

# TRAVEL INSURANCE

## POLICY WORDING



Thank you for purchasing your insurance from **JustTravelcover.**

**Our policies are designed to provide peace of mind for all travelers regardless of age or medical history. We aim to help all travelers enjoy their experience to the fullest by providing high quality, reasonably priced travel insurance which can be tailored to meet your specific requirements.**

We would advise **You** keep **Your** Policy documents in a safe place in case **You** need assistance or need to make a claim. Your documents can also be accessed securely via [www.justtravelcover.com](http://www.justtravelcover.com) online portal 24 hours per day.

If you have any questions or queries, please do not hesitate to contact Us on any of the numbers below:

### **Before you travel:**

**Customer Service: 0333 003 0021**

**Sales: 0800 294 2969**

**Email: [admin@justtravelcover.com](mailto:admin@justtravelcover.com)**

### **While you are away:**

**24 Hour Medical Emergency Assistance: +44 (0) 208 159 1702**

### **When you return:**

**Claims: 01608 641 351 or email [claims@rogerrich.co.uk](mailto:claims@rogerrich.co.uk)**

Please note: This is a travel insurance policy and not private medical insurance and does not provide cover for procedures that can be carried out in Your Home Country after repatriation, or any medical expenses incurred in private facilities if a medically suitable State facility is available unless specifically agreed and authorised by the Medical Emergency Assistance Company.

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## TABLE OF BENEFITS

The following is a summary of the main benefits and cover limits under this insurance per insured person. The covers provided, cover limits, and excesses applicable differ depending on whether you have chosen Silver Cover or Gold Cover. Your chosen cover option will be specified in your Policy Schedule. Benefits are subject to the terms, conditions, limitations and exclusions detailed in this Policy Document.

Cover Section & Policy Cover	Silver cover Limit per person (up to)	Silver cover Excess* per person	Gold cover Limit per person (up to)	Gold cover Excess* per person
<b>A. Cancellation</b>	<b>£2,500</b>	<b>£95</b>	<b>£5,000</b>	<b>£50</b>
<b>B1. Emergency Medical &amp; Associated Expenses</b> (outside your home country or on a UK cruise) Emergency dental treatment Kennel & cattery costs	<b>£5,000,000</b> £250 £500	<b>£95</b> (applies to section B1 only)	<b>£10,000,000</b> £400 £500	<b>£50</b> (applies to section B1 only)
<b>B2. Cover at home following hospitalisation abroad:</b> - Home help - Cosmetic surgery - Dental treatment - Physiotherapy - UK Convalescence (after hospitalisation abroad for 5 or more days)	£500 £3,000 £300 £750 £750		£500 £3,000 £300 £750 £750	
<b>B3. UK Trip non-medical cover</b> (this cover does not apply to a UK cruise)	<b>£10,000</b>		<b>£10,000</b>	
<b>C. Overseas Hospital Benefit</b>	<b>£1,000 (£30 per 24 hours)</b>	<b>Nil</b>	<b>£1,500 (£50 per 24 hours)</b>	<b>Nil</b>
<b>D. Curtailment (cutting short your trip)/Loss of Holiday</b>	<b>£2,500</b>	<b>£95</b>	<b>£5,000</b>	<b>£50</b>
<b>E. Personal Possessions</b> Single article, pair or set limit Valuables limit - Possessions delayed whilst being transported (over 12 hours) - Loss or damage to medical aids - Loss or damage to prescribed medications	<b>£1,500</b> £300 £500 <b>£250</b> <b>£1,000</b> <b>£250</b>	<b>£95</b>   <b>Nil</b> <b>£50</b> <b>£20</b>	<b>£2,500</b> £500 £750 <b>£250</b> <b>£2,000</b> <b>£500</b>	<b>£50</b>   <b>Nil</b> <b>£50</b> <b>£20</b>
<b>F. Personal Money, Passport &amp; Travel Documents</b> Cash limit - Loss of Passport	<b>£500</b> £200 <b>£200</b>	<b>£95</b>  <b>Nil</b>	<b>£1,000</b> £500 <b>£400</b>	<b>£50</b>  <b>Nil</b>
<b>G. Personal Accident **</b> - Death - Loss of limb/loss of sight - Permanent total disability Burial or cremation costs	<b>£7,500</b>   <b>£5,000</b>	<b>Nil</b>	<b>£15,000</b>   <b>£5,000</b>	<b>Nil</b>
<b>H. Personal Liability</b>	<b>£2,000,000</b>	<b>£95</b> (Property damage only)	<b>£2,000,000</b>	<b>£50</b> (Property damage only)
<b>I. Extended Journey Disruption</b>	<b>No cover</b>	<b>-</b>	<b>£3,000</b>	<b>Nil</b>
<b>J. Delayed Departure</b> (after 12 hours delay) or <b>Trip Abandonment</b> (after 12 hours delay)	<b>£200 (£50 per 12 hours delay)</b> <b>£2,500</b>	<b>Nil</b> <b>£95</b>	<b>£240 (£60 per 12 hours delay)</b> <b>£5,000</b>	<b>Nil</b> <b>£50</b>
<b>K. Missed Departure / Missed Connection</b>	<b>£500</b>	<b>Nil</b>	<b>£1,000</b>	<b>Nil</b>
<b>L. Travel Risks</b> - Hijack/Kidnap - Mugging - Natural Disaster	<b>£2,500 (£100 per 24 hours)</b> <b>£250</b> (one off payment) <b>£750</b>	<b>Nil</b> <b>Nil</b> <b>Nil</b>	<b>£2,500 (£100 per 24 hours)</b> <b>£250</b> (one off payment) <b>£750</b>	<b>Nil</b> <b>Nil</b> <b>Nil</b>
<b>M. Legal Advice &amp; Expenses</b>	<b>£30,000 (£60,000 policy max)</b>	<b>Nil</b>	<b>£50,000 (£100,000 policy max)</b>	<b>Nil</b>
<b>N. Travel Dispute †</b>	<b>£25,000</b> (optional cover)	<b>£35</b>	<b>£25,000</b>	<b>£35</b>
<b>O. Winter Sports †</b> - Own Ski Equipment Single article, pair or set limit - Hired Ski Equipment loss/damage - Delayed Ski Equipment (after 12 hours) - Loss of Ski Pack - Avalanche/Weather Delay - Piste Closure	(optional cover) <b>£500</b> £300 <b>£150</b> <b>£200</b> <b>£300</b> <b>£200</b> <b>£300 (£30 per 24 hours)</b>	<b>£95</b>  <b>Nil</b> <b>Nil</b> <b>Nil</b> <b>Nil</b> <b>Nil</b>	(optional cover) <b>£750</b> £500 <b>£250</b> <b>£200</b> <b>£500</b> <b>£500</b> <b>£500 (£50 per 24 hours)</b>	<b>£50</b>  <b>Nil</b> <b>Nil</b> <b>Nil</b> <b>Nil</b> <b>Nil</b>
<b>P. End Supplier Failure Insurance</b>	<b>No cover</b>	<b>-</b>	<b>£1,500</b>	<b>Nil</b>

\* An **excess** applies under some sections of cover under this insurance, as shown in the Table of Benefits above. This means **you** will be responsible for paying the first part of any claim. All **excesses** shown for this policy are payable for each claim, per incident claimed for, under each applicable section of cover, by each **insured person**. However, please note:

- Subject to the provisions contained in 2. below, if **you** have paid the additional premium for "Excess Waiver", no **excess** will be payable except for claims under Cover Section N - Travel Dispute where the £35 **excess** will still apply.
- Any **excess** imposed by **us** because an **insured person** has an **existing medical condition** which **we** have agreed in writing to cover following **your** call to the Medical Declaration Service, will still apply even if **you** have paid the additional premium for "Excess Waiver".

\*\* Section G - Personal Accident – The benefit payable for death is reduced if **you** are aged 17 years and under. If **you** are aged 70 or over, the benefits for death and **loss of limb/loss of sight** are reduced, and there is no benefit payable for **permanent total disablement**.

† Optional cover - if **you** have chosen an optional cover, this will only be in force if shown on **your** Policy Schedule and the appropriate additional premium has been paid.

Section O - Winter Sports – Silver or Gold cover is optional.

Section N - Travel Dispute – Gold cover is automatically included, Silver cover is optional.

## IMPORTANT CONTACT DETAILS

Calls may be monitored and recorded

### CUSTOMER SERVICES

**JustTravelcover.com**

**0333 003 0021** (this is a basic rate number)

Monday-Thursday 9.00am - 6.00pm, Friday 09:00am - 5.30pm, Saturday 9.00am - 1.00pm

**Email: admin@justtravelcover.com**

**Write to: Victoria House, Toward Road, Sunderland SR1 2QF**

Whether at **home** or abroad, the **policy administrator** JustTravelcover.com is available to help **you** deal with any queries about **your** insurance or make a claim. For medical emergencies, the Medical Emergency Assistance telephone service is available 24 hours a day, 365 days a year.

Please contact the **policy administrator** if **you** need any documents to be made available in braille and/or large print and/or in Audio format.

### MEDICAL DECLARATION SERVICE

**JustTravelcover.com**

**0333 003 0021** (this is a basic rate number)

Monday-Thursday 9.00am - 6.00pm, Friday 09:00am - 5.30pm, Saturday 9.00am - 1.00pm

**Email: admin@justtravelcover.com**

### 24HR EMERGENCY MEDICAL ASSISTANCE

**Healix Medical Assistance Services**

**+44 (0)208 159 1702**

**Email: internationalhealthcare@healix.com**

**You** should first call an ambulance using the local equivalent of a 999 number. If **you** are travelling within the European Union **you** should dial 112.

**You** should then, where possible, contact Healix Medical Assistance Services who are available 24 hours a day, all year round.

**You** have the reassurance of knowing that worldwide medical advice and help in an emergency is just a phone call away. (For more information see pages 9 to 10).

### CLAIMS

To make a claim, please ensure **you** contact the relevant **claims handler**. (For more information see pages 30 to 31).

### Cover Sections A-M and Cover Section O

**Roger Rich & Company**

**+44 (0)1608 641 351**

Monday - Friday 9am-5.30pm

**Email: claims@rogerrich.co.uk**

**Write to: Travel Claims, Roger Rich & Company, 2a Marston House, Cromwell Park, Chipping Norton, Oxfordshire OX7 5SR**

### Travel Dispute (Section N)

**+44 (0)1384 377 000** (this is a basic rate number)

### End Supplier Failure Insurance (Section P)

**+44 (0) 345 266 1872**

Monday - Friday 9am-5pm, closed Bank Holidays

## IMPORTANT INFORMATION

**The following is some key information about this insurance.**

**Please take the time to read it carefully.**

Throughout this Policy Document **we** use the terms “**you**” and “**insured person**” to describe the person(s) to whom cover is provided. Certain words shown in **bold** throughout this document have specific meanings and these are explained in the “Definition of Words” section at the end of the document. Some sections of cover contain additional definitions applicable to that cover section only.

This Policy Document is written in English and all other information and communications to **you** relating to this insurance will also be in English.

### Eligibility for this insurance

- This cover is for residents of the **United Kingdom**, the Channel Islands, the Isle of Man, or for members of the British Armed Forces only.
- All children under the age of 18 on the date **you** purchase **your** policy must travel with an adult insured under this policy. Adults insured on an Annual Multi-trip policy are entitled to travel independently of each other.
- Cover for **winter sports** activities is only provided if the appropriate additional premium has been paid and where an **insured person** is aged 69 years or under on the date **you** purchase **your** policy.

### Trips covered by this insurance

For cover to be provided under this insurance, any **trip** must meet the following requirements:

- The **trip** must be to a destination within the Area of Cover shown on **your** Policy Schedule.
- The **trip** must be a two-way **trip** which starts and ends in the **United Kingdom**, the Channel Islands or the Isle of Man, or which starts from a Ministry of Defence base/location where there is a recognised British Forces Post Office address.
- The **trip** must start and finish within the **period of insurance** shown on **your** Policy Schedule.
- Any **trip** within the **United Kingdom**, the Channel Islands or the Isle of Man must include at least 2 nights' booked accommodation.
- **You** must not be travelling against the advice of a **doctor** or where a **doctor** would have advised against **you** travelling had **you** sought their advice before beginning the **trip**.
- The **trip** cannot be undertaken for the specific purpose of receiving medical treatment during the **trip**.
- Where **you** have purchased Single Trip cover, the **trip** cannot be for more than 94 days (or 45 days if an **insured person** is aged 76 years or over on the date **you** purchase **your** policy).
- Where **you** have purchased Annual Multi-trip cover, **you** may take any number of **trips** within the **period of insurance** shown on **your** Policy Schedule but each **trip** cannot be for more than 31 days if **you** have purchased Silver cover or for more than 45 days if **you** have purchased Gold cover. **Winter sports** cover is limited to a maximum total of 17 days in the **period of insurance**.

### When your cover starts and ends

If **you** have chosen a Single Trip policy:

**Your period of insurance** is shown on **your** Policy Schedule and runs from the date **your** policy is issued until the completion of **your trip**.

- Cover under Cover Section A – Cancellation starts from the date the policy was issued and ends when **you** leave **home** to start **your trip**.
- Cover under Cover Section P - End Supplier Failure Insurance starts from the date the policy was issued and ends when **you** complete **your trip**.
- The cover under all other cover sections starts when **you** commence **your trip** and ends when **you** complete **your trip**.

If **you** have chosen an Annual Multi-trip policy:

**Your period of insurance** is shown on **your** Policy Schedule.

- Cover under Cover Section A - Cancellation starts from the date of commencement of **your period of insurance** or, if later, the date any **trip** is booked, and ends when **you** leave **home** to start any **trip**.
- Cover under Cover Section P - End Supplier Failure Insurance starts from the date of commencement of **your period of insurance** or, if later, the date any **trip** is booked, and ends on completion of any **trip** or expiry of the **period of insurance**, whichever is the earlier date.
- The cover under all other cover sections starts when **you** leave **home** to start **your trip** and ends when **you** complete **your trip**.

### Foreign, Commonwealth & Development Office (FCDO) advice

This insurance policy will not cover **you** for travel to a specific country or to an area where the Foreign, Commonwealth & Development Office (FCDO) advised against all travel at the time **you** purchased **your** policy or booked **your trip** (whichever is later).

## Medical declaration

To be covered on this policy **you** must act in accordance with the terms and conditions of the policy. **Existing medical conditions** will only be covered if declared and accepted by **us** in writing. Failure to declare ALL **existing medical conditions** may result in claims being rejected. It is a condition of this policy that unless **you** have been given **our** agreement **you** will not be covered.

**You** must contact **us** on **0333 003 0021** if **you** or anyone else to be insured on this policy answer 'YES' to any of the following questions. If **you** are not sure of any of the information **you** are giving **us** or do not know the answers, please check with **your** treating **doctor**.

### Question 1 of 6

Has anyone named on this policy ever had treatment for:

- a) any heart or circulatory condition?
- b) any type of diabetes?
- c) a stroke or high blood pressure?
- d) any type of cancer, whether in remission or not?
- e) any lung or breathing condition?
- f) an organ transplant or dialysis?

### Question 2 of 6

In the last 5 years, has anyone named on this policy suffered from a serious or recurring **medical condition**, been prescribed medication or received treatment or attended a **doctors** surgery?

### Question 3 of 6

In the last 5 years, has anyone named on this policy been referred to a specialist or a consultant at a hospital or clinic for tests, diagnosis or treatments or attended as an in or out patient?

### Question 4 of 6

Has anyone named on this policy ever been diagnosed or treated for any form of anxiety, depression or psychiatric condition including eating disorders?

### Question 5 of 6

Has anyone on this policy been placed on a waiting list currently for investigations or treatment?

### Question 6 of 6

Has anyone named on this policy been diagnosed by a **doctor** as suffering from a terminal illness?

## Changes in the health of an insured person

If an **insured person's** health changes after **you** purchased **your** policy but before **you** commence **your trip** (or in the case of Annual Multi-trip cover before the date of departure on **your next trip**), **you** must contact the Medical Declaration Service for further advice and to discuss **your** options. Contact details are given on page 4.

