Terms and Conditions

Europe/Worldwide

Select Cover

TRAVEL INSURANCE

AMERICAN EXPRESS

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Important Requirement applying to your Policy

If **you** have a **pre-existing medical condition you** must make a **medical health declaration** before each **period of insurance** and on each annual renewal. In addition, if there are any changes in **your** health or prescribed medication **you** must notify **us** and update **your medical health declaration** prior to booking any **trip** or departing on any **trip**. All changes must be declared to **us** and accepted in writing before cover can continue.

Policy Summary

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The Policy **you** have bought is Annual Select Cover. This Policy Summary tells **you** how much **you** can claim under each section of cover, but does not contain the full terms and conditions relating to **your** Policy. These can be found within this Policy booklet.

Section	Significant Features and Benefits	Annual Select Cover
	Description of Cover	Benefit
1	**Personal Assistance Services** including:	
	Concierge service	
	Transfer of emergency funds	to £200
	Homecare (parts/materials)	to £50 (including VAT)
2	**Medical Emergency & Repatriation Service** including:	**to £10million*†**
	Infants born following complication of pregnancy	to £75,000 (or £200,000 for trips to USA or Caribbean)
	Burial or cremation abroad or repatriation of body to the UK	to £4,000
	Emergency dental treatment	to £1,000
	UK medical transfer to hospital	to £500
	Person to join/stay with you	to £1,500
3	**Hospital Cash Benefit**	**to £500**
		£30 per 24 hrs
4	**Personal Accident** including:	**to £30,000**
	Death (18–69)	£30,000
	Death (under 18 or 70 and over)	£1,000
	Loss of limb	£30,000
	Loss of sight	£30,000
	Permanent total disablement	£30,000
5	**Curtailment** including:	**to £5,000†**

Section	Significant Features and Benefits	Annual Select Cover
	Description of Cover	Benefit
	If £1,500 loss to home When a deposit is lost # Excursion cover Independently Booked Accommodation	to £5,000†
6	**Missed Departure and/or Connection(s)**	**to £1,000**
7	**Travel Delay & Involuntary Denial of Boarding** including: If delayed more than 6 hrs For each additional 12 hr delay	**to £350** to £35 to £35
8	**Kennel & Cattery**	**to £250**
9	**Personal Baggage Delay** (outward trip) including: If delayed more than 6 hrs	**to £200** to £200
10	**Money** including: Loss of cash Loss of cash under 16s Loss of passport (travel/accommodation)	**to £500†** to £250 to £50 to £500
11	**Personal Liability**	**to £2 million**
12	**Legal Advice & Expenses** (advance) including: Travel expenses to court outside UK Extra claims, fees & expenses Fees for motor offence outside UK A Bail Bond in local currency	**to £50,000** to £250 to £50,000 to £1,000 to £1,000
The following cover is automatically included unless you have chosen to exclude these benefits for a reduced premium. Please refer to your Certificate of Insurance for the level of cover you have selected.		
13	**Cancellation** (see Important Information page 9): including If £1,500 loss to home When a deposit is lost # Excursion cover	**to £5,000†**

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Section	Significant Features and Benefits	Annual Select Cover
	Description of Cover	Benefit
14	**Personal Baggage** (see Important Information page 9) including: For any one item/pair/set For valuables in total	**to £2,500†** to £250 to £300
The following Option will only apply if you have chosen to add the Option for a reduced premium.		
	Double Excess Option A double excess will apply if you have chosen to add this Option for a reduced premium. (This will not apply to the increased excess for the Adventure Sports and Activities Option.)	
Cover for the following Options will only apply if you have chosen to add the Option and have paid the appropriate premium.		
	Excess Waiver Option No excess will apply if you have chosen to add this Option and have paid the appropriate premium (This will not apply to the increased excess for the Adventure Sports and Activities Option.)	**only covered if Option premium paid**
15	**Winter Sports Option** including: Piste closure Avalanche benefit Winter Sports Equipment For any one article/pair/set Delay of Equipment over 12 hrs Unused ski pack charges Search & rescue costs	**only covered if Option premium paid** to £200/£20 per day to £150/£30 per day to £500† to £300 to £300/£20 per day to £350 to £150,000
16	**Adventure Sports and Activities** including: (excess of £200 on Medical) Sports/Activities Equipment For any one article/pair/set	**only covered if Option** **premium paid** to £500† to £300

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Section	Significant Features and Benefits	Annual Select Cover
	Description of Cover	Benefit
17	**Golf Option** including:	**only covered if Option premium paid**
	Golf Equipment including:	to £2,500†
	For any one item	to £250
	For purchase of Golf Equipment, if delayed more than 12 hours	to £300
	For hire of Golf Equipment, if delayed more than 12 hours	to £250/ £35 per 24hrs
	Green Fees	to £1,000†
	Tournament Entry Fees	to £250
	Hole-In-One	to £300
18	**Business Travel Option** including:	**only covered if Option premium paid**
	Personal Assistance Services	
	Replacement Business Associate	to £750
	Emergency Return Home	
	Personal Accident	to £60,000
	Business Equipment including:	to £1,500†
	- Single item, pair or set limit	to £500
	- Computer equipment limit	to £1,000
	- Business samples limit	to £500
	Business Equipment Delay	to £200
	Emergency Courier Expenses	to £200
	Business Equipment Hire	to £500/ £50 per 24hrs
	Business Money including: including:	to £1,000†
	- Cash limit	to £500
19	**Stranded Traveller Assistance** including:	**only covered if Option premium paid**
	Travel Expenses	to £2,500†
	Emergency Expenses	to £200 per night
	Return home of your children travel costs	to £2,500

An **excess** applies to each insured person, to each and every incident under each section of this Policy marked with a †,* or #.

† A £50 **excess** applies unless the **Excess** Waiver Option premium has been paid.

* A £200 **excess** applies for Group B and C Adventure Sports & Activities and Group B and C Winter Sports.

A £10 **excess** applies.

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IMPORTANT INFORMATION

You are only covered for the Options if the appropriate premium has been paid.

If **you** wish to add any of these Options to **your** existing cover, please call American Express Insurance Services on **0800 700 707.**

Please note that if **you** have chosen to exclude Cancellation cover from **your** Policy, no cover under Section 13 will apply.

Please note that if **you** have chosen to exclude Personal Baggage from **your** Policy, no cover under Section 14 will apply.

Renewals

A renewal notice will be sent to you before the end of the period of insurance, explaining how this will work. Should you want to amend your policy, update us on any medical conditions or cancel your policy, please call us on 0800 700 707. Lines are open Monday to Friday 9:00 - 17:00.

The Intermediary

Your Policy has been arranged by American Express Insurance Services Europe Limited ("American Express Insurance Services"[1]), a UK based insurance intermediary authorised and regulated by the Financial Conduct Authority. They will administer **your** Policy, and organise the renewal of annual policies, subject to the terms and conditions set out by the insurer. American Express Insurance Services will provide **you** with renewal terms offered by their travel insurance provider at the time of **your** renewal. A renewal notice will be sent to **you** before the end of the **period of insurance**, explaining how this will work. If **you** do not wish to renew **your** Policy with the current or any new insurer, **you** will need to contact American Express Insurance Services by calling **0800 700 707**, at least 30 days prior to the expiry of **your** Policy. If American Express Insurance Service does not hear from **you**, **your** Policy will be renewed automatically.

[1]American Express Insurance Services Europe Limited (AEISEL), Registered Office: 76 Buckingham Palace Road, London SW1W 9AX, UK. Registered in England and Wales. Company Number: 05048826, is authorised and regulated by the Financial Conduct Authority, Registered Number: 311684. Full details can be found on the Financial Services Register by visiting www.fca.org.uk/register or by contacting the FCA on 0800 111 6768.

The Insurer

This policy is underwritten by American Express Insurance Services[1] current travel insurance provider, Inter Partner Assistance SA (IPA). Inter Partner Assistance SA is a Belgian firm authorised by the National Bank of Belgium, and has a branch office in Ireland regulated by the Central Bank of Ireland. It is subject to limited regulation by the Financial Conduct Authority (FCA) in the United Kingdom. Details about the extent of the regulation by the FCA are available from us on request. IPA's registered address in Ireland is 10/11 Mary Street, Dublin 1, Ireland (company number 906006). Some of the services under this Policy will be provided by IPA's agent, AXA Travel Insurance (company number 426087), of the same Ireland address. All companies are members of the AXA Assistance Group.

Important Requirement applying to your Policy

If **you** have a **pre-existing medical condition you** must make a **medical health declaration** before each **period of insurance** and on each annual renewal. In addition, if there are any changes in **your** health or prescribed medication **you** must notify **us** and update **your medical health declaration** prior to booking any **trip** or departing on any **trip**. All changes must be declared to **us** and accepted in writing before cover can continue.

Key exclusions applying to your Policy

Age Restrictions

Please see **your** Certificate of Insurance for age restrictions which apply to **your** Policy.

Exclusions

Please refer to the following sections of this Policy booklet for the specific exclusions relating to each Policy section:

Section 1	Personal Assistance Services
Section 2	**Medical Emergency** and Repatriation Service
Section 3	Hospital Cash Benefit
Section 4	Personal Accident
Section 5	**Curtailment**
Section 6	Missed Departure and/or Missed Connection(s)
Section 7	Travel Delay & Involuntary Denial of Boarding
Section 8	Kennel and Cattery
Section 9	**Personal Baggage** Delay
Section 10	**Money**
Section 11	Personal Liability
Section 12	Legal Advice and Expenses
Section 13	Cancellation (Unless excluded for a reduced premium)
Section 14	**Personal Baggage** (Unless excluded for a reduced premium)
Section 15	**Winter Sports** (Optional Cover)
Section 16	**Adventure Sports and Activities** (Optional Cover)
Section 17	Golf (Optional Cover)
Section 18	Business Travel (Optional Cover)
Section 19	Stranded Traveller Assistance (Optional Cover)

Please refer to page 80 for the list of General Exclusions applying to all the sections of **your** Policy.

Duration of your Policy

The Select Policy duration is one year:

- **Worldwide Cover** allows **trips** of up to 45 days each.
- **Worldwide Cover excluding North America and the Caribbean area** allows **trips** of up to 45 days each.
- **European Cover** allows **trips** of up to 45 days each.

  Annual cover is subject to a maximum of 183 **trip** days in each **period of insurance**.

Cancellation of your Policy

If this insurance does not meet **your** needs, **we** will cancel **your** Policy providing **you** return it to **us** within 15 days of issue and **you** have not already taken **your trip** or intend to make a claim. **We** will refund **your** premium in full, but **we** will not refund it, or any part of **your** premium, after the 15 days have passed.

If **you** subsequently give notice in writing or by telephone to American Express Insurance Services to cancel this insurance, such cancellation shall take effect on the next renewal date following such notice. No refund of premium will be made.

We may cancel this policy giving **you** at least fourteen days written notice at **your** last known address for the following reasons:

- if **you** fail to make payment of the premium(s);
- if **you** fail to co-operate with **our** representatives;
- if **you** otherwise cease to comply with the terms and conditions of this policy in any significant respect; and or
- if the cost of providing this policy becomes prohibitive.

We may cancel this policy without giving **you** prior notice if, by law, **we** are prevented or otherwise impeded from providing it.

We may cancel this policy without giving **you** prior notice and without refunding your premium if:

- **you** make or try to make a fraudulent claim under **your** policy;
- **you** are abusive or threatening towards **our** staff;
- **you** repeatedly or seriously break the terms of this policy.

What to do if you need to make a claim

1. First check **you** are covered by **your** Policy.

   Please read the appropriate section in this Policy booklet to see exactly what is, and is not covered, noting particularly any conditions, limitations and exclusions.

2. Making a claim.

a) In the event of an emergency **you** should first call the Emergency Helpline listed on the back cover of the Policy booklet (any minor illness or injury costs must be paid for by **you** and reclaimed).

b) For all other claims, telephone our Claims Helpline on 0203 126 4135 (Monday – Friday 8:00 - 20:00 and Saturday 8:00 - 17:00) to obtain a claim form. **You** will need to give:

– **your** name,

– **your** Policy Number found at the top of **your** Certificate of Insurance,

– brief details of **your** claim.

Alternatively **you** can submit **your** non-emergency claim on **our** 24/7 worldwide access online claims registrations tool at www.amex-claims/uk or email **our** Claims Helpline on amex.retail@axa-travel-insurance.com

You will need to provide:

– **your** name,

– **your** Policy Number found at the top of **your** Certificate of Insurance,

– **your** address including the postcode,

– the section under which **you** wish to make a claim.

We ask that **you** notify **us** within 28 days of **you** becoming aware of an incident or loss leading to a claim and **you** return **your** completed claim form and any additional information to **us** as soon as possible.

3. Additional Information.
   You must supply all of **your** original invoices, receipts and reports etc. **You** should check the section under which **you** are claiming for any specific conditions and details of any supporting evidence that **you** must give **us**.

It is always advisable to keep copies of all the documents that **you** send to **us.**

4. Claims Handling Agents.

   To help **us** agree a quick and fair settlement of a claim, it may sometimes be necessary for **us** to appoint a claims handling agent.

Complaints Procedure

We aim to provide a first class service at all times. However, if **you** have a complaint, in order to get **your** complaint dealt with as quickly and efficiently as possible, please ensure **your** complaint is directed to the right organisation.

If **your** complaint is about **your** cover under **your** Policy or a claim on **your** Policy, please contact:

AXA Travel Insurance (Complaints Department)
The Quadrangle
106-118 Station Road
Redhill RH1 1PR
United Kingdom

or phone 01737 815227; or email us at claimcomplaints@axa-travel-insurance.com

If **your** complaint is about the sale and servicing of **your** Policy that **you** have received from American Express Insurance Services, please contact:

American Express Insurance Executive Office
1 John Street
Brighton
BN88 1NH
United Kingdom

or phone 01273 576109; or email us at insuranceexec@aexp.com

Please enclose the following details when sending **your** letter:

– **your** full name, postcode and contact phone number(s);

– the type of Policy and **your** Policy and/or claim reference;

– an outline of the reasons for **your** complaint.

If it is impossible to reach an agreement, **you** may have the right to make an appeal to the Financial Ombudsman Service by writing to: Financial Ombudsman Service, Exchange Tower, Harbour Exchange Square, London, E14 9SR, United Kingdom.
Or **you** can phone 0800 023 4567 or 0300 123 9 123 from a mobile.
Website: www.financial-ombudsman.org.uk

These procedures do not affect **your** right to take legal action.

Compensation Scheme

We are a member of the Financial Services Compensation Scheme (FSCS). The FSCS is a safety net for customers of financial services firms should they not be able to meet their liabilities and **you** may be entitled to claim compensation in such event. Further information can be obtained from the FSCS. Their contact details are Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU United Kingdom. Telephone 0800 678 1100 or 020 7741 4100, Fax 020 7741 4101. Website: **www.fscs.org.uk**

Your Annual Select Policy

Introduction

Thank you for choosing American Express to provide **your** Travel Insurance. This booklet provides useful information about the protection offered by this insurance, and the way in which the Policy will operate.

Your Policy and Certificate of Insurance

The Policy is a contract between **you** and **us** and is made up of two parts, **your** Certificate of Insurance and **your** Policy booklet which includes the Policy Summary. These must be read and kept together.

Your Certificate of Insurance includes the information **you** gave **us**. It shows who is insured, the level of cover **you** have chosen, the **period of insurance**, **geographical limits** of travel, age restrictions, **your** premium and any changes to the normal cover (called endorsements).

