their pre booked accommodation.

Section 12 - Air rage

This section is applicable to Comprehensive cover only.

Special Definitions relating to this section (which are shown in bold italics)

Air Rage – means the act of an individual committing a crime whilst on board an aircraft which results in the perpetrator being handed to and detained by local Police or equivalent authorities on the landing of the aircraft.

Loss of limb - means loss by permanent severance of an entire hand or foot or the total and permanent loss of use of an entire hand or foot.

Loss of sight – means total and irrecoverable loss of sight which shall be considered as having occurred:

a) in both eyes if the **Beneficiary's** name is added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist and b) in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen scale.

What is covered

- If whilst the Beneficiary is on a Trip during the Period of Cover the Beneficiary's aircraft is delayed due to an act of Air Rage by an individual or group of individuals We will pay the Beneficiary up to the amount stated in the Statement of Insurance.
- 2. We will pay the Beneficiary one of the benefits i. ii or iii shown in the Statement of Insurance if they sustain Bodily Injury which shall solely and independently of any other cause, result within two years in their death, Loss of limb, Loss of sight or permanent total disablement as a direct result of an act of Air Rage by an individual or group of individuals travelling on the Beneficiary's aircraft whilst the Beneficiary is on a Trip during the Period of Cover

What is not covered

- Any claim where the **Beneficiary**, a **Close Relative**, a member of their family or travelling companions knowingly, deliberately or recklessly provoked the perpetrator of the *Air Rage*.
- Any claim where either the Beneficiary or a Close Relative, a member of their family or travelling companion is responsible for the act of Air Rage.
- 3. Anything mentioned in the general exclusions on page 11.

You should also refer to the important conditions relating to health on page 10.

The Beneficiary may claim only under section 12 - Air Rage or section 4 - Personal accident for the same event, not both.

Provisions

- 1. Benefit is not payable to the **Beneficiary**:
 - a) Under more than one of items i., ii. or iii as stated in the **Statement of Insurance**.
 - b) Under item iii. as stated in the Statement of Insurance until one year after the date the Beneficiary sustains Bodily Injury.
 - c) Under item iii. as stated in the **Statement of Insurance** if the **Beneficiary** is able or may be able to carry out any relevant employment or relevant occupation.

- 1. Our Medical Practitioner may examine the Beneficiary as often as they deem necessary in the event of a claim.
- 2. The Beneficiary MUST obtain a written Police report or report from the appropriate airline authority of the incident of Air Rage.

Section 13 - Incarceration

This section is applicable to Comprehensive cover only.

What is covered

We will pay up to the amount stated in the **Statement of Insurance** for reasonable travelling (economy class) and accommodation expenses (room only) for one **Close Relative** to travel out to the **Beneficiary** if they are arrested and lawfully imprisoned whilst on their **Trip** during the **Period of Cover**. The **Beneficiary** <u>MUST</u> have been imprisoned for more than 2 weeks with no prospect of release for at least another two weeks.

What is not covered

- . The Excess amount as stated in the Statement of Insurance.
- Any expenses incurred by the **Beneficiary** in relation to their imprisonment.
- Costs incurred by the Beneficiary's Close Relative within the first two weeks of their imprisonment.
- Any costs incurred if there are reasonable prospects of the Beneficiary's release within two weeks of the date their Close Relative intends to leave their Home Country.
- 5. Anything mentioned in the general exclusions on page 11.

Section 14 - Overseas legal expenses and assistance

What is covered

We will pay up to the amount stated in the **Statement of Insurance** for legal costs to pursue a civil action for compensation if someone else causes the **Beneficiary Bodily Injury**, illness or death whilst on a **Trip** during the **Period of Cover**.

Where there are two or more **Beneficiaries** covered by this **Group Policy**, then the maximum aggregate amount payable by **Us** for all such claims shall not exceed the amount stated in the **Statement of Insurance**.