Changes which **we** need to know about are:

- **you** have seen a **doctor** because **you** develop a new **medical condition**, **your** prescribed medication changes or an existing **medical condition** deteriorates;
- **you** have seen or been referred to a consultant or specialist;
- **you** are waiting to receive treatment (including surgery, tests or investigations) or the results of tests and investigations, or have been admitted to hospital.

**We** will then tell **you** if **we** can cover an **insured person's medical condition(s)** free of charge or for an additional premium.

If **we** cannot cover an **insured person's medical condition(s)**, or **you** do not want to pay any additional premium quoted, **we** will give **you** the choice of either:

- making a cancellation claim for any pre-booked **trips**; or
- cancelling **your** policy and receiving a proportionate/partial refund, provided that **you** have not made a claim or are about to.

## Pregnancy

If **you** are pregnant, **you** will be covered under the standard terms and conditions of the policy during weeks 0-28 inclusive of the pregnancy. From the start of week 29 to week 40 inclusive of the pregnancy, there is no cover for claims relating to pregnancy or childbirth unless one of the following medical complications of pregnancy arise:

Toxaemia, gestational hypertension, ectopic pregnancy, post-partum haemorrhage, preeclampsia, molar pregnancy or hydatidiform mole, retained placenta membrane, placental abruption, hyperemesis gravidarum, placenta praevia, stillbirth, miscarriage, emergency caesarean, a termination needed for medical reasons, or premature birth more than 12 weeks (or 16 weeks if **you** know **you** are having more than one baby) before the expected delivery date.

Please note **we** will not cover denial of boarding by a carrier so **you** should check that **you** will be able to travel with the carrier/airline in advance.

It is essential, if at the time of booking a **trip** **you** are aware that **you** are pregnant, that **you** ensure that **you** are able to have the required vaccinations for that **trip**. No cover will be provided for cancellation of the **trip** in the event that after booking **you** discover that travel whilst pregnant is advised against or **you** are unable to receive the appropriate and required vaccinations for that country.



## **The health of individuals with whom you are travelling or have arranged to travel, a person with whom you have arranged to reside temporarily, or a close relative or close business associate, who are not insured under the policy**

If, at the time **your** policy started or at the time of booking a **trip**, whichever was the later, any person on whom the **trip** depends including the person with whom **you** are travelling or have arranged to travel, a person with whom **you** have arranged to reside temporarily, or a **close relative**, friend or **close business associate** had a **medical condition** for which he or she:

- was receiving treatment at hospital (other than where they go to hospital for check-ups for a stable condition, at regular intervals which have been arranged beforehand); or
- was waiting for a hospital consultation, investigations or treatment (other than where they go to hospital for check-ups for a stable condition, at regular intervals which have been arranged beforehand); or
- had been given a terminal prognosis, or been told that their condition is likely to get worse in the next 12 months,

**we** will not pay for any claim **you** make under Section A - Cancellation or Section D - Curtailment/Loss of Holiday, that relates in any way to the **medical condition** of that person.

## **Claims for reimbursement of costs**

Under cover Sections A - Cancellation, D - Curtailment/Loss of Holiday and P - End Supplier Failure Insurance, **we** provide cover for **unrecoverable costs**. If **you** need to make a claim for travel, accommodation or related costs which **you** have paid, or agreed to pay, **we** will consider claims for **your** costs which are unrecoverable from **your** travel and/or accommodation provider or agent, **your** debit/credit card company, PayPal, ABTA, ATOL (or similar organisations). For example, if **your trip** is cancelled by **your** tour operator or booking agent **you** may have a right to a refund from them for some or all of the cost of **your trip**. If **you** are not able to recover all of **your** costs and **your** circumstances are covered by the terms of the policy, **we** will consider costs **you** have been unable to recover.

In the event that **you** have paid for a **trip** on behalf of other individuals not insured on this policy please be advised that **your** policy only provides cover for **your** proportion of **trip** costs, as opposed to the amount **you** have paid on behalf of others.

## **USA medical costs**

Medical providers in the USA routinely charge international patients many times higher than it costs them to provide service. It is important that **you** do not pay any medical providers up front, either at the time of **your** treatment or on **your** return to **your home country**. Medical providers may engage the services of collection agencies but any correspondence should simply be sent on to **us**, unanswered: there is no lawful action that can be taken which **we** cannot step in and take over on **your** behalf. Please contact the 24hr Emergency Medical Assistance helpline as soon as possible in the event of an **illness** or injury and do not pay for the costs of any treatment **you** receive.

## **Trip extensions**

### **Trip extensions if you decide you wish to extend your trip whilst overseas**

If **you** have chosen a Single Trip policy and, having started **your trip**, **you** decide **you** want to extend **your** policy either:

- a) beyond the allowed maximum number of days (i.e. 94 days or 45 days if an **insured person** is aged 76 years or over on the date **you** purchase **your** policy); or
- b) beyond the expiry date of **your period of insurance** as shown on **your** Policy Schedule

OR

If **you** have chosen an Annual Multi-trip Trip policy and, having started **your trip**, **you** decide **you** want to extend **your** policy either:

- a) beyond the allowed maximum number of days per **trip** (i.e. 31 days if **you** have Silver cover or 45 days if **you** have Gold cover); or
- b) beyond the expiry date of **your period of insurance** as shown on **your** Policy Schedule,

please contact the **policy administrator** – contact details are given on page 4 of this Policy Document. **You** will be asked some questions and the **policy administrator** will tell **you** whether or not an extension can be granted.

### **Trip extensions if you are unable to return home from your trip as planned**

If, due to unexpected circumstances beyond **your** control, for example, due to **illness** or injury or unavoidable delays affecting **your** return flight or **public transport**, **your trip** cannot be completed within the **period of insurance** stated in **your** Policy Schedule, cover will be extended at no extra cost for up to 30 days. This also applies to one person travelling with **you** who is authorised to stay with **you** by Healix Medical Assistance Services if the extension is due to medical reasons. All requests for more than 30 days extended cover must be authorised by Healix Medical Assistance Services. Contact details are given on page 4 of this Policy Document.

## **Expiry of your policy**

If **you** have an Annual Multi-trip policy, **we** will write to **you** at least 21 days prior to the expiry of the **period of insurance** as shown on **your** Policy Schedule to advise whether **we** are able to offer **you** a further period of cover, and if so the cost and terms and conditions of further cover.



## IMPORTANT INFORMATION YOU HAVE GIVEN US

In deciding to accept this insurance and in setting the terms and premium, **we** have relied on the information **you** have given **us** via the **policy administrator**. **You** must take reasonable care to provide complete and accurate answers to the questions asked when the insurance is taken out or amended. If the information provided by **you** is not complete and accurate:

- **we** may cancel the insurance and refuse to pay any claim, or;
- **we** may not pay any claim in full, or;
- **we** may revise the premium, or;
- the extent of the cover may be affected.

**We** will write to **you** if **we**:

- intend to cancel the insurance; or
- need to amend the terms of the insurance; or
- require **you** to pay more for this insurance.

If **you** become aware that information **you** have given is incomplete or inaccurate, **you** must inform the **policy administrator** as soon as possible. Contact details are given on page 4 of this document.

## POLICY EXCESS

An **excess** applies under some sections of cover under this insurance, as shown in the Table of Benefits on page 3. This means **you** will be responsible for paying the first part of any claim. All **excesses** shown for this policy are payable for each claim, per incident claimed for, under each applicable section of cover, by each **insured person**.

**Your excess** may be increased if, following **your** call to the Medical Declaration Service, **we** have agreed in writing to cover any **existing medical condition(s)** an **insured person** has (including anything directly or indirectly related to the condition(s)).

If **you** have paid the additional premium for 'Excess Waiver', please read the "Excess Waiver" section below for details of how this impacts any policy **excess(es)** payable.

## EXCESS WAIVER

If **you** have paid the additional premium for 'Excess Waiver' then, subject to 1. and 2. below, **you** will not have to pay the policy **excess** which **you** would otherwise have been required to pay for each claim, per incident claimed for, under each applicable section of cover, by each **insured person**.

However, please note:

1. The policy **excess** will still apply to any claims made under Cover Section N – Travel Dispute; and
2. Any **excess** imposed by **us** because an **insured person** has an **existing medical condition** which **we** have agreed in writing to cover following **your** call to the Medical Declaration Service, will still apply.

## WHAT TO DO IN A MEDICAL EMERGENCY

**PLEASE NOTE: This is travel insurance and not private medical insurance; so there is no cover for any medical expenses incurred in private facilities if medically capable public facilities are available.**

### IF YOU NEED MEDICAL ASSISTANCE WHEN YOU ARE AWAY YOU SHOULD CALL 112 OR THE LOCAL EQUIVALENT OF 999

**You** should receive emergency medical treatment or management regardless of ability to pay or any other consideration. A failure or refusal by a treating hospital or treating **doctor** to provide emergency treatment, management or care is a clear breach of an established duty of care.

### YOU SHOULD THEN CALL HEALIX MEDICAL ASSISTANCE SERVICES ON

**+44 (0) 208 159 1702\***

Whilst the actual medical care **you** receive is in the hands of the local **doctors** treating **you**, Healix Medical Assistance Services can obtain the medical information needed from them to establish what is wrong, as well as their treatment and discharge plans. Healix Medical Assistance Services can support **you** in the event **you** are admitted to a facility that may not be suitable for **your** clinical needs or where there are concerns over practice.

Healix Medical Assistance Services will then advise on, and can put in place, suitable **repatriation** plans to get **you home** as soon as it is medically safe to do so. Healix Medical Assistance Services will liaise with the treating **doctor** to get a fit to fly certificate when needed, and with aero-medical experts who will advise on both the timing and method of **repatriation** that is best suited to **your** individual needs and **your** recovery.

Healix Medical Assistance Services understand that an immediate contact could be difficult. If **you** are travelling alone and cannot make a call personally, please ask a representative from the hospital to call Healix Medical Assistance Services with **your** details as soon as possible. Healix Medical Assistance Services can then offer any useful information and translation requirements to the hospital and **you** can concentrate on getting better.

\*Please note - calls may be recorded and/or monitored for quality assurance, training and as a record of the conversation.

### Medical Treatment

There is no cover for:

- routine, non-emergency or elective treatment
- or treatment that can wait until **you** return **home**.
- Healix Medical Assistance Services **doctors** are not treating **you**; they are not responsible for or in control of the clinical care **you** are receiving in a medical facility.
- In some instances, **you** may need to be moved from one local facility to another larger/ more specialised facility, for treatment.
- Having travel insurance does not ensure a 'fast track' medical service from the treating facility. Much like the NHS, emergency service rooms can be busy at certain times and so it is possible **you** may have to wait as **you** would in a local NHS hospital unless **you** require critical care.
- Once **you** are discharged from hospital this does not always mean **you** are fit to fly **home** - for example, if **you** were in the **United Kingdom** and suffered the same injury/**illness**, then **you** would not consider flying out on holiday so soon after surgery/treatment/an incident.
- Some medical facilities will raise charges that are far in excess of what is customary and reasonable; Healix Medical Assistance Services will deal with such bills directly and there is no need for **you** to pay them. **You** simply need to pass any correspondence about such bills to Healix Medical Assistance Services to ensure Healix Medical Assistance Services can provide full financial protection.

### Repatriation (bringing you home)

- Coming **home** straight away is not always an option even if **you** are considered 'fit to fly' by the treating **doctor**.
- Healix Medical Assistance Services have a medical team with experience in aviation medicine who will advise on both the timing and method of **repatriation** which is best suited to **your** individual needs and recovery.
- Most airlines require specific criteria to be met in order to accept a 'medical passenger'.
- Things change - if **your** health, stability or vitals change - then so do the plans.
- Availability of air ambulances, stretchers and appropriate medical escorts can be limited in specific areas and at different times of the year.
- Air Ambulances are 'flying intensive care units' and are only used to transport critical patients to a hospital in the **United Kingdom**, the Channel Islands or Isle of Man if treatment is not possible where they are.

## OUT-PATIENT OR TREATMENT FOR A MINOR INJURY OR ILLNESS

**PLEASE NOTE: This is travel insurance and not private medical insurance; so there is no cover for any medical expenses incurred in private facilities if medically capable public facilities are available.**

### For a non-urgent medical situation

That is something **you** would normally see **your** GP or minor injuries unit for, so **you** don't need to attend hospital but do need some medication to treat a non-emergency situation. Like what? Poorly child with tonsillitis? Infected cut on the foot?

If **you** need to see a **doctor** ask locally for the nearest public/state medical facility or seek advice on where to go for treatment from Healix Medical Assistance Services on:

**+44 (0) 208 159 1702.**

### Optimal care

In **our** experience the access to the best **doctors**, diagnostics and optimal care in many areas of the world (particularly in Europe but also across many destinations worldwide) is limited to state facilities. They don't always look as nice, but **we** have experience of good clinical outcomes within a regulated environment without the risk of a patient's health being compromised over commercial interest or immoral and dangerous practices such as extortion, detainment and withdrawal of treatment which **you** are unlikely to find occurring in state facilities.

### In the event that you do receive out-patient treatment when you are travelling

Using these agreements below in public facilities will mean that medical treatment will be free, or at a reduced cost, and **your excess** will be waived from any claim **you** may make. If **you** are unable to use the UK Global Health Insurance Card (UK GHIC)/European Health Insurance Card (EHIC), **you** will have to pay the medical facility and submit a claim when **you** get **home**, the **excess** will then be applied.

**In European Union Countries** – if **you** present at a public facility, **you** are strongly advised to show **your** UK Global Health Insurance Card (UK GHIC)/European Health Insurance Card (EHIC).

**In Australia** – **you** are strongly advised to enrol for Medicare, and have it accepted.

**Everywhere else in the World** – if there is not a suitable public facility that will treat **you** free of charge, **you** can pay the medical facility and retain all receipts so that **you** can make a claim upon arriving **home**.

### Please note:

If **you** are admitted to hospital, **you** should call Healix Medical Assistance Services on: **+44 (0) 208 159 1702.**

## GENERAL EXCLUSIONS

**These General Exclusions do not apply to Section P – End Supplier Failure Insurance or Section N - Travel Dispute. The exclusions which apply to Section P – End Supplier Failure Insurance and Section N - Travel Dispute are listed in that cover section.**

**These General Exclusions apply to all other cover sections. Most cover sections contain exclusions specific to that section of cover which apply in addition to these General Exclusions.**

**We** will not pay any claim arising directly or indirectly from:

- 1) **your** participation in an activity not listed under 'Sports & Activities' in Appendix A of this Policy Document;
- 2) **your** participation in a **winter sports** activity, unless **you** have paid the appropriate additional premium to include **winter sports** cover. However, participation in the following activities is not covered even where **you** have paid the additional premium to include **winter sports** cover: **off-piste** skiing/snowboarding without a guide or instructor, skiing/snowboarding against local authoritative recommendations, warnings or advice, ski stunting, free-style skiing, bob sleigh, ice hockey, bobbing, heli-skiing, ski acrobatics, ski flying, ski jumping, ski mountaineering, glacier skiing, snowcat skiing, snow carting or the use of bob sleighs, luges or skeletons or any competitive skiing.
- 3) **your** participation in or practice of any professional sporting activities. **We** consider professional sporting activities to be activities or sports from which any income is obtained or sponsorship is received;
- 4) any travel outside the Area of Cover **you** have chosen as shown on **your** Policy Schedule, unless **you** are en route to **your** chosen Area of Cover;
- 5) an **existing medical condition**, unless **you** have contacted **our** Medical Declaration Service and **we** have agreed in writing to provide cover and **you** have paid (if required by **us**) any additional premium;
- 6) **your** carrier's refusal to allow **you** to board or travel for any reason, including due to pregnancy;
- 7) alcohol abuse, the use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a registered **doctor**, but not for the treatment of drug addiction), or solvent abuse;
- 8) **your** suicide or an attempt at suicide, self-injury or **you** deliberately putting **yourself** at risk (unless **you** were trying to save another person's life);
- 9) **you** causing damage or injury on purpose;
- 10) **you** breaking the law, or not following the laws of any country or local authority;
- 11) **you** piloting or travelling in an aircraft where **you** or the pilot are not licensed to carry passengers;
- 12) **you** operating or being in control of a motorised vehicle for which **you** do not hold the appropriate licence(s) to operate such vehicle in the **United Kingdom**, the Channel Islands or the Isle of Man. (Please Note: there is no cover under Section H - Personal Liability for any claim related to the use of motorised vehicles);
- 13) **you** travelling on a motorcycle or moped without wearing a crash helmet, whether legally required locally or not;
- 14) **you** riding a motor cycle or moped off-road or using a quad bike;
- 15) the usage of **drones**;
- 16) travel to a specific country or to an area where the Foreign, Commonwealth & Development Office (FCDO) advised against all travel at the time **you** purchased **your** policy or booked **your trip** (whichever is later);
- 17) any loss, damage, liability, cost or expense caused deliberately or accidentally by:
  - a) the use of, or inability to, use any application, software, or programme in connection with any electronic equipment (for example a computer, smartphone, tablet or internet-capable electronic device);
  - b) any computer virus;
  - c) any computer related hoax relating to a) and/or b) above.
- 18) any other loss, damage or additional expense following on from an event for which **you** are claiming, unless **we** specifically provide cover under this insurance. For example, **we** will not pay for loss of earnings following bodily injury or **illness**.
- 19) war, **act of terrorism**, **nuclear risks**, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, civil commotion, confiscation or nationalisation or requisition or destruction of or damage to property by or under the order of any government, public or local authority.