The Intermediary

Your Policy has been arranged by American Express Insurance Services Europe Limited ("American Express Insurance Services")[1], a UK based insurance intermediary authorised and regulated by the Financial Conduct Authority. They will administer **your** Policy, and organise the renewal of annual policies, subject to the terms and

conditions set out by the insurer. American Express Insurance Services will provide **you** with renewal terms offered by their travel insurance provider at the time of **your** renewal. A renewal notice will be sent to **you** before the end of the **period of insurance**, explaining how this will work. If **you** do not wish to renew **your** Policy with the current or any new insurer, **you** will need to contact American Express Insurance Services by calling **0800 700 707**, at least 30 days prior to the expiry of **your** Policy. If American Express Insurance Services does not hear from **you, your** Policy will be renewed automatically.

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The Insurer

This policy is underwritten by American Express Insurance Services[1] current travel insurance provider, Inter Partner Assistance SA (IPA). Inter Partner Assistance SA is a Belgian firm authorised by the National Bank of Belgium, and has a branch office in Ireland regulated by the Central Bank of Ireland. It is subject to limited regulation by the Financial Conduct Authority (FCA) in the United Kingdom. Details about the extent of the regulation by the FCA are available from us on request. IPA's registered address in Ireland is 10/11 Mary Street, Dublin 1, Ireland (company number 906006). Some of the services under this Policy will be provided by IPA's agent, AXA Travel Insurance (company number 426087), of the same Ireland address. All companies are members of the AXA Assistance Group.

Policy Information

1. Please take this Policy booklet and Certificate of Insurance with **you** whenever **you** travel. These are proof of **your** insurance and will be needed if **you** have to make a claim.

2. Please make sure **you** understand what this Policy covers. **Your** Certificate of Insurance draws **your** attention to important parts of the Policy. The Policy Summary included in this booklet confirms how much **you** can claim under each section of cover. Only this Policy booklet gives full details of what is, and is not covered, all terms and conditions, and how **your** claim will be handled.
3. Please see **'Emergency Assistance**' for details of what **you** should do in an emergency.
4. Premium refund within 15 days of issue. If this insurance does not meet **your** needs, **we** will cancel **your** Policy (if **you** return it to **us** within 15 days of issue) and refund **your** premium in full, providing **you** have not already taken **your trip** or intend to make a claim. **We** will not refund **your** premium, or any part of it, after the 15 days have passed.
   If **you** subsequently give notice in writing or by telephone to American Express Insurance Services to cancel this insurance, such cancellation shall take effect on the next renewal date. No refund of premium will be made.
5. Any changes to the normal cover are shown on **your** Certificate of Insurance and must be read in conjunction with this Policy booklet. It is particularly important that **you** read **your** Certificate of Insurance and if any details are incorrect, or **your** needs change in any way, **you** must contact American Express Insurance Services as soon as possible.
6. **Your** Policy is subject to a maximum cover of 183 **trip** days in each **period of insurance** with each individual **trip** limited to 45 consecutive days for European Cover, for **Worldwide Cover excluding North America and the Caribbean** area or for **Worldwide Cover**.

Please note that if **you** take a **trip** outside these limits **you** may wish to buy alternative cover for the whole of that journey, as **you** will not be covered for any part of the **trip** beyond the number of days cover as shown in **your** Certificate of Insurance. Please contact American Express Insurance Services for more information.

Please refer to **your** Certificate of Insurance for age, geographical and trip length restrictions which apply to **your** Policy.

7. This Policy also covers **you** for trips within the **United Kingdom** provided **you** have pre-booked at least one night's accommodation.
8. If **you** have purchased **family** cover, **your family** as named on the Certificate of Insurance, will be covered when either travelling with **you** or independently.
9. The most **we** will pay **you** is shown under each Policy section and on the Policy Summary. All benefits and **excesses** are per person, per applicable section, per trip, unless this is stated specifically.
10. Cover for **valuables** is limited under this Policy and **you** may wish to insure them separately, for example, under a Home Contents Insurance Policy.
11. The premium for this Policy must be paid in full at the time of purchase.
12. This Policy is effected in England and is governed by the laws of England and Wales.
13. This contract may only be completed in English.
14. You must be a permanent resident of, and registered with a General Practitioner in, the **United Kingdom**.

Important Health Requirements - For All **Insured Persons**

You must comply with the following conditions in order to have full protection under this policy. If **you** do not comply **we** may refuse to deal with **your** claim or reduce the amount of any claim payment.

This insurance will not cover **you** if **you**:

1. are travelling against the advice of a **medical practitioner** (or would be travelling against the advice of a **medical practitioner** had **you** sought his/her advice);
2. are travelling with the intention of obtaining medical treatment or consultation abroad;
3. have any undiagnosed symptoms that require attention or investigation in the future (that is symptoms for which **you** are awaiting investigations/consultations, or awaiting results of investigations, where the underlying cause has not been established);
4. are not a permanent resident of, and registered with a General Practitioner in the **United Kingdom**.

No claim arising directly or indirectly from any **pre-existing medical condition** affecting **you** will be covered unless:

- **you** have declared ALL **pre-existing medical conditions** to **us**;
- and **you** have declared any changes in **your** health or prescribed medication; and
- **we** have accepted the condition(s) for insurance in writing.

If **you** have a **pre-existing medical condition you** must make a **medical health declaration**. In addition, if there are any changes in **your** health or prescribed medication **you** must notify **us** and update **your medical health declaration** prior to booking any **trip** or departing on any **trip**. All changes must be declared to **us** and accepted in writing before cover can continue.

Failure to declare **pre-existing medical conditions** that are relevant to this insurance may invalidate **your** claim.

We will assess the medical information supplied to **us** and advise if **we** can cover the **pre-existing medical condition(s)**, if certain exclusions or restrictions should be imposed, or if cover can be offered subject to the payment of an additional premium. If the cover is subject to the payment of an additional premium, cover will not commence until full payment has been received by **us** and written confirmation has been provided by **us**.

To declare a **pre-existing medical condition** or a change in **your** state of health or prescribed medication, **you** should contact American Express Insurance Services on **0800 700 707.**

You should also refer to the General Exclusions.

Important Limitations under Section 5 - **Curtailment** and/or Section 13 - Cancellation

This policy will not cover any claims under Section 5 - **Curtailment** and/or Section 13 Cancellation arising directly or indirectly from any **pre-existing medical condition** known to **you** prior to purchasing this policy or booking any **trip** (whichever is the later) affecting any **close relative**, travelling companion who is not insured under the policy, or any person with whom you have arranged to reside temporarily whilst on **your trip** if:

1. a terminal diagnosis had been received; or if
2. they were on a waiting-list for, or had knowledge of the need for, surgery, in-patient treatment or investigation at any hospital or clinic; or if
3. during the 90 days immediately prior to the commencement of the policy or prior to booking any **trip** (whichever is the later) they had required surgery, in-patient treatment or hospital consultations.

Reciprocal Health Agreements

If **you** are travelling to a European Union (EU) country, the European Economic Area (EEA) or Switzerland, **you** can apply for a European Health Insurance Card (EHIC) via **your** local main Post Office. This card entitles **you** to certain free or reduced cost health cover arrangements in the EU, EEA or Switzerland. If **you** use it to reduce the cost of a medical claim under Section 2 – **Medical Emergency** and Repatriation, **you** will not have to pay the **excess** in respect of each and every incident - with the exception of claims where **you** have been taking part in any Group B or Group C **Adventure Sports and Activities** or Group B or Group C **Winter Sports**.

When **you** are travelling to Australia and **you** register for treatment under the national Medicare scheme, Medicare provides:

- free treatment as an in-patient or out-patient at a public hospital;

- subsidised medicines under the Pharmaceutical Benefits Scheme; and
- benefits for medical treatment provided by doctors through private surgeries and Government Health Centres (not hospitals).

We recommend **you** enrol at Medicare offices in Australia if **you** will be receiving treatment. If **you** receive treatment before **you** enrol, Medicare benefits can be backdated, if **you** are eligible. To be eligible **you** must be a resident of the **United Kingdom** and will need to show **your** British passport with an appropriate visa.

For more information **you** should contact: Health Insurance Commission, PO Box 1001, Tuggeranong, ACT 2901, Australia or visit their website at **www.humanservices.gov.au**

Emergency Assistance, 24 hours a day, 365 days a year

In an emergency, please first check that the circumstances are covered by **your** Policy. Having done this **you** should contact the Emergency Assistance provider on +44 (0) 203 126 4134, giving **your** name, Policy Number, and as much information as possible. **You** will need to give **us** a telephone or fax number where **we** can contact **you** or leave messages at any time of the day or night.

To comply with the terms and conditions of the insurance, **you** must contact **us** immediately (or as soon as **you** are physically able to do so) if **you** are hospitalised as an in-patient, or before incurring any expenses whatsoever over £500, in order to obtain our prior authorisation.

We ask that **you** notify **us** within 28 days of **you** becoming aware of any other incident or loss leading to a claim and **you** return **your** completed claim form and any additional information to **us** as soon as possible.

Definition of Words

This part of the Policy booklet explains any words which have a special meaning. Each word is listed with its meaning explained immediately afterwards. Whenever a word with special meaning appears in this Policy booklet it will be printed in **bold** type.

Adventure Sports and Activities
Your policy covers many **Adventure Sports and Activities** as standard which are listed below in Group A and provides limited cover for **Adventure Sports and Activities** listed in Group B. **Your** policy can be extended to cover additional sporting activities listed below in Group C when **you** have paid the appropriate premium. **Adventure Sports and Activities** are only covered on an incidental, non-competitive and non-professional basis.

Group A - The following **Adventure Sports and Activities** will be covered automatically under **your** policy:
badminton, baseball, basketball, bowling, camel riding, canoeing (up to grade/class 2), cricket, elephant riding, fishing, football, golf, hockey, horse trekking, kitesurfing, netball, orienteering, pony trekking, racquetball, roller skating, rounders, running, sailing (within 20 nautical miles of the coastline), scuba diving (unqualified and above 18 metres), squash, surfing, table tennis, tennis, trampolining, trekking (up to 4000 metres without use of climbing equipment), volleyball, water polo, water skiing, wind surfing, yachting (within 20 nautical miles of the coastline), zorbing.

Group B – The following **Adventure Sports and Activities** will also be covered, but no cover will be available for Section 4 - Personal Accident or Section 11 - Personal Liability sections and Section 2 - **Medical Emergency** and Repatriation Service will be subject to a policy **excess** of £200:
abseiling, archery, canoeing (up to grade/class 3 to 4), clay pigeon shooting, fell running, fencing, go-karting, horse riding, hot air ballooning, jet biking, jet skiing, mountain bicycling on tarmac, paintball, sailing (outside 20 nautical miles of the coastline), scuba diving (qualified

and above 40 metres), snowblading, war games, yachting (outside 20 nautical miles of the coastline).

Group C – **Your** policy can be extended to cover the following **Adventure Sports and Activities** when the appropriate premium is paid, but no cover will be available for Section 4 - Personal Accident or Section 11 - Personal Liability sections and Section 2 - **Medical Emergency** and Repatriation Service will be subject to a policy **excess** of £200:
American football, bungee jumping, gaelic football, mountain bicycling off tarmac, parascending (on water), rock climbing with ropes and guides, rugby league, rugby union, sky diving, white water canoeing/rafting.

Group D – **You** will not be covered for participating in the following sports and activities under any circumstances:
base jumping, boxing, canyoning, cave diving, caving, flying other than as a fare paying passenger, gliding, hang gliding, martial arts, microlighting, any form of motorsport (including motor rally, motor racing, speed, performance, endurance tests, motorboat racing, motorcycle racing), mountaineering, parachuting, paragliding, parascending (over land), polo, potholing, professional sports, quad biking, rock climbing without ropes and guides, safari with guns, shark diving, steeplechase.

Please also note the above lists are not exhaustive and if a sport or activity **you** want to do is not listed, please contact American Express on **0800 700 707** for advice.

Adverse weather conditions
Rain, wind, fog, thunder or lightning storm, flood, snow, sleet, hail, hurricane, cyclone, tornado or tropical storm which is not caused by or has not originated from a geological or catastrophic event such as but not limited to an earthquake, volcano or tsunami.

Adviser
Specialist solicitors or their agents.

Adviser's costs
Reasonable fees and disbursements incurred by the **adviser** with **our** prior written authority. Legal and accounting expenses shall be assessed on the standard basis and third party costs shall be covered if awarded against **you** and paid on the standard basis of assessment.

Bodily injury
An identifiable physical injury caused by a sudden, violent, external, unexpected specific event.

Business associate
A business partner, director or employee.

Business equipment
Computer equipment, (including laptop computers, hardware and software, peripherals and PDAs), communication devices, (including mobile phones). This includes stocks and samples, and other business related equipment which **you** need in the course of **your** business, and is not covered elsewhere.

Carrier
The aircraft, coach, ship or train operator, and their employees and agents.

Close relative
Your spouse, common law or same sex partner (with whom **you** have been living continuously for at least six months and with whom **you** are still living), grandmother, grandfather, mother, stepmother, mother-in-law, father, stepfather, father-in-law, sister, stepsister, sister-in-law, brother, stepbrother, brother-in-law, daughter, stepdaughter, daughter-in-law, son, step son, son-in-law, granddaughter, grandson, uncle, aunt, nephew, niece, legal guardian, legal ward, or the fiancé(e) of any person insured under this Policy.

Complications of Pregnancy
The following unforeseen complications of pregnancy as certified by a **medical practitioner**: toxaemia; gestational hypertension; pre-eclampsia; ectopic pregnancy; hydatidiform mole (molar pregnancy); hyperemesis gravidarum; ante partum haemorrhage; placental abruption; placenta praevia; post partum haemorrhage; retained placenta membrane; miscarriage; stillbirths; medically necessary emergency Caesarean sections/ medically necessary termination; and any premature births or threatened early labour more than 8 weeks (or 16 weeks in the case of a multiple pregnancy) prior to the expected delivery date.

Couple
You - the main policy holder, **your** spouse or partner (with whom **you** are and have been living with for the past six months).

Curtailment
Cutting short **your trip** by returning **home** due to an emergency authorised by **us**.

Double excess
You may choose to double the amount of each and every **excess** in return for a reduced Policy premium by selecting the Double **Excess** Option. Having selected the Double **Excess** Option, **you** will be personally financially responsible for twice (2x) the **excess** which would otherwise be applicable, when submitting each and every claim. (This will not apply to the increased **excess** for the Adventure Sports/Activities option).

Excess(es)
The first amount as shown in the Policy Summary, for each insured person, for every incident of loss applying to each section of cover under which a claim is made. This means that if **you** or any **insured person** claim for something under a section of the Policy for which an **excess** is to be deducted, **you** and/or **they** will be financially responsible for the first amount due in respect of those claims as shown in the Policy summary. A separate **excess** will apply to each **insured person's** claims.

Excess waiver
If **you** have obtained a European health Insurance Card (EHIC) and use it to reduce the costs of a medical claim under Section 2 - **Medical Emergency** and Repatriations, your will not have to pay the **excess** in respect of that claim. **You** may choose to pay an additional premium to purchase the Excess Waiver Option. Having purchased the Excess Waiver Option **you** will no longer be personally financially responsible for the **excess** when submitting a claim. (This will not apply to the increased **excess** for the Adventure Sports/Activities Option.) **You** cannot opt to purchase the Excess Waiver Option when **you** are actually aware of a potential claim, or in a claims situation.

