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Authorised and regulated by the Financial Services Authority



JBI TravelCare
Your Policy Wording

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The following table is only a summary of the main cover limits. **You** should read the rest of the policy for full terms and conditions.

SUMMARY OF COVER				
Section		Annual-Multi Trip	Single Trip	Excess
Section 1	Trip duration	45	90	
	Age Limit	69	74	
	Dependant Children Age limit	23	23	
Section 1	Cancellation	£5,000	£5,000	£50
Section 2	Curtailment	£5,000	£5,000	£50
Section 3	Emergency Medical Expenses	£10 Million	£10 Million	£50
	Emergency Dental Treatment Limit	£350	£350	
	Funeral Expenses Abroad Limit	£1,000	£1,000	
	UK Expenses Limit	£1,000	£1,000	
	Search and Rescue	£5,000	£5,000	
Section 4	Additional Hospital Benefit	£25/24hrs £600max	£25/24hrs £600max	Nil
Section 5	Personal Accident	£25,000	£25,000	Nil
Section 6	Baggage & Personal Belongings	£2,000	£2,000	£50
	Total Valuables Limit	£300	£300	
	Single Item Limit	£200	£200	
	Delayed baggage (after 24hrs)	£150 max	£150 max	
Section 7	Cash & Documents	£500	£500	£50
	Cash Limit	£250	£250	
Section 8	Loss of Passport	£200	£200	£50
Section 9	Travel Delay	£20/12hrs £100max	£20/12hrs £100max	Nil
	Trip Abandonment (after 24hrs)	£5,000	£5,000	£50
	Pet Cover	£20/24hrs £100max	£20/24hrs £100max	Nil
Section 10	Missed Departure	£600	£600	£50
Section 11	Personal Liability	£2 Million	£2 Million	£50
Section 12	Legal Expenses	£25,000	£25,000	Nil
Section 13	Hijack	£50/24hrs £500max	£50/24hrs £500max	
Section 14	Winter Sports Cover	Included	Optional	£50
	Ski Equipment	£500	£500	£50
	Equipment Hire	£300	£300	£50
	Ski Pack	£300	£300	£50
	Piste Closure	£300	£300	£50
Section 15	Sports and Activities	See section for details	Subject to additional premium See section for details	
	Telecare	See section for details	See section for details	

IMPORTANT CONTACT DETAILS

JB International Insurance Brokers	Telephone	+44 (0) 118 970 3781	Email	travel@jbi-ins.co.uk
Emergency Medical Assistance Service (24hours)		+44 (0) 845 838 4714		mayday@mstream.co.uk
Claims Service		+44 (0) 845 643 2629		claims@mstream.co.uk
Medical Screening Service		+44 (0) 845 643 2634		healthcheck@mstream.co.uk

OTHER USEFUL CONTACTS

Foreign & Commonwealth Office	Telephone	+44 (0)845 850 2829	Email	www.fco.gov.uk
European Health Insurance Card (EHIC)		+44 (0)845 606 2030		www.ehic.org.uk
Department of Health – Advice for Travellers		+44 (0)20 7210 4850		www.dh.gov.uk/travellers
Medicare Australia		+61 (0)2 6124 6333		www.medicareaustralia.gov.au

JBI TravelCare Insurance Policy

IMPORTANT INFORMATION

Thank **you** for taking out JBI TravelCare insurance with **us**.

This policy wording, **your** schedule and any endorsements form a contract of insurance between **you** (the insured named on the schedule) and **us**, (Millstream Underwriting Ltd on behalf of Elvia Travel Insurance International N.V. (which, during 2009 will change its name to Mondial Assistance Europe N.V.) administered in the United Kingdom by Mondial (UK) Limited) and explains the definitions, conditions, exclusions and limits of cover **we** provide. This contract is only valid when **you** have a valid schedule and have paid the appropriate premium.

It is very important that **you** carefully read the terms, conditions and exclusions of this insurance to ensure that you are properly covered for **your** planned trip.

Please check the details on **your** schedule and contact JBI International Insurance Brokers by email at travel@jbi-ins.co.uk or telephone +44 (0) 118 970 3781 if they are incorrect.

WHO IS COVERED

The persons insured as named on the schedule. Cover is only available to people resident in the **United Kingdom**, expatriates resident in an **EEA** country, military civilian MOD / UK armed forces personnel and their **families** based in the **EEA** or BFPO military establishment worldwide.

Cover is only valid for trips starting and returning to **your home in your Country of Residence**. **You** must have a permanent residential address in and unrestricted right of entry to the **United Kingdom, EEA** Country or BFPO. **You** cannot purchase or renew an annual multi-trip policy once **you** have reached the age of 70 years. **You** cannot purchase a single trip policy once **you** have reached the age of 75 years.

WHAT IS COVERED

You are covered for:

1. holidays and leisure trips.
2. trips with a maximum planned duration of up to 45 or 90 days as shown on **your** schedule.

NOTE: trips with a scheduled duration of more than 45 or 90 days will NOT be covered under this policy and you should arrange separate insurance for the whole duration of these trips.

3. trips within the Geographic Region as shown on **your** schedule. **You** will not be covered if **you** choose to travel to a specific country or region against the advice issued by the Foreign & Commonwealth Office. Telephone: +44 (0) 845 850 2829 Website: www.fco.gov.uk.
4. trips within the **United Kingdom** or **your Country of Residence** if it is pre-booked in paid accommodation and for 2 nights or more. (Restrictions apply to medical expenses cover. See section for details).
5. participating in sports and activities under categories A, B & C as detailed in Section 15, if **you** have Annual Multi-trip cover. If Single trip, cover is included for category A activities. Cover can be extended to cover categories B & C activities on payment of additional premium. **You** are not covered for **hazardous activities**, other than as specified in Section 15, unless **we** agree to include and **you** have paid the additional premium required.
6. reasonable activities **you** partake in on an unplanned and incidental basis provided that **you** are
 - supervised by a qualified instructor, or
 - hold the appropriate qualification or licence, or
 - have subscribed to an accredited organisation for the activity
 - and that **you** act in a reasonable way and use all recommended equipment and protective clothing that is necessary.

LIMITS OF COVER AND EXCESSES

The limits of cover under each section are shown on the Summary of Cover and apply to each insured person. This policy has an excess as shown on the Summary of Cover which will be deducted in the event of a claim under certain sections. The excess is applicable per person, per policy section, per insured incident.

WHEN COVER STARTS AND ENDS

If **you** have Annual Multi-trip cover Cancellation cover starts from the time of booking a trip providing it is within the period of cover as shown on **your** schedule and ends when **you** leave **your home** to commence the trip.

If **you** have Single Trip cover **you** are covered for the dates as shown on **your** policy schedule. Cancellation cover starts from the date **you** have purchased this insurance policy.

All other sections of cover start from when **you** leave **your home** to commence the trip. Cover applies for the duration of the booked trip (or earlier return to **your Country of Residence**) including the period of travel directly to the departure point and back **home** directly afterwards, not exceeding 24 hours in each case.

If **you** return is unavoidably delayed for an insured reason, cover will be extended free of charge for up to 30



days maximum.

CANCELLATION RIGHTS

If **you** cover does not meet **your** requirements, please notify **us** within 14 days of receiving **your** policy for a refund of **your** premium. If during this 14 day period **you** have travelled, made a claim, or intend to make a claim then **we** are entitled to recover all costs for those services that **you** have used. Please note that **your** cancellation rights are no longer valid after this initial 14 day period.

WORKING ABROAD

This insurance is extended to cover **work abroad**. **You** are not covered whilst on duty other than whilst participating in duly authorised adventurous training. **You** are not covered under the Personal Liability section when **you** are working or on duty.

RENEWAL OF YOUR INSURANCE

If **you** have Annual Multi-trip cover **we** will send **you** a renewal notice prior to the expiry of the Period of Cover as shown on **your** schedule. The terms of **your** cover and the premium may be varied by **us** at the renewal date. **We** will give **you** at least 21 days written notice before the renewal date should this happen.

At renewal **you** must tell **us** about relevant facts and check to see that **you** still comply with the Health Warranty as this may affect the cover provided. If **you** do not comply with the Health Warranty, this may invalidate **your** insurance.

DISCLOSING RELEVANT FACTS

It is **your** duty to inform **us** of any fact, which is likely to influence **us** in the acceptance, assessment or continuance of this insurance. Failure to do so may invalidate this insurance, leaving **you** with no right to make a claim.

It is very important that this insurance provides adequate cover for **your** trip. To ensure that it does, and for **your** peace of mind, **you** must tell **us** as soon as possible about anything, which could give rise to a claim.

MEDICAL CONDITIONS

This insurance contains restrictions regarding pre-existing medical conditions in respect of the people travelling and of other people upon whose health the trip depends.