What is not covered

We shall not be liable for:-

- Any claim where in **Our** opinion there is insufficient prospect of success in obtaining reasonable compensation.
- 2. Legal costs and expenses incurred in pursuit of any claim against a travel agent, tour operator, carrier, Us, the Emergency Assistance Service or their agents, someone the Beneficiary was travelling with, a person related to the Beneficiary, or another Beneficiary.
- Legal costs and expenses incurred prior to Our written acceptance of the case.
- 4. Any claim where the legal costs and expenses are likely to be greater than the anticipated amount of compensation.
- Any claim where legal costs and expenses are based directly or indirectly on the amount of compensation awarded (for example a Contingency Fee Agreement).
- Legal costs and expenses incurred in any claim which is capable of being pursued under a Conditional Fee Agreement.
- Legal costs and expenses incurred if an action is brought in more than one country.
- Any claim where in **Our** opinion the estimated amount of compensation payment is less than £1,000 for each **Beneficiary**.
- Travel, accommodation and incidental costs incurred to pursue a civil action for compensation.
- 10. Costs of any appeal.
- 11. Claims occurring within the **Beneficiary's Home Country**.
- 12. Claims by the **Beneficiary** other than in their private capacity.
- 13. Anything mentioned in the general exclusions on page 11.

Special conditions relating to claims

- 1. We shall have complete control over the legal case through agents We nominate, by appointing agents of Our choice on the Beneficiary's behalf with the expertise to pursue their claim.
- 2. The **Beneficiary** MUST follow **Our** agent's advice and provide any information and assistance required within a reasonable timescale.
- 3. The **Beneficiary** MUST advise **Us** of any offers of settlement made by the negligent third party and the **Beneficiary** MUST not accept any such offer without **Our** consent.
- 4. We will decide the point at which the **Beneficiary's** legal case cannot usefully be pursued further. After that no further claims can be made against **Us** in relation to this case.
- 5. We may include a claim for Our legal costs and other related expenses.
- 6. We may, at Our own expense, take proceedings in the **Beneficiary's** name to recover compensation from any third party in respect of any indemnity paid under this **Group Policy**. The **Beneficiary** MUST give such assistance as **We** shall reasonably require and any amount recovered shall belong to Us.
- 7. If the **Beneficiary** or the appointed agents receive any compensation, the **Beneficiary** <u>MUST</u> repay **Us** any legal costs which **We** have paid up to the amount of the compensation.

Section 15 - Extended kennel and/or cattery fees

What is covered

We will pay the **Beneficiary** up to the amount stated in the **Statement of Insurance** for kennel/cattery fees if their dog(s)/cat(s) are in a kennel/cattery during their **Trip** and their return to their **Home** has been delayed due to their **Bodily Injury** or illness.

What is not covered

1. Anything mentioned in the general exclusions on page 11.

- 1. Claims under this section will only be payable if the **Beneficiary's** delay is due to **Bodily Injury** or illness which is covered under section 2 Emergency medical and other expenses.
- 2. The **Beneficiary** MUST get a written statement from the appropriate kennel or cattery confirming any extra charges that they have to pay.
- 3. Any amount payable under this only applies to domestic cat(s) and/or dog(s) that the **Beneficiary** owns.

Sections 16, 17, 18, 19 and 20 - Winter Sports

(Only operative if indicated in the statement of insurance)

COVER IN RESPECT OF SECTIONS 16, 17, 18, 19 AND 20 ONLY OPERATES IF THE APPROPRIATE WINTER SPORTS EXTENSION HAS BEEN CHOSEN AND THE APPROPRIATE ADDITIONAL PREMUIUM HAS BEEN PAID.

Section 16 - Ski Equipment

What is covered

We will pay the Beneficiary up to the amount stated in the Statement of Insurance for the accidental loss of, theft of or damage to the Beneficiary's own Ski Equipment or hired Ski Equipment occurring whilst on a Trip during the Period of Cover. The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (loss of value – calculated from the table below) or We may at Our option replace, reinstate or repair the lost or damaged Ski Equipment. The maximum We will pay for any one article, pair or set of articles is stated in the Statement of Insurance.

Age of ski equipment	Amount payable
Less than 1 year old	90% of value
Over 1 year old	70% of value
Over 2 years old	50% of value
Over 3 years old	30% of value
Over 4 years old	20% of value
Over 5 years old	No payment

What is not covered

- 1. The Excess amount as stated in the Statement of Insurance.
- Loss, theft of or damage to Ski Equipment contained in or stolen from an Unattended vehicle:
 - a) overnight between 9 p.m. and 9 a.m. (local time) or
 - b) at any time between 9 a.m. and 9 p.m. (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view.
- Loss or damage due to delay, confiscation or detention by customs or other authority.
- Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
- 5. Anything mentioned in the general exclusions on page 11.

