

Staysure™



Travel Insurance Policy

 travel insurance
MEDICAL

...part of the Staysure family

travelinsurancemedical.co.uk

Introduction to your policy

This policy document provides you with the terms, conditions and exclusions of the insurance cover, together with information that will help you in the event of an emergency. The policy contains different levels of cover, some of which do not apply unless you have paid the appropriate additional premium. Conditions and exclusions will apply to individual sections of your policy while general exclusions, conditions and notes will apply to the whole of your policy.

Please read this document and your certificate very carefully to ensure you understand the extent of the cover and assistance services, exactly what is and is not covered, the conditions of cover, and that this meets your requirements.

Cooling-off-period: unless your trip will be completed within 1 month of buying this insurance, you have the right to cancel any policy of insurance within 14 days of the date of issue or receipt of the terms and conditions, whichever is later. We will refund to you any premium you have paid and will recover from you any payments we have made.

Please keep this document in a safe place and take it with you when you travel in case you need assistance or need to make a claim. If you have any questions or are in any doubt about the cover provided please call Customer Services on 0844 692 8450.

Contents

Useful Telephone Numbers
General Information
Table Of Benefits
Important – Validation Certificate and Policy Document
Definitions
Geographical Areas
How your Policy works
General Conditions
General Exclusions
Medical Declaration
Sports and Activities
24 Hour Medical Emergency and Repatriation Service
Travel Assistance

Sections Of Insurance

Section A – Cancellation or Curtailment
Section B – Medical Expenses and Repatriation
Section C – Hospital Benefit
Section D – Personal Accident
Section E – Baggage, Replacement Passport and Baggage Delay
Section F – Personal Money
Section G – Personal Liability
Section H – Travel Delay
Section I – Holiday Abandonment
Section J – Missed Departure
Section K – Hijack
Section L – Legal Expenses
Section M – Optional Winter Sports Cover
Section N – Optional Golf Cover
Section O – Optional End Supplier Failure
Section P – Optional Travel Legal Dispute
Section Q – Optional Travel Disruption Extension

Complaints Procedure
Financial Services Compensation Scheme (FSCS)
Data Protection
Payment Of Premium
Communication
Your Duty To Disclose Information
Overlapping Insurance
Governing Law

Useful telephone numbers

If you have a medical emergency or non-medical emergency while you are outside the United Kingdom, please call Mapfre Assistance on 0044 207 748 0675.

Travel Claims

If you have a medical or non-medical emergency claim please call **Mapfre Assistance** on 0207 748 0675 if you are within the **United Kingdom** or 0044 207 748 0675 if you are outside the **United Kingdom**.

If you need to make any kind of non-emergency claim, including claims for travel assistance or claims for Legal Advice and Expenses please call **Mapfre Assistance** on 0207 748 0676 if you are within the **United Kingdom** or 0044 207 748 0676 if you are outside the **United Kingdom**. Emergency Assistance Lines are open 24 hours a day, 365 days a year.

General information

Thank you for taking out travel insurance with Travelinsurancemedical.co.uk, **your** certificate shows the sections of the policy you have chosen, the people who are covered and the terms and conditions that may apply.

It is important that you read this document before **you** travel and make sure you understand what is and is not covered and what to do if **you** need to make a **claim**.

Policy information or advice

If **you** would like more information or if **you** feel the insurance may not meet your needs, telephone the customer helpline on:

- call Travelinsurancemedical.co.uk on 0844 692 8450
- email info@travelinsurancemedical.co.uk
- write to us at McGowan House, 10 Waterside, The Lakes, Bedford Road, Northampton, NN4 7XD.

Please Note:

Travelinsurancemedical.co.uk is a trading style of Staysure.co.uk Limited. Staysure.co.uk Limited is authorised and regulated by the Financial Services Authority (FSA). FSA Authorised No. 436804.

Insurer

This insurance is underwritten by Mapfre Asistencia Compania Internacional de Seguros y Reaseguros Sociedad Anonima, 5th Floor, Alpha House, 24a Lime Street, London, EC3M 7HS. Company number: FC021974. Branch Number BR008042. Trading under the name **Mapfre Assistance**.