You are advised to read the Health Warranty contained in this policy. If **you** are in any doubt as to whether a medical condition is covered **you** must contact the Medical Screening Service on +44 (0) 845 643 2634. **We** will not cover medical problems referred to in the Health Warranty unless this was declared to **us** and accepted by **us** in writing.

HEALTH WARRANTY

If any of the following apply to **you**, a travelling companion, an **immediate relative**, **close business associate** or someone upon whom **your** trip depends, (whether they are travelling with **you** or not) the Medical Screening Service must be contacted:

1. **You/they** were aware of any reason why the trip could be cancelled or curtailed or of any medical condition which could result in a claim.
2. **You/they** have, during the 12 months before this insurance started, suffered from or received treatment, advice or medication for any chronic, ongoing or recurring illness or condition. (A chronic condition is one lasting three months or more).
3. **You/they** were travelling against the advice of a **medical practitioner** or in order to get medical treatment abroad.
4. **You/they** have been diagnosed as having a terminal illness.
5. **You/they** were receiving, recovering from, or on a waiting list for in-patient treatment in a hospital or nursing home.
6. **You/they** were waiting for the results of tests or investigations, or awaiting a referral for an existing medical condition.

Failure to contact **us** could leave **you** with no right to make a claim, and may mean that **you** travel with insufficient cover.

CHANGE IN HEALTH

If any of the reasons stated in the Health Warranty above occur between the date the policy is issued and before the first day of **your** trip, **you** must notify the Medical Screening Service immediately on +44 (0) 845 643 2634.

We will then decide if **we** can provide **you** with cover on existing terms. **We** may ask **you** to pay an additional premium, add special conditions to the policy or exclude cover for that medical condition. If **we** cannot provide cover, or if **you** do not want to pay the additional premium, **you** can make a cancellation claim if **you** have booked and paid for a trip that **you** have not yet made. Alternatively **you** can cancel **your** policy and **we** will send **you** a pro-rata refund.

We reserve the right not to extend the policy where the booked trip could be detrimental to **your** well being.

Failure to contact **us** could leave **you** with no right to make a claim, and may mean that **you** travel with insufficient cover.

DEFINITIONS

Whenever the following words appear in bold in this policy they will always have these meanings:

Appointed adviser

The solicitor or appropriately qualified person, firm or company, including **us**, who is chosen to act for **you** in **your** claim for compensation.

Close Business Associate

Any person whose absence from business for one or more complete days at the same time as **your** absence prevents the effective continuation of that business.

Couple

The lead insured, spouse (or co-habiting partner) named on the schedule.

Country of Residence

United Kingdom, EEA Country or the country within which **your** HM Base is situated if **you** are based overseas.

Curtail/Curtailment

Return early to **home** in **your Country of Residence** before the scheduled return date.

EEA

Member country of the European Economic Areas, Switzerland and Gibraltar

Europe

Europe, Republic of Ireland, The Azores, Madeira, The Canary Islands, Morocco, Tunisia, Israel, Mediterranean Islands, Turkey and territories formally known as USSR, west of the Ural Mountains.

European Mainland

Albania, Andorra, Austria, Belgium, Bosnia, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Finland, France, Germany, Greece, Hungary, Iceland, Italy, Lapland, Liechtenstein, Luxembourg, Malta, Monaco, Montenegro, Netherlands, Norway, Poland, Portugal, Romania, San Marino, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland.

Expert Witness

A person who testifies in a court of law because they have specialist knowledge in a particular field or area of expertise, entitling that person to testify about their opinion on the meaning of facts.

Family

You and **your** spouse (or co-habiting partner) and **your** financially dependant children, aged under 23 years in full time education, at the inception date of **your** policy all normally resident with **you** and named on the schedule.

Hazardous Activities

Participating in any sport or activity which could pose an increased risk or danger to **you**, and may require **you** to take additional precautions to avoid injury or claim (a list of included sports activities covered by this insurance are shown in Section 15).

Hijack

The unlawful seizure or wrongful exercise of control of an aircraft or conveyance in which **you** are travelling as a passenger.

Home

Your residential address in **your Country of Residence**.

Immediate Relative

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-brother or step-sister resident in **your Country of Residence**.

Insurer

Elvia Travel Insurance International N.V.

Legal action

Work carried out to support a claim that **we** have agreed to. This includes settlement negotiations, hearings in a civil court, arbitration and any appeals resulting from such hearings other than an application by **you**:

- to the European Court of Justice, European Court of Human Rights or similar International body; or
- to enforce a judgement or legally binding decision.

Legal costs

Fees, costs and expenses (including Value Added Tax) which **we** agree to pay for **you** in connection with legal action. Also, any costs which **you** are ordered to pay by a court or arbitrator (other than damages, fines and penalties) or any other costs **we** agree to pay.

Loss of limb

Physical, permanent and total loss of use at or above the wrist or ankle.

Loss of sight

The complete, irrecoverable and irremediable loss of all sight in one or both eyes.

Medical Practitioner

A registered practising member of the medical profession who is not travelling with **you**, who is not related to **you** or to any person with whom **you** are travelling or intending to stay with.

Money

Cash, travel tickets and passports held by **you** for social domestic and/or pleasure purposes.

Permanent total disablement

Disablement as a result of which there is no business or occupation, which **you** are able to attend and to which having lasted for a period of 12 months, is, at the end of that period, beyond hope of improvement.

Personal accident

Accidental bodily injury caused solely and directly by outward violent and visible means.

Personal baggage

Your suitcases (or similar luggage carriers) and their contents usually taken on a trip, together with articles worn or carried by **you** for **your** individual use during **your** trip. (Not including any specialised items, medical or otherwise, unless specified on **your** schedule).

Public Transport

Any fare paying passenger on the following regular scheduled forms of transport: train, coach, bus, aircraft and sea vessel.

Redundancy

Any person being declared redundant, who is under 65 years and under the normal retiring age for someone holding that person's position, and who has been employed for 2 continuous years with the same employer at the time of being made redundant.

Scuba Diving

Conventional **scuba diving** only. **We** do not cover any unaccompanied dive, any dive in over head environments, any dive for gain or reward, or any dive below 50 metres (on single trip policies an additional premium is to be paid if diving below 30 metres, see sports and activities section 15). **You** must hold a British Sub Aqua Club certificate or Professional Association of Diving Instructors certificate or equivalent and follow the relevant Club or Association rules and guidelines at all times, or **you** must only dive under the constant supervision of a properly licensed diving school and follow their rules and instructions at all times.

Single Parent Family

You and **your** financially dependent children under 23 years old and in full time education, at the inception date of **your** policy, all normally resident with **you** and named in the schedule.

The Caribbean

Antigua and Barbuda, Anguilla, Aruba, The Bahamas, Barbados, British Virgin Islands, Cayman Islands, Cuba, Dominica, Dominican Republic, Grenada, Guadeloupe, Haiti, Jamaica, Martinique, Montserrat, Navassa Island, Netherland Antilles, Puerto Rico, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Trinidad and Tobago, Turks and Caicos Islands, Virgin Islands

Unattended

When **you** are not in full view of and not in a position to prevent unauthorised interference with **your** property.

United Kingdom

England, Scotland, Wales, Northern Ireland and Isle of Man and the Channel Islands

Valuables

Watches, furs, jewellery, photographic equipment, binoculars, telescopes, spectacles, sunglasses, computers and or accessories (including laptops, games & gaming consoles), video equipment, camcorders and audio equipment including personal stereos, DVD, mini-disc players, i-pods and MP3 players, CDs, DVDs, tapes, films, cassettes, cartridges, headphones and televisions.

We / us / our

Millstream Underwriting Ltd on behalf of Elvia Travel Insurance International N.V. (which, during 2009 will change its name to Mondial Assistance Europe N.V.) Mondial Assistance (UK) Limited is Elvia's appointed administrator in the United Kingdom.

Winter Sports Equipment

Skis, bindings, ski boots, ski poles, snowboards and specialised clothing.

Winter Sports

Conventional skiing / snowboarding only. **We** do not cover any competition, free-style skiing, ski jumping, ice hockey, use of bobsleighs or skeletons, repetitive travel in ski run helicopters. Off-piste skiing is covered when **you** are skiing within the ski area boundaries of a recognised ski resort and following ski patrol guide lines.

Work abroad

For the purposes of this policy clerical business activities of the insured only. Non-manual or light general work not involving the use of mechanical or industrial machinery at a height not exceeding 2 metres.

Worldwide (excluding USA, Canada & The Caribbean)

Worldwide excluding United States of America, Canada and **The Caribbean**.