This exclusion shall not apply to claims under Section B1 - Emergency Medical & Associated Expenses providing:

- the **act of terrorism** is not of a nuclear nature; and
- at the time of travel **you** are not travelling to a country or area that the Foreign, Commonwealth & Development Office lists as a place which they either advise against all travel to, or all travel on holiday.

## 20) Infectious or contagious diseases

- a) Other than as stated in e) below, this insurance does not cover claims in any way caused by or resulting from an **infectious or contagious disease**, an outbreak of which has been declared a Public Health Emergency of International Concern (PHEIC) by the World Health Organization (WHO).
- b) This exclusion shall apply to claims made after the date of any such declaration(s), other than where a relevant diagnosis has been made by a qualified **doctor** before the date of any such declaration(s).
- c) This exclusion will continue to apply until the WHO cancels or withdraws any relevant PHEIC.
- d) **Infectious or contagious disease** means any disease capable of being transmitted from an infected person, animal or species to another person, animal or species by any means.
- e) This exclusion does not apply to claims under Section B1 - Emergency Medical & Associated Expenses or Section D - Curtailment/Loss of Holiday. **We** will also provide cover under Section A - Cancellation if **you** are forced to cancel **your trip** before the start date because **you** became **ill** with an **infectious or contagious disease**, including contracting **Coronavirus**. Please read the information contained under "Coronavirus cover" towards the end of Section A - Cancellation and Section D - Curtailment/Loss of Holiday for full details of the cover provided under these sections of cover and the evidence **you** will need to provide if **you** wish to make a claim.

## GENERAL CONDITIONS

**These conditions apply to the whole of your insurance. Under some individual sections of cover there are also "Special Conditions Relating to Claims" under that section of cover.**

**Where any condition requires an action by you and you do not meet the condition, your claim may not be paid or not paid in full.**

1. **We** may refuse to pay any expenses for which **you** cannot provide receipts or bills.
2. **You** cannot transfer **your** rights under this policy but **we** may ask **you** to transfer **your** rights to **us** to enable **us** to take proceedings in **your** name for **our** benefit.
3. If, at the time of a valid claim under this policy there is another insurance policy in force which covers **you** for the same loss or expense (for example a Home Contents Policy), **we** may seek a recovery of some or all of **our** costs from the other insurer. **You** must give **us** any help or information **we** may need to assist **us** with **our** loss recoveries.
4. **We** take a robust approach to fraud prevention in order to keep premium rates down so that **you** do not have to pay for other people's dishonesty. If any claim made by **you**, or anyone acting on **your** behalf, is fraudulent, deliberately exaggerated, or is intended to mislead, **we** may:
  - not pay that claim; and
  - recover (from **you**) any payments made in respect of that claim; and
  - terminate **your** insurance from the time of the fraudulent act; and
  - inform the police of the act.If **your** insurance is terminated from the time of the fraudulent act, **we** will not pay any claim for any incident which happens after that time and may not return any of the insurance premium(s) already paid.
5. When **you** deal with **us** or **our claims handler** or the Medical Emergency Assistance Company **you** are acting on behalf of any other person(s) covered under this insurance.
6. Only all **insured persons** and **we** have rights under this insurance and it is not intended that any clause or term of this insurance should be enforceable, by virtue of the Contract (Rights of Third Parties) Act 1999, by any other person.

## Section A - Cancellation

### For each insured person we will pay up to:

**£2,500** Silver cover

**£5,000** Gold cover

for the following **unrecoverable costs** that **you** have paid or agreed to pay:

- i) transport charges,
  - ii) accommodation charges,
  - iii) car hire and
  - iv) pre-paid excursions (limited to **£250** Silver cover or **£500** Gold cover) booked before **you** go on **your trip**,
- if **you** are forced to cancel **your trip** before it starts because one of the following happens which could not have been foreseen:
- i. **you** or a **travelling companion**, becomes **ill**, is injured or dies;
  - ii. **you** become **ill** with an **infectious or contagious disease** (including contracting **Coronavirus**);  
Note: Please read the information contained under "Coronavirus cover" towards the end of this Cover Section A for full details of the cover provided in relation to **Coronavirus** and the evidence **you** need to supply in order to make a claim.
  - iii. a **close relative**, a **close business associate** or the person **you** were going to stay with becomes **ill**, is injured or dies;
  - iv. **your home** is burgled, or damaged by fire, flood or storm;
  - v. **you**, or a **travelling companion** are called for jury service or required as a witness in a court of law;
  - vi. **you**, or a **travelling companion** suffer compulsory redundancy (there must have been no reason to believe **you** or the **travelling companion** would be made redundant at the time **you** booked the **trip**);
  - vii. an **insured person** or a **travelling companion** who is in the armed forces (including reserves and territorial), emergency services, medical or nursing professions (in the public sector), or is a member of parliament, has leave withdrawn;
  - viii. fire, earthquake, storm, flood, riot or civil unrest in the country **you** are travelling to.

### The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.

#### We will not pay:

- the **excess** shown in the Table of Benefits on page 3;
- any claim due to circumstances known to **you** before this insurance was purchased, or at the time of booking any **trip**, which could reasonably have been expected to lead to cancellation of **your trip**;
- any claim **you** make that relates in any way to a **medical condition** of any person not insured under this policy on whom the **trip** depends, including the person with whom **you** are travelling or have arranged to travel, a person with whom **you** have arranged to reside temporarily, or a **close relative**, friend or **close business associate**, if, at the time **your** policy started or at the time of booking a **trip**, whichever was the later, any such person:
  - was receiving treatment at hospital (other than where they go to hospital for check-ups for a stable condition, at regular intervals which have been arranged beforehand); or
  - was waiting for a hospital consultation, investigations or treatment (other than where they go to hospital for check-ups for a stable condition, at regular intervals which have been arranged beforehand); or
  - had been given a terminal prognosis, or been told that their condition is likely to get worse in the next 12 months;
- any claim where **you** cancelled **your trip** because:
  - a) **you** simply did not want to travel;
  - b) **you** could no longer afford to pay for the **trip**;
  - c) of an **existing medical condition** which **you** have not told **us** about and that **we** have not agreed to cover in writing;
- any claim where **you**, or a **travelling companion**, did not obtain the required **travel documents**, inoculations or vaccinations for the area **you** are travelling to;
- any claim where **you**, or a **travelling companion** are the defendant in a court of law;
- any claim relating to pregnancy or childbirth if **you** are 29 weeks or more pregnant unless one of the following medical complications of pregnancy arise:  
Toxaemia, gestational hypertension, ectopic pregnancy, post-partum haemorrhage, pre-eclampsia, molar pregnancy or hydatidiform mole, retained placenta membrane, placental abruption, hyperemesis gravidarum, placenta praevia, stillbirth, miscarriage, emergency caesarean, a termination needed for medical reasons, or premature birth more than 12 weeks (or 16 weeks if **you** know **you** are having more than one baby) before the expected delivery date.
- any claim if, after booking a **trip**, **you** discover that travel whilst pregnant is advised against or **you** are unable to receive the appropriate and required vaccinations for that country;
- accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme. However, **we** will pay any property maintenance costs, service charges or user fees relating to a specific booking under any such arrangement, plan or scheme.



## Coronavirus cover

If **you** become **ill** following a positive diagnosis of **Coronavirus** and **you** are forced to cancel **your trip**, the insurance provides cover for any **unrecoverable costs** if **you** are unable to travel to or enter any country because **you** have tested positive for **Coronavirus** and are unable to demonstrate that **you** are symptom free or have tested negative for **Coronavirus**. This cover is only provided where **you** were travelling to a country which requires evidence of a negative test for **Coronavirus** prior to travelling to or entering the country.

There is no cover under this insurance:

- For **unrecoverable costs** unless **you** provide evidence that **you** have been unable to travel to or enter any country because **you** have tested positive for **Coronavirus**. **You** must provide the result of a test carried out by a testing provider who has self-certified as meeting the **UK** Government's minimum standards for general population testing services.  
**You** can find a list of such providers at: <https://www.gov.uk/government/publications/list-of-private-providers-of-coronavirus-testing/>
- For any **unrecoverable costs** if **you** are unable to provide evidence from a **doctor** confirming that **you** have contracted **Coronavirus**;
- If **you** cancelled **your trip** because:
  - **you** chose to quarantine or isolate as a result of exposure to an **infectious or contagious disease** including **Coronavirus**; or
  - **you** simply did not want to travel or had a fear of travelling.

## Special Conditions Relating to Claims

1. **You** must notify **your** tour operator, travel agent, transport or accommodation provider as soon as **you** find out it is necessary to cancel **your trip** and request a cancellation invoice. If **you** fail to do so, the amount **we** will pay will be limited to the cancellation charges that would have been payable had such notification taken place.
2. **You** must ensure that the medical certificate in the cancellation claim form is completed by the **doctor** of the person whose injury, **illness** or death has caused the cancellation.

## Section B1 - Emergency Medical & Associated Expenses

**Your** policy is intended to cover immediate treatment in an emergency situation. **We** reserve the right to **repatriate you** immediately for treatment in **your home country** when this is deemed to be preferable regardless of **your** original travel plans. All medical decisions are at the discretion of the Medical Emergency Assistance Company. It is essential for **you** to contact the Medical Emergency Assistance Company prior to **you** being admitted anywhere. In this instance **we** may arrange for a local transfer to a hospital better equipped for **your** immediate needs.

Please see the section 'What to do in a Medical Emergency' on pages 9 to 10 of this Policy Document for details.

**For each insured person we will pay up to:**

**£5,000,000** Silver cover

**£10,000,000** Gold cover

to **you** or **your** legal representatives the following emergency expenses that result from **your** accidental death, injury or **illness**:

- a) for:
  - i) fees or charges to be paid outside **your home country** or when on a **UK cruise** for medical, surgical, hospital, nursing home or nursing services and additional accommodation (room only) incurred and payable until such time as, when in the opinion of the **doctor** in attendance and the Medical Emergency Assistance Company, **you** are fit to travel;
  - ii) additional travel and accommodation expenses incurred, up to the standard of **your** original booking, if it is medically necessary for **you** to stay abroad beyond **your** scheduled return date;
  - iii) additional travel, accommodation and **repatriation** costs incurred by **you** or on **your** behalf for any one other person who is required for medical reasons to stay with **you**, to travel to **you** from within **your home country** or to travel with **you**;
  - iv) the cost of returning **your** ashes **home** or the return of **your** body to **your home** when arranged by **us**.
- b) up to **£250** Silver cover or **£400** Gold cover, for non-cosmetic emergency dental treatment.
- c) additional costs of providing an alternative **carer** for **you** during the remainder of **your trip** where **your carer** is another **insured person** who is unable to care for **you** due to suffering bodily injury or **illness** and/or compulsory quarantine, and no other person with whom **you** are travelling or a **close relative** is already present and able or competent to become **your carer**.
- d) up to **£500** if **your** domestic dog(s)/cat(s) is/are in a kennel/cattery during **your trip** and **your** return to **your home** has been delayed due to bodily injury, **illness** or disease.



The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.

**We will not pay:**

- the **excess** shown in the Table of Benefits on page 3, except when **you** have used a UK Global Health Insurance Card (UK GHIC)/European Health Insurance Card (EHIC) or other mutual agreement between countries to obtain a reduction in medical cost when the **excess** is waived;
- any claim arising directly or indirectly from any **existing medical condition**, unless **you** have contacted **our** Medical Declaration Service, and **we** have agreed in writing to provide cover and **you** have paid (if required by **us**) any additional premium.
- any claim if **you** have travelled against the advice of a **doctor** or where a **doctor** would have advised against **you** travelling had **you** sought their advice before beginning the **trip**;
- for any elective or pre-arranged treatment or any routine non-emergency tests or treatment of any description. This includes complications as a result of elective, pre-arranged or cosmetic treatment, received whilst abroad;
- any claim where **you** did not obtain the recommended vaccines, inoculations or medications prior to the **trip**;
- any claim relating to pregnancy or childbirth if **you** are 29 weeks or more pregnant unless one of the following medical complications of pregnancy arise:  
Toxaemia, gestational hypertension, ectopic pregnancy, post-partum haemorrhage, pre-eclampsia, molar pregnancy or hydatidiform mole, retained placenta membrane, placental abruption, hyperemesis gravidarum, placenta praevia, stillbirth, miscarriage, emergency caesarean, a termination needed for medical reasons, or premature birth more than 12 weeks (or 16 weeks if **you** know **you** are having more than one baby) before the expected delivery date.
- any claim if, after booking a **trip**, **you** discover that travel whilst pregnant is advised against or **you** are unable to receive the appropriate and required vaccinations for that country;
- the cost of private treatment where adequate state facilities are available;
- any costs for treatment relating to **Coronavirus** if **you** are unable to provide evidence from a **doctor** confirming that **you** have contracted **Coronavirus**;
- any costs of **Coronavirus** testing, unless **you** are admitted to hospital as an inpatient as a result of an accident, injury or **illness** that is covered under this section of cover;
- for **repatriation** unless this is deemed medically necessary by the Medical Emergency Assistance Company;
- for any services or treatment received by **you** within **your home country**, except where **you** are on a **UK cruise**;
- for any proposed services or treatment including any form of cosmetic surgery or treatment, that in the opinion of the Medical Emergency Assistance Company, in consultation with **your** treating **doctor**, can reasonably wait until **you** return to **your home country**;
- for any services or treatment received by **you** after the date on which, in the opinion of the Medical Emergency Assistance Company **you** can safely return **home**, where such services or treatment would exceed the cost of **your repatriation**;
- for repairs to or for the provision of artificial limbs or hearing aids;
- any costs for treatment, including exploratory tests, that has no relationship with the **illness** or injury in relation to which the claim is being made;
- for repairs to or for the provision of dentures, crowns or veneers;
- for any dental work involving the use of precious metals;
- for any dental work or treatment which could wait until **your** return **home**.

## **Section B2 - Cover Upon Your Return Home Following Hospitalisation Abroad**

- a) Aftercare – For each **insured person we** will pay up to the amounts shown below for treatment given or prescribed and costs authorised by a **doctor** in **your home country** and agreed by **us** following bodily injury or **illness** for which the **insured person** received inpatient treatment at a hospital during a **trip** outside of **your home country**:
- i) **£500** for the employment of home-help provided this was not available to **you** before **your trip**;
  - ii) **£3,000** for the cost of emergency cosmetic medical treatment to repair damage to **your** soft facial tissue;
  - iii) **£300** towards non-cosmetic dental treatment;
  - iv) **£750** for the cost of further physiotherapy treatment.
- b) Convalescence – For each **insured person we** will pay up to **£750** towards the cost of a convalescence **trip** in **your home country** in the event that **you** are hospitalised for more than 5 days outside **your home country** and **we** have accepted a claim under Section B1 - Emergency Medical & Associated Expenses. **Your** policy will be extended by up to a maximum of 31 days to cover **your** convalescence **trip**. The convalescence **trip** must be taken within 3 months of **your** return to **your home country**.