Please note:
An **excess** of £200 will apply to any claim under Section 2 – **Medical Emergency** and Repatriation Service, where **you** have been taking part in any Group B or Group C **Adventure Sports and Activities** or Group B or Group C **Winter Sports**. This higher **excess** cannot be reduced or deleted by use of the European Health Insurance Card (EHIC) or by having purchased the Excess Waiver Option.

Family
You - the main policy holder, **your** spouse or partner (with whom **you** are and have been living with for the past six months) and **your** or their children who on the first day of the **period of insurance** are under 18 years old and either living with **you** or in full time education.

Geographical limits
The following areas for which **you** have paid the appropriate premium are covered, excluding countries to which the Foreign and Commonwealth Office has advised the public not to travel at the time of taking the **trip**.

European Cover
The following countries are included within the definition of Europe: Albania; Andorra; Austria; Azores; Balearics; Belarus; Belgium; Bulgaria; Canary Islands; Channel Islands (Bailiwicks of Guernsey and Jersey) Corsica; Croatia; Cyprus; Czech Republic; Denmark; Egypt; Estonia; Finland; France; Germany; Gibraltar; Greece; Hungary; Iceland; Isle of Man; Israel; Italy; Latvia; Liechtenstein; Lithuania; Luxembourg; Madeira; Malta; Moldova; Monaco; Morocco; Netherlands; Norway; Poland; Portugal; Republic of Ireland; Romania; Russia west of the Ural Mountains; San Marino; Sardinia; Serbia; Sicily; Slovak Republic; Slovenia; Spain; Sweden; Switzerland; Tunisia; Turkey; Ukraine; and the **United Kingdom***.

Worldwide Cover excluding North America and the Caribbean area
All countries worldwide including **United Kingdom*** and excluding **North America and the Caribbean** area.
The following countries are included within the definition of North America and the Caribbean area, and excluded under this **geographical limit**: The United States of America; Canada; Anguilla; Antigua and Barbuda; Aruba; Bahamas; Barbados; Bermuda; British Virgin Islands; Cayman Islands; Cuba; Dominica; Dominican Republic; Grenada; Guadeloupe; Haiti; Jamaica; Martinique; Montserrat; Navassa Island; Netherlands Antilles; Puerto Rico; Saint Barthelemy; Saint Kitts and Nevis; Saint Lucia; Saint Martin; Saint Vincent and the Grenadines, Trinidad and Tobago; Turks and Caicos Islands; the US Virgin Islands; and includes cruising in waters around these islands.

Worldwide Cover
All countries worldwide including the **United Kingdom***

Please refer to the General Exclusions of **your** Policy.

* **Trips** within the **United Kingdom** are covered provided **you** have pre-booked at least one night's accommodation.

Golf equipment

The following items owned, entrusted to, or hired by **you**: golf clubs, golf bags, golf umbrellas, non-motorised trolleys, golf shoes and golf clothing.

Green fees

Club membership or subscription fees.

Home

The place where **you** normally live in the **United Kingdom** and use for domestic purposes.

Loss of limb

Loss by physical severance, or the total and irrecoverable permanent loss of use or function of, an arm at or above the wrist joint, or a leg at or above the ankle joint.

Loss of sight

Total and irrecoverable loss of sight in one or both eye(s); this is considered to have occurred if the degree of sight remaining after correction is 3/60 or less on the Snellen scale. (This means being able to see at 3 feet or less what **you** should see at 60 feet.)

Medical condition

Any medical or psychological disease, sickness, condition, illness or injury.

Medical emergency

A **bodily injury** or sudden and unforeseen illness suffered by **you** while **you** are on a **trip** outside the **United Kingdom** and a registered **medical practitioner** tells **you** that **you** need immediate medical treatment or medical attention.

Medical health declaration
Medical information that needs to be declared to **us** by any **insured person** who has suffered from any **pre-existing medical condition.**

Medical practitioner
A legally licensed member of the medical profession, recognised by the law of the country where treatment

is provided and who, in rendering such treatment is practising within the scope of his/her licence and training, and who is not related to **you** or any travelling companion.

Money
Sterling and foreign currency, cheques, postal and money orders, gift vouchers, travel tickets, hotel and other holiday vouchers, petrol coupons, Green Card, passports, ski lift pass (if **you** have paid the Winter Sports Option), together with the wallet, purse or similar article in which these items are carried, whilst:

- carried by **you** about **your** person (in an item of clothing **you** are wearing or in a container which **you** are holding or which is attached to **you**); or
- left in a locked safety deposit box.

Pair or set
Items of **personal baggage** or **valuables** forming part of a set or which are normally used together.

Period of insurance
The period to which the insurance applies and for which **you** have paid, or have agreed to pay the appropriate premium. This period and the premium payable is shown on **your** Certificate of Insurance.

Please note, provided that **you** have not chosen to exclude the Cancellation cover in return for a reduced premium, as shown in **your** Certificate of Insurance, cover for cancellation under Section 13 – Cancellation will start when **you** pay or agree to pay for a **trip** (provided that this policy is in force) and shall cease when **you** have started that **trip**.

Cover under all the other sections applies for the length of **your trip** unless it is further qualified under a specific section.

Extension to the **period of insurance**

If **your** return journey to the **United Kingdom** is unavoidably delayed because of something which is covered under **your** Policy, **we** will automatically extend **your** cover for the period of the delay at no additional cost.

If **you** book a **trip** during the current **period of insurance** and have paid or agreed to pay for it, where the departure date is after the renewal date of

your Policy, and **you** have not chosen to exclude the Cancellation cover in return for a reduced premium as shown on **your** Certificate of Insurance, cancellation cover will continue in force on condition that

a) **you** renew the Policy, if eligible, when renewal falls due, and

b) **you** have not chosen to exclude the Cancellation cover in return for a reduced premium as shown on **your** Certificate of Insurance, and

c) **your** premium has been paid in full.

N.B. Please refer to **your** Certificate of Insurance for age restrictions which apply to the renewal of **your** Policy.

Permanent total disablement
Disablement which, having lasted for a period of at least 12 consecutive months from the date of occurrence will, in the opinion of an independent qualified specialist, prevents **you** from engaging in, or giving any attention to, any business or occupation for the remainder of **your** life.

Personal baggage
Items usually carried or worn by travellers (excluding **valuables** and **money**) taken on, or purchased on, a **trip** by **you** for **your** individual use during **your trip**.

Pre-existing medical condition(s)

1. Any past or current **medical condition** that has given rise to symptoms or for which any form of treatment or prescribed medication, medical consultation, investigation or follow-up/check-up has been required or received during the 2 years prior to the commencement of cover under this Policy and/or prior to any **trip**: and
2. any cardiovascular or circulatory condition (e.g. heart condition, hypertension, blood clots, raised cholesterol, stroke, aneurysm) that has occurred at any time prior to the commencement of cover under this Policy and/or prior to any **trip**.

If **you** are aware of any **pre-existing medical condition(s)** these must be declared to American Express Insurance Services on **0800 700 707**, and accepted for cover.

Public transport
Includes the following forms of transport: aircraft; bus; coach; pre-booked taxi; sea vessel; and train.

Single parent family
You – the main policy holder and **your** children who on the first day of the **period of insurance** are under 18 years old and either living with **you** or in full time education.

Ski pack
Ski lift pass, ski school fees and hired ski equipment, all pre-paid.

Strike or industrial action
Any form of industrial action which is carried out with the intention of stopping, restricting or interfering with the production of goods or provision of services.

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

Trip(s)
A journey within the **geographical limits** shown on **your** Certificate of Insurance, which starts and ends in the **United Kingdom** during the **period of insurance** and which does not exceed 45 days. If **your** planned journey exceeds these limits **you** may wish to buy alternative insurance for the whole of that journey, as **you** will not be covered for any part of the **trip** beyond the number of days cover as shown in **your** Certificate of Insurance. Please contact American Express Insurance Services on **0800 700 707** for more information.

Trips within the United Kingdom are covered provided **you** have pre-booked at least one night's accommodation.

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

United Kingdom
England, Scotland, Wales and Northern Ireland. Excluded from this definition are the Channel Islands and the Isle of Man.

Valuables
Jewellery, precious metals or precious stones or items made from precious metals or precious stones, watches,

furs, leather articles, personal mobile phones, binoculars, telescopes, electronic/audio/video or photographic equipment, laptops, tablets and notebooks, E-readers, MP3 and MP4 players, and games consoles.

We, us, our
Inter Partner Assistance SA, 10/11 Mary Street, Dublin 1, Ireland, a branch of Inter Partner Assistance SA, Avenue Louise 166 bte 1, 1050 Brussels, and AXA Travel Insurance of the same Ireland address, their agent, and/or their service provider.

Winter Sports
Upon payment of the Winter Sports Option premium, **your** policy will be extended to cover certain **winter sports** activities listed below. **Winter sports** are only covered on a non-competitive and non-professional basis. **You** are not covered when engaging in organised competitions or when skiing against local authoritative warning or advice.

Group A - The following sports and activities will automatically be covered under **your** policy upon payment of the Winter Sports Option premium:
ice skating (on recognised ski rinks), monoskiing, skiing (on piste or off piste with a guide), snowboarding (on piste or off piste with a guide), snowshoeing.

Group B – The following sports and activities will also be covered payment of the Winter Sports Option premium, but no cover will be available for Section 4 - Personal Accident or Section 11 - Personal Liability sections and Section 2 - **Medical Emergency** and Repatriation Service will be subject to a policy **excess** of £200:
cross country skiing, glacier skiing, ski touring, skidoo, snowblading, tobogganing.

Group C – **Your** policy can be extended to cover the following sports and activities when **you** pay the Adventure Sports and Activities Option premium in addition to the Winter Sports Option premium, but no cover will be available for Section 4 - Personal Accident or Section 11 - Personal Liability sections and Section 2 - **Medical Emergency** and Repatriation Service will be subject to a policy **excess** of £200: bobsleigh, heli skiing.

Group D – **You** will not be covered for participating in the following sports and activities under any circumstances:
skiing (off piste without a guide), ski jumping, ski racing, ski stunting, snowboarding (off piste without a guide).

You will be covered for the defined **winter sports** activities on **trips** up to an overall maximum of:

- no more than 31 days in total per **trip**; and
- no more than 120 days in total in each **period of insurance**.

Cover is not available to anyone aged 70 years or over taking part in **winter sports** for the first time.

Please also note the above lists are not exhaustive and if a sport or activity **you** want to do is not listed, please contact American Express on **0800 700 707** for advice.

Winter Sports Equipment
Skis, snowboards, ski boots, and ski equipment (not clothing).

You, **yourself**, **your insured person(s)**
The person(s) named on **your** Certificate of Insurance who:

a) permanently resides in the **United Kingdom** and has been resident for at least 6 months of the 12 months prior to the date of the Policy issue or renewal; and
b) is registered with a General Practitioner in the **United Kingdom**; and
c) has complied with **our** Important Health Requirements, and for whom the appropriate premium has been paid.

When the family premium has been paid, children must be under 18 years old on the first day of cover, in full time education and be travelling with **insured person** named first on the Certificate of Insurance.

Cover is not available to anyone aged over 69 years on the first day of cover for **Worldwide Cover** and 79 for **European Cover**.

Policy Sections

1. Personal Assistance Services

Assistance and Information about your Destination

This section provides details of the services **we** provide before **you** travel.

We will provide **you** with advice and information on:

- current visa and entry permit requirements. If **your** passport was not issued in the **United Kingdom**, **we** may refer **you** to the United Kingdom Embassy or Consulate of the country where **your** passport was issued;
- current inoculation/vaccination requirements and World Health Organisation warnings. **We** can also help **you** arrange inoculations or vaccinations in the **United Kingdom** but **we** will not pay for the actual costs of inoculations or vaccinations;
- climatic conditions;
- languages;
- time differences;
- information and advice on the availability of various currencies and specification of the prime currency of **your** destination;
- main bank opening hours;
- national or bank holidays;
- motoring regulations and restrictions including whether **you** will need a Green Card;
- other motoring insurance issues.

Personal Assistance

This part of the Policy booklet explains the administrative and delivery costs **we** will pay for services **we** provide outside the **United Kingdom**.

1. Transfer of Emergency Funds
   If **you** need funds and access to **your** normal financial or banking arrangements is not available locally, **we** will transfer funds intended to cover **your** immediate emergency needs to **you** if **you** allow **us** to debit a credit, debit, or charge card, or arrange for funds to be deposited with **us** in the **United Kingdom**. The most **we** will transfer per **trip** is £200.
2. Concierge Service
   We will provide advice and information on any travel related issue **you** may have and **we** will help **you** with any problem or query relating to **your trip** which is not covered by any of the other headings in this section.

For example, **we** can arrange to pre-book hotels or have chocolate and champagne awaiting **your** arrival;

book restaurants on **your** behalf; arrange for a readily available shopping item to be purchased if **you** do not have time to do it **yourself**.

Please note that **we** will arrange for the service, but all delivery costs, the cost of items purchased on **your** behalf, and service charges must be paid for by **you**.

3. Message Relay
   We will send urgent messages to **your home**, if **you** suffer an illness, accident or have unforeseen travel delay problems.
4. Drug and Glasses/Contact Lens Replacement.

We will help **you**:

- replace essential prescription medication which has been lost or stolen, if it, or a local equivalent, is unavailable when **you** are outside the **United Kingdom;**
- replace prescription glasses or contact lenses which have been lost, stolen, or broken which **you** cannot get outside the **United Kingdom**;
- trace and deliver blood supplies which **you** cannot obtain outside the **United Kingdom**.

5. Medical Referral
   We will provide access to the names and addresses of local doctors, hospitals, clinics or dentists when **you** want a consultation or if minor treatment is needed. If any treatment other than for minor ailments is needed, **you** must advise **us** as soon as possible.
6. Medical Referral for Children
   If any of **your** children under 18 years of age, who **you** leave in the **United Kingdom** when **you** travel, become ill or suffer injury **we** will, if **you** ask **us** to, provide medical advice and monitor the situation until **you** return **home**.
7. Tracing lost **Personal Baggage**
   We will help trace **your personal baggage** and deliver it to **you** if it has been lost and the **carrier** has not found it for **you**. **We** will need **your personal baggage** tag number.
8. Replacement Travel Documents
   We will help **you** to replace these and refer **you** to a suitable travel office if **your** tickets and travel documents, including **your** passport, have been lost or stolen.

9. Lost Credit, Debit and/or Charge Cards
   We will tell **your** credit, debit and/or charge card company in the **United Kingdom** if **your** credit, debit and/or charge cards are lost or stolen.

Homecare

What **you** are covered for:

We will arrange for one of **our** approved tradesmen to contact **you** to make emergency repairs to **your** domestic plumbing or drainage system, domestic gas or electricity supply, roofing, external locks, doors or windows or fixed heating system, if any of them suffer damage during, and up to seven days after **you** return **home** from **your trip**.

We will pay for the call-out charge and one man hour's labour charge. **We** will also pay for any parts/materials used to effect a repair, up to a maximum of £50 (including VAT) per **trip**.