Worldwide (including USA, Canada & The Caribbean)

Worldwide

You / your

Each insured person as shown on **your** schedule.

SECTION 1 CANCELLATION

Covered

You are covered up to the limit as shown on the Summary of Cover for loss of travel and accommodation expenses, which were cancelled before **you** were due to leave **your home** for which **you** have paid or are contracted to pay, providing the cancellation is necessary and unavoidable (and is not as a result of mere disinclination to begin **your** trip as arranged) due to any

cause listed below occurring during the period of insurance:

1. injury, serious illness, death of **you**, any person with whom **you** are intending to travel or stay, or of an **immediate relative** or **close business associate** of **you**rs;
2. **you** being called for jury service, attending court as a witness (but not as an **expert witness**), or **redundancy** (for **you** or for any person with whom **you** had arranged to travel);
3. **your home** or place of business being made uninhabitable, within 14 days of travel, or the police asking to see **you** after theft from **your home** which occurred within 14 days of travel;
4. **your** posting overseas or emergency and unavoidable duty if **you** are a member of the medical or nursing professions, armed forces, police, fire or ambulance services and compulsory quarantine. This cover only applies for Single trip policies if an additional premium has been paid.
5. the posting overseas or emergency and unavoidable duty of a member of the UK armed forces with whom **you** are intending to visit. Cover will only apply if the person is posted overseas or on duty for the whole of **your** planned visit.

Not covered

1. the policy excess shown on the Summary of Cover (£20 in respect of loss of deposit only claims) of any incident. This applies to each person making a claim;
2. medically related claims where a certificate has not been obtained from a **medical practitioner**, confirming that cancellation of the trip is medically necessary;
3. additional costs as a result of not immediately telling the travel agent, tour operator or provider of transport or accommodation that **you** need to cancel the trip. **We** will only pay the cancellation charges that would have applied at the time **you** knew it was necessary to cancel **your** trip, if a valid claim exists;
4. any costs recoverable from another source;
5. anything caused directly or indirectly by prohibitive regulations by the Government of any country;
6. if the Health Warranty has not been complied with and **you** do not have an appropriate endorsement from the 24 hour Emergency Medical Assistance Service (see Health Warranty);
7. any costs incurred on behalf of other party members who are not specified on the insurance schedule;
8. anything mentioned in the General Exclusions.

SECTION 2 CURTAILMENT

This section includes the services of the 24 hour Emergency Medical Assistance Service who must be contacted immediately in the event of a serious injury, illness or hospitalisation, or where repatriation has to be considered.

The 24 hour Emergency Medical Assistance Service telephone number is: **+44 (0) 845 838 4714**

Covered

You are covered up to the limit as shown on the Summary of Cover for the value of the portion of **your** travel and accommodation expenses, calculated from the date of **your** return to **your home**, which have not been

used and which were paid before **your** departure from **your Country of Residence**. **You** are also covered for reasonable additional travelling expenses (Economy Class) incurred by **you** for returning to **your home** earlier than planned due to a cause listed below:

1. accidental injury, serious illness, death of **you**, any person with whom **you** are intending to travel or stay, or of an **immediate relative** or **close business associate** of **yours**.
2. **your home** or place of business being made uninhabitable or the police requesting **your** presence following a theft from **your home**.
3. **your** posting overseas or emergency and unavoidable duty if **you** are a member of the medical or nursing professions, armed forces, police, fire or ambulance services. This cover only applies for Single trip policies if an additional premium has been paid.

Conditions

1. **You** must contact the 24 hour Emergency Medical Assistance Service for assistance/advice if **you** need to cut short **your** trip for an insured reason.
2. **You** must use or revalidate **your** original ticket for **your** early return. If this is not possible **you** must provide evidence that additional costs were necessary. Any refunds due on unused original tickets will be deducted from **your** claim. If **you** do not have an original return ticket, **you** will not be reimbursed for costs incurred for **your** early return.
3. If **you** require the 24 hour Emergency Medical Assistance Service to pay for arrangements, they may first need to contact the relevant **medical practitioner** to confirm **your** claim falls within the terms of **our** cover.
4. If **you** make **your** own arrangements **you** must supply all necessary documentation to substantiate that **your** claim falls within the terms of cover.
5. This policy does not provide compensation for loss of holiday/enjoyment.

Not covered

1. the policy excess shown on the Summary of Cover. This applies to each person making a claim;
2. claims that are not confirmed as medically necessary by the 24 hour Emergency Medical Assistance Service, and where a medical certificate has not been obtained from the attending **medical practitioner** abroad confirming it necessary to **curtail** the trip;
3. additional travelling expenses incurred which are not authorised by the 24 hour Emergency Medical Assistance Service;
4. unused prepaid travel tickets where repatriation has been arranged by the 24 hour Emergency Medical Assistance Service;
5. if the Health Warranty has not been complied with and **you** do not have an appropriate endorsement from the 24 hour Emergency Medical Assistance Service (see Health Warranty);
6. anything mentioned in the General Exclusions.

SECTION 3

EMERGENCY MEDICAL EXPENSES (NOT PRIVATE HEALTH INSURANCE)

*NOTE: This is not a private health insurance policy. It only covers **you** if there is a sudden and unexpected accident or if **you** became ill during a trip.*

If **you** are admitted to hospital as an in-patient overseas, the Emergency Medical Assistance Service must be notified immediately. They will deal direct with the hospital and arrange the payment of any bills. Repatriation by specially equipped air ambulance will be available where medically necessary.

You must maintain contact with the Emergency Medical Assistance Service until **your** return to **your Country of Residence** or until **you** no longer require treatment or assistance.

If **you** receive out patient treatment (no hospital admission) and the costs are likely to exceed £1,000 **you** must refer to the Emergency Medical Assistance Service for authorisation.

If **you** receive out-patient treatment (no hospital admission) in Spain, Greece, Cyprus, Portugal or Turkey, show this document to the doctor and **your** treatment will be paid through ChargeCare International in line with the policy wording. The doctor will ask **you** to fill in a form to confirm treatment and may request **you** to pay the excess.

If **you** receive out-patient treatment (no hospital admission) in other countries, it may be easier to pay any bills yourself. Keep all receipts and submit a claim when **you** return **home**. If **you** are in any doubt, call the Emergency Medical Assistance Service for help.

24 hour Emergency Medical Assistance Service telephone number: **+44 (0) 845 838 4714**

Covered

You are covered up to the limit as shown on the Summary of Cover for costs incurred
A. Outside **your Country of Residence** for:

1. emergency medical and surgical treatment and hospital charges (including necessary physiotherapy, authorised by the Emergency Medical Assistance Service);
2. emergency dental treatment, to relieve pain only, limited to amount shown on the Summary of Cover;
3. reasonable and necessary additional accommodation (room only) and travelling expenses **home** (Economy Class), including those of one relative or friend if **you** have to be accompanied **home** on the advice of the attending **medical practitioner** or if **you** are a child and require an escort **home**;
4. in the event of death, reasonable cost for the conveyance of the body or ashes to **your Country of Residence** (the cost of burial or cremation is not included), or local funeral expenses abroad limited to £1,000 up to a limit of £5,000 in respect of search and rescue costs

B. Within your **Country of Residence**:

1. reasonable and necessary expenses incurred in respect of **your travel home** (Economy Class), or additional accommodation (room only) for **you** and one relative or friend should **you** suffer accidental bodily injury, illness or death whilst on a trip within **your Country of Residence** limited to the amount stated on the summary of cover.
2. necessary search and rescue expenses **you** are liable to pay for official civil and police rescue teams if **you** are based overseas. Limited to £5,000 in total.
3. HM Armed Forces personnel and their dependants named on the policy schedule only – Emergency medical and surgical treatment and hospital charges up to £5,000.

*NOTE: If **you** are travelling to a country in the EU, **you** will need a European Health Insurance Card (EHIC) to receive healthcare. Apply by calling 0845 606 2030 or online at www.ehic.org.uk. Application forms are also available at the post office. If **you** are travelling to Australia and require medical treatment, **you** must enroll with Medicare. For more information on Medicare visit www.medicareaustralia.gov.au*

Not covered

1. the policy excess shown on the Summary of Cover. This applies to each person making a claim;
2. any sums which can be recovered from another source or which are covered under any National Insurance scheme or reciprocal health arrangement;
3. any expenses or fees, for in-patient treatment or returning **home** early, which have not been reported to and authorised by the Emergency Medical Assistance Service;
4. any expenses incurred for illness, injury or treatment required as a consequence of:
 - a) Surgery or medical treatment which in the opinion of the attending **medical practitioner** and the Emergency Medical Assistance Service can be reasonably delayed until **your** return to **your Country of Residence**.
 - b) Medication or treatment which at the time of departure is known to be required or to be continued during **your** trip;
5. if the Health Warranty is not complied with and **you** do not have an appropriate endorsement from the Medical Screening Service (see Health Warranty);
6. the cost of any routine or elective (non-emergency) treatment or surgery, including specialist review or referral, exploratory tests, treatment or surgery which are not directly related to the injury, which necessitated **your** admittance to hospital;
7. claims that are not confirmed as medically necessary by the attending **medical practitioner** or the Emergency Medical Assistance Service;
8. any additional hospital costs arising from single or private room accommodation unless medically necessary;
9. treatment or services provided by a health spa, convalescent or nursing **home** or any rehabilitation centre;
10. any costs incurred within the **United Kingdom** or **your Country of Residence** other than under B above;
11. any costs that can be recovered from the Ministry of Defence or HM Armed Forces unit;

12. further costs **you** incur if **we** wish to bring **you home** early but **you** refuse (where in the opinion of the treating **medical practitioner** and the Emergency Assistance Service **you** are fit to travel);
13. anything mentioned in the General Exclusions.