## Section B3 - UK Trip Non-Medical Cover

**Please Note: This does not apply for a trip which is a UK cruise**

For each **insured person we** will pay up to **£10,000** for non-medical and other expenses incurred within the **UK**, the Channel Islands or the Isle of Man for the following expenses caused by **you** becoming **ill** or dying during the **period of insurance**:

- a) extra accommodation (room only and up to the standard of the original booking) expenses, incurred until such time as when, in the opinion of the **doctor** in attendance and the Medical Emergency Assistance Company, **you** are fit to travel;
- b) (for the purposes of the following cover only 'Repatriation' will be defined as: **Repatriation** - **your** return to a hospital within the location of **your home** as approved by **us** or the Medical Emergency Assistance Company)  
the extra cost of returning to **your home**, including **repatriation** expenses if this is medically necessary;
- c) extra travel and accommodation (room only and up to the standard of the original booking) expenses for one person who has to either stay with **you** or travel to **you** to escort **you home** if **you** are **ill** or injured;
- d) the extra cost of bringing **your** body or ashes **home**;
- e) extra charges incurred to recover **your** car and **personal possessions** to **your home** if **you** and no other person travelling with **you** at the time of **your** discharge from hospital are able to drive the car.

**The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.**

**We will not pay:**

- any costs incurred either directly or indirectly for services received for in-patient treatment in the **United Kingdom**, Channel Islands or Isle of Man other than as provided for in e) above.

## Section C - Overseas Hospital Benefit

**For each insured person we will pay:**

**£30** per 24 hours up to **£1,000** Silver cover

**£50** per 24 hours up to **£1,500** Gold cover

for each complete 24 hour period where **you** are:

- i) admitted as a hospital in-patient in a hospital outside of the **United Kingdom**, the Channel Islands or the Isle of Man; or
- ii) are confined to **your trip** accommodation outside of the **United Kingdom**, the Channel Islands or the Isle of Man during the period of the **trip**.

This benefit is payable in addition to the fees and charges paid under Section B1 - Emergency Medical & Associated Expenses.

## Section D - Curtailment / Loss of Holiday

**For each insured person we will pay up to:**

**£2,500** Silver cover

**£5,000** Gold cover, for:

- i) pre-paid excursions (limited to **£250** Silver cover or **£500** Gold cover) booked before **you** go on **your trip**,
- ii) **unrecoverable costs** for unused travel and accommodation together with any additional travel expenses incurred, and
- iii) car hire

that **you** have paid or agreed to pay if **you** had to **curtail your trip** because any of the following happened after **you** left **home**, which **you** could not have been expected to foresee or avoid:

- i. **you** or a **travelling companion** became **ill** (including contracting **Coronavirus**), were injured or died during **your trip**;  
Note: Please read the information contained under "Coronavirus cover" towards the end of this Cover Section D for full details of the cover provided in relation to **Coronavirus** and the evidence **you** need to supply in order to make a claim.
- ii. a **close relative**, a **close business associate** or the person **you** were going to stay with became **ill**, was injured or died;
- iii. **your** pre-booked accommodation was damaged by a **natural disaster**, and alternative accommodation was not provided;
- iv. **you** or a **travelling companion** were called for jury service or required as a witness in a court of law;
- v. **you** or a **travelling companion** have leave withdrawn, and are a member of the armed forces (including reserves and territorial), emergency services, medical or nursing professions (in the public sector), or a member of parliament;
- vi. fire, earthquake, storm, flood, riot or civil unrest in the country **you** are travelling to.

#### Please Note:

The amount of benefit due will be calculated from the date of **your** return **home** and based on the full days of **your trip** which have been lost.

#### **This insurance also provides cover for:**

- i) pre-paid excursions (limited to **£250** Silver cover or **£500** Gold cover) booked before **you** went on **your trip**; and
- ii) car hire

which **you** were unable to participate in or use because **you** were confined to a hospital or **your trip** accommodation on **your** treating **doctor's** orders due to injury or **illness**.

#### **The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.**

##### **We will not pay:**

- the **excess** shown in the Table of Benefits on page 3;
- any claim due to circumstances known to **you** before this insurance was purchased, or at the time of booking any **trip**, which could reasonably have been expected to lead to **curtailment of your trip**;
- any costs for treatment relating to **Coronavirus** if **you** are unable to provide evidence from a **doctor** confirming that **you** have contracted **Coronavirus**;
- any claim where **you curtailed your trip** because **you** could no longer afford to pay for the **trip**;
- any claim where **you curtailed your trip** because **you** did not want to continue travelling;
- any claim arising directly or indirectly from any **existing medical condition**, unless **you** have contacted **our** Medical Declaration Service, and **we** have agreed in writing to provide cover and **you** have paid (if required by **us**) any additional premium;
- any claim **you** make that relates in any way to a **medical condition** of any person not insured under this policy on whom the **trip** depends, including the person with whom **you** are travelling or have arranged to travel, a person with whom **you** have arranged to reside temporarily, or a **close relative**, friend or **close business associate**, if, at the time **your** policy started or at the time of booking a **trip**, whichever was the later, any such person:
  - was receiving treatment at hospital (other than where they go to hospital for check-ups for a stable condition, at regular intervals which have been arranged beforehand); or
  - was waiting for a hospital consultation, investigations or treatment (other than where they go to hospital for check-ups for a stable condition, at regular intervals which have been arranged beforehand); or
  - had been given a terminal prognosis, or been told that their condition is likely to get worse in the next 12 months;
- any claim if **you** have travelled against the advice of a **doctor** or where a **doctor** would have advised against **you** travelling had **you** sought their advice before beginning the **trip**;
- any claim where **you** did not obtain the recommended vaccines, inoculations or medications prior to the **trip**;
- any claim relating to pregnancy or childbirth if **you** are 29 weeks or more pregnant unless one of the following medical complications of pregnancy arise:

Toxaemia, gestational hypertension, ectopic pregnancy, post-partum haemorrhage, pre-eclampsia, molar pregnancy or hydatidiform mole, retained placenta membrane, placental abruption, hyperemesis gravidarum, placenta praevia, stillbirth, miscarriage, emergency caesarean, a termination needed for medical reasons, or premature birth more than 12 weeks (or 16 weeks if **you** know **you** are having more than one baby) before the expected delivery date.
- any claim where **you** or a **travelling companion** are the defendant in a court of law.

#### **Coronavirus Cover**

If at any time during **your trip**, **you** become **ill** following a positive diagnosis of **Coronavirus** and **you** are forced to **curtail your trip** before completion, the insurance provides cover for any **unrecoverable costs**, any other pre-paid charges which **you** have paid or are contracted to pay, and any additional travel expenses incurred.

There is no cover under this insurance for any **unrecoverable costs**, any other pre-paid charges which **you** have paid or are contracted to pay, and any additional travel expenses incurred, if **you** are unable to provide evidence from a **doctor** confirming that **you** have contracted **Coronavirus**.

#### **Special Conditions Relating to Claims**

1. **You** must inform **your** tour operator, travel agent, transport or accommodation provider as soon as possible of **your** necessity to **curtail your trip** and request a cancellation invoice confirming the number of nights missed.
2. **You** must request a **curtailment** claim form and ensure that the medical certificate is completed by the **doctor** of the person whose injury, **illness** or death has caused the **curtailment**.

## Section E - Personal Possessions

### For each insured person we will pay up to:

#### A. a total of:

**£1,500** Silver cover or **£2,500** Gold cover for **your personal possessions**,  
and

**£1,000** Silver cover or **£2,000** Gold cover for **your medical aids**, to cover:

- either i) the cost of repair of items that are damaged whilst on **your trip**, up to the market value of the item, allowing for age, wear and tear;
- or ii) the market value of the item, allowing for age, wear and tear, for any items that are stolen, permanently lost or destroyed whilst on **your trip**.

**We will not pay more than:**

**£300** Silver cover or **£500** Gold cover for any one article, **pair or set** of any kind, whether they are solely or jointly owned;

**£500** Silver cover or **£750** Gold cover in total for **valuables** whether solely or jointly owned;

**£250** in respect of sunglasses;

**£250** for items lost or stolen from a beach or lido.

#### B. a total of **£250** to cover the purchase of replacement clothing, toiletries, prescribed medication and **medical aids** if **your personal possessions, medical aids** or prescribed medication are delayed due to being misplaced, lost or stolen on **your** outward journey from **your home country** for over 12 hours from the time **you** arrived at **your trip** destination. **You** must keep all receipts for these items and send them in to **us** with **your** claim and any amount paid will be deducted from the final claim settlement if the items are permanently lost.

#### C. a total of:

**£250** Silver cover

**£500** Gold cover

for the accidental loss of, theft of or damage to **your** prescribed medications.

**The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.**

### We will not pay:

- the **excess** shown in the Table of Benefits on page 3. There is no **excess** for the purchase of replacement clothing, toiletries, prescribed medication and **medical aids** if **your personal possessions, medical aids** or prescribed medication are delayed.  
Please Note: if a claim is also being made under Section F - Personal Money, Passport & Travel Documents, only one **excess** per **insured person**, per incident, will be deducted.
- any claim for **ski equipment**;
- any claim directly or indirectly resulting from the use of, or damage to, **drones**;
- any claim for theft where **you** have not notified the police and obtained a written report;
- any claim for loss related to **public transport** where **you** have not notified the **public transport** provider and obtained a written report;
- any claim where **you** are unable to provide the damaged items on request or to prove the existence or prove the ownership/purchase of any item;
- for any claim due to delay, confiscation or detention by customs or other officials or authorities;
- any claim for property that does not belong to **you** or any **close relative**;
- for any breakage or damage to china, glass or other fragile articles, paintings, works of art, sculptures, audio, video, computer or television equipment, musical instruments or household goods unless the breakage or damage is caused by fire, theft or in an accident to the motor vehicle in which they are being carried;
- for the cost of replacing or repairing dentures;
- for the loss or theft of, or damage to:
  - films, tapes, cassettes, cartridges or discs other than their value as unused material unless purchased pre-recorded when **we** will pay up to the maker's latest list price;
  - SIM cards, mobile telephone prepayment cards, mobile telephone accessories, car keys or duty free items;
  - tobacco and alcohol products;
  - perishable goods, bottles, cartons and any damage caused by them or their contents;
  - pedal cycles, prams, pushchairs or baby buggies except while they are being carried as luggage on **public transport**;
  - **valuables** carried in any suitcases, trunks or similar containers when left **unattended**;
  - **valuables** left **unattended** except where they are locked in a safe or safety deposit box where these are available or left out of sight in **your** locked **trip** accommodation;
  - contact or corneal lenses or artificial limbs;

- any claim for money, bonds, coupons, stamps, negotiable instruments, securities or documents of any kind;
- any claim for **personal possessions** or **medical aids** left **unattended** except where left in the locked boot or covered luggage area of a motor vehicle where entry was gained by violent and forcible means.

### Special Conditions Relating to Claims

1. If **your personal possessions** or **medical aids** are lost or damaged whilst being transported, **you** must retain **your** tickets and luggage tags and report the loss or damage to **your** transport provider or their handling agents and obtain a Property Irregularity Report (PIR) form or its equivalent within 24 hours.
2. For all damage claims **you** should retain the items in case **we** wish to see them. **You** will need to obtain an estimate for repairs or a letter confirming that the damage is irreparable.
3. In all instances where **your personal possessions** are lost or stolen, **you** must report to the police as soon as possible, and within 24 hours of discovery, and obtain a written report and reference number from them. **You** must also report the loss or theft to **your** tour operator's representative or hotel/apartment manager wherever appropriate.

## Section F - Personal Money, Passport & Travel Documents

### For each insured person we will pay:

- a) for the loss or theft of **your personal money**, passport or **travel documents** during **your trip**, up to a total of:

**£500** (limited to **£200** in cash) Silver cover

**£1,000** (limited to **£500** in cash) Gold cover

**Please Note:** We also provide cover for **personal money** only for up to 72 hours before **your trip** commences.

- b) up to a total of **£200** Silver cover or **£400** Gold cover for additional travel and accommodation expenses to obtain a replacement passport whilst on **your trip**, if **your** passport is lost or stolen during **your trip**.

### The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.

#### We will not pay:

- the **excess** shown in the Table of Benefits on page 3. There is no **excess** for claims for additional travel and accommodation expenses to obtain a replacement passport if passport is lost or stolen during **your trip**.

Please Note: if a claim is also being made under Section E - Personal Possessions, only one **excess** per **insured person**, per incident, will be deducted.

- for any depreciation in value, currency changes or shortage caused by any error or omission;
- any claim for loss or theft of travellers' cheques where the provider provides a replacement service;
- any claim for **personal money**, passports or **travel documents** left **unattended** except where left:
  - in a safety deposit box (if one is available); or
  - in **your** locked **trip** accommodation; or
  - in a locked boot or covered luggage area of a motor vehicle where entry was gained by violent and forcible means;
- any claim for theft where **you** have not notified the police and obtained a written report;
- any claim for loss related to **public transport** where **you** have not notified the **public transport** provider and obtained a written report;
- for any claim due to delay, confiscation or detention by customs or other officials or authorities;
- any costs which are due to any errors or omissions on **your** passport or **travel documents**;
- any expenses for a missed flight or alternative transport to return **home** due to the loss or theft of **your** passport or **travel documents**.

### Special Conditions Relating to Claims

1. In all instances where **your personal money**, passport or **travel documents** are lost or stolen, **you** must report to the police as soon as possible, and within 24 hours of discovery, and obtain a written report and reference number from them. **You** must also report the loss or theft to **your** tour operator's representative or hotel/apartment manager wherever appropriate.
2. For a lost or stolen passport or **travel documents** **you** will need to get a letter from the consulate, airline or travel provider where **you** obtained a replacement and keep all the receipts for **your** travel and accommodation expenses.

## Section G - Personal Accident

Definition of words applicable to this section only.

**Please Note:** **You** must refer to the 'Definition of Words' section at the end of this Policy Document which will also apply.

**Loss of limb** - means:

- In the case of a lower limb, loss by physical severance at or above the ankle, or
- Permanent and total loss of and/or total and irrecoverable loss of use of an entire leg or foot which lasts twelve (12) calendar months and at the expiry of that period being beyond hope of improvement, or
- In the case of an upper limb, loss by physical severance of the entire four fingers through or above the meta carpo phalangeal joints or permanent and total loss of and/or total and irrecoverable loss of use of an entire arm or hand which lasts twelve (12) calendar months and at the expiry of that period being beyond hope of improvement.

**Loss of sight** - means:

- Permanent and total loss of sight in both eyes where **your** name has been added to the Register of Blind Persons on the authority of a qualified ophthalmic specialist; or
- Permanent and total loss of sight if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale (only being able to see at three feet what **you** should see at sixty feet), which lasts twelve (12) calendar months and at the expiry of that period being beyond hope of improvement.

**Permanent total disablement** - means:

Irrecoverable disablement arising from accidental bodily injury, which permanently and totally incapacitates **you** for a continuous period of twelve (12) months from carrying out at least two (2) of the following activities of daily living:

- Eating - the ability to move food and drink successfully to one's mouth
- Dressing - the ability to select appropriate clothing and put it on
- Bathing - the ability to maintain good personal hygiene practices, including nail care, hair care, and oral hygiene
- Toileting - the ability to use the toilet and cleanse oneself
- Continence - the ability to control bladder and bowel function
- Ambulating - the ability to walk and transfer to and from a bed or chair.

**For each insured person we will pay:**

The benefit stated below if **you** suffer accidental bodily injury whilst on **your trip** that independently of any other cause results in **your death, loss of limb/loss of sight or permanent total disablement**.

**Please Note:** In relation to any one accident, you can only claim for one of the benefits A, B or C under this section, regardless of the number of injuries sustained. However, in the event of a claim for death, you can also claim the burial or cremation benefit D.