What **you** are not covered for::

a) more than one man hour's labour charge;
b) costs of more than £50 (including VAT) for parts/materials used to effect a repair;
c) blockage of toilet units not caused by breakage or sudden mechanical failure;
d) failure of the central heating system unless there is a risk of frost damage to **your home**;
e) emergencies caused by leaking water hoses or water appliances;
f) leaking overflows or gradual seepage from defective seal joints; any claim involving a septic tank; descaling or work relating to removing hard water scale deposits;
g) damage to **home** contents;
h) damage caused by the tradesman gaining necessary access to **your home**;
i) any amount payable where the cost is recoverable under any other insurance contract or agreement;
j) any costs which were not authorised by **us** first.

Please also refer to the General Conditions and General Exclusions.

2. Medical Emergency and Repatriation Service

This section provides details of the cover **we** provide for a **medical emergency** and other expenses relating to such an emergency.

To comply with the terms and conditions of the insurance, **you** must contact **us** immediately (or as soon as **you** are physically able to do so) if **you** are hospitalised as an in-patient, or before incurring any expenses whatsoever over £500, in order to obtain **our** prior authorisation. For the avoidance of any doubt – failure to contact **us** as required may result in **our** declining to pay **your** claim.

What **you** are covered for:

1. **We** will pay the following costs if **you** suffer an unforeseen **bodily injury**, illness, a **complication of pregnancy** or die during a **trip** outside the **United Kingdom**.

a) All reasonable and necessary expenses which arise as a result of a **medical emergency** (excluding search and rescue) involving **you**. This includes **medical practitioners**' fees, hospital expenses, medical treatment and all the costs of transporting **you** to the nearest suitable hospital, when deemed necessary by a recognised **medical practitioner**.

The most **we** will pay **you**, under this section per **trip**, for any one claim in total is £10,000,000. This does not apply to **trips** within the **United Kingdom**.

b) All reasonable and necessary emergency medical expenses for all infants born following **complications of pregnancy** during a **trip**. Claims involving multiple births are considered to be one event. The most **we** will pay **you** per **trip** under Section 1-2. i) is £75,000 (£200,000 for trips to USA or Caribbean).

c) Emergency dental treatment for the immediate relief of pain and/or emergency repairs to dentures or artificial teeth solely to relieve distress in eating. The most **we** will pay **you** per **trip** under Section 2 -1 c) is £1,000.

d) in the event of death:
   i. the cost of burial or cremation outside the **United Kingdom**; or

ii. transport of **your** body or ashes to **your home**.

The most **we** will pay **you** per **trip**, under Section 2- 1. c) is £4,000.

e) With **our** prior authorisation, additional travelling costs to repatriate **you** to the **United Kingdom** when recommended by **our** Chief Medical Officer, including the cost of a medical escort if necessary.

f) Reasonable additional travelling and accommodation costs for returning **home** insured members of **your family** travelling with **you**, where a valid claim is made under this section, including the cost of a competent adult of **our** choice to accompany any insured children under 18 years of age, if **your bodily injury**, illness or death means there is no one else to look after them. Any travel (flight tickets will be for economy class or at the same class as that originally purchased) and/or accommodation (on a half-board basis) must be arranged by **us**, or with **our** prior approval.

g) Reasonable additional accommodation and meal expenses incurred up to the standard of **your** original booking, if it is recommended by the treating registered **medical practitioner**, and agreed by **our** Chief Medical Officer, that it is medically necessary for **you** to stay beyond **your** original return date.

h) If **you** are travelling unaccompanied and if it is agreed by **our** Chief Medical Officer that it is medically necessary for **you** to be accompanied on the **trip home**, **we** will pay the additional travelling and accommodation costs for one person to fly out to **you** and accompany **you home**. Accommodation will be on a half-board basis. **We** will not pay for travel (flight tickets will be for economy class) and/or accommodation that has not been arranged through **us**, or incurred without **our** prior approval. The most **we** will pay **you** per trip under Section 2 -1. h) is £1,500.

i) If **you** are travelling accompanied by another adult(s), and the return journey cannot take place on the original scheduled date, if it is agreed by **our** Chief Medical Officer that a person should stay with **you**, and/or accompany **you home**, then **we** will arrange and pay for one person's necessary additional travel

and accommodation costs. Accommodation will be on a half-board basis. **We** will not pay for travel (flight tickets will be for economy class) and/or accommodation that has not been arranged through **us**, or incurred without **our** prior approval.The most **we** will pay **you** per trip under Section 2 -1. i) is £1,500.

2. If **you** suffer **bodily injury** or sudden illness while on a **trip** in the **United Kingdom**, **we** will pay the cost of transferring **you** to a suitable hospital near **your home** or to **your** home if **you** are hospitalised more than 50 miles from **your home**.
   The most **we** will pay **you** per **trip** under Section 2 – 2. is £500.

What **you** are not covered for:

a) the **excess** per **insured person**, for each and every incident;

b) costs of more than £500 or medical repatriation not agreed or authorised by **us** in advance;

c) any claims arising directly or indirectly as a result of any **pre-existing medical conditions** unless **you** have declared ALL **pre-existing medical conditions** to **us** and **we** have written to **you** accepting them for insurance;

d) any treatment or diagnostic testing that was pre-planned or pre-known by **you**;

e) any treatment which is not a surgical or medical procedure with the sole purpose of curing or relieving acute unforeseen illness or injury;

f) treatment costs for cosmetic reasons unless **our** Chief Medical Officer agrees such treatment is necessary as a result of an accident covered by this Policy;

g) the cost of any treatment which, in the opinion of **our** Chief Medical Officer, can safely be delayed until **your** return **home**;

h) any costs **you** incur outside the **United Kingdom** after the date **our** Chief Medical Officer tells **you you** should return **home** or **we** arrange for **you** to return **home**. (**Our** liability to pay further costs under this section after that date will be limited to what **we** would have paid if **your** repatriation had taken place.);

i) **you** must not unreasonably refuse the medical

repatriation services **we** agree to provide and pay for under this Policy. If **you** choose alternative medical repatriation services without reasonable grounds for doing so, which **we** have accepted in writing, it will be at **your** own risk and own cost.

j) expenses incurred as a result of a tropical disease where **you** have not had the recommended inoculations or vaccinations and/or taken the recommended medication;

k) A claim arising from pregnancy related conditions not due to **complications of pregnancy** which first arise after departing on **your trip**. Normal pregnancy or childbirth, or travelling when **your medical practitioner** has recorded **your** pregnancy as being at heightened risk of premature birth, would not constitute an unforeseen event;

l) treatment or services provided by a private clinic or hospital, health spa, convalescent home or any rehabilitation centre unless confirmed as medically necessary by **our** Chief Medical Officer;

m) costs incurred in the United States that exceed the average reimbursement the medical service provider receives for all services rendered to its patients for like treatment, but in any event no more than one and a half times the rate that would be applicable if the costs were payable by US Medicare;

n) costs incurred in the **United Kingdom** other than the cost of transporting **you** or **your** body or ashes to **your home**;

o) the cost of flight tickets exceeding economy class for an accompanying non-medical escort in the event of medical repatriation (any increase in cost due to requested upgraded flight tickets must be at the personal expense of the person(s) travelling);

p) costs for accommodation exceeding half-board;

q) any costs for transportation and/or accommodation not arranged by **us**, or incurred without **our** prior approval;

r) the cost of dental treatment involving the provision of dentures, artificial teeth or the use of precious metals;

s) the cost of replacing medication **you** were using when **you** began **your trip**;

t) air-sea rescue costs;

u) any medical costs **you** incur when **you** are engaging in **Winter Sports** activities, where **you** have not paid the **Winter Sports** Option premium;

v) any medical costs **you** incur when **you** are engaging in any Group C **Adventure Sports and Activities** or Group C **Winter Sports** and where **you** have not paid the Adventure Sports and Activities Option premium;

w) the **excess** per insured person, for each and every incident except where **you** have paid the Excess Waiver Option premium. Please note an **excess** of £200, which cannot be removed or reduced by use of a European Health Insurance Card (EHIC), also applies to each insured person to each and every claim they make when taking part in any activity listed under either Group B or C **Adventure Sports and Activities** or Group B or Group C **Winter Sports**.

Please also refer to the General Conditions and General Exclusions.

3. Hospital Cash Benefit

This section provides details of the benefit **we** will pay for a hospital in-patient stay outside the **United Kingdom**.

What **you** are covered for:

If **we** accept a claim under Section 2 – **Medical Emergency** and Repatriation Service, **we** will also reimburse **you** up to £30 for incidental expenses in the hospital (such as newspapers, television rental and visitor taxi journeys) for each continuous 24 hour period that **you** have to spend in hospital as an in-patient outside the **United Kingdom**. Itemised receipts must be kept as proof of costs incurred.

The most **we** will pay **you** per **trip** under this section is £500.

What **you** are not covered for:

a) any claim where **you** cannot provide itemised receipts;

b) claims for more than one round trip taxi journey per day.

Please also refer to the General Conditions and General Exclusions.

4. Personal Accident

What **you** are covered for:

If **you** suffer an accidental **bodily injury** during **your trip**, which within 12 months is the sole and direct cause of death or disablement, **we** will pay to **you** or **your** legal personal representatives the following benefits:

1. £30,000 for death; or £1,000 if **you** are under 18 years old or over 70 years old; or
2. £30,000 for the **loss of** (one of more) **limbs**, or the total and irrecoverable **loss of sight** in one or both eyes; or
3. £30,000 for **permanent total disablement**.

The most **we** will pay **you** in total under this section per **trip** is £30,000.

What **you** are not covered for:

a) any claim arising directly or indirectly from any **pre-existing medical condition**(**s**);

b) any claim resulting either directly or indirectly from **you** engaging in any Group B or C **Adventure Sports and Activities** or Group B or Group C **Winter Sports**.

Please also refer to the General Conditions and General Exclusions.

5. Curtailment

This section provides details of the cover **we** provide if **you** need to curtail **your trip** having already departed.

What **you** are covered for:

If **you** are forced to curtail a **trip you** have already commenced, which was booked within the **period of insurance**, because of any one of the following changes in circumstances, which is beyond **your** control, and of which **you** were unaware at the time **you** booked **your trip**:

1. unforeseen illness, injury or death of **you**, a **close relative** or any person with whom **you** are travelling or staying during **your trip**;
2. a **complication of pregnancy** involving **you**;
3. **you** or any person with whom **you** are travelling being called up for Jury Service or being subpoenaed as a witness in a Court of Law other than in a professional or advisory capacity;
4. accidental damage, burglary, flooding or fire affecting **your home**, when a loss exceeding £1,500 is involved and **your** presence is required by the Police;

then **we** will reimburse **you** up to a maximum of £5,000 in total for financial loss **you** suffer for travel (including pre-paid excursions and/or conferences) and accommodation **you** do not use because of **your** inability to complete **your trip**.

Important Limitations

This policy will not cover any claims under Section 5 - **Curtailment** arising directly or indirectly from any **pre-existing medical condition** known to **you** prior to purchasing this policy or booking any **trip** (whichever is the later) affecting any **close relative**, travelling companion who is not insured under the policy, or any person with whom **you** have arranged to reside temporarily whilst on **your trip** if:

1. a terminal diagnosis had been received; or if
2. they were on a waiting-list for, or had knowledge of the need for, surgery, in-patient treatment or investigation at any hospital or clinic; or if
3. during the 90 days immediately prior to the commencement of the policy or prior to booking any **trip** (whichever is the later) they had required surgery, in-patient treatment or hospital consultations.

Special Conditions

1. if **you** are forced to curtail **your trip** for medical reasons:

   a. relating to **you** – **you** must get a medical certificate from the treating registered **medical practitioner** at the resort or place of incident, explaining why it is deemed medically necessary for **you** to curtail **your trip**.

   You may also be required to have the relevant

section of **your** claim form completed by **your** usual registered **medical practitioner** within the **United Kingdom** with regard to pre-existing medical history.

b. relating to a close relative within the **United Kingdom** – **you** will be required to have the relevant section of **your** claim form completed by their usual registered **medical practitioner**, with regard to pre-existing medical history if appropriate and explaining why it was deemed necessary for **you** to curtail **your trip**.

c. relating to any person with whom **you** are travelling or staying during **your trip** – **you** will need to obtain a copy of a medical certificate from their treating registered **medical practitioner** at the resort or place of incident, explaining why it is deemed medically necessary for the **trip** to be curtailed.

You may also be required to have the relevant section of **your** claim form completed by the patient's usual registered **medical practitioner** with regard to pre-existing medical history if appropriate.

2. **You** must contact **us** to make necessary travel arrangements for **you**.
3. In the event of a claim for **curtailment**, indemnity will be calculated strictly from the date **you** return to **your home** in the **United Kingdom**.

<u>What **you** are not covered for:</u>

a) the **excess** (for claims involving loss of deposit the **excess** will be £10 only) except where **you** have paid the Excess Waiver Option Premium. The **excess** is per insured person, for each and every incident;

b) curtailing **your trip** for any reason other than specified under 'What **you** are covered for';

c) any claim arising directly or indirectly from any **pre-existing medical condition** affecting **you** unless **you** have declared ALL **pre-existing medical conditions** to **us** and **we** have written to **you** accepting them for insurance;

d) Any claim arising from **complications of pregnancy** which:

i) for Cancellation or re-booking – first arise before booking or paying for the trip, whichever is the later; or

ii) for Curtailment - first arise before departing on **your trip**.

Normal pregnancy or childbirth, or travelling when **your medical practitioner** has recorded **your** pregnancy as being at heightened risk of premature birth, would not constitute an unforeseen event;

e) claims for financial loss in respect of travel and/or accommodation booked and paid for by **you** on behalf of anyone who is not an **insured person** under **your** Policy;

f) any claim caused by **strike** or **industrial action**;

g) any costs incurred because **you** did not contact the emergency service provider to make the necessary travel arrangements, immediately **you** knew that **your trip** was to be curtailed;

h) any costs incurred when **you** do not get a medical certificate from the treating **medical practitioner** at **your** resort or place of incident, explaining why it is deemed medically necessary to return **home** early to the **United Kingdom**;

i) any claim resulting from the withdrawal from service of any **public transport** on the orders or recommendation of the regulatory authority in any country. **You** should refer any claim in this case to the transport operator involved;

j) any claim resulting from the failure of the provider of any service forming part of **your** booked **trip** to provide any part of **your** booked **trip** including error, insolvency, omission or default;

k) any claim resulting from change of plans due to **your** financial circumstances;

l) any claim resulting from **your** inability to travel due to an **insured person's** failure to hold, obtain or produce a valid passport or any required visa;

m) any claim resulting from **curtailment** caused by work commitments or amendment of **your** holiday entitlement by **your** employer;

n) any claim resulting from the delay or amendment of **your** booked **trip** because of Government action or restrictive regulations;

o) costs paid for using any airline mileage reward scheme, for example Avios, or any card bonus point schemes, Timeshare, Holiday Property Bond or other holiday points scheme and/or any associated maintenance fees;

p) the cost of recoverable airport charges and levies;

q) any claim resulting from the death or illness of pets or animals.

Please also refer to the General Conditions and General Exclusions.

Independently Booked Accommodation Protection

What **you** are covered for:

If the providers of **your** independently booked accommodation cease to trade, **you** will be covered up to £5000 additional accommodation and transport costs incurred, up to the standard of **your** original booking, if **you** need to move to other accommodation on arrival or at any other time during **your trip** because **you** cannot use **your** booked accommodation.

What **you** are not covered for:

a) the **excess** except where **you** have paid the Excess Waiver Option premium. The **excess** is per insured person, for each and every incident;

b) any accommodation booked via an ABTA or ATOL bonded company;

c) any costs incurred by **you** which are recoverable from the company providing the accommodation or for which **you** receive or are expected to receive compensation;

d) claims for financial loss in respect of accommodation booked and paid for by **you** on behalf of anyone who is not an **insured person** under **your** Policy.