- 1. The **Beneficiary** MUST report to the local Police within 24 hours of discovery and obtain a written report of the loss, theft or attempted theft of all **Ski Equipment**.
- 2. If Ski Equipment is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or the Beneficiary's accommodation provider they MUST report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If Ski Equipment is lost, stolen or damaged whilst in the care of an airline the Beneficiary MUST:
 - a) obtain a Property Irregularity Report from the airline.
 - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
 - c) retain all travel tickets and tags for submission if a claim is to be made under this **Group Policy**.
- 3. Receipts for items lost, stolen or damaged MUST be retained as these will help the Beneficiary to substantiate their claim.

Section 17 - Hire of ski equipment

What is covered

We will pay the **Beneficiary** up to the amount stated in the Statement of Insurance per day, up to a maximum of for the reasonable cost of hiring replacement **Ski Equipment** as a result of the accidental loss of, theft of, damage to or temporary loss in transit for more than 24 hours of their own **Ski Equipment** occurring whilst on a **Trip** during the **Period of Cover**.

What is not covered

- Loss, theft of or damage to Ski Equipment contained in or stolen from an Unattended vehicle:
 - a) overnight between 9 p.m. and 9 a.m. (local time) or
 - b) at any time between 9 a.m. and 9 p.m. (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view.
- Loss or damage due to delay, confiscation or detention by customs or any other authority.
- Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
- 4. Anything mentioned in the general exclusions on page 11.

- 1. The **Beneficiary** MUST report to the local Police within 24 hours of discovery and obtain a written report of the loss, theft or attempted theft of their own **Ski Equipment**.
- 2. If **Ski Equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or the **Beneficiary's** accommodation provider they <u>MUST</u> report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If **Ski Equipment** is lost, stolen or damaged whilst in the care of an airline the **Beneficiary** <u>MUST</u>:
 - a) obtain a Property Irregularity Report from the airline.
 - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
 - c) retain all travel tickets and tags for submission if a claim is to be made under this Group Policy.
- 3. Receipts for items lost, stolen or damaged MUST be retained as these will help the Beneficiary substantiate their claim.

Section 18 - Ski Pack

What is covered

We will pay the **Beneficiary** up to the amount stated in the **Statement of Insurance**:

- a) for the insured portion of their ski pack (ski school fees, lift passes and hired Ski Equipment) following their Bodily Injury or illness whilst on a Trip during the Period of Cover
- b) for the unused portion of their lift pass if lost whilst on a **Trip** during the **Period of Cover**.

What is not covered

1. Anything mentioned in the general exclusions on page 11.

- 1. The **Beneficiary** MUST provide written confirmation from a **Medical Practitioner** that such **Bodily Injury** or illness prevented them from using their ski pack.
- 2. Claims under this Section will only be payable if the **Beneficiary's Bodily Injury** or illness is covered under section 2 Emergency medical and other expenses.

Section 19 - Piste closure

What is covered

We will pay the **Beneficiary** up to the amount shown the **Statement of Insurance** for the cost of transport organised by the tour operator to an alternative site if whilst on a **Trip** during the **Period of Cover** lack of snow conditions or avalanche results in the closure of skiing facilities (excluding cross-country skiing) in the **Beneficiary's** resort and it is not possible to ski. The cover only applies:

- a) To the resort which the **Beneficiary** has pre-booked for a period exceeding 12 hours and for so long as such conditions prevail at the resort, but not exceeding the pre-booked period of the **Beneficiary's Trip** and
- b) To **Trips** taken outside the **Beneficiary's Home Country** during the published ski season for their resort.

If no alternative sites are available **We** will pay the **Beneficiary** compensation up to the amount stated in the **Statement of Insurance**.

What is not covered

1. Anything mentioned in the general exclusions on page 11.

Special conditions relating to claims

1. The **Beneficiary** <u>MUST</u> obtain written confirmation from the tour operator (or their representative) of the number of days skiing facilities were closed in their resort and the reason for the closure.

Section 20 - Avalanche cover

What is covered

We will pay the **Beneficiary** up to the amount stated in the **Statement of Insurance** for reasonable extra travel and accommodation expenses if whilst on a **Trip** during the **Period of Cover** their arrival or departure from their prebooked ski resort is delayed by more than 12 hours due to an avalanche.

What is not covered

- 1. The Excess amount as stated in the Statement of Insurance.
- 2. Any cost incurred where the ski resort is less than 1,000 metres above sea level.
- 3. Any mentioned in the general exclusions on page 11.