Mapfre Asistencia Regulator

Mapfre Asistencia are authorised by Direccion General de Seguros and subject to limited regulation by the Financial Services Authority. Details about the extent of their regulation by the Financial Services Authority are available from them on request. Their Financial Services Authority Registration number is 203041. **You** can visit the Financial Services Authority website, which includes a register of all regulated companies, at www.fsa.gov.uk/register or **you** can telephone them on 0845 606 1234.

Residents of the Channel Islands and Isle of Man

Please note that sales of **Mapfre Assistance**'s General Insurance products in the Channel Islands and Isle of Man do not fall within the jurisdiction of the Financial Services Authority, the Financial Ombudsman Service or the Financial Services Compensation Scheme. Local regulations apply.

For further details please contact the Compliance Department.

Contract of Travel Insurance

This is a contract of insurance between **you** and Mapfre Asistencia trading under the name of **Mapfre Assistance**. It contains certain conditions and exclusions in each section and General Conditions and Exclusions that apply to all sections. **You** must meet these conditions or **we** may not accept **your** claim. **We** will pay for any **claim you** make which is covered by this **policy** and which happens during the period of cover. **Your policy** does not cover all possible events and expenses. This **policy** is only valid when **you** have a **Validation Certificate** attached.

Health Agreements

If **you** are travelling to a country in the European Union, **you** should collect an application form for a European Health Insurance Card from **your** local Post Office or download an application form from [www. ehic.org.uk](http://www.ehic.org.uk). This entitles European Citizens to benefit from the health agreements which exist between countries in the European Union. (This used to be known as the E111).

If **you** are travelling to Australia or New Zealand and **you** have to go to hospital, **you** must register for treatment under the National Medicare or equivalent scheme in that country.

If **you** make use of any health agreement that exists between the **United Kingdom** and another country, or any other worldwide reciprocal health agreement and your claim under Section B is reduced, **you** will not have to pay an **excess**.

Conditions, exclusions and warranties

Conditions, exclusions and warranties will apply to individual sections of the **policy** while General Conditions, Exclusions and warranties will apply to the whole of the **policy**.

Claims for Baggage or personal possessions

We will pay **claims** for **baggage** or personal possessions based on the value of the goods at the time **you** lost them and not on a new for old or replacement cost basis unless otherwise stated in the **policy**.

Policy limits

Most sections of the policy contain limits to the amount **we** will pay under that section. Some sections also include other specific limits.

Reasonable care

You must take all reasonable care to protect **yourself and your** belongings.

Table of benefits

*Basics Cover

Please note that if you have arranged Basics cover you will not be covered for sections A, C, D, E2, E3, H, I, J, L, M or N or Q.

Section No	Description	Limits of cover (Per person unless otherwise shown)		Limits of cover (Per person unless otherwise shown)	
		Basics	Excess	Comprehensive	Excess
A	Cancellation or Curtailment - pre booked excursions limit	N/A	N/A	£5,000 £250	£65
B	Medical Expenses and Repatriation	£5,000,000	£65	£10,000,000	£65
	Emergency Dental	£200	£65	£200	£65
C	Hospital Benefit	N/A	N/A	£25 per day up to £800	Nil
D	Personal Accident - Permanent Total Disablement (aged 18-74) - Permanent Total Disablement (aged under 18 or over 74) - Loss of limb or sight - Death - Death (aged under 18)	N/A	N/A	£20,000 £1,000 £20,000 £20,000 £5,000	Nil
E	Baggage, Replacement Passport and Baggage Delay				
E1	Baggage - Single Item limit - Valuables limit in total	£200 £100 £100	£65	£2,000 £300 £300	£65
E2	Replacement Passport	N/A		£500	Nil
E3	Baggage Delay - Over 12 hours - Over 48 hours	N/A	N/A	Up to £50 Up to £100	Nil
F	Personal Money - Cash limit - Cash (under 18 years)	£200 £200 £50	£65	£500 £200 £50	£65