	<b>Benefit</b>		
	17 years & under	18 to 69 years	70 years & over
<b>A. Death</b>			
Silver cover	<b>£3,500</b>	<b>£7,500</b>	<b>£5,000</b>
Gold cover	<b>£3,500</b>	<b>£15,000</b>	<b>£5,000</b>
<b>B. Loss of limb/Loss of sight</b>			
Silver cover	<b>£7,500</b>	<b>£7,500</b>	<b>£5,000</b>
Gold cover	<b>£15,000</b>	<b>£15,000</b>	<b>£5,000</b>
<b>C. Permanent total disablement</b>			
Silver cover	<b>£7,500</b>	<b>£7,500</b>	<b>Nil</b>
Gold cover	<b>£15,000</b>	<b>£15,000</b>	<b>Nil</b>

- Up to **£5,000** for burial or cremation costs either in the **United Kingdom**, the Channel Islands or the Isle of Man or in the locality where the death occurred whilst on a **trip**.

**Please Note:** The General Exclusions on pages 11 to 12 apply to this section of cover.



## Section H - Personal Liability

**Please Note: It is a condition of any claim under this Section H that you must make no admission, offer, promise, payment, or undertaking of payment without our claims handler's prior written consent. You must tell our claims handler if you are aware of any writ, summons or impending prosecution.**

**For each insured person we will provide cover up to:**

**£2,000,000** in total (inclusive of legal costs) for any compensation or costs that **you** are legally liable to pay due to any event occurring during the **period of insurance** that relates to an incident caused by **you** and that results in:

- a) accidental bodily injury of any person;
- b) loss of, or damage to, any item that does not belong to **you** or a **close relative** and is neither in **your** charge or control nor under the charge or control of a **close relative**;
- c) damage to a property or **your trip** accommodation that does not belong to **you** or a **close relative**;

**The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.**

**We will not provide cover:**

- for the **excess** shown in the Table of Benefits on page 3 in respect of claims for damage to a property or **your trip** accommodation that does not belong to **you** or a **close relative**;
- for any liability for loss of or damage to any item, a property or accidental bodily injury:
  - a) that is suffered by anyone who is under a contract of service with **you**, acting as a **carer** (whether paid or not), or a **close relative** or **travelling companion** and is caused by the work **you** or a **close relative** or **travelling companion** employ them to do;
  - b) which results from any deliberate omission by **you**;
  - c) which results from the carrying on of any trade, profession or business;
  - d) which is caused by any horse, or by a dog which is defined under the Dangerous Dogs Act 1991 (and its subsequent amendments) that **you** own, look after or control;
- for any liability that falls on **you** by agreement and would not have done if such agreement did not exist;
- for any liability for injury, **illness** or disease suffered by **you** or a **close relative**;
- for compensation or any other costs caused by accidents involving **your** ownership, possession or control of any:
  - a) land or building or their use either by or on **your** behalf, other than **your** temporary **trip** accommodation;
  - b) motorised or mechanically propelled vehicles and any trailers attached to them;
  - c) **drone(s)**;
  - d) aircraft, motorised skis, motorised waterborne craft or sailing vessel;
  - e) firearms or incendiary devices.

### Special Conditions Relating to Claims

1. **You** must give **us** written notice of any incident which may result in a claim as soon as possible.
2. **You** must send **us** every writ, summons, letter of claim or other document as soon as **you** receive it.
3. **You** must not admit any liability or pay, offer to pay, promise to pay or negotiate any claim without **our** permission in writing.
4. **We** will be entitled to take over and carry out in **your** name the defence of any claims for compensation or damages or otherwise involving any third party. **We** will have full discretion in the conduct of any negotiation or proceedings or in the settlement of any claim and **you** must give **us** all information and assistance which **we** may require.
5. If **you** die, **your** legal representative(s) will have the protection of this cover as long as they comply with the terms and conditions outlined in this policy.

## Section I - Extended Journey Disruption

### Applicable to Gold cover only

**If any of the following happen:**

1. an airport, port or airspace **you** are travelling from or through is closed for more than 24 hours from the date and time of **your** scheduled departure as shown on **your** ticket/itinerary, causing **your** departure to be delayed or cancelled, and no other suitable alternative flight or means of transport can be provided within 24 hours after the initial 24 hours of delay; or
2. **your** flight is diverted or re-directed after takeoff; or
3. **you** are denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight can be provided within 12 hours; or
4. **you** have to move to other accommodation on arrival or at any other time during the **trip** because **you** cannot use **your** booked accommodation due to a **natural disaster**, landslide or an outbreak of food poisoning;



**For each insured person we will pay:**

- a) **£50** for each 12 hour delay up to a maximum of **£250** for delayed departure provided **you** eventually travel; or
- b) up to **£3,000** in respect of unused travel and accommodation costs (including excursions up to **£250**) which **you** have paid or are contracted to pay and which **you** cannot recover from any other source;
- c) up to **£1,000** for additional accommodation (room only) and transport costs incurred up to the standard of **your** original booking which **you** cannot recover from any other source;
- d) up to **£200** for additional kennel, cattery or professional pet sitter fees which **you** are contracted to pay and which **you** cannot recover from any other source.

**The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.****We will not pay:**

- any claim for **trips** where **you** do not have a return date scheduled at the time the airspace, airport or port is closed;
- any amounts recoverable or refundable from any source;
- any claim for administration costs charged by **your** travel and/or accommodation provider to obtain a refund;
- the cost of Air Passenger Duty (APD) whether irrecoverable or not;
- any claim due to circumstances known to **you** before **you** purchased this insurance or at the time of booking any **trip** which could reasonably have been expected to lead to a claim under this section;
- any claim due to **your** disinclination to travel, for whatever reason;
- for the cost of travel tickets paid for using any reward scheme or reward points, unless evidence of specific monetary value can be provided;
- accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme. However, **we** will pay any property maintenance costs, service charges, or user fees relating to a specific booking under any such arrangement, plan or scheme;
- any unused travel costs arising from the insolvency of **your** transport provider;
- any costs if **your trip** was booked as part of a package holiday (as more fully described under The Package Travel Regulations).  
This exclusion will not apply to claims under sub-sections a) and d) under "**For each insured person we will pay**" above.
- any claim due to an aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any equivalent body in a country to/from which **you** are travelling;
- any claim for denied boarding due to **your** drug use, alcohol or solvent abuse or **your** inability to provide a valid passport, visa or other documentation required by the **public transport** operator or their handling agents;
- any claim relating to airspace closure which has been caused and implemented because of a breakdown in legal agreements between the **United Kingdom**, the Channel Islands or the Isle of Man and another country.

**Special Conditions Relating to Claims**

1. **You** must inform **your** tour operator, travel agent, transport or accommodation provider as soon as possible if **your trip** has been cancelled and request a cancellation invoice.
2. **You** must check in according to the itinerary supplied to **you** unless **your** tour operator has requested **you** not to travel to the departure point.

**Section J - Delayed Departure / Trip Abandonment**

**Please Note: Cover is only provided under this section in relation to trips outside your home country.**

**You must obtain written confirmation from your transport provider or their handling agents that shows the scheduled departure time, the actual departure time and reason for the delay of your international flight, international train or sailing.**

**For each insured person we will pay:**

1. **£50** for each complete 12 hour period of delay up to a maximum of **£200** Silver cover  
**£60** for each complete 12 hour period of delay up to a maximum of **£240** Gold cover  
if the departure of **your** international flight, international train or sailing, on **your** outward or return journey, is delayed for at least 12 hours from its scheduled departure time from **your international departure point**;

or

2. up to **£2,500** Silver cover

up to **£5,000** Gold cover

for unrecoverable travel and accommodation expenses and other pre-paid charges **you** have paid or are contracted to pay if **your** outward journey is delayed for more than 12 hours at the airport, rail terminal or port and **you** decide to abandon the **trip**.

**The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.**

**We will not pay:**

- the **excess** shown in the Table of Benefits on page 3. This only applies to claims where **you** decide to abandon **your trip**;
- any claim arising directly or indirectly from strike or industrial action or air traffic control delay existing or being publicly announced before **you** purchased this insurance or at the time of booking any **trip**;
- any claim arising directly or indirectly from the withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Civil Aviation Authority, Port Authority or any similar body in any country.
- any claim unless **you** have obtained written confirmation from **your** airline, railway company, shipping line or their handling agents that shows the reason for the delay, the scheduled departure time and the actual departure time of **your** flight, international train or sailing.

### **Section K - Missed Departure / Missed Connection**

**For each insured person we will pay up to:**

**£500** Silver cover

**£1,000** Gold cover

for additional transport and accommodation (room only) costs, of a similar standard to those originally booked and paid for, to get **you** to **your** overseas destination or to reach **your home**, if:

- a) the vehicle in which **you** are travelling to **your international departure point** becomes undriveable due to mechanical failure or being involved in an accident, or
- b) **your public transport** is delayed, preventing **you** from getting to **your international departure point** in time to check in, or
- c) there is a delay involving the vehicle in which **you** are travelling because of unexpected and unforeseen heavy traffic or road closures, or
- d) **your** outward or inward flight is delayed and **you** miss **your** connecting flight outside the **United Kingdom**, the Channel Islands, the Isle of Man or country in which **your** Ministry of Defence base/location is located.

**We will pay for you missing your connecting flight provided:**

- **you** have allowed sufficient time within **your** itinerary to enable **you** to make **your** connections given the normal operation of **your** outbound flight from **your international departure point**.
- **your** connecting flight was not scheduled to depart more than 10 hours after **your** original flight was due to arrive.

**The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.**

**We will not pay:**

- claims arising directly or indirectly from an accident or mechanical failure of the vehicle in which **you** are travelling when a police or repairer's report or other evidence is not provided;
- claims arising from delays in **public transport** scheduled services unless **you** have obtained confirmation from the **public transport** authority of the cause and length of the delay.

### **Special Conditions Relating to Claims**

1. For claims for missed connections **you** must obtain written confirmation from **your** airline or their handling agents that shows the scheduled departure time, the actual departure time and reason for the delay of **your** flight from **your international departure point**.

## Section L - Travel Risks

### For each insured person we will pay:

1. **£100** per 24 hours up to **£2,500**, if **you** are a victim of either hijack or kidnap for longer than 24 hours.
2. **£250** if **you** are hospitalised and **you** receive inpatient hospital treatment which is covered under Section B1 - Emergency Medical & Associated Expenses, following a mugging attack.
3. up to **£750** for additional costs of travel and accommodation (to the same standard as those on **your** booking) which **you** incur to enable **you** to continue **your trip** if **your** pre-booked accommodation has been damaged as a result of a **natural disaster**.

**Please Note:** The General Exclusions on pages 11 to 12 apply to this section of cover.

## Section M - Legal Advice & Expenses

**Please Note:** If **you** are awarded compensation and receive payment then all sums paid out by **us** shall be repaid to **us** out of that compensation.

### For each insured person we will pay up to:

**£30,000** (**£60,000** maximum in total for all **insured persons** in respect of any one claim) Silver cover

**£50,000** (**£100,000** maximum in total for all **insured persons** in respect of any one claim) Gold cover

for legal costs and expenses incurred in pursuing claims for compensation and damages if someone causes **your** accidental death or personal injury whilst on a **trip**, provided **we** always have complete control over the legal proceedings and the selection, appointment and control of lawyers and where a claim occurs **you** will supply any reports or information and proof to **us** and the **claims handler** as may be required.

**The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.**

### We will not pay:

- any costs to pursue a claim against a carrier, travel agent, tour operator, tour organiser, **us** (the insurer) or anyone acting on **our** behalf;
- any claims for legal proceedings through the contingency fee system in the USA or Canada;
- for any legal action where the estimated amount that will be recovered is less than **£500**;
- any claim where, in **our** opinion, there are no reasonable prospects of success in obtaining compensation;
- any costs that can be considered under an arbitration scheme or a complaints procedure;
- any legal expenses incurred without **our** prior authorisation or that of the **claims handler**;
- any claim made by one **insured person** against another **insured person** who is a **close relative**, a **business associate**, friend or **travelling companion**, whether insured by **us** or another provider;
- any claim for damage to a mechanically propelled vehicle;
- legal expenses to bring proceedings in more than one country in respect of the same event.

## Section N - Travel Dispute

### Please Note:

- Gold policy cover is automatically included.
- Silver policy cover is optional and will only be in force if shown on **your** Policy Schedule and the appropriate additional premium has been paid.

### Definition of words applicable to this section of cover only

The words or expressions detailed below have the following meaning wherever they appear, the definitions will start with a capital letter.

**Note:** **you** must refer to the 'Definition of Words' section of this policy which will also apply, policy definitions are shown in **bold**.

**Agent** - the Agent appointed by the coverholder to transact this insurance with **you**.

**Authorised Professional** - a solicitor, counsel, claims handler or mediator, accountant, firm of accountants or other appropriately qualified person appointed and approved by **us** under the terms and conditions of this policy to represent **your** or an **insured person's** interests.

**Claims Specialist** - **our** own claims panel solicitor or claims handler.

**Court** - a Court, tribunal or other competent authority.

**Event** - the initial Event, act or omission which sets off a natural and continuous sequence of Events that subsequently gives rise to a claim for Professional Fees and/or payment of a benefit under this policy.

**Legal Proceedings** - when formal Legal Proceedings are issued against an opponent in a Court of Law.

**Policy Schedule** - the document that shows details of **you** and the insurance and is attached to and forms part of this policy.

**Professional Fees** - Legal Fees and costs properly incurred by the Authorised Professional, with **our** prior written authority including costs incurred by another party for which **you** are made liable by Court Order, or may pay with our consent in pursuit of a civil claim in the geographical limits arising from an insured incident. In the event that the matter falls within the limits of a Small Claims Court, the maximum amount payable to the Authorised Professional shall be limited to the maximum amount recoverable from that respective Court.

**Prospects of Success** - at least a 51% chance of the insured-person(s) achieving a favourable outcome.

**Standard Professional Fees** - the level of Professional Fees that would normally be incurred by **us** in either handling this matter using **our** own Claims Specialist or a nominated Authorised Professional of **our** choice.

**Territorial Limits** - Worldwide but only where Legal Proceedings can be brought in a **UK** or European Union (EU) country's Court jurisdiction.

**Time of Occurrence** - when the Event occurred or commenced whichever is the earlier.

#### **Cover:**

**You** have paid the premium and supplied to **us** a proposal and declaration or other information which shall be the basis of this contract and be incorporated in this policy. Upon payment of the policy **excess** if applicable **we** will indemnify **you** in accordance with **our** Standard Professional Fees and where requested by **you** any other **insured person** up to the limit of indemnity subject to the terms, conditions and exclusions of this policy, against Professional Fees arising from an insured Event within the Territorial Limits where **you** notify **us** within thirty (30) days of returning from the **trip** which is subject to the dispute and which may give rise to any claim under this policy.

#### **For each insured-person this insurance will pay:**

up to **£25,000** for the cost of pursuing a breach of contract claim arising from a contract (which must be evidenced and recorded in writing) entered into by or on **your** behalf for the purposes of undertaking a **trip** in order to seek compensation and or implementation of the contract from the following:

- a) **your** Tour Operator or Holiday Company;
- b) **your** Travel Agent;
- c) a Car Hire Company with whom **you** have pre-booked a vehicle;
- d) an Airline, Ferry, Train, Cruise Liner or Coach Operator;
- e) a Hotelier or Property Owner.

Subject to the cause of action arising within the Territorial Limits.

#### **For each insured-person this insurance will not cover:**

1. any matter where the value of the goods or services in dispute or the total instalments due at the time of making the claim is less than £150;
2. an Event not reported to **us** within 30 days of returning from the **trip** subject to the dispute;
3. Professional Fees and expenses which a Court of Criminal Jurisdiction orders to be paid;
4. actions pursued in order to obtain satisfaction of a judgement or legally binding decision;
5. the **insured-person's** travelling expenses, subsistence allowances or compensation for absence from work;
6. any claim where the Event arises from incidents which have occurred or services and the like which have been provided prior to the first inception date of this insurance.