SECTION 4 ADDITIONAL HOSPITAL BENEFIT

This section does not apply to trips within the **United Kingdom** or **your country of residence**.

This benefit is payable only if the hospital admission has been covered under the terms of the Emergency Medical Expenses section. The benefit payment is intended to contribute towards miscellaneous expenses that may be incurred whilst **you** are an in-patient (e.g. taxi fares and telephone calls). This policy does not provide compensation for loss of holiday/enjoyment.

Covered

You are covered up to the limit as shown on the Summary of Cover for:

1. payment of the amount shown for each complete 24 hours **you** spend in hospital, as a result of **you** being admitted as an in-patient to a registered hospital. This is in addition to any medical expenses incurred under Emergency Medical Expenses section.

Conditions

1. In the event of a claim **you** must provide documentation confirming the date and time of admission and discharge.

Not Covered

1. anything mentioned in the General Exclusions.

SECTION 5 PERSONAL ACCIDENT

Covered

You are covered up to the limit as shown on the Summary of Cover in respect of **loss of limb, loss of sight, permanent total disablement** or for death (which will be paid to **your** legal representative), if **you** have a **personal accident** during **your** trip which, up to 12 months from the date of the accident, is the sole cause of **your** consequent death or disability.

*NOTE: If **you** are aged under 16 years at the time of the accident the death benefit will be limited to funeral and other reasonable costs up to £1000 and the **permanent total disablement** benefit will not apply.*

We will only pay the benefit for **permanent total disablement** if **your medical practitioner** or specialist confirms that **you** cannot do any paid work for 12 months after the date of the accident and there is little or no hope of improvement. **You** must accept and agree to examination by **our** doctor or specialist should **we** consider it necessary to validate the claim.

Not covered

1. any claims for death, loss or disablement caused directly or indirectly by:
 - a) Disease or any physical defect or illness

- b) An injury which existed prior to the beginning of the trip;
- 2. anything mentioned in the General Exclusions.

SECTION 6 BAGGAGE & PERSONAL BELONGINGS

Covered

A) Personal Baggage

You are covered up to the limit as shown on the Summary of Cover for the value or repair to any of **your personal baggage** (not hired, loaned or entrusted to **you**), which is lost, stolen, damaged or destroyed (after making proper allowance for wear and tear and depreciation) limited to:

- a) the single item limit as shown on the Summary of Cover for any one item, pair or set of items
- b) the **valuables** limit as shown on the Summary of Cover for all **valuables** in total

B) Delayed Baggage

You are covered up to the limit as shown on the Summary of Cover for the cost of buying replacement necessities if **your personal baggage** is delayed in reaching **you** on **your** outward journey for at least 24 hours and **you** have a written report from the carrier (e.g. airline, shipping company etc) or tour representative. Receipts will be necessary in the event of a claim.

Conditions

1. Any amount **we** pay **you** under B Delayed Baggage will be deducted from the final claim settlement if **your** baggage is permanently lost.
2. **You** must obtain written proof of the incident from the police, **your** accommodation management, tour operator or carrier, within 24 hours of the discovery in the event of loss, burglary or theft of the baggage. Failure to do so may result in **your** claim being declined.
3. In the event of a claim for damaged items, proof of the damage must be supplied.
4. In the event of a claim for a pair or set of items, **we** shall be liable only for the value of that part of the pair or set which is lost, stolen, damaged or destroyed.
5. If the repair cost is more than the value of an item, **we** will assess the claim as if the item has been lost.

Not covered

1. the policy excess shown on the Summary of Cover. This applies to each person making a claim; of any incident.
2. if **you** do not exercise reasonable care for the safety and supervision of **your personal baggage**;
3. any item, pair or set of items with a value of over £50, if an original receipt, valuation report or other acceptable proof of ownership and value cannot be supplied to support **your** claim;
4. in the event of a claim for damaged items, proof of the damage must be supplied. The damaged articles must be retained by **you** and if requested, submitted to the claims handlers so as to substantiate a claim. Failure to do so may result in a claim being turned down.
5. if **your personal baggage** is lost, damaged or delayed in transit and **you** do not:
 - a) notify the carrier (i.e. airline, shipping company etc.) immediately and obtain a written carrier's

report (or Property Irregularity Report in the case of an airline); or

- b) follow up in writing within 7 days to obtain a written carrier's report (or Property Irregularity Report in the case of an airline) if **you** are unable to obtain one immediately.
6. loss, destruction, damage or theft of the following property:
 - a) contact or corneal lenses, hearing aids, dentures and false body parts or other prostheses.
 - b) antiques, precious stones that are not set in jewellery, glass or china, pictures, musical instruments.
 - c) electrical equipment including mobile telephones any hand-held computer equipment not defined under **valuables** (including but not limited to PDA's, BlackBerrys, personal organisers and electronic navigation equipment).
 - d) pedal cycles, dinghies, boats and/or ancillary equipment, vehicles or vehicle accessories (other than wheelchairs and pushchairs).
 - e) tools of trade.
 - f) perishable items such as food.
 - g) **valuables** left **unattended** at any time (including in a vehicle or in the custody of carriers) unless they are with **you** or locked in a safe or safety deposit box or locked in the accommodation;
 - h) **valuables** left as checked-in baggage;
 7. loss, destruction, damage or theft:
 - a) due to confiscation or detention by customs or other officials or authorities.
 - b) due to wear and tear, denting or scratching, moth or vermin.
 - c) transportation by any postal or freight service, or if sent under an air-way bill or bill of lading.
 8. mechanical breakdown or derangement, for breakage of fragile or brittle articles being transported by a carrier, unless the breakage is due to fire or other accident to the vessels, aircraft or vehicle in which they are being carried.
 9. **personal baggage** and **valuables** stolen from:
 - a) an unattended vehicle unless it was in the locked glove compartment or rear boot or luggage area of the vehicle and is covered so as not to be visible from the outside of the vehicle and there is evidence of forcible and violent entry.
 - b) an unattended vehicle (other than motor caravans) left for any period between the hours of 9pm and 9am.
 10. any shortage due to error, omission or depreciation in value;
 11. any property more specifically insured or recoverable under any other source;
 12. stamps, documents, deeds, samples or merchandise, manuscripts or securities of any kind, sports gear or activity equipment.
 13. **winter sports equipment** (unless **you** have paid the appropriate premium), sports or activity equipment whilst in use);
 14. anything mentioned in the General Exclusions.

SECTION 7 CASH & DOCUMENTS

Covered

You are covered up to the limit as shown on the Summary of Cover for accidental loss or theft of **your** own **money** whilst being carried on **your** person or left in

a locked safety deposit box. Cash is limited to the amount shown on the Summary of Cover unless **you** are under 16 years, in which case the maximum payable is £50.

Condition

In the event of a claim for loss of cash **you** must provide evidence of the initial withdrawal of the cash and also evidence of how **you** coped financially immediately after the loss (e.g. currency exchange/ withdrawal slips, bank/credit card statements).

Not covered

1. the policy excess shown on the Summary of Cover of any incident. This applies to each person making a claim;
2. if **you** do not exercise reasonable care in protecting **your money** against loss, theft or damage;
3. if **you** do not obtain a written police report within 24 hours of the discovery in the event of loss, burglary or theft of **money**;
4. any shortages due to error, omission or depreciation in value;
5. anything mentioned in the General Exclusions.

SECTION 8 LOSS OF PASSPORT/DRIVING LICENCE EXPENSES

This section does not apply to trips within **your Country of Residence**.

Covered

You are covered up to the limit as shown on the Summary of Cover for reasonable additional travel or accommodation expenses **you** have to pay whilst abroad, over and above any payment which **you** would normally have made during the trip if no loss had been incurred, as a result of **you** needing to replace a lost or stolen passport/driving licence.