Section No	Description	Limits of cover (Per person unless otherwise shown)		Limits of cover (Per person unless otherwise shown)	
		Basics	Excess	Comprehensive	Excess
G	Personal Liability	£2,000,000	£65	£2,000,000	£65
H	Travel Delay	N/A	N/A	£20 for first 12 hours, £10 for each further 12 hours up to £300	Nil
I	Holiday Abandonment	N/A	N/A	£5,000	£65
J	Missed Departure	N/A	N/A	£500 (Areas 1, 2 & 3) £1,000 (Areas 4 & 5)	£65
K	Hijack	£50 per day (up to £500)	N/A	£100 per day (up to £1,000)	Nil
L	Legal Expenses	N/A	N/A	Up to £25,000 (max £50,000 from two or more Insured persons)	Nil

Winter Sports (Available subject to additional Premium and shown on Validation Certificate)

M1	Ski Equipment – Owned – Single Item Limit	N/A	N/A	Up to £500 Up to £500	£65
M2	Ski Hire	N/A	N/A	£15 per day up to £300	Nil
M3	Ski Pack	N/A	N/A	£250	Nil
M4	Piste Closure	N/A	N/A	£20 per day up to £200	Nil
M5	Avalanche Closure	N/A	N/A	£15 per day up to £150	Nil

Golf Cover (Available subject to additional Premium and shown on Validation Certificate)

N1	Golf Equipment -Single Item Limit	N/A	N/A	£1,000 £300	£65
N2	Golf Equipment Hire	N/A	N/A	Up to £300	Nil
N3	Non Refundable Golf Fees	N/A	N/A	£150	Nil
N4	Hole-in-One	N/A	N/A	£75	Nil

Optional End Supplier Failure Cover (Available subject to additional Premium and shown on Validation Certificate)

O	End Supplier Failure	£3,000	N/A	£3,000	N/A
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Optional Travel Legal Dispute Cover (Available subject to additional Premium and shown on Validation Certificate)

P	Travel Legal Dispute Subject to acceptance criteria and minimum claim value £150	£25,000 Max £50,000 per policy	£35	£25,000 Max £50,000 per policy	£35
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Optional Travel Disruption Extension Cover (Available subject to additional Premium and shown on Validation Certificate)

Q	Extended Cancellation or Curtailment	N/A	N/A	£1,000	£65
	Extended Travel Delay	N/A		£1,000	
	Extended Missed Departure	N/A		£500	
	Catastrophe Cover	N/A		£1,000	

Important – Validation Certificate and policy document

This is **your** travel insurance **policy**. It contains details of cover, conditions and exclusions relating to each **insured person** and is the basis on which all **claims** will be settled. It is validated only when issued with a **Validation Certificate** which must be attached to the **policy**.

Subject to **you** paying **us** the correct **premium we** will insure **you** in accordance with the terms and conditions of this **policy** during the **period of insurance**. The **Validation Certificate** and any endorsements are all part of the **policy**.

Your policy is evidence of the contract of insurance.

Please keep **your Validation Certificate** and this **policy** document for reference.

Your Validation Certificate details exactly what **you** are covered for.

Please read the whole of this **policy** document before **you** travel and make sure that **you** understand exactly what is and is not covered. The **policy** document is important because it contains information about how **we** will deal with **your claim**. If **you** have any questions or **you** wish to make a change to **your** cover, please contact Travelinsurancemedical.co.uk Customer Services on 0844 692 8450.

If **you** wish to arrange additional cover on **your policy**, **you** may have to pay an additional **premium**.

Definitions

Wherever the following words or phrases appear in this **policy** document, they will always have following meanings:

Accident(s) – an unexpected **event** which results in **your bodily injury**, that is due to a violent, sudden and external cause which occurs during the term of the **policy**. The following are also defined as **accident(s)** under the terms of this **policy**:

- Asphyxia or injuries caused by gases or vapours, immersion or submersion, or from the consumption of liquid or solid matter other than foodstuffs.
- Infections resulting from an **accident** covered by the **policy**.
- Injuries which are a direct result of surgical operations or medical treatments undertaken as a result of an **accident** covered by the **policy**.
- Injuries sustained as a result of self-defence.

Baggage – luggage, clothing, personal effects (excluding **golf equipment**, **ski equipment** and **valuables**) and other articles which belong to **you** (or for which **you** are legally responsible) which are worn, used or carried by **you** during any **trip**.