Please also refer to the General Conditions and General Exclusions.

6. Missed Departure and/or Missed Connection(s)

This section provides details of the services and benefits **we** provide to **you** during **your trip** if **you** are delayed

when travelling to **your** point of international departure and **you** miss a travel departure or a connection on either **your** outward or **your** return journey.

What **you** are covered for:

Additional costs **you** have to pay when **you** travel to **your** international departure point or **you** miss a connection and **you** have taken every reasonable step to ensure **you** get there on time but **you** are still delayed on **your** way because of:

1. cancellation, failure or disruption of **public transport**; or
2. an accident to or breakdown of the vehicle in which **you** are travelling.

We will help **you** to get to **your** international departure point by:

- liaising with **your carrier** and/or tour operator to advise them of **your** late arrival;
- arranging emergency local help including towing **your** vehicle to the nearest garage;
- arranging alternative transport;
- arranging for overnight hotel accommodation and alternative international travel to **your** pre-booked destination by the most direct alternative route.

The most **we** will pay **you** per **trip** under this section is £1,000.

What **you** are not covered for:

a) any delay caused by **strike** or **industrial action** which had started or for which the start date had been announced before **you** made travel arrangements for **your trip**, and/or arranged **your** insurance;

b) any claim resulting from the withdrawal from service of **public transport** on the orders or recommendation of the regulatory authority in any country;

   N.B. **You** should refer any claim in this case to the transport operator involved.

c) additional costs where the **public transport** operator has offered reasonable alternative travel arrangements;

d) any claim for additional mechanical wear and tear or loss of value or for additional mileage charges other

than for additional fuel and oil;

e) any claim under this section where **you** are also claiming under Section 13 – Cancellation, or Section 7 – Travel Delay & Involuntary Denial of Boarding;

f) additional costs which are not directly related to **you** travelling to **your** international departure point or **your home**;

g) any claim where **you** have not provided written evidence of the breakdown or accident involving the car **you** were travelling in;

h) any claim where **you** have not obtained written confirmation from the **carrier** stating the period and the reason for delay;

i) any claim where **you** have not allowed **yourself** sufficient time to arrive at the international departure point in time to check-in or clear passport and security controls;

j) any claim where **you** did not contact **us** to make the necessary travel arrangements.

Please also refer to the General Conditions and General Exclusions.

7. Travel Delay & Involuntary Denial of Boarding

This section provides details of the benefits **we** provide if **your** travel is delayed or if **you** are involuntarily denied boarding of a scheduled flight.

What **you** are covered for:

1. If **you** have arrived at the terminal and have checked-in, or attempted to check in for **your** pre-booked flight, sea crossing, international coach or international train journey from or to the **United Kingdom**, and it is delayed for more than six hours beyond the intended departure time as a direct result of **strike** or **industrial action**, **adverse weather conditions** or mechanical breakdown of **public transport**; or
2. If **you** have arrived at the terminal and have checked-in, or attempted to check in for **your** confirmed flight and **you** are involuntarily denied boarding as a result of overbooking;

we will reimburse **you** up to:

a) £35 for the first full six hours that **your** departure is delayed for **your** costs incurred in the terminal in respect of restaurant meals and refreshments consumed; and

b) £35 for each additional full twelve hour period of delay for **your** costs incurred in the terminal in respect of restaurant meals, refreshments consumed and hotel accommodation.
Itemised receipts must be kept as proof of purchase.
The maximum **we** will pay **you** per **trip** under a) and b) is up to the amount of **your** pre-booked **trip**, but in any event no more than £350.

OR

c) If after a minimum of 24 hours delay on **your** outward journey and the period of **your trip** is reduced by more than 25% of the original pre-booked duration, **you** may choose to submit a cancellation claim under Section 13 – Cancellation (as long as **you** have not chosen to exclude Section 13 - Cancellation in return for a reduced premium as shown on **your** Certificate of Insurance). A refund or alternative compensation must initially be sought from the travel provider.

<u>What **you** are not covered for:</u>

a) claims where **you** do not provide receipts for the restaurant meals, refreshments and accommodation;

b) delays caused by **strike** or **industrial action** which had started, or for which the start date had been announced, before **you** made travel arrangements for **your trip**, and/or arranged **your** insurance;

c) delays caused by the withdrawal from service of any **public transport** on the orders or recommendation of the regulatory authority in any country;

N.B. **You** should refer any claim in this case to the transport operator involved.

d) the failure of the provider of any service forming part of **your** booked **trip** to provide any part of **your** booked **trip** including error, insolvency, omission or default;

e) any claim where **you** are already claiming under Section 6 – Missed Departure and/or Missed

Connection(s) or under Section 13 - Cancellation;

f) any costs or charges for which any **carrier** or provider must, has or will compensate **you**;

g) any claim where **you** have not obtained written confirmation from the **carrier** giving the period and reason for delay;

h) any claim for a delay that **you** are aware of at the time of booking **your trip** or taking out this Policy;

i) if **you** do not check-in (or attempted to check in) and arrive at the departure point for the flight, sea crossing, coach, or train departure before the advised time;

j) any claim due to Involuntary denial of boarding relating to private charter flights.

Please also refer to the General Conditions and General Exclusions.

8. Kennel and Cattery

This section provides details of the cover **we** provide for **your** domestic dog(s) and/or cat(s) if **your** return **home** is delayed due to a valid claim under this Policy.

What **you** are covered for:

We will pay for additional kennel and/or cattery costs up to £250 if **you** are unable to return **home** as expected due to any reason for which **you** make a valid claim under this Policy.

What **you** are not covered for:

Please also refer to the General Conditions and General Exclusions.

9. Personal Baggage Delay

This section provides details of the cover **we** provided if **your personal baggage** is delayed on **your** outward journey.

What **you** are covered for:

We will pay **you** up to £200 towards the cost of buying essential items if **your personal baggage** has been misplaced by the **carrier** for more than six hours on the outward journey of **your trip**.

The most **we** will pay **you** in total per **trip** under this section is £200.

Special Conditions

1. **You** must notify the **carrier** immediately and obtain a written **carrier's** report confirming the period of the delay of **your personal baggage** (or a property irregularity report in the case of an airline) or if **you** are unable to get one immediately **you** must follow up in writing within seven days to obtain a written **carrier's** report or a property irregularity report in the case of an airline;
2. Within 14 days of receipt of **your personal baggage you** should inform the **carrier** in writing that **we**, **your** travel insurer, will submit a claim to them for additional expenses due to **your personal baggage** delay. When **you** submit **your** claim to **us we** will then file **your** claim with the **carrier** on **your** behalf. **You** must submit the claim to **us** in the first instance and only notify the **carrier**;
3. **You** must keep all **your** receipts, flight tickets and checked-in luggage tags and send them to **us** with **your** claim.

What **you** are not covered for:

Please also refer to the General Conditions and General Exclusions.

10. Money

This section provides details of the cover **we** provide for **your money**.

What **you** are covered for:

Your money is covered while **you** are carrying it on **your** person (in an item of clothing **you** are wearing or in

a container which **you** are holding or which is attached to **you**) or if **you** have left it in a locked safety deposit box during **your trip**, if it is:

a) damaged or destroyed;

b) lost or stolen.

The most **we** will pay **you** in total per **trip** under this section is £500, of which;

a) the most **we** will pay **you** for cash is £250;

b) the most **we** will pay **you** for cash if **you** are under 16 years old is £50 per **trip**, but please note that the **excess** will not apply in this case.

Special Conditions

You must produce evidence of the withdrawal of bank notes, currency notes or coins.

Loss of Passport

Your passport is covered while **you** are carrying it on **your** person (in an item of clothing **you** are wearing or in a container which **you** are holding or which is attached to **you**) or if **you** have left it in a locked safety deposit box during **your trip**.

What **you** are covered for:

The cost of reasonable additional travel and accommodation expenses **you** incur outside the **United Kingdom** while obtaining a replacement passport if **your** passport is lost or stolen during **your trip**.

The most **we** will pay **you** under Loss of Passport is £500 per **trip**.

What **you** are not covered for:

a) the **excess** except where **you** have paid the Excess Waiver Option Premium. The **excess** is per insured person, for each and every incident;

b) personal **money** left **unattended** at any time unless deposited in a locked hotel safe, safety deposit box or locked in **your trip** accommodation;

c) the theft or loss of **money** which has not been reported to the local Police, **your carrier**, accommodation management or tour operator within 24 hours of the incident or as soon as **you** become aware that the incident has taken place. The incident report must be sent to **us** with **your** claim;

d) loss of value or loss due to errors in receipts, payments, accountancy or depreciation;

e) theft of **money** from an **unattended** road vehicle;

f) loss due to confiscation or detention by customs or other lawful officials and authorities;

g) the cost of **your** replacement passport.

Please also refer to the General Conditions and General Exclusions.

11. Personal Liability

This section provides details of the cover provided for certain personal legal responsibilities **you** may have.

What **you** are covered for:

Your legal responsibility to pay compensation and legal costs to others where **you** accidentally cause:

1. bodily injury, or death of anyone during **your trip**; and/or
2. loss of, or damage to, property during **your trip**.

The total maximum payable for any single event occurring during the **period of insurance**, for all claimants, in connection with all occurrences within one original cause is £2,000,000.

What **you** are not covered for:

a) death of, or bodily injury to **you**, any member of **your family**, **your close relative** or anyone in **your** service;

b) anything belonging to **you**, or anything which is the responsibility of **you** or any member of **your family** or **your close relative** or anyone employed by **you**;

c) any responsibility **you** undertake within a contract or agreement which would not have existed in law had that agreement not existed;

d) any responsibility resulting from **you** or any member of **your family** owning or using: aircraft; horse-drawn vehicles; motorised or mechanically propelled, or towed vehicles; boats (other than rowing boats,

punts and canoes); jet skis; jet bikes; skidoos; animals (other than horses, domestic dogs or cats) or firearms;

e) any responsibility resulting from **your**, or any member of **your family's**, trade, profession, occupation or supply of goods or services;

f) any responsibility resulting from wilful or malicious acts by **you**;

g) any claim which is covered by any other insurance held by **you**;

h) the occupation, except temporarily for the purposes of **your trip**, or ownership of any land or building;

i) accidental injury or loss which has not been caused by **your** negligence;

j) any responsibility **you** have as an employer to anyone employed by **you** or any member of **your** family in any trade, business or profession;

k) any injury, illness, death, loss expense or other liability attributable to the transmission of any communicable disease or virus and/or any related illness and/or any mutant derivatives or variations thereof, however caused;

l) any claim for incidents which occurred while **you** were on a **trip** within the **United Kingdom**;

m) any claim resulting either directly or indirectly from **you** engaging in any Group B or C **Adventure Sports and Activities** or Group B or Group C **Winter Sports**.

Please also refer to the General Conditions and General Exclusions.

12. Legal Advice and Expenses

This section provides details of the cover **we** provided for Legal Advice and Expenses.

What **you** are covered for:

1. telephone guidance and assistance on any legal

problem arising in connection with **your trip** or in connection with **your home**. This service is available from the start of **your trip** and up to seven days after **you** complete **your trip**;

2. telephone advice and guidance during the **period of insurance** to **you** or any **close relative** living with **you** on any legal problem which arises in connection with:

a) personal injury to, or death of, an **insured person**;

b) consumer disputes arising from the sale, purchase or hire of goods or services;

c) the sale or purchase of **your home**;

d) a **trip** outside the **United Kingdom**.

3. an advance up to a maximum of £50,000 towards legal fees, in connection with one event giving rise to a compensation claim if **you** suffer illness or **you** are injured or **you** die as a direct result of an event that happens during **your trip**, or if **your home** suffers damage during **your trip**;

4. any extra travelling expenses up to a maximum of £250, if **you** have to attend a court outside the **United Kingdom** about **your** claim for compensation;

5. when **we** have instituted proceedings on **your** behalf and **you** receive no compensation, or only limited compensation, **we** will indemnify **you** against claims or fees, costs and expenses arising out of the proceedings to the extent that these fees, costs and expenses exceed the amount of the compensation **you** have received up to a maximum of £50,000 (and in total for all **insured persons** in connection with any one event giving rise to a claim). This benefit will be offset against the advance described in Section 12 – 3. up to the maximum of £50,000;

6. legal fees up to a maximum of £1,000, incurred in defending **you** in a Court outside the **United Kingdom** against an alleged motoring offence during **your trip**;

7. a Bail Bond of £1,000 in local currency, to enable **you** to provide Bail or other security to any judicial authority outside the **United Kingdom** which detains

you following a road traffic accident where **you** are held responsible.

What **you** are not covered for:

a) costs or expenses which **we** have not agreed to beforehand in writing;

b) any claim reported to **us** more than 90 days after the incident and in the case of a motoring offence more than 28 days after **you** receive a summons;

c) any claim where **we** think there is not a reasonable chance of **you** winning the case or achieving a reasonable settlement;

d) any claim made by **you** against **us**, **our** agent or an insurer underwriting any section of this Policy, or a travel agent, tour operator, **carrier** or American Express Insurance Services;

e) any claim against any other person insured under an American Express Travel Insurance Policy;

f) penalties or fines which a Court awards against **you**.

Please also refer to the General Conditions and General Exclusions.

How **we** settle Legal Expenses claims:

We will appoint a member of our panel to handle **your** case. However, should **you** choose to appoint an **adviser** of **your** own choice to act on **your** behalf, **you** will notify **us** to that effect. **We** will, upon receipt of **your** notification, advise **you** of any conditions concerning such appointment.

The following shall apply at all times during the Policy:

a) **You** must notify **us** of claims as soon as reasonably possible.

b) **You** must notify **us** within 90 days of **you** becoming aware of an incident which may generate a claim.

c) **We** will provide **you** with a claim form which must be returned promptly with all relevant information required by **us**. **You** must supply at **your** own expense all of the information which **we** reasonably require to decide whether a claim may be accepted.

d) In the event of a dispute arising as to **adviser's costs we** may require **you** to change **adviser**.

e) **We** shall only be liable for **adviser's costs** for work expressly authorised by **us** in advance in writing and undertaken while there are reasonable prospects of success. In the event that **you** instruct an **adviser** of **your** own choice instead of the **panel adviser** appointed by **us**, **your adviser's costs** will be covered to the extent that they do not exceed **our** standard panel **adviser's** costs.

f) **You** are responsible for any **adviser's** costs if **you** withdraw from the legal action, other than on the advice of **your adviser**, without our prior consent. Any **adviser's costs** or other fees already paid under this insurance will be reimbursed to **us** by **you**.

g) **We** will not start legal proceedings in more than one country in respect of the same occurrence.

h) **We** may choose to conduct legal proceedings in the United States of America or Canada under the contingency fee system operating in those countries.

13. Cancellation

This section provides details of the cover **we** provide for Cancellation as long as **you** have not chosen to exclude Cancellation cover in return for a reduced premium and Cancellation cover is not shown as excluded on **your** Certificate of Insurance.

This section provides details of the cover **we** provide if **you** need to cancel **your trip** before **you** leave.