Condition

You must provide receipts for all costs incurred.

Not covered

1. the policy excess shown on the Summary of Cover of any incident. This applies to each insured person involved in the incident causing the claim;
2. any costs that **you** would have incurred had **you** not lost **your** passport or driving licence;
3. if **you** do not exercise reasonable care for the safety or supervision of **your** passport/driving licence;
4. if **you** do not obtain a written police report within 24 hours of the loss;
5. loss, destruction or damage arising from confiscation or detention by customs or other officials or authorities;
6. anything mentioned in the General Exclusions.

SECTION 9 TRAVEL DELAY AND ABANDONMENT

This section does not apply to trips within **your Country of Residence**.

Covered

You are covered if **your** initial outward or final return flights, sea crossing, coach or train departure to or from **your Country of Residence** are delayed for more than 12

hours beyond the intended departure time (as specified on **your** travel ticket) as a result of:

- a) strike or industrial action (provided that when this policy was taken out, and or when the trip was booked there was no reasonable expectation that the trip would be affected by such cause);
- b) adverse weather conditions;
- c) mechanical breakdown or technical fault of the aircraft, coach, train or sea vessel

then a benefit of:

1. £20 per person for each complete 12 hours **you** are delayed up to a maximum of £100 or up to the limit under Cancellation section of **your** policy (less the excess) if **you** abandon the trip having been delayed for the first full 24 hours;
2. up to the Cancellation section limit of this policy (less the excess) if **you** abandon **your** trip as a result of **your** vehicle being involved in an accident or mechanical breakdown en route to **your** departure point from **your Country of Residence** rendering it impossible for **you** to undertake **your** planned itinerary.
3. Up to £20 per full 24 hour delay on **your** return to **your Country of Residence** in respect of maintaining **your** dog or cat in pre-booked, registered kennels or cattery, up to a maximum of £100.

Conditions

1. In the event of a claim due to delayed public transport **you** must provide documentation from the transport company, confirming the period of and the reason for the delay.
2. This benefit is only payable in respect of either 1 and 3 or 2 as detailed above.

Not covered

1. the policy excess shown on the Summary of Cover of any incident. This applies to each person making a claim and is only applicable if **you** abandon **your** trip;
2. if **you** have not checked-in in sufficient time for **your** outward or return journey;
3. any claims arising from withdrawal from service temporarily or otherwise of the aircraft, coach, train or sea vessel on the order or recommendation of the Civil Aviation Authority or a Port Authority or similar body in any country;
4. abandonment of a trip once **you** have departed from **your Country of Residence**
5. internal flights
6. anything mentioned in the General Exclusions.

SECTION 10 MISSED DEPARTURE

Covered

You are covered up to the limit as shown on the Summary of Cover for necessary hotel and travelling expenses incurred in reaching **your** booked destination, if **you** arrive too late to commence **your** booked trip from or to **your Country of Residence** as a result of:

- a) the **public transport** in which **you** are travelling is delayed (**you** must obtain written confirmation from the transport company);
- b) the vehicle in which **you** are travelling being involved in an accident or breakdown, or **you** being delayed as a result of a major accident on a motorway. In the event of a claim due to vehicle

breakdown of a road accident, **you** must obtain a police or roadside assistance report.

- c) adverse weather conditions making it impossible to travel to the outbound departure point in **your Country of Residence**;

Not covered

1. the policy excess shown on the Summary of Cover of any incident. This applies to each person making a claim;
2. if sufficient time has not been allowed for **your** journey in order to meet the check-in time specified by the transport providers or agent
3. if **you** are not proceeding directly to the departure point;
4. any costs claimed under Travel Delay and Abandonment section;
5. anything mentioned in the General Exclusions.

SECTION 11 PERSONAL LIABILITY

*NOTE: If **you** are using a mechanical/motorised vehicle, make sure that **you** are adequately insured for third party liability, as **you** are not covered under this insurance.*

Covered

You are covered up to the limit as shown on the Summary of Cover, for legal expenses and legal liability for damages incurred by **you** which are caused by an accident that happened during the trip, and leads to claims made against **you** as a result of:

1. accidental bodily injury to a person who is not a member of **your** family or household or employed by **you**;
2. loss of or damage to any property which does not belong to **you**, is not in the charge of, and is not in the control of **you** or any member of **your** family, household or employee;
3. loss of or damage to temporary holiday accommodation that does not belong to **you**, or any member of **your** family, household or employee.

*NOTE: **We** are entitled to take over any rights in the defence or settlement of any claim and to take proceedings in **your** name for **our** benefit against any other party.*

Not covered

1. the policy excess shown on the Summary of Cover of any incident. This applies to each person making a claim;
2. fines imposed by a Court of Law or other relevant bodies;
3. anything caused directly or indirectly by:
 - a) liability which **you** incur as a result of an agreement that **you** made which would not apply in the absence of that agreement;
 - b) injury, loss or damage arising from:
 - i) ownership or use of aircraft, horse-drawn or mechanical/motorised vehicles, vessels (other than rowing boats, punts or canoes), animals (other than horses) or firearms or any weapons
 - ii) the occupation (except temporarily for the purpose of the trip) or ownership of any land or

buildings

- iii) the carrying out of any trade or profession
- iv) racing of any kind
- v) any deliberate act

c) liability covered under any other insurance.

4. anything mentioned in the General Exclusions.

SECTION 12 LEGAL EXPENSES

Covered

You are covered if **you** die, are ill or injured during **your** trip and **you** or **your** personal representative take **legal action** to claim damages or compensation for negligence against a third party **we** will do the following:

Nominate an **appointed adviser** to act for **you**. If **you** and **we** cannot agree on an **appointed adviser**, the matter can be referred to an Alternative Resolution Facility.

For each event giving rise to a claim pay up to £25,000 **legal costs** for **legal action** for **you** (but no more than £25,000 in total for all persons insured on the policy).

Conditions

1. **you** must conduct **your** claim in the way requested by the **appointed adviser**;
2. **you** must keep **us** and the **appointed adviser** fully aware of all the facts and correspondence including any claim settlement offers made to **you**;
3. **we** will not be bound by any promises or undertakings which **you** give to the **appointed adviser**, or which **you** give to any person about payment of fees or expenses, without **our** consent;
4. **we** can withdraw cover after **we** have agreed to the claim, if **we** think a reasonable settlement is unlikely or that the cost of **legal action** could be more than settlement.

Not Covered

1. Any claim:
 - a) reported to **us** more than 60 days after the event giving rise to the claim;
 - b) where **we** think a reasonable settlement is unlikely or where the cost of **legal action** could be more than the settlement;
 - c) involving **legal action** between members of the same household, an **immediate relative**, a travelling companion or one of **your** employees;
 - d) where another insurer or service provider has refused **your** claim or where there is a shortfall in the cover they provide;
 - e) against a travel agent, tour operator or carrier, **us**, the **insurer**, another person insured by this policy or **our** agent.
2. **Legal costs**:
 - a) for **legal action** that **we** have not agreed to;
 - b) if **you** refuse reasonable settlement of **your** claim. **You** should use Alternative Resolution Facilities such as mediation in this situation;
 - c) if **you** withdraw from a claim without **our** agreement. If this occurs **legal costs** that **we** have paid must be repaid to **us** and all **legal costs** will be become **your** responsibility;
 - d) that cannot be recovered by **us**, **you** or **your appointed adviser**, when **you** receive

compensation. Any repayment will not be more than half of the compensation **you** receive;

- e) awarded as a personal penalty against **you** or the **appointed adviser** (for example not complying with Court rules and protocols);
- f) for bringing **legal action** in more than one country for the same event
- g) the funding of any appeal costs or actions to enforce a judgement or legally binding decision;
- h) anything mentioned in the General Exclusions.

SECTION 13 HIJACK

Covered

You are covered up to the limit as shown on the summary of cover, for each complete 24 hour period **you** are the victim of a **hijack**.

Not covered

1. if **you** or **your family** or **your business associates** have engaged in activities that could be expected to increase the risk of **hijack**;
2. anything mentioned in the General Exclusions.

SECTION 14 WINTER SPORTS COVER

Covered

If **you** have paid the appropriate premium to include and if shown on **your** policy (please refer to **your** schedule and the Summary of Cover) **you** are also covered for:

A WINTER SPORTS MEDICAL

The medical section of this policy is extended to cover **you** whilst participating in **winter sports**.

B WINTER SPORTS LIABILITY

The personal liability section of this policy is extended to cover **you** whilst participating in **winter sports**.