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

Cancellation period – the 14 days following receipt of the **policy** documents for new business or the 14 days from the renewal date.

Claim(s) – any event which leads to a **claim** being made by **you** under the terms of this **policy**. A series of **claims** arising out of one **event** shall constitute one **claim**.

Close business associate(s) - any person whose absence from the business for one or more complete days at the same time as **your** absence prevents the proper continuation of that business.

Close relative(s) - for the purpose of this **policy**, **close relatives** are considered to the following persons only:

- The person that **you** live with, in a relationship, at the same address, whether married or cohabiting (as if husband and wife) regardless of gender;
- **Your** children (including fostered or adopted children);
- **Your** grandchildren;
- **Your** parents;
- **Your** grandparents;
- **Your** brothers and sisters;
- **Your** sons-in-law;
- **Your** daughters-in-law;
- **Your** brothers-in-law and sisters-in-law;
- **Your** parents-in-law.

You may be required to demonstrate the existence of the relationship.

Couple – **you** and **your** wife, husband, civil partner or partner who lives with **you** in a domestic relationship at the same address as **you**. On an **annual multi-trip policy insured persons** can travel independently.

Curtailment/curtail/curtailed – either:

- a) cutting short the **trip** by immediate direct early return to **your home area**, in which case **claims** will be calculated from the day **you** returned to **your home area** and based on the number of complete days of **your trip** **you** have not used, or
- b) being a hospital in-patient outside **your home area** for a period in **excess** of 48 hours.

Damages – compensation or indemnity for loss suffered owing to the deterioration or destruction of **your** property, **you** suffering **bodily injury**.

Dangerous activity – means any professional sporting activity, any kind of racing except racing on foot, **winter sports** over 17 days, or any sporting or physical activity except those listed in the sports and activities section or those accepted by **us** in writing.

Dependent child/children – a child/children accompanying **you** on **your** journey who is/are under 18 years of age.

Destination – the **geographical area** to which **you** travel during **your trip**.

Doctor – a registered practising member of the medical profession who is not related to **you** or anyone **you** are travelling with.

Excess – under most sections of this **policy** **you** have to pay the first part of any **claim**. This is called an **excess**. The **excess** will apply to each person claiming, and to each incident and to each section of the **policy** **you claim** under. The **excess** amount is shown in the table of benefits on pages 4 and 5 under each section.

Family cover – means **you** and **your** husband/wife or civil partner, partner (who have co-habited for at least 6 months), **your** unmarried, **dependent children** of either of **you** (including fostered or adopted) under the age of 18 years. On an **annual multi-trip policy**, adults and children can travel independently but children must always be accompanied by a responsible adult over 18 years.

Golf equipment – means golf clubs, golf balls, golf bag, golf shoes and non-motorised golf trolleys.

Guardian – the person with a legal duty of care for a child or group of children aged under 18 or the person with a legal duty of care for a disabled person or group of disabled persons during the period of the **policy**.

Hijack – the unlawful seizure or wrongful exercise of control of an aircraft or conveyance that **you** are travelling in as a passenger.

Home – the place **you** usually live in the **United Kingdom**.

Home area or home country – for residents of the **United Kingdom** excluding Channel Islands and the Isle of Man, **your home country** means the **United Kingdom** excluding Channel Islands and the Isle of Man. For residents of the Channel Islands and the Isle of Man, **your home area** means the Channel Islands or the Isle of Man depending on where **your home** is.

Incidental – means happening on a casual or occasional basis.

Illness/illnesses – any condition, disease, set of symptoms or sickness leading to a change in **your** health and as diagnosed and confirmed by a **doctor** during the **period of insurance** and which is not a pre-existing disease or **illness** unless the pre-existing disease or **illness** has been disclosed to **us** and accepted in writing by **us**.

Medical condition – any disease, **illness** or injury.

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

Osteosynthesis material – parts or pieces of metal or of any other kind used to join together the ends of a fractured bone, or to knit together the tips of joints, by surgical operation and which can be reused.

Orthopaedic material or orthesis – anatomical parts or items of any kind used to prevent or correct temporary or permanent deformations of the body (including but not limited to walking sticks, cervical collars and wheelchairs).