Special conditions relating to claims

1. The **Beneficiary** MUST obtain written confirmation from the tour operator or local authority (or their representative) confirming the location, date, time and duration of the avalanche.

How to make a complaint

We aim to provide a high level of service and pay claims fairly and promptly under the terms of this **Group Policy**.

If the **Group Policyholder** and/or a **Beneficiary** are unhappy with any aspect of **Our** service, please contact, in the first instance the person who originally dealt with the enquiry. Alternatively the **Group Policyholder** or a **Beneficiary** can contact **Us** by:

Telephone: 0800 085 8698

Post: Customer Liaison Department Endsleigh Insurance Services Limited

Shurdington Road Cheltenham Gloucestershire

GL51 4UE

Full details of **Our** complaints procedures are detailed in the **Group Policy** summary.

If We have given the Group Policyholder or a Beneficiary Our final response and they remain dissatisfied they have the right to ask the Financial Ombudsman to review their case. The Ombudsman can be contacted at the following address:—

The Financial Ombudsman Service

Exchange Tower

Harbour Exchange Square

London E14 9SR

United Kingdom

Telephone 0800 023 4567 or +44 20 7964 0500 from outside the UK

Fax: 020 7964 1001

Please note the **Group Policyholder** or a **Beneficiary** have six months from the date of **Our** final response in which to refer their complaint to the Ombudsman. Contacting the Ombudsman will not affect their right to take legal action against **Us**.

Compensation Scheme

Zurich Insurance plc is a member of the Financial Services Compensation Scheme (FSCS). The FSCS is a safety net for customers of financial services firms should they not be able to meet their liabilities and the **Group Policyholder** and/or a **Beneficiary** may be entitled to claim compensation in such event. Further information can be obtained from the FSCS.

Their contact details are Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU, United Kingdom

Website: www.fscs.org.uk

The Endsleigh Group of Companies ("Endsleigh, We, Us") Privacy Policy

It is Endsleigh's policy to take all necessary steps to ensure that personal data held is processed fairly and lawfully in accordance with the Data Protection Act 1998 ("the Act").

We hold personal data relating to the **Group Policyholder** and any **Beneficiary** in connection with insurance products and services We provide to the extent We are permitted by law, personal data provided to or obtained by Us will be used for the purposes of providing the products and services the **Group Policyholder** and any **Beneficiary** have requested. It may also be shared within other Endsleigh group companies, (full details of which are available on request), as well as carefully selected third parties who have products and services that We think may be of interest to the **Group Policyholder** and **Beneficiaries**.

In the process of gathering the **Group Policyholder** and **Beneficiary's** details **We** may collect sensitive information such as about the health of the **Group Policyholder** and **Beneficiaries** or in relation to motoring offences. If the **Group Policyholder** and **Beneficiaries** purchase products or services from **Us**, they will have given **Us** their consent to use this personal data as detailed in this Privacy Policy. **We** may wish to contact the **Group Policyholder** and **Beneficiaries** from time to time by telephone, e-mail or post about other products and services that may be of interest to them.

If at any time the **Group Policyholder** and **Beneficiaries** do not wish to receive this information then please write to Endsleigh's Group Data Protection Officer at: Endsleigh Insurance Services Limited, Shurdington Road, Cheltenham, Glos GL51 4UE. Under the Act, as a data subject, the **Group Policyholder** and **Beneficiaries** are granted certain rights. If the **Group Policyholder** and **Beneficiaries** would like to know what information **We** hold about them, they can write to **Us** as above. **We** may charge a statutory administration fee to comply with their request.

Should the **Group Policyholder** and **Beneficiaries** have any queries in connection with data protection then please contact Endsleigh's Group Data Protection Officer as above. Endsleigh will share the personal details the **Group Policyholder** and **Beneficiaries** provide with Zurich Insurance plc. To administer this **Group Policy** Zurich Insurance plc will hold and use information about the **Group Policyholder** and **Beneficiaries** supplied by them (and by medical providers). Zurich Insurance plc may send it in confidence for processing to other companies in the Zurich Insurance plc Group (or companies acting on Zurich Insurance plc instructions) including those located outside the European Economic Area, however, Zurich Insurance plc has taken appropriate steps to ensure the same (or equivalent) level of protection of information in other countries as there is in the EU. Applications for further information should be addressed to the Data Protection Officer at Zurich Insurance plc.