C SKI EQUIPMENT

You are covered up to £500 for the value or repair of **your own winter sports equipment** (after making proper allowance for wear and tear and depreciation) or hired **winter sports equipment**, if they are lost, stolen or damaged during **your** trip, limited to the single item limit for any one item. For **winter sports equipment** over 5 years old the maximum we will pay is £50.

Conditions

In the event of a claim **you** must provide the following documentation:

1. loss or theft: a report from police, resort management or tour operator; plus original receipt or proof of ownership and confirmation of second hand value from a specialist dealer.
2. damage: confirmation from a specialist dealer of the damage sustained and repair costs, or confirmation that damage is beyond economic repair, plus the second hand value prior to damage.

D EQUIPMENT HIRE

You are covered up to £300 for the reasonable cost of hiring **winter sports equipment** for the rest of **your** trip or until **your own** or hired **winter sports equipment** has been returned to **you**, if:

1. **your** equipment is lost, stolen or damaged; or
2. **your** equipment is delayed for more than 12 hours on

your outward journey.

Conditions

In the event of a claim **you** must provide the following documentation:

1. loss or theft: report from police, resort management or tour operator plus receipts showing original and additional hire charges.
2. damage: confirmation from the hire company of damage sustained and additional charges incurred.
3. delay: confirmation from the airline or transport company that **your** equipment was delayed for over 12 hours on the outward journey plus a receipt showing original and additional hire charges.

E WINTER SKI PACK

You are covered up to £300 for the value of the unused portion of **your** ski school, resort pass, lift pass and **winter sports equipment** hire costs limited to £150 per week, if:

1. **you** have an accident or **you** are ill;
2. **your** lift pass is lost or stolen.

Conditions

In the event of a claim **you** must provide the following documentation:

1. accident or illness: medical report confirming the reason and length of time **you** were unable to undertake **your** planned activity plus the original lift pass and evidence of initial cost.
2. loss or theft: report from police or resort management plus evidence of initial cost and cost of replacement pass.

F PISTE CLOSURE

You are covered up to £300 if during the period of **your** stay, on-piste skiing at the resort that **you** had pre-booked is not available due to lack of snow or excessive snow or avalanche conditions, we will pay:

1. up to £15 per day towards transport costs to reach another resort or;
2. compensation of £25 per full day if skiing is unavailable due to the total closure of all on-piste skiing activity.

Conditions

In the event of a claim **you** must provide documentation from the resort's management confirming how long the piste was closed at **your** resort and the reason.

Not Covered

1. the policy excess as shown on Summary of Cover;
2. if **you** do not adhere to the International Ski Federation code or the resort regulations;
3. anything not covered in Baggage and Personal Belongings Section (applicable to Part C and D above);
4. anything not covered in Emergency Medical Expenses Section (applicable to Part A and E);
5. anything not covered in Personal Liability Section;
6. ski jumping, ice hockey, the use of skeletons or bobsleighs, taking part in International and National events and their heats and officially organised practice or training for these events;
7. anything listed in the General Exclusions.

SECTION 15 SPORTS AND ACTIVITIES

Covered

If Annual Multi-trip cover **you** are covered for the following sports and activities. If Single-trip cover **you** are covered for category A activities and it can be extended to cover category B & C if an additional premium has been paid and is shown on **your** schedule. **You** must act in a reasonable way and use all recommended safety equipment and protective clothing that is necessary.

Category A

- Abseiling (max 100m) (a,c)
- Angling
- Archery (a,b)
- Badminton
- Black Water Rafting (Grades 1-3) (a)
- Bowling
- Bungee Jumping (max 2 jumps) (a,c)
- Camel/Elephant riding/trekking (b)
- Canoeing/ kayaking (inland/coastal, no White Water)(a)
- Clay Pigeon Shooting (a,b)
- Cycling
- Deep Sea Fishing (a)
- Fell Running/Walking (without ropes, picks or other specialist climbing equipment)
- Golf
- Gymnastics (a)
- Hiking / Trekking without ropes, picks or other specialist climbing equipment up to 1500m
- Horse Riding (Hacking only – incidental to trip, no jumping)
- Hot-Air Ballooning (a,b)
- Ice Skating (in-door only)
- Jet Boating / Jet Skiing (inland / coastal waters, no White Water) (a,b)
- Martial Arts (non-contact)
- Motor Biking (full UK licence, up to 125cc and helmet to be worn) (b,c)
- Orienteering (a)
- Outward Bound (a)
- Paint balling (a,b)
- Parasailing (a)
- Parascending (over water only) (a)
- Rambling
- Roller Skating/Blading (no stunting)
- Rowing/Sculling (inland/coastal waters, no White Water)
- Rifle range shooting (a,b)
- Safari Tours (a)
- Sailing (coastal waters only) (a,b)
- **scuba diving** (30m) (a)
- Snorkelling
- Speed Boating (inland/coastal waters ONLY, no White Water) (a,b)
- Squash
- Surfing (incidental to trip)
- Swimming
- Table Tennis
- Ten Pin Bowling
- Tennis
- Volleyball
- Water Skiing (no jumps) (a,b)
- White Water Rafting (grades 1-3) (a,c)
- Wind Surfing (b)
- Yachting (coastal waters only) (a,b) -

Category B (£100 medical excess applies)

- Abseiling (over 100m) (a,c)
- Aerial Safari (a)
- American Football (c)
- Ballooning (a)
- Black Water Rafting (Grades 4-5) (a)
- Bouldering
- Bungee Jumping (3 + jumps) (a,c)
- Canoeing White Water (Grade 1-3) (a)
- Football (including 5 a side)
- Go-Karting (a,b)
- Hiking / Trekking without ropes, picks or other specialist climbing equipment up to 3000m (a)
- Hockey
- Horse Riding/Trekking (main purpose of trip)
- Hunting on foot (a,b,c)
- Jet Boating / Jet Skiing White Water (Grades 1-2) (a,b)
- Kayaking White Water (Grades 1-3)(a)
- Kite Surfing (c)
- Motor Biking (full UK licence, over 125cc and helmet to be worn) (b,c)
- Mountain Biking (off-road) (b,c)
- Parachuting (1 Jump only) (a,b,c)
- Quad Biking (a,b,c)
- Rugby (c)
- Sailing outside coastal waters (Europe ONLY) (a,b)
- Scrambling
- Sea Canoeing (coastal waters only)
- Surfing (main purpose of trip)
- White Water Rafting (Grades 4-5) (a,c)
- War Games (a,b)
- Wind Surfing (main purpose of holiday) (b)
- Yachting outside coastal waters (Europe ONLY) (a,b)

Category C (£150 medical excess applies)

- Fencing (a,b)
- Hiking / Trekking without ropes, picks or other specialist climbing equipment up to 4500m (a)
- Ice Hockey
- Judo (a)
- Rock Climbing (not mountaineering) (a,c)
- **scuba diving** to 50 metres (a)
- Show jumping (a,b,c)
- Weightlifting

The following specific conditions and exclusions apply where highlighted in the sport and activities list above

- (a) Provided **you** are supervised by a qualified instructor or have subscribed to an accredited organisation for the activity
- (b) Personal Liability cover is excluded
- (c) **Personal Accident** cover is excluded

NOTE: You are not covered when participating in professional or organised sports, racing, speed or endurance tests, dangerous pursuits

Not Covered

anything listed in the General Exclusions.