Period of insurance –

Annual multi-trip cover

The period as stated in the **Validation Certificate**. During this period any **trip** not exceeding 31 days (limited to a maximum of 183 days in any one **period of insurance**) is covered as indicated on **your Validation Certificate**, and in any event limited to 17 days in total in each **period of insurance** for **winter sports** (if **you** have paid the appropriate **winter sports premium** to include this cover). Under these policies Section A – Cancellation or Curtailment cover commences on the start date of the **policy** stated on the **Validation Certificate** or the time of booking any **trip** (whichever is the later) and terminates on commencement of any **trip**.

Single trip cover

The period of the **trip** terminating upon the **trips** completion, but not in any case exceeding the period shown on the **Validation Certificate**. Under **single trip** policies, Section A – Cancellation cover shall start from the time **you** pay the **premium** and evidence of insurance is issued and will stop at the departure of **your trip** or in the event of **you** making a cancellation **claim** all remaining cover will immediately cease for that **trip**. For all other sections of the **policy** the insurance commences when **you** leave **your home** to start the **trip** and stops at the time of **your** return to **your home** on completion of the **trip**.

Please note:

- Any **trip** that had already begun when **you** purchased this insurance will not be covered, except where **you** renew an existing **annual multi-trip policy** which fell due for renewal during the **trip**.
- The **period of insurance** is automatically extended for the period of the delay in the event that **your** return to **your home area** is unavoidably delayed due to an event **insured** by this **policy**.

Permanent disability – means the permanent, complete or partial loss (of function) of any part or organ of **your** body, regardless of **your** profession.

Personal money – means bank notes, currency notes and coins in current use, travellers' and other cheques, travel tickets, event and entertainment tickets, driving licence and **your** personal credit/debit or charge cards.

Policy – means this insurance, the terms and conditions and any supplements, endorsements or appendices issued thereto.

Premium – the sum that **you** must pay **us** for this **policy**, including any surcharges and taxes legally applicable. Except where otherwise stated, all amounts shall be expressed in pound sterling and the £ symbol may be used.

Prostheses – the replacement (whether on a temporary or permanent basis) of a missing body part including but not limited to, mechanical or biological items such as cardiac valve parts, joint replacements, synthetic skin, intraocular lenses, biological materials (cornea), fluids, gels and synthetic or semi-synthetic liquids that replace organic humours or liquids, medicine reservoirs and mobile oxygen therapy systems.

Public transport – means any publicly licensed aircraft, sea vessel, train or coach on which **you** are booked to travel.

Single item – means any one article pair or set of articles (including golf clubs) or collection which is used or worn together, except when the optional golf cover section is purchased and shown in the **Validation Certificate** then the **single item** limit applies to each individual golf club and not the set as a whole.

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

Theft – the dishonest appropriation of property from other people including the use of or threatening to use force or violence.

Third party – any natural person or legal entity other than:

- **You**;
- **Your close relative(s)**;
- **Your** partners, directors, employees and other **close business associates**.

Travelling companion – means a person(s) with whom **you** have booked to travel on the same travel itinerary and without whom **your** travel plans would be impossible.

Trip(s) – a holiday or journey for leisure or business purposes that takes place during the **period of insurance** which begins when **you** leave **home** and ends when **you** get back **home**, or to a hospital or nursing **home** in the **United Kingdom**, whichever is earlier. For **single trip** cover, any other holiday or **trip** which begins after **you** get back **home** is not covered.

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

United Kingdom – means England, Scotland, Wales, Northern Ireland, Isle of Man and the Channel Islands.

Validation Certificate – the document that shows the names and other details of all the people insured under this **policy**. The **Validation Certificate** proves **you** have the cover shown in the **policy** document.

Valuables – including but not limited to jewellery, furs, watches and clocks, photographic or film equipment, items of gold, silver and precious metals, works of art, carpets and silks, musical instruments, cassette players and cassettes, record players and records, CD-players and CD-discs, DVD/MP3 players and DVD/MP3-discs, electrical and electronic equipment, mobile/satellite telephones, photographic equipment, scientific instruments and equipment, sunglasses, any optical instrument such as binoculars and telescopes, tools and animal skins and hides, hunting items, valuable papers and other documentation.