#### **General Exclusions applying to this section**

This insurance does not cover:

1. Professional Fees incurred:
  - a) in respect of any Event where the Time of Occurrence commenced prior to the commencement of the insurance;
  - b) where the **insured person** should have realised when purchasing this insurance that a claim under this insurance might occur;
  - c) before **our** written acceptance of a claim;
  - d) before **our** approval or beyond those for which **we** have given **our** approval;
  - e) where **you** fail to give proper instructions in due time to **us** or to the Authorised Professional;
  - f) where **you** are responsible for anything which in **our** opinion prejudices **your** case;
  - g) if **you** withdraw instructions from the Authorised Professional, fail to respond to the Authorised Professional, withdraw from the Legal Proceedings or the Authorised Professional refuses to continue to act for **you**;
  - h) where **you** decide that **you** no longer wish to pursue **your** claim as a result of disinclination. All costs incurred up until this stage will become **your** responsibility;
  - i) in respect of the amount in excess of **our** Standard Professional Fees where **you** have elected to use an Authorised Professional of **your** own choice;
2. the pursuit, continued pursuit or defence of any claim if **we** consider it is unlikely a sensible settlement will be obtained or where the likely settlement amount is disproportionate compared with the time and expense incurred;
3. claims which are conducted by **you** in a manner different from the advice or proper instructions of **us** or the Authorised Professional;

4. appeals unless **you** notify **us** in writing of **your** wish to appeal at least six working days before the deadline for giving notice of appeal expires and **we** consider the appeal to have reasonable Prospects of Success;
5. any Professional Fees and expenses that could have been recovered under any other insurance except beyond the amount which would be payable under such insurance had this policy not been effected;
6. damages, fines or other penalties **you** are ordered to pay by a Court, tribunal or arbitrator;
7. claims arising from an Event arising from **your** deliberate act, omission or misrepresentation;
8. any Professional Fees relating to **your** alleged dishonesty or deliberate and wilful criminal acts or omissions;
9. a dispute which relates to any compensation or amount payable under a contract of insurance;
10. a dispute with **us** not dealt with under the 'Arbitration' condition;
11. an application for judicial review;
12. any Professional Fees incurred in defending or pursuing new areas of law or test cases;
13. any claim involving medical or clinical negligence or pharmaceutical or any related claims (including but not limited to tobacco products);
14. any claim arising from a stress or psychological related condition;
15. any matter arising from or relating to any business or trading activity or venture for gain undertaken by an **insured person** including but not limited to any personal guarantee and investment in unlisted companies;
16. Legal Proceedings outside the European Union (EU) and proceedings in constitutional international or supranational Courts or tribunals including the European Court of Justice and the Commission and Court of Human Rights;
17. Legal Proceedings between an **insured person** and a central or local government authority;
18. disputes between an **insured person** and their family or a matrimonial or cohabitation dispute;
19. any claims made or considered against **us**, the Agent or Authorised Professional used to handle any claim;
20. any claims relating to cosmetic treatment, surgery or tanning;
21. Professional Fees incurred that exceed the maximum amount recoverable from that respective Court in relation to matters that fall within Small Claims Court limits;
22. any direct or indirect liability, loss or damage caused:
  - a) to equipment because it fails correctly to recognise data representing a date in a way that it does not work properly or at all; or
  - b) by computer viruses;

This does not apply to Legal Proceedings connected with claiming compensation following **your** death or bodily injury.
23. any claim or expense of any kind caused directly or indirectly by:
  - a) ionising radiation or radioactive contamination from any nuclear fuel or waste which results from the burning of nuclear fuel; or
  - b) the radioactive, toxic, explosive or other dangerous properties of nuclear machinery or any part of it;
24. any loss or damage caused by any sort of war, invasion or revolution
25. any loss or damage caused by pressure waves caused by aircraft or other flying objects moving at or above the speed of sound;
26. any loss, damage, liability, cost or expense of any kind directly or indirectly caused by, resulting from or in connection with any act of terrorism. For the purpose of this exclusion, "terrorism" means the use, or threat of use, of biological, chemical and/or nuclear force or contamination by any person(s), whether acting alone or on behalf of or in connection with any organisation(s) or government(s) committed for political, religious, ideological or similar purposes including the intention to influence any government(s) or put any section of the public in fear.

### General Conditions applying to this section

Note: please also refer to the 'General Conditions' which apply to the whole of **your** insurance on page 12.

### Consumer Insurance Act

**You** are required by the provisions of the Consumer Insurance (Disclosure and Representations) Act to take care to:

- a) supply accurate and complete answers to all the questions **we** or the administrator may ask as part of **your** application for cover under the policy;
- b) to make sure that all information supplied as part of **your** application for cover is true and correct;
- c) tell **us** of any changes to the answers **you** have given as soon as possible.

Failure to provide answers in-line with the requirement of the Act may mean that **your** policy is invalid and that it does not operate in the event of a claim.

### Observance

**Our** liability to make any payment under this policy will be conditional on **you** complying with the terms and conditions of this insurance.

### Claims

**You** must tell **us** in writing within 30 days of returning from the respective **trip** about any matter, which could result in a claim being made under this policy, and must obtain in writing **our** consent to incur Professional Fees.

**We** will give such consent if **you** can satisfy **us** that there are reasonable Prospects of Success in pursuing or defending **your** claim and that it is necessary for Professional Fees to be paid and **you** have paid the **excess**.

**We** may require (at **our** discretion) **you** at **your** expense to obtain the opinion of an expert or counsel on the merits of a claim or continued merits of a claim or Legal Proceedings. If **we** subsequently agree to accept or continue with the claim, the costs of such opinion will be covered.



If after receiving a claim or during the course of a claim **we** decide that:

1. **Your** Prospects of Success are insufficient;
2. It would be better for **you** to take a different course of action;
3. **We** cannot agree to the claim.

**We** will write to **you** giving **our** reasons and **we** will not then be bound to pay any further Professional Fees for this claim.

**We** may limit any Professional Fees that **we** will pay under the policy in the pursuit continued pursuit or defence of any claim:

1. If **we** consider it is unlikely a sensible settlement will be obtained; or
2. Where the likely settlement amount is disproportionate to the time and expense necessary to achieve a settlement; or
3. **We** consider that it is unlikely that **you** will recover the sums due and or awarded to **you**.

Alternatively where it may cost **us** more to handle a claim than the amount in dispute **we** may at **our** option pay to **you** the amount in dispute which shall be deemed to represent full and final settlement under this policy providing that all the terms and conditions of this policy have been complied with.

In the event that **you** make a claim under this policy which **you** subsequently discontinue due to **your** own disinclination to proceed, any legal costs incurred to date will become **your** own responsibility and will be required to be repaid to the **Insurer**.

### **Claims notification & advice helpline service**

All potential claims must be reported initially to the 'Travel Dispute Claims Notification & Advice Helpline Service' for advice and support. Telephone: **01384 377 000**. **We** will not accept responsibility if the Helpline Services fail for reasons beyond **our** control.

Note: please also refer to the section 'Making a Claim' within this policy.

### **Representation**

**We** will take over and conduct in **your** name the prosecution, pursuit, defence or settlement of any claim. The Authorised Professional nominated and appointed by **us** will act on **your** behalf and **you** must accept **our** nomination.

If Legal Proceedings have been agreed by **us**, **you** may nominate **your** own Authorised Professional whose name and address **you** must submit to **us**. In selecting **your** Authorised Professional **you** shall have regard to the common law duty to minimise the cost for **your** claim. Any dispute arising from this shall be referred to Arbitration in accordance with the policy conditions.

Where **you** have elected to use **your** own nominated Authorised Professional **you** will be responsible for any Professional Fees in excess of **our** Standard Professional Fees.

### **Conduct of claim**

1. **You** shall at all times co-operate with **us** and give to **us** and the Authorised Professional evidence, documents and information of all material developments and shall attend upon the Authorised Professional when so requested at **your** own expense.
2. **We** shall have direct access at all times to and shall be entitled to obtain from the Authorised Professional any information, form, report, copy of documents, advice computation, account or correspondence relating to the matter whether or not privileged, and **you** shall give any instructions to the Authorised Professional which may be required for this purpose. **You** or **your** Authorised Professional shall notify **us** immediately in writing of any offer or payment into Court made with a view to settlement and **you** must secure **our** written agreement before accepting or declining any such offer.
3. **We** will not be bound by any promise or undertaking given by **you** to the Authorised Professional or by either of **you** to any Court, witness, expert or Agent or other person without **our** agreement.

### **Recovery of costs**

**You** should take all steps to recover costs charges, fees or expenses. If another person is ordered, or agrees, to pay **you** all or any costs charges, fees, expenses or compensation **you** will do everything possible (subject to **our** directions) to recover the money and hold it on **our** behalf. If payment is made by instalments these will be paid to **us** until **we** have recovered the total amount that the other person was ordered, or agreed to pay by way of costs, charges or fees.

### **Fraud**

**We** have the right to refuse to pay a claim or to void this insurance in its entirety if **you** make a claim which is in any respect false or fraudulent.

### **Due care**

**You** must take due care to prevent incidents that may give rise to a claim and to minimise the amount payable by **us**.

### **Acts of Parliament**

Any reference to Act of Parliament within this policy shall include an amending or replacing Act and shall also include where applicable equivalent legislation in Scotland, Northern Ireland, the Channel Islands, the Isle of Man and under European Law where applied in the **United Kingdom**.

### **Arbitration**

Any dispute between **you** and **us**, which is not solved by the policy, will be governed by the laws of England and Wales and shall be referred to a single arbitrator who shall either be a solicitor or barrister on whom **we** both agree. If **we** cannot agree, one will be nominated by the Law Society. Where appropriate the dispute will be resolved on the basis of written submissions. The costs of resolving the dispute will be met in full by the party against whom the decision is made. If the decision is not clearly made against either party, the arbitrator shall have the power to apportion costs.

## Contracts (Rights of Third Parties) Act 1999

Unless expressly stated nothing in this insurance contract will create rights pursuant to the Contracts (Rights of Third Parties) Act 1999 in favour of anyone other than the parties to the insurance contract.

### Notices

Any letter or notice concerning this insurance will be properly issued if it is sent to the last known address of the person intended to receive it.

### Law

This policy shall be governed by and construed in accordance with the Law of England and Wales unless the policyholder's habitual residence (in the case of an individual) or central administration and/or place of establishment is located in Scotland in which case the law of Scotland shall apply. In the event of the place of establishment being situated in the Channel Islands the relevant law governing the Channel Islands shall apply.

## Section O - Winter Sports

### Please Note:

- Cover under this section of the insurance is only provided if shown on **your** Policy Schedule and the appropriate additional premium has been paid.
- Please refer to "Definition of Words" section, page 39 for the list of **winter sports** activities which are covered and to exclusion 2) in the General Exclusions on page 11 for activities which are not covered.
- **Winter sports** cover is only available if an **insured person** is aged 69 years or under on the date **you** purchase **your** policy.
- When purchasing Annual Multi-trip cover **winter sports** cover is limited to a maximum total of 17 days in the **period of insurance**.
- There is no cover for lost or damaged **ski equipment** over 5 years old.

### For each insured person we will pay:

#### 1. Ski Equipment

for loss of or damage to **your own ski equipment**, up to:

**£500** Silver cover

**£750** Gold cover

if taken with **you** or purchased on **your trip** but subject to the limits as set out below in respect of a single article, **pair or set**, or loss of hired **ski equipment** which is **your** responsibility.

- Single article, **pair or set** limit:

**£300** Silver cover

**£500** Gold cover

- Hired **ski equipment** lost/damaged:

**£150** Silver cover

**£250** Gold cover

#### 2. Delayed Ski Equipment

up to:

**£200** Silver cover

**£300** Gold cover

for the cost of hiring replacement **ski equipment** if **your own ski equipment** is delayed due to being misplaced, lost or stolen on **your** outward journey for over 12 hours from the time **you** arrived at **your trip** destination.

#### 3. Loss of ski pack

up to:

**£300** Silver cover

**£500** Gold cover

for a proportional refund following the loss of use of **your ski pack** following **your** injury or **illness** during **your trip** (as confirmed by **your** treating **doctor**). Reimbursement will be based on the number of days **you** are incapacitated.

#### 4. Avalanche / Weather Delay

up to:

**£200** Silver cover

**£500** Gold cover

for additional transport and/or accommodation if, because of an avalanche or severe weather conditions, **you** are unable to reach or leave **your** pre-booked resort for 12 hours or more.



## 5. Piste Closure

up to:

**£30** for each full 24 hours up to **£300** Silver cover

**£50** for each full 24 hours up to **£500** Gold cover

if during the recognised ski season **you** are unable to ski due to the lack of snow which results in the total closure of skiing facilities in the resort.

**The following exclusions apply to this section of cover in addition to the General Exclusions on pages 11 to 12.**

### **We will not pay:**

- the **excess** shown in the Table of Benefits on page 3. This only applies to claims relating to the loss of or damage to **your own ski equipment**;
- in relation to claims for loss of or damage to **ski equipment**, more than:
  - 60%** of the original purchase price for **ski equipment** over **6** months old and less than **1** year old;
  - 50%** of the original purchase price for **ski equipment** over **1** year old and less than **2** years old;
  - 40%** of the original purchase price for **ski equipment** over **2** years old and less than **3** years old;
  - 25%** of the original purchase price for **ski equipment** over **3** years old and less than **5** years old.
- any claim for loss of or damage to **ski equipment** over **5** years old;
- for **ski equipment** left **unattended** away from **your trip** accommodation except **ski equipment** left in the locked boot or covered luggage area of a motor vehicle where entry was gained by violent and forcible means;
- any claim where **you** are unable to provide the damaged items on request or to prove the existence or prove ownership/purchase or responsibility of any items;
- any claim for loss or theft where **you** have not notified the police, **your** carrier or tour operator's representative and obtained a written report;
- in respect of claims relating to an avalanche or weather delay, any costs where **your** tour operator, transport provider or accommodation provider arranges alternative transport and/or accommodation;
- in respect of claims relating to piste closures:
  - any compensation where **your** tour operator provides a payment or provides travel to an alternative resort;
  - any compensation where **your trip** was booked within 14 days of travel;
  - any compensation where **you** fail to obtain written confirmation from the ski lift and/or ski school operator confirming the closure of facilities, stating the reason for closure and the date and time of closure and date and time it reopened;
  - any compensation when **you** are not in the resort covered by **your** ski pass.

### **Special Conditions Relating to Claims**

1. If any **ski equipment** is lost or damaged whilst being transported, **you** must retain **your** tickets and luggage tags and report the loss or damage to **your** transport provider or their handling agents and obtain a Property Irregularity Report (PIR) form or its equivalent within 24 hours.
2. For all damage claims **you** should retain the items in case **we** wish to see them. **You** will need to obtain an estimate for repairs or a letter confirming that the damage is irreparable.
3. In all instances where **your ski equipment** is lost or stolen, **you** must report to the police as soon as possible, and within 24 hours of discovery, and obtain a written report and reference number from them. **You** must also report the loss or theft to **your** tour operator's representative or hotel/apartment manager or ski slope operator wherever appropriate.

## Section P - End Supplier Failure Insurance

### Applicable to Gold cover only

Definition of words applicable to this section only:

#### Financial Failure

means the **end supplier** becoming insolvent or having an administrator appointed and being unable to provide agreed services.

#### End Supplier

means the company that owns and operates the services listed in point 1. below.

Note: **You** must refer to the 'Definition of Words' section of this Policy which will also apply.

#### For each insured person this insurance will pay:

up to **£1,500** for:

1. **unrecoverable costs** paid prior to **financial failure** of the **scheduled airline**, hotel, train operator including Eurostar, car ferries, villas abroad & cottages in the **United Kingdom**, Channel Islands or Isle of Man; coach operator, car or camper hire company, caravan sites, campsites, mobile home, safaris; excursions; Eurotunnel; theme parks or attractions all known as the **end supplier** of the travel arrangements not forming part of an inclusive holiday prior to departure,
- or;
2. in the event of **financial failure** after departure:
  - a) additional pro rata costs incurred by the **insured person(s)** in replacing that part of the travel arrangements to a similar standard of transportation as enjoyed prior to the **curtailment** of the travel arrangements, or;
  - b) if **curtailment** of the holiday is unavoidable - the cost of return transportation to the **United Kingdom**, Channel Islands or Isle of Man, to a similar standard of transportation as enjoyed prior to the **curtailment** of the travel arrangements.