GENERAL CONDITIONS

1. It is a condition of this insurance that all material facts have been disclosed to **us**. Failure to do so may

- invalidate this insurance, leaving **you** with no right to make a claim. A material fact is one, which is likely to influence **us** in the acceptance or assessment of **your** application. If **you** are in any doubt about whether a fact is material, **you** should disclose it.
2. All claims must be submitted within 60 days from the date of **your** return to **your Country of Residence**.
 3. Original receipts and or proof of ownership and value must be supplied in the event of a claim.
 4. **You** must take all reasonable steps to recover any lost or stolen article.
 5. Damaged articles must be retained by **you** and if requested submitted to the Claims Handlers so as to substantiate a claim. Failure to do so may result in a claim being turned down.
 6. If **we** require any medical certificates, information, evidence and receipts, these must be obtained by **you** at **your** expense.
 7. In the event of a claim, if **we** require a medical examination **you** must agree to this. In the event of death, **we** are entitled to a post mortem examination. The post mortem would be at **our** expense.
 8. **You** must not make any payment; admit liability, offer or promise to make any payment without written consent from **us**.
 9. **We** are entitled to take over any rights in the defence or settlement of any claim and to take proceedings in **your** name for **our** benefit against any other party.
 10. **We** may at any time pay to **you** **our** full liability under this insurance, after which no further payments will be made in any respect.
 11. If at the time of making a claim there is any other insurance covering the same risk, **we** are entitled to contact that insurer for a contribution.
 12. If any claim is found to be fraudulent in any way, this insurance will not apply and all claims will be forfeited.
- c) after being given a terminal prognosis.
 10. suicide, deliberate self-injury being under the influence of drink or drugs (unless prescribed by a **medical practitioner**), alcoholism, drug addiction, solvent abuse, wilful exposure to exceptional risk (unless **you** are trying to save someone's life).
 11. any emotional or psychiatric disorder or condition;
 12. pregnancy 12 weeks before and 12 weeks after the estimated date of delivery.
 13. any claim arising from sexually transmitted diseases.
 14. any injury, illness, death, loss, expenses or other liability attributable to HIV (Human Immunodeficiency Virus) and/or any HIV related illness and/or any mutant derivatives or variations thereof however caused.
 15. the cost of any routine or elective (non-emergency) treatment or surgery, including specialist review or referral, exploratory tests which are not directly related to the illness or injury which necessitated **your** admittance to hospital.
 16. any epidemic or pandemic
 17. loss or damage to any property and expense or legal liability, directly or indirectly caused by or contributed to or arising from:
 - a) Ionising radiation or radioactive contamination from any nuclear fuel or nuclear waste, which results in burning of nuclear fuel.
 - b) The radioactive toxic explosive or other dangerous properties of nuclear machinery or any part of it.
 - c) Pressure waves from aircraft and other flying objects travelling faster than the speed of sound.
 18. any consequence whether direct or indirect of war, invasion, act of foreign enemy, hostilities (whether war be declared or not), discharge, explosion or use of a weapon of mass destruction whether or not employing nuclear fission or fusion, or chemical, biological, radioactive or similar agents, by any party at any time for any reason, terrorist activity (although terrorist activity does not apply to claims made under Section 3 Emergency Medical Expenses and Section 5 Personal Accident, providing the disturbances were not taking place at the start of the insured trip), civil war, rebellion, revolution, insurrection, blockade, military or usurped power.
 19. air travel (other than as a fare-paying passenger on a regular scheduled airline or licensed charter aircraft).
 20. planned **hazardous activities** unless **you** have paid the appropriate additional premium and **we** have issued **you** with an endorsement;
 21. travelling on motorbikes over 125cc, motorbike touring or where a motorbike is the main mode of transport.
 22. **your** manual work or hazardous occupation of any kind.
 23. professional or organised sports, racing, speed or endurance tests, dangerous pursuits.
 24. mountaineering, ordinarily necessitating the use of picks, ropes or other specialist equipment, pot holing or caving.
 25. taking part in dangerous expeditions or the crewing of a vessel outside coastal waters.
 26. any off-piste skiing except when **you** are skiing within the ski area boundaries of a recognised ski resort and following ski patrol guidelines.
 27. **You** are not covered whilst on duty other than whilst participating in duly authorised adventurous training.

GENERAL EXCLUSIONS

You are not covered for anything caused directly or indirectly by the following, unless **you** have contacted **us** and **we** have confirmed in writing that **you** will be covered:

1. If **you** choose to travel to a specific area against the advice issued by the Foreign & Commonwealth Office: Telephone : 0845 850 2829
Website : www.fco.gov.uk
2. a set of circumstances which **you** knew about at the time the trip was booked unless **you** could not reasonably have expected such circumstances to result in a claim;
3. if an Annual Multi-trip policy **you** being 70 years at the start date of the policy. If a Single trip policy **you** being 75 years on the date of purchase.
4. any criminal act by **you**;
5. failure to comply with the laws applicable to the country in which **you** are travelling;
6. bankruptcy/liquidation of a tour operator, travel agent or transportation company.
7. consequential loss of any kind (e.g. loss of earnings)
8. any payment, which **you** would normally have made during **your** travels, if no claim had arisen;
9. any trip that is undertaken for the purpose of
 - a) obtaining medical treatment (whatever the nature of this treatment);
 - b) against the advice of a medically qualified doctor.

No cover will be provided under section 11 Personal Liability when on duty

COMMENTS & COMPLAINTS PROCEDURES

We aim to provide a first class level of service at all times. If, for any reason, **you** feel that **our** service is not of the standard **you** would expect, please tell **us**. **You** should address any enquiries or complaints, in writing to:-

Millstream Underwriting Limited
PO Box 18381, London, EC3M 7AU
(quoting the policy number on **your** schedule)

If **you** are still dissatisfied, at this stage **you** may contact:

The Financial Ombudsman Service
South Quay Plaza, 183 Marsh Wall, London, E14 9SR

Please note that the Financial Ombudsman Service will not consider **your** complaint until **you** have received a final decision from Millstream Underwriting Limited.

CLAIMS PROCEDURES

All claims to be submitted within 60 days of the incident giving rise to the claim. First, check this wording to make sure **your** claim is valid:

CANCELLATION CLAIMS

The travel agent, tour operator, provider of transport or accommodation must be contacted immediately and **you** must obtain a cancellation invoice. The original tickets and booking forms / receipts will also be required to support **your** claim. Contact the Claims Service for a claim form by email on claims@mstream.co.uk or by phone on +44 (0)845 643 2629 when **you** return **home**. They will advise **you** of any other additional supporting documentation required (this will be dependent upon the reason for the cancellation).

CURTAILMENT CLAIMS

Call the Emergency Medical Assistance Service on +44 (0)845 838 4714 if **you** are ill or injured. Their authorisation must be obtained before **you** cut short **your** trip. All original ticket stubs/booking forms/receipts should be retained and submitted to support **your** claim. Contact the Claims Service for a claim form by email on claims@mstream.co.uk or by phone on +44 (0)845 643 2629 when **you** return **home**. They will advise **you** of any additional supporting documentation required (this will be dependent upon the reason for the curtailment).

MEDICAL CLAIMS IN-PATIENT TREATMENT OR OUT-PATIENT TREATMENT EXPECTED TO BE OVER £1,000

If serious injury is incurred in which **you** are admitted to hospital abroad or require significant out-patient treatment, call **our** Emergency Medical Assistance Service on +44 (0)845 838 4714 as soon as possible. **You** will be given advice on what to do and the assistance **you** require. All original receipts for medical consultations / treatment / medication etc should be retained and submitted to support **your** claim.

OUT-PATIENT TREATMENT AND MINOR INPATIENT TREATMENT

If **you** need out-patient medical treatment (no hospital admission) or minor in-patient treatment (less than 3 days hospitalisation) please provide a copy of **your** schedule to the doctor and **your** treatment will be paid by ChargeCare International in line with the policy wording. In such cases, the doctor will ask **you** to fill in a simple form to confirm the treatment and may request **you** pay the policy excess. The doctor will then send the medical bill and supporting documentation to ChargeCare International for repayment.

This service is available in the following selected countries:



Out-Patient treatment: SPAIN, GREECE, CYPRUS, TURKEY and PORTUGAL

Minor In-Patient treatment: SPAIN, GREECE and CYPRUS

OTHER MINOR MEDICAL AND OUT-PATIENT TREATMENT

Contact the Claims Service for a claim form by email on claims@mstream.co.uk or by phone on +44 (0) 845 643 2629. They will advise **you** of any additional supporting documentation required (this will be dependent upon the circumstances and nature of the medical claim). All original receipts for medical consultations / treatment / medication etc should be retained and submitted to support **your** claim.

PERSONAL BAGGAGE CLAIMS

Written proof of the incident must be obtained from the police, the accommodation management, tour operator or carrier within 24 hours of the loss/theft. If the loss occurs during travel, **you** must obtain a property irregularity report from the carrier. Contact the Claims Service for a claim form by email on claims@mstream.co.uk or by phone on +44 (0)845 643 2629 when **you** return **home**.

If personal baggage is delayed obtain a written report from the carrier (e.g. airline, shipping company etc.) is required detailing the length and cause of the delay. Retain all the receipts which relate to any emergency replacement items **you** have purchased. Contact the Claims Service for a claim form by email on claims@mstream.co.uk or by phone on +44 (0)845 643 2629 when **you** return **home**.

MONEY CLAIMS

Written proof of the incident must be obtained from the police, the accommodation management, tour operator or carrier within 24 hours of the loss/theft. **You** may be asked to provide proof of the withdrawal of the money from the bank. Please remember that the loss of money must occur whilst it is carried on **your** person or whilst it is left in a locked safety deposit box. Contact the Claims Service for a claim form by email on claims@mstream.co.uk or by phone on +44 (0) 845 643 2629.