We, Us, Our, Mapfre Assistance, the Insurer – Mapfre Asistencia Compania Internacional de Seguros y Reaseguros Sociedad Anonima, trading under the name **Mapfre Assistance**, Mapfre House, 5th floor, Alpha house, 24a Lime Street, London EC3M 7HS Company Number: FC021974. Branch Number BR008042. Once **you** have paid the **premium**, **we** assume responsibility for providing cover according to the terms and conditions of the **policy**. Except Sections O and P, please refer to the relevant sections for details.

Winter sports – means guided cross country skiing (nordic skiing), glacier skiing, recreational racing, snowmobiling, mono skiing, off piste skiing or off piste snowboarding, on piste skiing, on piste snowboarding and snow sledging.

You, Your, Insured – each person for whom an insurance **premium** has been paid as shown on the **Validation Certificate**.

Geographical areas

Territorial limits

Area 1 The United Kingdom – England, Northern Ireland, Scotland and Wales.

Area 2 Europe A – Austria, Azores, Belgium, Corsica, the Channel Islands and the Isle of Man, Croatia, Czech Republic, Denmark, Finland, France, Germany, Gibraltar, Hungary, Iceland, Italy, Liechtenstein, Luxembourg, Madeira, Malta, Monaco, Netherlands, Norway, Poland, Portugal, Republic of Ireland, Romania, Russia (west of the Ural Mountains), San Marino, Sicily, Slovak Republic, Slovenia, Sweden

Area 3 Europe B – Remaining countries West of the Ural Mountains and Andorra, Balearics, Canary Islands, Cyprus, Greece, Morocco, Spain, Switzerland, Tunisia, Turkey (except Egypt, Israel, Lebanon and Libya, see Area 4 below)

Area 4 Worldwide A – (including Egypt, Israel, Lebanon and Libya) other than Area 5 countries

Area 5 Worldwide B – including Canada, Caribbean, China, Hong Kong, USA, Mexico, Singapore

How your policy works

Eligibility

You are eligible for this insurance if **you** are:

- a) a permanent resident of the **United Kingdom**.
- b) registered with a UK **medical practitioner**.
- c) if **your** journey starts from the **United Kingdom**.
- d) **you** are in the **United Kingdom** at the time of purchasing this **policy**.
- e) **your trip** starts and ends in the **United Kingdom**.

Period of cover

This document only constitutes a valid insurance when it is issued with a **Validation Certificate** issued between 1st December 2011 and 30th November 2012 and for holidays or journeys commencing up to 28th February 2014.

Underwriter

This insurance is underwritten by Mapfre Asistencia Compania Internacional de Seguros y Reaseguros Sociedad Anonima, 5th floor, Alpha House, 24a Lime Street, London EC3M 7HS Company Number: FC021974. Branch Number BR008042. Trading under the name **Mapfre Assistance**.

Family policies

One other adult and up to six children may join **you** on this **policy**. The maximum number of **dependent children** allowed per adult is three, providing that **you** have paid the appropriate **premium** and all **insured persons** are named on **your Validation Certificate**.

Independent travel on annual multi-trip policies

All **insured persons** on an **annual multi-trip policy** may travel independently, but children under 18 who travel alone must be dropped off and picked up by a responsible adult aged over 18 years.

Premium

This insurance will only be valid once **you** have paid the **premium** and provided that **you** intend to return to the **United Kingdom** after **your trip**.

Annual multi-trip and single trip policies

You have chosen either an **annual multi-trip** or a **single trip policy**.

The **annual multi-trip policy** covers any number of **trips** during one year, each up to a maximum of 31 days (up until **your** 86th birthday). **You** are not covered for any **trip** that lasts over 31 days. The **single trip policy** covers individual **trips** up to a maximum of 104 days in length up until **your** 86th birthday. Cover for the **winter sports** extension is only available if **you** are under 66 years of age on the date of inception. The dates of cover will be specified on **your Validation Certificate** and must match the outgoing and return dates of **your trip** for **your single trip** cover to be valid. The period of cover will be shown on **your Validation Certificate**. **You** will not be covered for any period over this limit.