What **you** are covered for:

If **you** have booked a **trip** within the **period of insurance**, but **you** are forced to cancel **your** travel plans because of any one of the following changes in circumstances, which is beyond **your** control, and of which **you** were unaware at the time **you** booked **your trip**:

1. unforeseen illness, injury or death of **you**, a **close relative** or any person with whom **you** are travelling or staying during **your trip**;
2. a **complication of pregnancy** involving you;

3. **you** or any person with whom **you** plan to travel being called up for Jury Service or being subpoenaed as a witness in a Court of Law other than in a professional or advisory capacity;
4. **you** are made redundant and **you** qualify for redundancy payment under current legislation;
5. accidental damage, burglary, flooding or fire affecting **your home**, when a loss exceeding £1,500 is involved and **your** presence is required by the Police,

then **we** will reimburse **you** up to a maximum of £5,000 in total for financial loss **you** suffer for travel (including pre-paid excursions and/or conferences) and accommodation **you** do not use because of **your** inability to start **your trip**.

If **you** chose to rebook **your** covered holiday instead of to cancel, **we** will pay for rebooking fees if they are less than the cancellation costs.

You may be eligible to submit a claim for cancellation if **you** have a valid claim under Section 7 – Travel Delay & Involuntary Denial of Boarding c).

Important Limitations

This policy will not cover any claims under Section 13 - Cancellation arising directly or indirectly from any **pre-existing medical condition** known to **you** prior to purchasing this policy or booking any **trip** (whichever is the later) affecting any **close relative**, travelling companion who is not insured under the policy, or any person with whom **you** have arranged to reside temporarily whilst on **your trip** if:

1. a terminal diagnosis had been received; or if
2. they were on a waiting-list for, or had knowledge of the need for, surgery, in-patient treatment or investigation at any hospital or clinic; or if
3. during the 90 days immediately prior to the commencement of the policy or prior to booking any **trip** (whichever is the later) they had required surgery, in-patient treatment or hospital consultations.

Special Conditions

1. If **you** are forced to cancel **your trip** for medical reasons:
   a) relating to **you** – **you** will be required to have the relevant section of **your** claim form completed by

your usual registered **medical practitioner** within the **United Kingdom**, explaining why it is deemed medically necessary for **you** to cancel **your trip**;

b) relating to a **close relative**, any person with whom **you** are going to travel or stay during **your trip** – **you** will be required to have the relevant section of **your** claim form completed by their usual registered **medical practitioner,** explaining why it is deemed necessary for **you** to cancel **your trip**.

2. **You** must notify **you**r **carrier** or travel agent immediately **you** know **your trip** is to be cancelled to minimise **your** loss as far as possible.

What **you** are not covered for:

a) cover if **you** have chosen to exclude the Cancellation cover in return for a reduced premium as shown on **your** Certificate of Insurance;

b) the **excess** (for claims involving loss of deposit the **excess** will be £10 only) except where **you** have paid the Excess Waiver Option Premium. The **excess** is per insured person, for each and every incident;

c) cancelling **your trip** for any reason other than specified under 'What **you** are covered for';

d) any claim arising directly or indirectly from a **pre-existing medical condition** affecting **you** unless **you** have declared ALL **pre-existing medical conditions** to **us** and **we** have written to **you** accepting them for insurance;

e) Any claim arising from **complications of pregnancy** which:

i) for Cancellation or re-booking – first arise before booking or paying for the trip, whichever is the later; or

ii) for Curtailment - first arise before departing on **your trip**.

Normal pregnancy or childbirth, or travelling when your **medical practitioner** has recorded **your** pregnancy as being at heightened risk of premature birth, would not constitute an unforeseen event;

f) claims for financial loss in respect of travel and/ or accommodation booked and paid for by **you** on behalf of anyone who is not an **insured person** under **your** Policy;

g) any claim caused by **strike** or **industrial action**;

h) any costs incurred because **you** did not tell **your carrier** or travel agent immediately **you** knew that **your trip** was to be cancelled;

i) any claim resulting from the withdrawal from service of any **public transport** on the orders or recommendation of the regulatory authority in any country. **You** should refer any claim in this case to the transport operator involved;

j) any claim resulting from the failure of the provider of any service forming part of **your** booked **trip** to provide any part of **your** booked **trip** including error, insolvency, omission or default;

k) any claim resulting from change of plans due to **your** financial circumstances except if **you** are made redundant and qualify for redundancy payment under current UK legislation;

l) any claim resulting from **your** inability to travel due to an **insured person's** failure to hold, obtain or produce a valid passport or any required visas;

m) any claim resulting from cancellation caused by work commitments or amendment of **your** holiday entitlement by **your** employer;

n) any claim resulting from the delay or amendment of **your** booked **trip** because of Government action or restrictive regulations;

o) costs paid for using any airline mileage reward scheme, for example Avios, or any card bonus point schemes, Timeshare, Holiday Property Bond or other holiday points scheme and/or any associated maintenance fees;

p) the cost of recoverable airport charges and levies;

q) any claim resulting from the death or illness of pets or animals.

Please also refer to the General Conditions and General Exclusions.

14. Personal Baggage

This section provides details of the cover **we** provide for **your personal baggage** and/or **valuables** as long as **you** have not chosen to exclude the **Personal Baggage** cover in return for a reduced premium and **personal baggage** is not shown as excluded on **your** Certificate of Insurance.

What **you** are covered for:

Your personal baggage and/or **valuables** are covered if they are:

1. damaged or destroyed (in this instance, please retain any damaged or destroyed item for inspection if required);
2. lost or stolen and not recovered within 28 days of **you** arriving back in the **United Kingdom**.

The most **we** will pay **you** per **trip** under this section is £2,500 in total and:

a) the most **we** will pay **you** for any one item or any one **pair or set** per **trip** is £250;

b) the most **we** will pay **you** for **valuables** in total per **trip** is £300.

Special Conditions

1. **We** will pay the cost of replacing lost, stolen, damaged, or destroyed items subject to a deduction made for wear, tear and loss of value based on the age of the property.
2. If the item can be repaired economically **we** will pay the cost of the repair only.
3. **We** will request original receipts for lost, stolen or damaged goods.
4. **You** must not abandon any property for **us** to deal with or dispose of any damaged items as **we** may need to see them.

What **you** are not covered for:

a) any claim for **personal baggage** and/or **valuables** where **you** have chosen to exclude the **Personal Baggage** cover in return for a reduced premium as shown on **your** Certificate of Insurance;

b) the **excess** except where **you** have paid the Excess Waiver Option premium. The **excess** is per insured person, for each and every incident;

c) any item loaned, hired or entrusted to **you** (except **winter sports equipment** when **you** have purchased the **Winter Sports** Option);

d) theft of **personal baggage**, from an **unattended** motor vehicle unless:

   i) the items were out of sight in a locked dashboard or locked boot; and

   ii) evidence that force and violence were used to get into the motor vehicle is provided by **you**;

e) Loss, theft of or damage to **valuables** left **unattended** at any time (including in a vehicle or in the custody of **carriers**) unless deposited in a hotel safe or locked safety deposit box or from **personal baggage** in transit or in the care of someone other than **you**;

f) **personal baggage** when **you** have left it unsecured or **unattended** or outside **your** reach at any time in a place to which the public have access;

g) contact or corneal lenses; dentures; bonds; securities; stamps or documents of any kind including driving licence; keys and necessary changes to locks; musical instruments; glass; china; antiques; pictures; pedal cycles; hearing aids; coupons; alcohol, tobacco products; cosmetics; computer hardware, peripherals and software (excluding laptop, notebook and tablet computers); PDAs; televisions; vehicles (including boats or any parts or accessories for any of them);

h) damage to suitcases unless they are entirely unusable as a result of one incidence of damage;

i) claims which are not supported by the original receipt, proof of ownership or insurance valuation (obtained prior to the loss) of the items lost, stolen or damaged;

j) claims arising from damage caused by leakage of powder or liquid carried within **personal baggage**;

k) loss, damage or destruction by wear and tear, moths, vermin, denting, scratching, dyeing, or cleaning;

l) electrical or mechanical breakdown of any insured article;

m) loss or damage due to delay, confiscation or detention by customs or other official bodies;

n) in the event of a claim for a **pair or set** those parts that remain in **your** possession which are undamaged;

o) damage to any brittle or fragile items unless they are damaged by fire or damaged because of an accident which happens to a sea-going vessel, aircraft or motor vehicle;

p) theft or losses from a roof or boot luggage rack other than the theft or loss of camping equipment;

q) sports equipment damaged while in use. However, if **you** have paid the **Adventure Sports and Activities** Option premium, **your** own Group C sports equipment will be covered against damage while in use up to the Policy limits. Please refer to Section 19 – **Adventure Sports and Activities** (Optional Cover);

r) **winter sports equipment** unless **you** have paid the appropriate additional premium and it is shown on **your** Certificate of Insurance;

s) **golf equipment** unless **you** have paid the appropriate additional premium and it is shown on **your** Certificate of Insurance;

t) **business equipment** unless **you** have paid the appropriate premium and it is shown on **your** Certificate of Insurance;

u) claims arising from loss or theft from **your** accommodation unless there is evidence of forced entry which is confirmed by a police report, including an incident number, issued by the local police in the country of incident;

v) theft or loss of **personal baggage** and/or **valuables** which has not been reported to the local Police in the country of incident, **your** accommodation management, **your carrier** or tour operator within 24 hours of the incident or within 24 hours of **you** becoming aware that the incident has taken place. The incident report with a case number must be sent to **us** with **your** claim;

w) loss or theft of, or damage to, **personal baggage** in transit which has not been reported to the **carrier** within 24 hours of the incident. The incident report must be sent to **us** with **your** claim – in the case of checked-in luggage a property irregularity report is required. **You** will be required to send **us** the retained portion of **your** flight ticket and checked-in luggage tag.

Please also refer to the General Conditions and General Exclusions.

15. Winter Sports (Optional Cover)

Cover will apply when **you** have paid or agreed to pay the Winter Sports Option premium and it is shown on **your** Certificate of Insurance.

You will be covered for the defined **winter sports** activities on **trips** up to an overall maximum of:

- no more than 31 days in total per **trip**; and
- no more than 120 days in total in each **period of insurance**.

Cover is not available to anyone aged 70 years or over taking part in **winter sports** for the first time.
You are not covered when engaging in organised competitions or when skiing against local authoritative warning or advice.

Adventure Sports and Activities specific to **Winter Sports**:

When **you** pay the Adventure Sports and Activities Option premium, **you** are also covered for Group C **Winter Sports**.

The following additional benefits are available under this Policy in relation to **your Winter Sports trip**.

Piste Closure

What **you** are covered for:

If **you** cannot ski at **your** pre-booked resort for more than 24 consecutive hours, because of a lack of snow causing a total closure of the lift system, **we** will pay **you** a cash benefit if no alternative skiing is available. If

alternative skiing is available **we** will pay for reasonable transportation costs and lift pass charges which **you** have to pay to travel to and from a similar ski resort or area to ski.

The most **we** will pay **you** for Piste Closure per day is £20 and up to a maximum of £200 in total per **trip**.

What **you** are not covered for:

a) any claim which involves the closure of the resort lift system because of avalanches or dangerous high winds;

b) any claim which involves the closure of baby drags and lifts used for transport within the resort by non-skiers;

c) **trips** in the Northern Hemisphere before 1st November and after 31st March;

d) **trips** in the Southern Hemisphere before 1st May and after 30th September;

e) any claim where **you** do not have confirmation from the ski resort of the closure.

Please also refer to the General Conditions and General Exclusions.

Avalanche Benefit

What **you** are covered for:

Additional accommodation and travel expenses reasonably incurred if, following avalanches or landslides, access to and from the ski resort is blocked or scheduled public transport services are cancelled or curtailed. Evidence of limited access will be required.

The most **we** will pay **you** for Avalanche Benefit is £30 per day and up to £150 in total per **trip**.

What **you** are not covered for:

a) anything mentioned in the exclusions to Section 5 – **Curtailment**;

b) any claim where **you** do not have confirmation of the cancellation from the **public transport** provider.

Please also refer to the General Conditions and General Exclusions.

Winter Sports Equipment

What **you** are covered for:

We will cover **your Winter Sports** Equipment against loss, theft or damage occurring during **your trip**.

The most **we** will pay **you** for **your Winter Sports Equipment** is £500 in total per **trip**. The maximum **we** will pay **you** for any one article, or for any one **pair or set** under this section is £300.

What **you** are not covered for:

a) anything mentioned in the exclusions to Section 14 – **Personal Baggage**;

b) the **excess** per insured person, for each and every incident.

Please also refer to the General Conditions and General Exclusions.

Delayed Winter Sports Equipment

What **you** are covered for:

If **your Winter Sports Equipment** is certified by the **carrier** as misplaced in transit during **your trip**, for a period of more than 12 hours, **we** will pay **you** £20 per day for the necessary hire or replacement of **Winter Sports Equipment**.

The most **we** will pay **you** during any one **trip** under this section is £300.

Special Conditions

1. **You** must provide written confirmation from the **carrier** confirming the period of the loss of **your** delayed **Winter Sports Equipment**. Please retain **your** flight tickets, checked-in luggage tags and all receipts and send them to **us** with **your** claim.
2. **You** should also notify the **carrier** in writing of **your personal baggage** delay within 21 days of receipt of **your personal baggage**.

What **you** are not covered for:

a) any claim where **you** do not provide a valid receipt for the hired items.

Please also refer to the General Conditions and General Exclusions.

Unused Ski Pack

What **you** are covered for:

If during **your trip**, **you** are certified by a registered **medical practitioner** at the ski resort as being unable to ski as a direct result of injury or illness, **we** will pay **you** up to a maximum of £350 in total per **trip** in respect of charges for unused **ski pack**.

Search and Rescue

What **you** are covered for:

If **you** suffer **bodily injury**, illness or die during a **trip** outside the **United Kingdom we** will pay up to £150,000 for search and rescue, including emergency transfer to a hospital effected by local organisations, where such costs are not met by local authorities.

Special Conditions applying to off-piste skiing and off-piste snowboarding

Off-piste is defined as any skiing or snowboarding outside recognised and authorised areas. For **your** protection and to ensure continuity of cover under this Policy, **you** must adhere to the following conditions when **you** are intending to ski or snowboard off-piste. Failure to adhere to these conditions will invalidate **your** claim.

1. **You** must observe the rules of **your** resort or **Winter Sports** area. If in any doubt **you** should follow specialist local advice.
2. **You** must not under any circumstances attempt off-piste skiing or off-piste snowboarding unless **you** are under the supervision of a guide.
3. **Your** guide's advice and instructions must be strictly followed at all times.
4. As a general rule **you** should exercise common sense and follow sensible local practices.

16. Adventure Sports and Activities (Optional Cover)

Cover will apply when **you** have paid or agreed to pay the Adventure Sports and Activities Option premium and it is shown on **your** Certificate of Insurance.

When **you** have bought the Adventure Sports and Activities Option, **you** are covered under this Policy for any Group C **Adventure Sports and Activities**. Please note, however, that there is no cover under Section 4 – Personal Accident or Section 11 – Personal Liability while **you** are taking part in, or practising for, any Group B or C sporting activity.

Please remember that the **excess** is increased to £200 under Section 2 – **Medical Emergency** and Repatriation Service, and shall not be removed or reduced by the use of a European Health Insurance Card (EHIC) or by the purchase of the Excess Waiver Option.

Adventure Sports and Activities cover is not available to anyone aged 70 years or over.

Adventure Sports and Activities Equipment

What **you** are covered for:

We will cover **your** Group C sports gear and activity equipment against loss, theft or damage occurring during **your trip**.