#### For each insured person this insurance will not cover:

1. Travel or accommodation not booked within the **United Kingdom**, Channel Islands or Isle of Man prior to departure
2. Any **end supplier** which is, or which any prospect of **financial failure** is known by the **insured person** or widely known publicly at the date of the **insured person's** application under this policy
3. Any loss or part of a loss which at the time of the happening of the loss is insured or guaranteed by any other existing Policy, Policies, bond or is capable of recovery from under Section 75 of the Consumer Credit Act or from any bank or card issuer or any other legal means
4. The **financial failure** of any travel agent, tour organiser, booking agent or consolidator with whom the **insured person** has booked travel or accommodation
5. Any losses which are not directly associated with the incident that caused the **insured person** to claim. For example, loss due to being unable to reach **your** pre-booked hotel following the **financial failure** of an airline.

## Making a Claim

### Medical Emergencies

Contact Healix Medical Assistance Services

Tel: **+44 (0)208 159 1702**

Email: **internationalhealthcare@healix.com**

The Medical Emergency Assistance telephone service is available 24 hours a day, 365 days a year. Further details of what to do in the event of a medical emergency are given on pages 9 to 10 of this Policy Document.

Please have the following information available when **you** (or someone on **your** behalf) contact the Medical Emergency Assistance Company so that **your** case can be dealt with swiftly and efficiently:

- **Your** name and address;
- **Your** contact phone number abroad including the hospital and treating **doctor's** details;
- **Your** policy number shown on **your** Policy Schedule; and
- The name, address and contact phone number of **your** GP.
- Quote the scheme name which is: Free Spirit Flex.

## For All Other Claims

### Cover Sections A-M and Cover Section O

Please contact the **claims handler** within 31 days of returning **home**:

Travel Claims, Roger Rich & Company, 2a Marston House, Cromwell Park, Chipping Norton, Oxfordshire OX7 5SR

Telephone: +44 (0)1608 641 351

Email: [claims@rogerrich.co.uk](mailto:claims@rogerrich.co.uk)

### Travel Dispute (Section N)

Please notify the **claims handler** as soon as possible but within 30 days of returning from the **trip** which is the subject of the dispute and may give rise to any claim under this policy. Failure to do so could lead **us** to decline the claim.

Telephone: 01384 377 000

Please also refer to 'General Conditions - Claims' under Section N within this policy.

### End Supplier Failure Insurance (Section P)

Please notify the **claims handler** as soon as reasonably practicable, by quoting **your** policy number, Free Spirit Flex and reference: IPP ESFIV1-22:

IPP Claims at Sedgwick, Oakleigh House, 14-15 Park Place, Cardiff CF10 3DQ

Telephone: +44 (0) 345 266 1872

Email: [Insolvency-claims@ipplondon.co.uk](mailto:Insolvency-claims@ipplondon.co.uk)

Website: [www.ipplondon.co.uk/claims.asp](http://www.ipplondon.co.uk/claims.asp)

### Reporting your claim

If there is a delay in reporting of **your** claim it is not **our** intention to decline **your** claim or to reduce the payment amount, provided that all the information required is still available and the delay has not prejudiced the **claims handler's** ability to fully assess the claim.

### Providing information to support your claim

**You** will need to provide certain information to enable a claim to be fully assessed. This information will vary depending on which section of cover **you** are claiming under. Examples of the types of information **we** will need are given below, but there may be other evidence required from **you**. **Our claims handler** will tell **you** exactly what information **you** need to give them in relation to **your** own claim. Please keep copies of all information sent to the **claims handler**.

Unless **we** agree to pay for any information, for example a medical examination (which **you** must agree to undergo if required), the information will need to be provided at **your** expense.

Medical Certificates	A medical certificate from the treating <b>doctor</b> explaining why <b>you</b> required medical attention, were unable to travel, forced to cancel, extend, cut short or forfeit any pre-arranged plans or paid for activities, or rearrange any travel plans.
Police (or other Authority) Reports	A report from the local police or other relevant authority in the country where the incident occurred confirming dates, circumstances and further details of the loss, theft, attempted theft, mugging, or damage.
Travel Tickets & Baggage Tags	All travel tickets (including any unused travel tickets) and luggage tags.
Receipts, Bills, Valuations & Proof of Ownership	<p>An original receipt, valuation or proof of ownership for items, currency or documents of any kind lost, stolen, damaged, repaired, replaced or purchased.</p> <p>Receipts or bills for any costs incurred for in-patient/out-patient treatment, emergency dental treatment, transport, accommodation, hospital or medical costs and any other charges or expenses which are to be considered as part of a claim.</p>
Confirmation Letters, Reports, Invoices & Notices	Confirmation of the loss, delay, failure, cancellation or circumstance leading to the claim in the form of a letter, invoice, report or notice of cancellation from (as appropriate) <b>your</b> tour operator or their representative, airline, luggage handler, service provider, hotel or accommodation provider, <b>public transport</b> provider or relevant authority.
Death Certificates	For any claim involving death an original death certificate will be required.

## Cancelling Your Policy

If **you** wish to cancel **your** policy, please contact the **policy administrator**, JustTravelcover.com:

Email: **admin@justtravelcover.com**

Telephone: **0333 003 0021** (this is a basic rate number)

Write to: Customer Services, JustTravelcover.com, Victoria House, Toward Road, Sunderland SR1 2QF

### 1. If you wish to cancel the policy within the 14-day cooling off period

If **you** decide this cover is not suitable for **you** and **you** want to cancel **your** policy, contact the **policy administrator** within 14 days of the policy start date or the date **you** receive **your** insurance documents, whichever is later. Any premium already paid will be refunded to **you** in full.\*

### 2. If you wish to cancel the policy after the 14-day cooling off period

#### For Single Trip policies:

If **you** cancel the policy at any time after the 14-day cooling off period, **you** will be entitled to a refund of the premium paid, subject to a deduction of 30% for the cancellation cover **you** have received.

#### For Annual Multi-trip policies:

**You** will be entitled to a refund of a proportion of the premium, in accordance with the amounts shown below.

Period of Cover	Refund Due
Up to two months	60%
Up to three months	50%
Up to four months	40%
Up to five months	30%
Up to six months	25%
Six months or over	No refund

#### \* Important- Applicable to all policies

**We** will not refund any premium if **you** have travelled since the policy started, or if **you** have made or if **you** intend to make a claim or an incident has occurred which is likely to give rise to a claim.

## Our Right To Cancel The Policy

**We** reserve the right to give immediate notice of cancellation of this policy if any information **you** have given **us** via the **policy administrator** is found to be inaccurate or incomplete, if any **insured person** commits fraud, or if any **insured person** is abusive to any of **our** staff or staff of the **policy administrator** or a **claims handler**.

If the nature of the risk **we** have agreed to insure changes and **we** are unable to continue to provide cover under the policy, **we** will give **you** 14 days' written notice of cancellation and will provide a refund of premium based on the number of days remaining in **your period of insurance**.

## Making a Complaint

**Our** aim is to provide **you** with a high quality service at all times, although **we** do appreciate that there may be instances where **you** feel it is necessary to lodge a complaint.

### Cover Sections A-M and Cover Section O

If **you** do wish to complain, please note the 3 steps below, along with the relevant contact details for each step. Please take special note however that should **you** wish to direct **your** complaint directly to Lloyd's in the first instance, **you** may do so by using the contact information referenced in step 2 below.

#### Step 1:

In the first instance, if **your** complaint does not relate to a claim please direct it to:

The Office Manager, JustTravelcover.com, Victoria House, Toward Road, Sunderland SR1 2QF

Tel: **0333 003 0021** (this is a basic rate number)

Email: **admin@justtravelcover.com**

If **your** complaint does relate to a claim, please direct it to:

Roger Rich & Company

2a Marston House, Cromwell Park, Chipping Norton, Oxfordshire OX7 5SR

Tel: **01608 641 351** (this is a basic rate number)

Email: **enquiries@rogerrich.co.uk**

#### Step 2:

Should **you** remain dissatisfied with the outcome of **your** complaint from JustTravelcover.com or Roger Rich & Company **you** may refer **your** complaint to Lloyd's. Lloyd's contact information is:

Complaints at Lloyd's, Fidentia House, Walter Burke Way, Chatham Maritime, Kent ME4 4RN

Tel: **+44 (0)20 7327 5693**

Email: **complaints@lloyds.com**

Website: **www.lloyds.com/complaints**

Details of Lloyd's complaints procedure are set out in a leaflet "Your Complaint - How We Can Help", which is available at [www.lloyds.com/complaints](http://www.lloyds.com/complaints). Alternatively, **you** may ask Lloyd's for a hard copy.

#### Step 3:

If **you** remain dissatisfied after Lloyd's has considered **your** complaint, **you** may have the right to refer **your** complaint to an alternative dispute resolution (ADR) body.

If **you** live in England, Scotland, Wales or Northern Ireland, the contact information is:

Financial Ombudsman Service, Exchange Tower, London E14 9SR

Tel: 0800 0234 567 (calls to this number are free on mobile phones and landlines)

Tel: 0300 1239 123 (calls to this number cost no more than calls to 01 and 02 numbers)

Email: [complaint.info@financial-ombudsman.org.uk](mailto:complaint.info@financial-ombudsman.org.uk)

Website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

If **you** live in the Channel Islands, the contact information is:

Channel Islands Financial Ombudsman, PO Box 114, Jersey, Channel Islands JE4 9QG

Jersey: +44 (0)1534 748610

Guernsey: +44 (0)1481 722218

International +44 1534 748610

Facsimile: +44 1534 747629

Email: [enquiries@ci-fo.org](mailto:enquiries@ci-fo.org)

Website: [www.ci-fo.org](http://www.ci-fo.org)

If **you** live in the Isle of Man, the contact information is:

Financial Services Ombudsman Scheme,

Thie Slieau Whallian, Foxdale Road, St John's, Isle of Man IM4 3AS

Tel: +44 (0) 1624 686500

Fax: +44 (0) 1624 686504

Email: [ombudsman@iomoft.gov.im](mailto:ombudsman@iomoft.gov.im)

Website: <https://www.gov.im/oft/ombudsman/>

#### Cover Section N - Travel Dispute only

Please contact:

Arc Legal Assistance Ltd, PO Box 8921, Colchester CO4 5NE

Tel: 01206 615000

Email: [customerservice@arclegal.co.uk](mailto:customerservice@arclegal.co.uk)

If after making a complaint **you** are still not satisfied **you** may be entitled to refer the dispute to the Financial Ombudsman Service (FOS):

Financial Ombudsman Service, Exchange Tower, London E14 9SR

Tel: 0800 0234 567 (calls to this number are free on mobile phones and landlines)

Tel: 0300 1239 123 (calls to this number cost no more than calls to 01 and 02 numbers)

Email: [complaint.info@financial-ombudsman.org.uk](mailto:complaint.info@financial-ombudsman.org.uk)

Website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

## Cover Section P - End Supplier Failure Insurance only

Please contact:

Compliance Officer, Liberty Mutual Insurance Europe SE, 20 Fenchurch Street, London EC3M 3AW

Tel: +44 (0) 20 3758 0840

Email: [complaints@libertyglobalgroup.com](mailto:complaints@libertyglobalgroup.com)

Please quote **your** Policy Schedule number, Free Spirit Flex, reference: IPP ESFIV1-22 and **your** claim number.

Non-Assignment - no title, right or interest under this policy may be assigned, transferred, conveyed or otherwise disposed of without the consent in writing of the **Insurer** hereon. Any attempt to assign rights or interests without the **Insurer's** written consent is null and void.

Data Protection - **we** will deal with any information **you** provide to **us** in compliance with the provisions of relevant Data Protection legislation. For the purposes of providing this insurance and the handling of any claims or complaints, **we** may need to transfer certain information which **you** have provided to other parties.

If after making a complaint **you** are still not satisfied **you** may be entitled to refer the dispute to the Financial Ombudsman Service (FOS):

Financial Ombudsman Service, Exchange Tower, London E14 9SR

Tel: 0800 0234 567 (calls to this number are free on mobile phones and landlines)

Tel: 0300 1239 123 (calls to this number cost no more than calls to 01 and 02 numbers)

Email: [complaint.info@financial-ombudsman.org.uk](mailto:complaint.info@financial-ombudsman.org.uk)

Website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

## Legal, Regulatory and Other Information

### Financial Services Compensation Scheme

**We** are covered by the Financial Services Compensation Scheme. **You** may be entitled to compensation under the scheme if **we** are unable to meet **our** obligations to **you** under this contract. Further information can be obtained from the Financial Services Compensation Scheme, PO Box 300, Mitcheldean GL17 1DY, United Kingdom. Tel: +44 0 800 678 1100 (freephone) or +44 0 20 7741 4100. Website: [www.fscs.org.uk](http://www.fscs.org.uk)

### Law and Jurisdiction

This policy shall be governed by the laws of England and Wales and subject to the non-exclusive jurisdiction of the courts of England.

### Data Protection Notice

The **insurers** (each in respect of the cover section(s) it underwrites and in respect of the personal information each collects about **you** and processes) and JustTravelcover.com (the **policy administrator**) are the data controllers (as defined by the Data Protection Act 2018 and all applicable laws which replace or amend it, including the General Data Protection Regulation).

For full details of what data each **insurer** collects about **you**, how it uses it, who it shares it with, how long it keeps it and **your** rights relating to **your** personal data, please refer to each **insurer's** Privacy Notice which is available on each **insurer's** website (details given below).

If **you** do not have access to the Internet, please write to the relevant **insurer** (addresses are given below) with **your** address and a copy will be sent to **you** in the post.

In summary:

Each **insurer** may, as part of its agreement with **you** under this insurance, collect personal information about **you**, including:

- Name, address, contact details and date of birth
- Financial information such as bank details
- Details of any claim

Each **insurer** will also collect personal information about any additional people who **you** wish to be insured.

Each **insurer** may also collect sensitive personal information about **you**, and any additional people who **you** wish to be insured, where the provision of this type of information is of legitimate interest, including:

- Medical records to validate a claim should **you** be claiming for injury or **illness**.

Each **insurer** collects and process **your** personal information for the purpose of insurance and claims administration.

All phone calls may be monitored and recorded and the recordings used for fraud prevention and detection, training and quality control purposes.

**Your** personal information may be shared with third parties which supply services to each **insurer** or which process information on each **insurer's** behalf (for example, premium collection and claims validation, or for communication purposes related to **your** cover). Each **insurer** will ensure that it keeps **your** information secure and does not use it for purposes other than those that each **insurer** has specified in its Privacy Notice.

Some third parties that process **your** data on each **insurer's** behalf may do so outside of the European Economic Area ("EEA"). This transfer and processing is protected by EU Model Contracts which aim to provide the equivalent level of data protection to that found in the EU.

Each **insurer** will keep **your** personal information only for as long as it believes is necessary to fulfil the purposes for which the personal information was collected (including for the purpose of meeting any legal obligations).

Each **insurer** will share **your** information if it is required to by law. Each **insurer** may share **your** information with enforcement authorities if they ask it to, or with a third party in the context of actual or threatened legal proceedings, provided it can do so without breaching data protection laws.

If **you** have any concerns about how **your** personal data is being collected and processed, or wish to exercise any of **your** rights detailed in the relevant **insurer's** Privacy Notice, please contact:

#### **Cover Sections A-M and Cover Section O:**

Group Data Protection Officer

Canopus Managing Agents Limited, Floor 29, 22 Bishopsgate, London EC2N 4BQ, UK

Email: [privacy@canopus.com](mailto:privacy@canopus.com) Tel: + 44 20 7337 3700

Website: [www.canopus.com/privacy](http://www.canopus.com/privacy).

#### **Cover Section N – Travel Dispute:**

The Data Protection Officer, AmTrust International - please see website for full address details.