TRAVEL DELAY

Written confirmation must be obtained from the airline, shipping, coach or train company stating the period of the delay and the reason for the delay. Please remember

that cover for travel delay is provided for specific reasons only:

- strike or industrial action (provided that when this policy was taken out and or the trip was booked, there was no reasonable expectation that the trip would be affected by such cause)
- adverse weather conditions
- the mechanical breakdown or technical fault of the aircraft, coach or sea vessel

MISSED DEPARTURE CLAIMS

Written confirmation must be obtained from the Transport Company, police or roadside assistance service confirming the location, reason and duration of the delay. Contact the Claims Service for a claim form by email on claims@mstream.co.uk or by phone on +44 (0) 845 643 2629.

PERSONAL LIABILITY AND LEGAL EXPENSES

Obtain as much information as possible, including police reports, witness details and any photographs. **You** must NOT admit liability at any time. The Claims Service must be notified immediately by email on claims@mstream.co.uk or by phone on +44 (0)845 643 2629.

DATA PROTECTION

Information about **your** policy may be shared between JBI International Insurance Brokers, Millstream Underwriting Limited and Elvia Travel Insurance International N.V (which, during 2009 will change its name to Mondial Assistance Europe N.V.) for underwriting purposes.

Please note that sensitive health and other information **you** provide may be used by **us**, **our** representatives and other insurers and industry governing bodies and regulators to process **your** insurance, handle claims and prevent fraud. This may involve transferring information to other countries (some of which may have limited or no data protection laws). **We** have taken steps to ensure that **your** information is held securely.

Information **we** hold will not be shared with third parties for marketing purposes. **You** have the right to access **your** personal records.

GOVERNING LAW

Unless agreed otherwise, English law will apply and all communications and documentation in relation to this policy will be in English. **We** the **insurer** and **you** do not intend any term of this contract to be enforceable pursuant to the Contract (Rights Of Third Parties) Act 1999.

DETAILS ABOUT OUR REGULATOR

TravelCare travel insurance is underwritten by Millstream Underwriting Limited on behalf of Elvia Travel Insurance International N.V. (which, during 2009 will change its name to Mondial Assistance Europe N.V.) Mondial Assistance (UK) Limited is ELVIA's appointed administrator in the United Kingdom.

JBI International Insurance Brokers Ltd (FSA Firm Ref:

308981), Millstream Underwriting Limited (FSA Firm Ref: 308584) and Mondial Assistance (UK) Limited (FSA Firm Ref: 311909) are authorised and regulated by the Financial Services Authority (FSA).

ELVIA Travel Insurance International N.V. (which, during 2009 will change its name to Mondial Assistance Europe N.V.) is authorised by De Nederlandsche Bank (DNB) in the Netherlands and regulated by the FSA for conduct of UK business

The FSA holds a register of all regulated firms on its website visit www.fsa.gov.uk/register or you can contact them by phone on 0845 606 1234.

Millstream Underwriting Limited and Mondial Assistance (UK) Limited will act as agents for ELVIA Travel Insurance International N.V. (which, during 2009 will change its name to Mondial Assistance Europe N.V.) with respect to the receipt of customer money and for the purpose of settling claims and handling premium refunds

JBI International Insurance Brokers Ltd will act as agent for ELVIA Travel Insurance International N.V (which, during 2009 will change its name to Mondial Assistance Europe N.V.) with respect to the receipt of customer money and handling premium refunds

JBI International Insurance Brokers Ltd, Registered in England No. 01936834, Registered Office: Amdromenda House, Calleva Park, Aldermaston, Reading, Berkshire RG7 8AR
Millstream Underwriting Limited, Registered in England No. 3896220, Registered Office: 40 Lime Street, London EC3M 7AY.
Mondial Assistance (UK) Limited, Registered in England No. 1710361. Registered Office: Mondial House, 102 George Street, Croydon CR9 1AJ.

FINANCIAL SERVICES COMPENSATION SCHEME

In the event that the **insurer**, is unable to pay a claim you may be entitled to compensation from the Financial Services Compensation Scheme. Information can be obtained on request, or by visiting the Financial Services Compensation Scheme website at www.fscs.org.uk

TELECARE HELPLINE

TeleCare is designed to complement your travel insurance policy by providing you and your family with 24 hour freephone access to expert medical advice and information, direct from the United Kingdom, whilst you are away from home.

Pre-trip travel health information and guidance

- Precautions necessary for different countries and environments
- Common minor ailments and bugs experienced when abroad
- Holiday First Aid
- Sunburn and heat exhaustion
- Child health
- Medical Practitioner 'in-country' service locator.
- Foreign emergency services database

Access to Pharmaceutical advice

- General information on prescribed drugs
- Identification of foreign brand names for prescribed drugs
- Adverse reactions and interactions

- Side effects of prescribed drugs
- Contra-indications
- Tropical diseases information

Access to Midwifery advice

- General healthcare information during pregnancy
- Travel advice during pregnancy
- Symptom analysis during various stages pf pregnancy
- Diet and food recommendations
- Special precautions when travelling abroad.

To use TeleCare

1. From any touch-tone phone, dial the access number for the country you are in from the list below.
2. Wait for the voice prompt.
3. Enter the PIN number: 7989 6925 9987
4. Once the PIN is validated you will be connected to TeleCare.

If you experience difficulties, call the customer services on **+44 (0) 20 7950 5660** and you will be connected to TeleCare by an operator. To assist the TeleCare specialist, please have your foreign address and a contact number available before you call.

INTERNATIONAL ACCESS NUMBERS

Alaska	1888 237 7855 or 1800 635 4110
Argentina	0800 333 5240 dial 677* at 2nd tone
Australia	1800 553 161 or 1800 504 091
Austria	0800 29 3272
Bahrain	8000 0600
Belgium	0800 11 008 or 0800 14321
Bermuda 1	800 623 0459 or 1800 623 0758
Brazil	0800 891 6736
Brunei	800 013 dial 677* at 2nd tone
Bulgaria	00800 1300 dial 677* at 2nd tone
Canada	1866 464 1061
Canary Islands	900 944 407 or 900 971 607
Chile	800 532 837
China North*	10800 714 0732
China South*	10800 140 0727
Colombia	01800 919 3592
Corsica	0800 906706 or 0800 918107
Croatia	0800 22 0116 dial 677* at 2nd tone
Cyprus	800 95126
Denmark	808 85179
Dominica	1800 201 3600
Dominican Republic	1800 751 4192 or 1888 1563018
Egypt (Cairo)	364 0083 dial 677* at 2nd tone
Egypt	02 364 0083 dial 677* at 2nd tone
Fiji	00 800 7028
Finland	0800 114 734 or 0800 115544
France	0800 906706 or 0800 918107
Germany	0800 181 4886
Greece	00800 4513 9055 or 00800 4413 1018
Guernsey	0800 018 1716
Hawaii	1888 237 7855 or 1800 635 4110
Hong Kong	800 930 465
Hungary	06800 12296
Iceland	800 8313
India	008000 100 6062
Indonesia	008800 1050 44
Ireland	1800 551 546
Ireland Payphone	1800 551 540
Israel	1800 943 0317 or 1800 946 0061
Isle of Man	0800 018 1716
Italy	800 870 939
Italy	(Mobile & Payphone) 800 781 034 or 800 879 994

Japan	00531 7800 30
Korea (South)	00308 140077
Liechtenstein	0800 837 175
Lithuania	8800 9 1000 dial 677* at 2nd tone
Luxembourg	800 23907
Madeira	800 819 260
Malaysia	1800 808 379
Malta	800 90 112 dial 677* at 2nd tone
Mexico	00 1800 514 3881
Monaco	0800 906706 or 0800 918107
Netherlands	0800 022 8992
New Zealand	0800 445 425
Nicaragua	1800 00551 dial 677* at 2nd tone
Norway	800 11 247
Phillippines	1800 1100 0074
Poland	00 800 451 1512
Portugal inc. Azores	800 819 260
Puerto Rico	1877 410 6060
Romania	01800 5030 dial 677* at 2nd tone
Russia	810 800 2028 2044
Senegal	3080 dial 677* at 2nd tone
Singapore	800 4411 014
Spain	900 944 407 or 900 971 607
Sri Lanka	451 456 dial 677* at 2nd tone
St Kitts & Nevis	1800 744 9147
Sweden	0200 214 394
Switzerland	0800 563 949
Taiwan	00801 044150
Thailand	001 800 15 9999 dial 677* at 2nd tone
Trinidad & Tobago	1800 201 3670
Turkey	0800 1420 3708 or 0800 1420 3707
Ukraine	8100 180 dial 677* at 2nd tone
UK	0800 018 19 20
USA	1888 237 7855 or 1800 635 4110
Venezuela	0800 100 4024

In some locations service is not available

✳ Only available from card phones

☎ Only available from DACOM payphones

☎ Only from public payphones

* If the continuous tone persists, do not hang up. Wait on the line and an Operator will ask you for a 3 digit code (SAC code). The SAC code to be given is 677