The most **we** will pay **you** for **your** Group C sports gear and activity equipment is £500 per **trip**. The maximum **we** will pay **you** for any one article, or for any one **pair or set** under this section is £300.

What **you** are not covered for:

a) anything mentioned in the exclusions to Section 14 – **Personal Baggage**;

b) the **excess** per insured person, for each and every incident.

Please also refer to the General Conditions and General Exclusions.

17. Golf (Optional Cover)

Cover will apply when **you** have paid or agreed to pay the Golf Option premium and it is shown on **your** Certificate of Insurance.

The following benefits are available under this Policy in relation to **your** Golf **trip**.

Golf Equipment

What **you** are covered for:

1. If **your golf equipment** is

a) delayed for more than 12 hours on **your** outward journey, or

b) lost, damaged or stolen on **your trip**,

we will pay **you** up to the limits specified on **your** Certificate of Insurance for:

i) the hire of alternative **golf equipment**; and

ii) the purchase of essential items of **golf equipment**.

We will deduct any payment **we** make under Section 17 Golf Equipment 1. ii) from the amount of any claim under Section 17 Golf Equipment 2.

2. If **your golf equipment** is lost, stolen or damaged during **your trip we** will pay **you** up to the limits specified on **your** Certificate of Insurance for replacement **golf equipment**.

Special Conditions

1. **you** must keep all receipts for hire costs and send them in with **your** claim form;
2. **we** will deduct any payment **we** make under Section 17 Golf Equipment 1. ii) from the amount of any claim under Section 17 Golf Equipment 2.;
3. **golf equipment** will be replaced on a new for old basis (if the item is no longer available **we** will cover the replacement cost of a reasonable alternative);
4. all receipts must be provided as proof of purchase;
5. anything mentioned in General Conditions.

What **you** are not covered for:

a) the **excess** except where **you** have paid the Excess Waiver Option Premium. The **excess** is per insured person, for each and every incident;

b) any item, where **you** are not able to provide proof of value (for example, original receipts);

c) any loss, theft of or damage to **golf equipment** shipped as freight or under a bill of lading;

d) anything mentioned in the exclusions to Section 14 – **Personal Baggage**.

Please also refer to the General Conditions and General Exclusions.

Green Fees

What **you** are covered for:

We will pay up to £1,000 per **trip** to reimburse **your** prepaid, irrecoverable **green fees** if:

1. **you** are ill or injured during **your trip** and **you** are medically certified (by the treating registered **medical practitioner** at the resort or place of incident), as being unable to play golf for the remainder of **your trip**; or
2. **you** have to curtail **your trip** for any of the valid reasons listed under Section 5 – **Curtailment**; or
3. **you** have to cancel **your trip** for any of the valid reasons listed under Section 13 – Cancellation.

What **you** are not covered for:

a) the **excess** except where **you** have paid the Excess Waiver Option Premium. The **excess** is per insured person, for each and every incident;

b) anything mentioned in the exclusions to Section 5 – **Curtailment**;

c) anything mentioned in the exclusions to Section 13 – Cancellation.

Please also refer to the General Conditions and General Exclusions.

Tournament Entry Fees

What **you** are covered for:

We will pay up to £250 per **trip** to reimburse any prepaid, irrecoverable golf tournament entry fees if:

1. **you** are ill or injured during **your trip** and **you** are medically certified (by the treating registered **medical practitioner** at the resort or place of incident) as being unable to participate in the tournament; or
2. **you** have to curtail **your trip** for any of the valid reasons listed under Section 5 – **Curtailment**.
3. **you** have to cancel **your trip** for any of the valid reasons listed under Section 13 – Cancellation.

What **you** are not covered for:

a) anything mentioned in the exclusions to Section 5 – **Curtailment**;

b) anything mentioned in the exclusions to Section 13 – Cancellation.

Please also refer to the General Conditions and General Exclusions.

Hole-In-One

What **you** are covered for:

We will pay up to £300 per **trip** to reimburse the cost of a round of drinks at the golfing venue immediately following a game of golf in a recognised competition when a hole-in-one has been achieved and verified by the Club Secretary. All receipts must be provided as proof of purchase.

18. Business Travel (Optional Cover)

Cover will apply when **you** have paid or agreed to pay the Business Travel Option premium and it is shown on **your** Certificate of Insurance.

Personal Assistance Services

What **you** are covered for:

On request, **we** will provide **you** with the following services:

1. advice on and arrangement of suitable overseas office/conference facilities, business translation and legal services, and details of business etiquette overseas;
2. advice on chartering executive jets.

What **you** are not covered for:

a) the payment of any costs or expenses incurred.

Please also refer to the General Conditions and General Exclusions.

Replacement Business Associate

What **you** are covered for:

Following a claim under Section 2 – **Medical Emergency** and Repatriation Service, **we** will pay up to £750 for the cost of a single journey air ticket, at the same class as originally travelled by **you**, for a **business associate** to replace **you** in the overseas location as a result of:

1. **your** medical repatriation or death during **your trip**; or
2. **your** incapacitation, as confirmed by **our** Chief Medical Officer, for more than three working days during a **trip** as a result of sudden **bodily injury** or illness occurring during **your trip**.

What **you** are not covered for:

a) any costs for transportation not arranged by **us**, or incurred without **our** prior approval;

b) **trips** taken within the **United Kingdom**;

c) interruption to **your** business or any other any other costs that are indirectly caused by the event which led to **your** claim, unless specifically stated in this Policy.

Please also refer to the General Conditions and General Exclusions.

Emergency Return Home

What **you** are covered for:

We will pay all necessary additional travelling costs incurred in transporting **you home** early from a **trip** (and, if required, back to the overseas location within the original period of the booked **trip**) as a result of the following:

1. a serious accident or illness of a **business associate** whose absence from the place of work at the same time as **you**, as certified by a director or manager, requires **your** immediate return;
2. accidental damage, burglary, flooding or fire affecting **your** usual place of business, when a loss exceeding £1,500 is involved and **your** presence is required by the Police.

What **you** are not covered for:

a) any costs for transportation not arranged by **us**, or incurred without **our** prior approval;

b) the cost of flight tickets exceeding economy class for each **insured person**.

Please also refer to the General Conditions and General Exclusions.

Personal Accident

What **you** are covered for:

The benefits provided under Section 4 – Personal Accident, will be doubled if **you** are travelling on a booked business **trip** in which **your** transport and accommodation has been paid by **you** (if self-employed) or **your** employer, and **you** can provide proof that the purpose of **your trip** was **your** business.

What **you** are not covered for:

a) anything mentioned in the exclusions to Section 4 – Personal Accident.

Please also refer to the General Conditions and General Exclusions.

Business Equipment

What **you** are covered for:

We will pay:

1. up to £1,500 per **trip** for the loss, theft of, or damage to **your business equipment**:

a) up to a limit of £500 for any one item, **pair or set;**

b) up to a limit of £1,000 for computer equipment;

c) up to a limit of £500 for business samples.

2. up to £200 per **trip** for the purchase of essential items of **business equipment**, if **your business equipment** is delayed or lost during **your** outward journey for more than 24 hours. **You** must get written confirmation of the length of the delay and receipts for any items that **you** buy.
3. up to £200 per **trip** for emergency courier expenses **you** have to pay to replace **business equipment** essential to **your** intended business following a claim made under Section 18 **Business Equipment** 1) and 2).

4. up to £50 for each 24-hour period, to a maximum of £500 per **trip**, for hiring **business equipment** if:

a) **your business equipment** is delayed during **your** outward journey for more than 24 hours (**you** must get written confirmation of the length of the delay); or,

b) **your business equipment** is lost or damaged during **your trip**.

Special conditions:

a) **You** must keep all receipts for hire costs and send them in with **your** claim form.

b) **We** will deduct any payment **we** make under Section 18 **Business Equipment** 2. from any claim made under Section 18 **Business Equipment** 1.

What **you** are not covered for:

a) the **excess** except where **you** have paid the Excess Waiver Option premium (no **excess** applies to Section 18 **Business Equipment** 2., 3. and 4.). The **excess** is per insured person, for each and every incident;

b) computer equipment, (including laptop computers, hardware and software, peripherals and PDAs), communication devices, (including mobile phones) left **unattended** at any time (including in a vehicle or in the custody of **carriers**) unless deposited in a hotel safe or locked safety deposit box;

c) any loss, theft of or damage to **business equipment** during a journey, unless **you** report this to the **carrier** and get a property irregularity report at the time of the loss. Any claims for loss, theft or damage must then be made to the **carrier** within seven days;

d) any item, **pair or set** where **you** are not able to provide proof of value (for example, original receipts);

e) any loss, theft of or damage to **business equipment** shipped as freight or under a bill of lading;

f) anything mentioned in the exclusions to Section 14 – **Personal Baggage**, except items of **business equipment**.

Please also refer to the General Conditions and General Exclusions.

Business Money

What **you** are covered for:

Business **money** which is the property of **you** (if self employed) or **your** employer is covered while **you** are carrying it on **your** person (in an item of clothing **you** are wearing or in a container which **you** are holding or which is attached to **you**) or if **you** have left it in a locked safety deposit box during **your trip**, if it is:

1. damaged or destroyed;
2. lost or stolen.

The most **we** will pay **you** in total per **trip** under this section is £1,000, of which the total for cash is £500.

What **you** are not covered for:

a) the **excess** except where **you** have paid the Excess Waiver Option Premium. The **excess** is per insured person, for each and every incident;
b) anything mentioned in the exclusions to Sections 14 – **Personal Baggage**, and 10 – **Money**.

Please also refer to the General Conditions and General Exclusions.

19. Stranded Traveller Assistance (Optional Cover)

Cover will apply when **you** have paid or agreed to pay the Stranded Traveller Option premium and it is shown on **your** Certificate of Insurance.

This section provides details of the services and benefits **we** provide to **you** during **your trip** if **your** transport provider should cease to trade.

Travel Expenses

What **you** are covered for:

If the tour operator or transport provider ceases to trade and does not provide reasonable alternative transport to return **you** to the **United Kingdom**, departing within 72 hours of **your** original booked UK bound departure time, **we** will pay up to £2,500 in total for:

1. necessary costs for transferring **you** to an alternative airport or transport terminus; and

2. necessary costs for transporting **you** to alternative accommodation; and
3. **your** reasonable additional or alternative travel home.

Emergency Expenses

What **you** are covered for:

In addition to Travel Expenses **we** will pay up to £1,000 for meals and accommodation costs (up to a maximum of £200 per night for 5 nights) which are of a similar standard to that of **your** pre-booked travel and accommodation for costs incurred after **your** original published departure time until **your** new departure date.

Return Home of Your Children

What **you** are covered for:

We will pay up to £2,500 for travel costs and £200 per night for up to 5 nights, towards meals and accommodation for **you** or a relative to collect and bring **home insured persons** under the age of 18, who were travelling without an adult, if they are stranded due to a transport provider ceasing to trade.

Special conditions: (applicable to Stranded Traveller)

a) all costs must be approved in advance by **us** and all receipts retained as proof of purchase;
b) anything mentioned in General Conditions.

What you are not covered for: (applicable to Stranded Traveller)

a) the **excess** except where **you** have paid the Excess Waiver Option Premium. The **excess** is per insured person, for each and every incident;
b) any additional costs incurred after refusal of reasonable alternative travel arranged within a reasonable time frame;
c) any costs **you** can claim back from any other source.

Please also refer to the General Conditions and General Exclusions.

General Conditions of your Policy

We will only pay **your** claim if the following conditions are met:

1. **You** must comply with **our** Important Health Requirements. No cover will come into force,

or continue in force, for **Medical Emergency** and Repatriation Service, Cancellation (if shown as included on **your** Certificate of Insurance) or **Curtailment**, unless each **insured person** who must make a **medical health declaration** in respect of the period for which insurance is required, has declared ALL **pre-existing medical conditions** to **us** and they have been formally accepted by **us** in writing.
Any medical information **you** give **us** will be treated as strictly confidential. **We** will not pass **your** medical information to anyone without **your** specific authority. **We** will use it to decide whether or not **we** can cover **you** and **we** will refer to it in the event of any claim.

2. **You** must tell **us** before booking **your trip** or departing on **your trip** if any of the following change after **you** pay for **your** Policy:
   a) if there is any change in **your** health, medication or treatment;
   b) if **you** wish to add or remove anyone from **your** Policy;
   c) if **you** change **your** address.

   If **you** do not tell **us** about changes, claims may not be accepted and **your** Policy may be invalid. All changes must be declared to American Express Insurance Services on **0800 700 707** and accepted before cover can continue.
3. **You** must tell **us** as soon as possible if **you** are hospitalised as an in-patient, or of any emergencies or claims whatsoever that are likely to exceed £500.
4. We ask that **you** notify **us** within 28 days of **you** becoming aware of an incident or loss leading to a claim and **you** return **your** completed claim form and any additional information to **us** as soon as possible.
5. **You** must pay the appropriate premium for the full number of days comprising **your** planned trip. If **you** travel for more than the number of days for which **you** have paid for cover, **you** will not be covered after the last day for which **you** have paid.
6. In the event of a claim and if **we** require it, **you** must agree to be examined by a **medical practitioner** of **our** choice, at **our** expense. In the event of **your** death **we** may need to carry out a post-mortem

examination for which **we** would seek agreement from **your** legal executor.

7. **Your** Policy will be automatically renewed each year, subject to **your** age, **your medical conditions** and the Policy, terms and conditions and limitations unless **you** notify **us** otherwise 30 days prior to **your** renewal date. **You** will receive a written reminder before the end of the **period of insurance**. If there have been any changes in **your pre-existing medical conditions**, health or prescribed medication **you** must declare these to **us** in accordance with the Important Health Requirements prior to booking any **trip** or departing on any **trip**.

   N.B. Please refer to **your** Certificate of Insurance for age restrictions applying to the renewal of **your** Policy.

   If **you** book a **trip** during the current **period of insurance** and have paid or agreed to pay for it, where the departure date is after the renewal date of **your** Policy, and **you** have not chosen to exclude the Cancellation cover in return for a reduced premium as shown on **your** Certificate of Insurance, Cancellation cover will continue in force on condition that

   a) **you** renew the Policy, if eligible, when renewal falls due, and

   b) **you** have not chosen to exclude the Cancellation cover in return for a reduced premium as shown on **your** Certificate of Insurance, and

   c) **your** premium has been paid in full.

In the event that the renewal of **your** Policy is no longer offered by **us**, American Express Insurance Services Europe Limited, the intermediary, may provide **you** with the details of any renewal terms offered by its new travel insurance provider.

8. **You** must take all reasonable care and precautions to protect **yourself** against accident, illness, disease or injury and to safeguard **your** property against loss, theft or damage. **You** must act as if **you** are not insured and take steps to minimise **your** loss as much as possible and take reasonable steps to prevent a further incident.

9. The Policy **excess** or the **Adventure Sports and Activities excess**, as and when applicable, will be deducted in respect of each insured person, and each

and every separately identified occurrence of loss whether notified to **us** as one claim or otherwise.

10. **We** will make every effort to apply the full range of services in all circumstances as shown in **your** Policy booklet. Remote geographical locations or unforeseeable adverse local conditions may prevent the normal standard of service being provided.

11. **We** may:

    a) deny **your** application for insurance coverage; and/or

    b) deny renewal of **your** Policy; and/or

    c) cancel **your** Policy by giving seven days notice by recorded delivery to **you** at **your** last known address. In such an event the premium shall be adjusted appropriately for the unexpired part of the **period of insurance**.