Website: <https://www.amtrustinternational.com/legal/privacy-cookies/>

#### **Cover Section P – End Supplier Failure Cover:**

Post: Data Protection Officer, IPP House, 22-26 Station Road, West Wickham, Kent BR4 0PR

Email: [info@ipplondon.co.uk](mailto:info@ipplondon.co.uk)

Website: [www.ipplondon.co.uk/privacy.asp](http://www.ipplondon.co.uk/privacy.asp)

#### **Sanctions**

**We** shall not provide any benefit under this insurance to the extent of providing cover, payment of any claim or the provision of any benefit where doing so would breach any sanction, prohibition or restriction imposed by law or regulation.

#### **Several Liability**

**PLEASE NOTE – This notice contains important information. PLEASE READ CAREFULLY**

The liability of an **insurer** under this contract is several and not joint with other **insurers** party to this contract. An **insurer** is liable only for the proportion of liability it has underwritten. An **insurer** is not jointly liable for the proportion of liability underwritten by any other **insurer**. Nor is an **insurer** otherwise responsible for any liability of any other **insurer** that may underwrite this contract.

The proportion of liability under this contract underwritten by an **insurer** (or, in the case of a Lloyd's syndicate, the total of the proportions underwritten by all the members of the syndicate taken together) is shown in this contract.

In the case of a Lloyd's syndicate, each member of the syndicate (rather than the syndicate itself) is an **insurer**. Each member has underwritten a proportion of the total shown for the syndicate (that total itself being the total of the proportions underwritten by all the members of the syndicate taken together). The liability of each member of the syndicate is several and not joint with other members. A member is liable only for that member's proportion. A member is not jointly liable for any other member's proportion. Nor is any member otherwise responsible for any liability of any other **insurer** that may underwrite this contract. The business address of each member is Lloyd's, One Lime Street, London EC3M 7HA. The identity of each member of a Lloyd's syndicate and their respective proportion may be obtained by writing to Market Services, Lloyd's, at the above address.

Although reference is made at various points in this clause to "this contract" in the singular, where the circumstances so require this should be read as a reference to contracts in the plural.



## The Insurers

### Cover Sections A-M and Cover Section O

These sections of the insurance are underwritten 100% by Lloyd's Syndicate 4444 which is managed by Canopus Managing Agents Limited. Registered Office: Canopus Managing Agents Limited, Floor 29, 22 Bishopsgate, London EC2N 4BQ. Registered in England no. 01514453.

Canopus Managing Agents Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm Reference: 204847.

### Cover Section N – Travel Dispute

This section of the insurance is administered by Arc Legal Assistance Ltd who are authorised and regulated by the Financial Conduct Authority. Arc Legal's Firm Reference Number is 305958. This can be checked on the Financial Services Register by visiting the website [www.fca.org.uk/register](http://www.fca.org.uk/register) or by contacting the Financial Conduct Authority on 0800 111 6768. Underwritten by AmTrust Europe Limited, Registered Office: Market Square House, St James's Street, Nottingham, NG1 6FG, Registered Number: 1229676. AmTrust Europe Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and Prudential Regulation Authority, financial services number: 202189. These details can be checked on the Financial Services Register at [www.fca.org.uk](http://www.fca.org.uk)

### Cover Section P – End Supplier Failure Insurance

This section of cover is provided by International Passenger Protection Limited, IPP House, 22-26 Station Road, West Wickham, Kent BR4 0PR, United Kingdom and is underwritten 100% by Liberty Mutual Insurance Europe SE (the **Insurer**). The **Insurer** is authorised and regulated by the Luxembourg Minister of Finance and the Commissariat aux Assurances. Deemed authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority and limited regulation by the Prudential Regulation Authority (registered number 829959). Details of the Temporary Permissions Regime, which allows EEA-based firms to operate in the UK for a limited period while seeking full authorisation, are available on the Financial Conduct Authority's website.

## The Policy Administrator

Free Spirit Flex is arranged on behalf of JustTravelcover.com by travel insurance specialist, PJ Hayman & Company Limited who are authorised and regulated by the Financial Conduct Authority. Financial Services (FS) Register Number: 497103. Registered Office: Stansted House, Rowlands Castle, Hampshire PO9 6DX. Registered in England - No. 2534965. JustTravelcover.com is authorised and regulated by the Financial Conduct Authority. Register Number: 610022. Registered Office: Victoria House, Toward Road, Sunderland SR1 2QF. Registered in England No. 05399196.

## Certification of Cover

This Policy Document and **your** Policy Schedule, which together make up the contract between **you** and **us**, is arranged by PJ Hayman & Company Limited in its capacity as the agent of the **insurers** and issued by JustTravelcover.com under the following contract references:

B6839/AH031 for Cover Sections A-M inclusive and Cover Section O (underwritten by Lloyd's Syndicate 4444 which is managed by Canopus Managing Agents Limited).

IPP ESFIV1-22 for Cover Section P (underwritten by Liberty Mutual Insurance Europe SE)

In exchange for **your** paying the premium amount shown in **your** Policy Schedule, **you** are insured in accordance with the terms and conditions contained in this Policy Document and **your** Policy Schedule (and any amendments made to them) for the duration of **your** policy.

Signed by



Authorised signatory of PJ Hayman & Company Limited

## Definition of Words

Listed below are certain words that appear throughout the policy. These will always be shown in **bold** type and in all cases will have the meanings shown below.

### Act of terrorism

means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), 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.

### Carer

means the person travelling in **your** party who is competent to provide care for **you** where **you** are not able to care for **yourself**.

### Claims handler

means:

- a) Roger Rich & Company for claims under Cover Sections A-M and Cover Section O.
- b) Travel Dispute Claims Notification & Advice Helpline Service for claims under Section N - Travel Dispute.
- c) IPP Claims at Sedgwick for claims under Section P - End Supplier Failure Insurance.

### Close business associate

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

### Close relative

means spouse or partner (who **you** are living together with), parents, grandparents, legal guardians, foster child, parents-in-law, daughter-in-law, son-in-law, brother-in-law, sister-in-law, step-parents, step-child, step-brother, step-sister, aunt, uncle, brother, sister, child, grandchild, niece, nephew, or fiancé(e).

### Coronavirus

means Covid-19, including each and every variant thereof.

### Curtail/curtailed/curtailment

means the cutting short of a **trip** by direct early return to **your home country**.

### Doctor

means a registered practising member of the medical profession, recognised by the law of the country where they are practising, who is not related to **you** or any person who **you** are travelling with.

### Drones

means un-manned aerial vehicles that belong to or are being used by **you**.

### Excess(es)

means the amount **you** will have to pay towards the cost of each claim, per incident claimed for, under each applicable section of cover, by each **insured person**.

If **you** have paid the additional premium for 'Excess Waiver' then, subject to 1. and 2. below, **you** will not have to pay the **excess** which **you** would otherwise have been required to pay.

- 1. The **excess** will still apply to any claims made under Cover Section N – Travel Dispute; and
- 2. Any **excess** imposed by **us** because an **insured person** has an **existing medical condition** which **we** have agreed in writing to cover following **your** call to the Medical Declaration Service, will still apply.

### Existing medical condition

means **you** are considered to have an existing medical condition if **you** answer 'YES' to any of the questions stated in **our** 'Medical Declaration' on page 6.

### Home

means one of **your** normal places of residence in the **United Kingdom**, the Channel Islands or the Isle of Man, or **your** Ministry of Defence base/location where there is a recognised British Forces Post Office address.

### Home country

means the country **you** live in within the **United Kingdom**, the Channel Islands or the Isle of Man or **your** Ministry of Defence base/location where there is a recognised British Forces Post Office address.

### Ill/illness

means a **medical condition**, disease (including **Coronavirus**), set of symptoms or sickness diagnosed and confirmed by a **doctor** during the **period of insurance**.

**Inshore**

means within 12 nautical miles of the shore.

**Insured Person/You/Your/Yourself**

means any person(s) named on the Policy Schedule to whom cover is provided under this insurance policy.

**International departure point**

means the airport, international rail terminal or port from which **you** departed from the **UK**, the Channel Islands, the Isle of Man or Ministry of Defence base/location to **your** destination, and from where **you** depart to begin the final part of **your** journey **home** at the end of **your** trip.

**Medical aids**

means wheelchairs, walking frames and sticks, supplies and equipment designed to provide mobility and care for the disabled and any other articles of such equipment all belonging to **you** (or for which **you** are legally responsible).

**Medical condition**

means any disease, **illness** or injury, including any psychological conditions.

**Natural disaster**

means an event such as avalanche, blizzard, earthquake, flood, explosion, fire, forest fire, storm, hurricane, lightning, tornado, tsunami or volcanic eruption.

**Nuclear risks**

means ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.

**Off-piste**

means any area within the resort not defined under **on-piste** below.

**On-piste**

means skiing or snowboarding on marked runs, in between groomed trails and runs, on a slope or hillside between marked pistes or in areas in and around the resort that are not cordoned off, restricted or that are not accessible by any sort of tow or lift.

**Pair or set**

means 2 or more items of **personal possessions** that are complementary, purchased as one item or used or worn together.

**Period of insurance**

means the period shown on **your** Policy Schedule.

**Personal money**

means sterling or foreign currency in notes or coins.

**Personal possessions**

means each of **your** suitcases and containers of a similar nature and their contents (excluding **ski equipment** and **medical aids**) and articles **you** are wearing or carrying, and **your** valuables.

**Policy administrator**

means JustTravelcover.com.

**Public transport**

means buses, coaches, aircraft or trains that run to a published scheduled timetable.

**Repatriation/repatriate**

means the return of an **insured person** to his/her **home**, a hospital, nursing home or funeral director in the **United Kingdom**, the Channel Islands or the Isle of Man.

**Scheduled airline**

means an airline that publishes a timetable and operates its service to a distinct schedule and sells tickets to the public at large, separate to accommodation and other ground arrangements.

**Ski equipment**

means skis, ski bindings, ski poles, ski boots, ski goggles, ski helmet, board boots, snowboard bindings and snowboards.

**Ski pack**

means ski pass, ski lift pass and ski school fees.

**Travel documents**

means visas, ESTA's and travel tickets/flight tickets.

## Travelling companion

means a person insured under this policy:

- a) with whom **you** are travelling and are on the same booking as, or
- b) whom **you** have arranged to meet at **your trip** destination, with the intention of spending a proportion of **your trip** with, who has booked independently and is therefore not included on the same booking and may have differing inbound and outbound departure times or dates.

## Trip

means a holiday or journey for which **you** have made a booking which includes transportation and/or accommodation, and that begins when **you** leave **home** and ends on **your** return (i) to **your home** at the end of **your** holiday or journey, or (ii) following **your repatriation**.

For cover to be provided under this insurance, any **trip** must meet the following requirements:

- The **trip** must be to a destination within the Area of Cover shown on **your** Policy Schedule;
- The **trip** must be a two-way **trip** which starts and ends in the **United Kingdom**, the Channel Islands, the Isle of Man, or which starts from a Ministry of Defence base/location where there is a recognised British Forces Post Office address.
- The **trip** must start and finish within the **period of insurance** shown on **your** Policy Schedule.
- Any **trip** within the **United Kingdom**, the Channel Islands or the Isle of Man must include at least 2 nights' booked accommodation.
- **You** must not be travelling against the advice of a **doctor** or where a **doctor** would have advised against **you** travelling had **you** sought their advice before beginning the **trip**.
- The **trip** cannot be undertaken for the specific purpose of receiving medical treatment during the **trip**.
- Where **you** have purchased Single Trip cover, the **trip** cannot be for more than 94 days (or 45 days if an **insured person** is aged 76 years or over on the date **you** purchase **your** policy).
- Where **you** have purchased Annual Multi-trip cover, **you** may take any number of **trips** within the **period of insurance** shown on **your** Policy Schedule but each **trip** cannot be for more than 31 days if **you** have purchased Silver cover or for more than 45 days if **you** have purchased Gold cover. **Winter sports** cover is limited to a maximum total of 17 days in the **period of insurance**.

## UK cruise

means a voyage within **United Kingdom**, Channel Islands or Isle of Man territorial seas of more than 72 hours in duration on a ship/vessel, that includes stopping at various ports.

## Unattended

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

## United Kingdom/UK

means England, Wales, Scotland and Northern Ireland.

## Unrecoverable costs

means any costs where **you** are not entitled to a refund by any other means, and/or costs that are not compensated elsewhere.

## Valuables

means television equipment, radios, CD players, audio equipment, computer equipment/accessories, hard drives, flash drives, binoculars, telescopes, antiques, jewellery, laptop computers (meaning any portable computer that includes a screen, keyboard and track pad or track ball), watches (meaning any type of watch other than a Smartwatch), precious or semi-precious stones, articles made of or containing gold, silver or other precious metals, films, or compact discs.

## We/Our/Us/Insurer(s)

For Cover Sections A-M & O – Lloyd's Syndicate 4444 which is managed by Canopus Managing Agents Limited.

For Cover Section N - Travel Dispute - AmTrust Europe Limited.

For Cover Section P - End Supplier Failure Insurance - Liberty Mutual Insurance Europe SE.

## Winter sports

means **on-piste** skiing/snowboarding (and **off-piste** when accompanied by a guide or instructor and provided **you** are not skiing against local recommendations or where avalanche warnings have been given), alpine skiing, big foot skiing, cat skiing (with a guide), cross country skiing, glacier walking, husky dog sledging (organised and with an experienced local driver), ice skating, kick sledging, langlauf, mono-skiing, nordic skiing, passenger sledge, ski boarding, skidooring, sledging, snowmobiling, snow parascending, snow shoe walking, snow tubing, snowcat driving, speed skating, telemarking and tobogganing.

## Appendix A - Sports & Activities

All of the sports and activities listed in this Appendix A are only covered where **you** are participating as an amateur. **We** will not pay any claim directly or indirectly arising from **your** participation in, or practice of, any professional sporting activities. **We** consider professional sporting activities to be activities or sports from which any income is obtained or sponsorship is received.

If **you** have any queries about **your** participation in any sport or activity, please do not hesitate to contact the **policy administrator** JustTravelcover.com to discuss **your** individual requirements. Contact details are provided on page 4 of this Policy Document.

### **These sports and activities are covered as standard with no restrictions in cover (no additional premium is required)**

Aerobics, Angling/Fishing, Badminton (amateur), Banana Boating, Baseball (amateur), Basketball (amateur), Beach Games, Bowls, Cricket (amateur), Croquet, Curling, Cycling (other than specified), Fell Walking/Fell Running, Fencing, Football/Soccer (amateur), Golf (amateur), Hiking/Rambling/Trekking (under 2,000m altitude), Jogging, Netball (amateur), Orienteering, Outward-bound Pursuits (ground level only), Paddle Boarding (**inshore**), Paintballing, Pony Trekking, Racquetball, Roller Blading/Roller Skating, Rounders, Sail Boarding, Sailing/Dinghy Sailing (within Territorial Waters and **inshore**), Skate Boarding, Snorkelling, Snooker/Pool/Billiards, Squash (amateur), Swimming, Table Tennis, Ten Pin Bowling, Tennis (amateur), Tug of War, Underground Activities (as part of an organised excursion/tour), Volleyball (amateur), War Games, Water Polo (amateur), Windsurfing (amateur, **inshore**), Weightlifting, Work Abroad - Non Manual Work (including professional, administrative or clerical duties only).

### **These sports and activities are covered as standard (no additional premium is required).**

**However, there is no cover under Cover Section G – Personal Accident or Cover Section H – Personal Liability for any claim arising directly or indirectly from participating in these activities.**

Archery (amateur), Canoeing/River Canoeing (up to Grade 3), Clay Pigeon Shooting, Jet Boating, Motorcycling (up to 50cc with licence appropriate to the cc, wearing a crash helmet, no racing), Parascending/Parasailing (over water, towed by boat), Surfing (amateur), Water Skiing (amateur - **inshore**, excluding jumping).

## **IMPORTANT NUMBERS:**

**Medical Emergency: +44 (0) 208 159 1702**

**Claims: 01608 641 351**

**Just Travel Cover: 0333 003 0021**

**Email: [admin@justtravelcover.com](mailto:admin@justtravelcover.com)**