12. **You** must not admit, deny, settle, reject, negotiate or make any arrangement for any claim without **our** permission.

13. **We** have the right, if **we** choose, in **your** name but at **our** expense to:

    a) take over the defence or settlement of any claim;

    b) take legal action in **your** name to get compensation from anyone else for **our** own benefit or to get back from anyone else any payments that have already been made;

    c) take any action to get back any lost property or property believed to be lost.

14. **We** may at any time pay to **you our** full liability under the Policy after which no further payments will be made in any respect.

15. **You** or **your** legal representatives must supply at **your** own expense all information, evidence, details of household insurance, medical certificates, assistance, original invoices, receipts, reports, etc. **We** may refuse to reimburse **you** for any expenses for which **you** cannot provide receipts or bills. Please keep copies of all documents sent to **us**.

16. **You** must report all incidents to the local Police in the country where it occurs and obtain a crime or lost property report, which includes an incident number.

17. **You** must take all reasonable steps to get back any article which has been lost or stolen, and to identify

the person **you** believe to be responsible for the loss and assist in any legal action.

18. If **we** provide transportation or settle **your** claim and as a result **you** have unused travel ticket(s) **you** must surrender those tickets to **us**. If **you** do not **we** will deduct the amount of those tickets from any amount paid to **you**.

19. If **you** or anyone acting for **you** in any respect; makes a claim under the Policy knowing the claim to be false or fraudulently exaggerated, makes a statement in support of a claim knowing the statement to be false, submits a document in support of a claim knowing the document to be forged or false or makes a claim in respect of any loss or damage caused by **your** wilful act or with **your** connivance; then **we**;
    will not pay the claim or any other claim which has been or will be made under the Policy, may at **our** option declare the policy void, shall be entitled to recover from **you** the amount of any claim already paid under the Policy, may inform the police of the circumstances and shall not make any return of premium.

20. If **we** pay any expense for which **you** are not covered, **you** must pay this back within one month of **our** asking.

21. **You** must give **us**, at **your** expense, all the information, documents and medical certificates **we** ask for including details of other insurance policies that may cover the loss. If something **you** make a claim for is covered by another insurance policy or service contract (for example by a Household Contents All Risks Policy), **we** will only pay our proportional share of any claim. The exception to this is for any claim under Section 11 – Personal Liability where **we** will make no payment if **you** hold another insurance policy providing this cover.

22. Although **we** are prepared to cover **you** when undertaking certain sports and activities, the availability of insurance cover does not mean that American Express Insurance Services or the insurers consider these sports and activities as safe. At all times **you** must satisfy **yourself** that **you** are capable of safely undertaking the planned sport or activity and

you must take all due care to avoid injury, accident or loss to **yourself** and to others.

23. **You** must accept and follow the supervision and tuition of experts qualified in the pursuit or activity in question and **you** must use all appropriate precautions, equipment and eye protection. Disregarding such advice and precautions may invalidate any claim **you** make.

General Exclusions of your Policy

These exclusions apply to all the sections of **your** Policy.

1. Any claim where **you** have not paid the appropriate premium as shown on **your** Certificate of Insurance.
2. Any claim occurring outside of the maximum **trip** length and **geographical limits** shown on **your** Certificate of Insurance. Please note that this exclusion operates regardless of when the claim actually occurred during **your trip**.
3. Any claim resulting from something **you** knew about at the time of paying for the insurance, before the start of the **period of insurance** or before booking any **trip** and which **you** did not declare to American Express Insurance Services before the start of the **period of insurance** or before booking any **trip**.
4. **Your** travel against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider.
5. Self exposure to needless peril (except in an attempt to save human life).
6. Flying except as a fare paying passenger in a fully-licensed passenger-carrying aircraft.
7. The use of motorised two or three wheeled vehicles unless a full driving licence issued in **your** country of residence is held permitting the use of such vehicles and **you** and **your** passengers are wearing a helmet.
8. Any claim caused by **you** climbing, jumping or moving from one balcony to another regardless of the height of the balcony.
9. Any costs **you** would have been required or been expected to pay, if the event resulting in the claim had not happened.

10. Any claim resulting from **you** attempting or committing suicide; deliberately injuring **yourself**; using any drug not prescribed by a registered **medical practitioner,** being addicted to any drugs, or abusing solvents, drugs, or alcohol, or being under the influence of drugs, solvents, or alcohol.
11. Any other loss, damage or additional expense resulting directly or indirectly from the cause of **your** claim, unless **we** provide cover under this insurance. Examples of such loss, damage or additional expense would be the cost of replacing locks after losing keys; cost incurred in preparing a claim; loss of earnings following **bodily injury** or illness; or loss or costs incurred arising from the interruption of **your** business.
12. Any loss or damage deliberately carried out or caused by **you**, **your** own unlawful action or any criminal proceedings against **you**.
13. Any claim where **you** are entitled to indemnity under any other insurance policy including any amounts recoverable from any other source, except in respect of any amount exceeding that for which **you** are covered under such other policy, or any amount recoverable from any other source, had this insurance not been effected.
14. Costs of taxi fares (with the sole exception of the taxi costs incurred for the initial journey to a hospital abroad due to an **insured person's** illness or injury); telephone calls or faxes, meals, newspapers, laundry costs, interpreters' fees (unless incurred under 3. Hospital Cash Benefit); inconvenience, distress, loss of earnings, or loss of enjoyment.
15. Any claim resulting from **you** taking part in manual work, which involves the installation, assembly, maintenance, repair, or use of electrical, mechanical or hydraulic plant (other than in a purely managerial/ supervisory, sales or administrative capacity), manual labour of any kind other than in the catering industry or fruit picking by hand at ground level, or work at a ski resort, during **your trip**.
16. Any loss relating to services which **we** have provided to **you** or any loss which happens following any delay on **our** part, in providing services to **you** unless negligence on **our** part can be proved.

17. Any claim arising from war; invasion; act of a foreign enemy; hostilities (whether war be declared or not); civil war; rebellion; **terrorism**; revolution; insurrection; civil commotion assuming the proportions of or amounting to an uprising; military or usurped power; **you** taking part in civil commotion or riot of any kind but this exclusion shall not apply to losses under Section 2 – **Medical Emergency** & Repatriation Service unless such losses are caused by nuclear, chemical or biological attack, or the disturbances were already taking place at the beginning of any **trip**.
18. Any claim directly or indirectly caused by:
    a) ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste, from combustion of nuclear fuel, the radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly;
    b) pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds;
    c) the actual, alleged or threatened discharge, dispersal, seepage, migration, escape, release of or exposure to any hazardous biological, chemical, nuclear or radioactive material, gas, matter, or contamination.
19. Any claim involving, or involving the fear of: delay; loss; damage; injury or any other costs that are indirectly caused by the event which led to **your** claim, unless specifically stated in this Policy which is caused, either directly or indirectly, by the actual or potential inability of any computer, data processing equipment or media, microchip, integrated circuit or similar device or any computer software or stored programme, to correctly recognise any date as the true calendar date or to continue to function correctly in respect of or beyond that date.
20. Any claim resulting from **your** involvement in a fight except in self-defence.
21. Any claim if **you** have been taking part in, or practicing for, any Group C sport or activity unless **you** have paid the Adventure Sports and Activities Option premium, as identified on **your** Certificate of Insurance.

22. Any claim if **you** have been taking part in, or practising for, a Group A, B or C sport or activity forming part of an organised team sport or organised competition (except for American football or rugby) or any claim where **you** are practising for, or taking part in, any sport or activity as a professional sportsperson.
23. Any claim if **you** have been taking part or practising for **Winter Sports** unless the appropriate premium has been paid as shown on **your** Certificate of Insurance.
24. Any claim if **you** have been taking part in, or practising for, any Group D **Adventure Sports and Activities** or Group D **Winter Sports**.
25. Bobsleigh or heli-skiing unless the Certificate of Insurance shows that both the **Winter Sports** and **Adventure Sports and Activities** Options are included.
26. **Your** participation in **Winter Sports** if **you** are aged 70 years or over and taking part for the first time.
27. Participation in **Adventure Sports and Activities** if **you** are aged 70 years or over.
28. Operational duties as a member of the Armed Forces.
29. **Your** travel to a country or specific area or event to which the Foreign and Commonwealth Office has advised the public not to travel.

What to do if you need to make a claim

1. First check **you** are covered by **your** Policy. Please read the appropriate section in this Policy booklet to see exactly what is, and is not covered, noting particularly any conditions, limitations and exclusions.

2. Making a claim.

a) In the event of an emergency **you** should first call the Emergency Helpline listed on the back cover of the Policy booklet (any minor illness or injury costs must be paid for by **you** and reclaimed).

b) For all other claims telephone our Claims Helpline on 0203 126 4135 (Monday – Friday 8:00 - 20:00 and Saturday 8:00 - 17:00) to obtain a claim form.

You will need to give:

– **your** name,

– **your** Policy Number found at the top of **your** Certificate of Insurance,

– brief details of **your** claim.

Alternatively **you** can submit **your** non-emergency claim on **our** 24/7 worldwide access online claims registrations tool at www.amex-claims/uk or email **our** Claims Helpline on amex.retail@axa-travel-insurance.com

You will need to provide:

– **your** name,

– **your** Policy Number found at the top of **your** Certificate of Insurance,

– **your** address including the postcode,

– the section under which **you** wish to make a claim.

We ask that **you** notify **us** within 28 days of **you** becoming aware of an incident or loss leading to a claim and **you** return **your** completed claim form and any additional information to **us** as soon as possible.

3. Additional Information.
   You must supply all of **your** original invoices, receipts and reports etc. **You** should check the section under which **you** are claiming for any specific conditions and details of any supporting evidence that **you** must give **us**.
   It is always advisable to keep copies of all the documents that **you** send to **us**.
4. Claims Handling Agents
   To help **us** agree a quick and fair settlement of a claim, it may sometimes be necessary for **us** to appoint a claims handling agent.

Complaints Procedure

We aim to provide a first class service at all times. However, if **you** have a complaint, in order to get **your** complaint dealt with as quickly and efficiently as possible, please ensure **your** complaint is directed to the right organisation.

If **your** complaint is about **your** cover under **your** Policy or a claim on **your** Policy, please contact:

AXA Travel Insurance (Complaints Department)

The Quadrangle
106-118 Station Road
Redhill RH1 1PR
United Kingdom

or phone 01737 815227; or email us at claimcomplaints@axa-travel-insurance.com

If **your** complaint is about the sale and servicing of **your** Policy that **you** have received from American Express Insurance Services, please contact:

American Express Insurance Executive Office
1 John Street
Brighton
BN88 1NH
United Kingdom

or phone 01273 576109; or email us at insuranceexec@aexp.com

Please enclose the following details when sending **your** letter:

– **your** full name, postcode and contact phone number(s);
– the type of Policy and **your** Policy and/or claim reference;
– an outline of the reasons for **your** complaint.

If it is impossible to reach an agreement, **you** may have the right to make an appeal to the Financial Ombudsman Service by writing to:

Financial Ombudsman Service, Exchange Tower, Harbour Exchange Square, London, E14 9SR, United Kingdom.

Or **you** can phone 0800 023 4567 or 0300 123 9 123 from a mobile. Website: www.financial-ombudsman.org.uk

These procedures do not affect **your** right to take legal action.

Compensation Scheme

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

Their contact details are Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU, United Kingdom. Telephone 0800 678 1100 or 020 7741 4100. Website: **www.fscs.org.uk**

Use of Your Personal Data

Please read the paragraphs below, which define how American Express Insurance Services Europe Limited, ("American Express Insurance Services") and Inter Partner Assistance SA and AXA Travel Insurance (cumulatively "AXA") use information about **you** for the purpose of providing **you** with insurance services and additional products and services and to comply with legal and regulatory requirements in relation to the provision of benefits under this Policy.

Both organisations appreciate the importance of the protection, confidentiality and security of **your** information.

Personal Information

If **your** insurance application is accepted by American Express Insurance Services and AXA and **you** are issued a Certificate of Insurance and Policy wording, **you** also agree that American Express Insurance Services and AXA may:

a) disclose and use information about **you** and **your** insurance cover – including information relating to **your** medical status and health – to companies within the American Express and AXA group of companies worldwide, their partners, service providers and agents in order to administer and service **your** account/insurance cover (and arrange the renewal thereof) process and collect relevant payments on it, for fraud prevention and to manage the benefits or insurance programmes in which **you** are enrolled;

b) use information about **you** and **your** insurance cover – excluding information relating to **your** medical status and health – to develop lists for use within the American Express group of companies worldwide and its partners to develop or make offers to **you** (by mail, email or telephone) of products and services in which **you** may be interested. The information used to develop these lists may be obtained from **your**

application, from information on where and how **you** use **your** Card if **you** are an American Express Cardmember and from surveys and research (which may involve contacting **you** by mail or telephone) and information obtained from other external sources such as merchants or marketing organisations;

c) undertake all of the above within and outside the United Kingdom and the European Union. This includes processing **your** information in other countries in which data protection laws are not as comprehensive as in the European Union. However, both organisations have taken appropriate steps to ensure the same (or equivalent) level of protection for **your** information in other countries, as there is in the European Union; and

d) monitor and/or record **your** telephone calls in relation to cover to ensure consistent servicing levels and account operation.

Both organisations use advanced technology and well defined employee practices to help ensure that **your** information is processed promptly, accurately and completely and in accordance with applicable data protection law.

If **you** want to know what information is held about **you** by the American Express Group of companies, please write to:

American Express Services Europe Limited
Data Protection Office
Dept 2007
1 John Street
Brighton
BN88 1NH
United Kingdom

If **you** want to know what information is held about **you** by Inter Partner Assistance SA or AXA Travel Insurance, please write to:

AXA Travel Insurance
Data Protection Officer
The Quadrangle
106-118 Station Road
Redhill
RH1 1PR
United Kingdom

There may be a charge for this service, as permitted by law. Any information which is found to be incorrect will be corrected promptly. Information about **you** is only held for so long as it is appropriate for the above.

The American Express Group of companies reserves the right to contact **you** by mail or telephone in connection with the operation of **your** Policy and related services. If **you** wish to have **your** name removed from any marketing programmes or if **you** require any further information please contact American Express Insurance Services on 0800 700 707. Please provide **your** full name, postal address, travel insurance Policy Number and if **you** are an American Express Cardmember **your** Card Number. Please allow 40 days if **you** wish to have **your** name removed from marketing programmes for **your** request to become effective.

Remember to take this policy booklet with you when you travel.

For 24 hour worldwide emergency assistance and information before you travel, contact AXA Assistance on:

+44 (0) 203 126 4134

AXA Assistance Claims:

(Monday – Friday, 8:00 – 20:00, Saturday, 8:00 – 17:00)

0203 126 4135

When dialling from outside the UK add 44 then omit the 0. When dialling within the UK omit the 44.

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Inter Partner Assistance is a branch of Inter Partner Assistance S.A. (IPA), Avenue Louise 166 bte 1, 1050 Brussels. IPA is a Belgian company authorised by the National Bank of Belgium (registration 0487) and subject to limited regulation by the Financial Conduct Authority in the UK. Details of the extent of its regulation by the Financial Conduct Authority are available upon request, (registration 202664). IPA and its agent, AXA Travel Insurance are all members of the AXA Assistance Group.

INS199 (IPA) Effective from July 2015

AXA TRAVEL INSURANCE

redefining / service