Telling Travelinsurancemedical.co.uk about relevant facts

It is **your** responsibility to ensure that **you** provide Travelinsurancemedical.co.uk with complete and accurate information when **you** take out **your** insurance **policy**, throughout the life of **your policy**, and when **you** renew **your** insurance.

Relevant information includes details of and changes to **your** health and medical history. **You** must let Travelinsurancemedical.co.uk know if **you** or anyone upon whose good health the **trip** depends:

- Suffers from a **medical condition**;
- Are diagnosed with a new **medical condition** after **you** have taken out **your policy**;
- Have an existing **medical condition** which changes at any point during the term of **your policy**;
- Have recently undergone or are waiting for tests or have sought medical advice for any **medical condition**, disease or **illness** (whether this has been diagnosed or not).

Please refer to the medical declaration section on page 17 for full details of what must be declared and whether **you** need to tell us about a change in **medical condition**.

You must tell Travelinsurancemedical.co.uk before **you** travel by calling 0844 692 8450.

Lines are open Monday to Friday, 8.30am – 6pm, Saturday 8.30am – 1pm, Sunday closed (excluding bank holidays).

If **you** do not disclose all relevant information to Travelinsurancemedical.co.uk, this may invalidate **your** insurance cover and either part of **your claim** or the whole of **your claim** will not be paid. If **you** are in any doubt about what information is relevant, **you** should call Travelinsurancemedical.co.uk to disclose it.

Cancellation rights

You have the right to cancel **your policy** during the first 14 days after **you** have bought the **policy**. If **you** wish to cancel within this 14 day period, **you** will be entitled to a full refund of the **premium** paid, less any cancellation charge, provided **you** have not already started **your trip**. Please note that if **you** wish to cancel **your policy** after **you** have made a **claim**, **we** may seek to recover the monies paid to **you** in settlement of the **claim**.

To cancel **your policy** please write to **your** issuing agent at the address shown at the top of **your Validation Certificate** during the **cancellation period**. Please quote **your Validation Certificate** number. Unless **you** exercise **your** right to cancel within this 14 day period **you** will not be entitled to any refund of **premium**. If **you** do not exercise **your** right to cancel **your policy**, it will remain in force for the term of the **policy** and **you** will be required to pay the **premium** as stated.

Period of insurance

Cancellation cover begins on the start date of **your policy** if **you** have an **annual multi-trip policy**, or on the day **you** pay the **premium** if **you** have a **single trip policy**.

The cover for all other sections starts at the beginning of **your trip** and finishes at the end of **your trip** but will be no longer than the **period of insurance** shown on **your Validation Certificate**. **Annual multi-trip** cover ends 12 months after the start date. If **you** have a **single trip policy** **you** must ensure that **you** begin and end **your** journey on the same dates shown by the **period of cover** on **your Validation Certificate**.

Extending the period of cover

If **you** or anyone travelling with **you** cannot return from **your trip** as planned because of **death**, **illness** or **injury**, or there is an unavoidable delay to the **public transport** system, **we** will extend **your** cover free of charge until the earliest time that **you** are no longer prevented from travelling by the effects of **death**, **illness** or **injury** or delay to the **public transport** system and until **you** are no longer physically or medically restricted from travelling back to the **United Kingdom**.

Non payment of premiums

We reserve the right to cancel this **policy** immediately in the event of non payment of the **premium**.

Making a claim

If **you** have an **emergency** during **your trip** and require medical treatment while outside the **United Kingdom**, or if **you** have to cut **your** journey short, or **you** are in any of the circumstances listed in sections A and B **you** must phone **Mapfre Assistance** as soon as possible, and quote **your Validation Certificate** number:

If **you** have a **medical emergency**, please call 0207 748 0675. These lines are open 24 hours a day.

For all other **claims** (such as cancellations, missed departure, departure delay, personal **accident**, personal possessions and **personal money**) please phone 0207 748 0676.

Lines are open 9am – 5pm Monday to Friday (except for public holidays). Please have **your** insurance **Validation Certificate** number to hand, and have ready any documents **you** may have that could be relevant to **your claim** for cover as detailed under Sections A to Q (for example medical certificates, travel tickets, boarding passes, letters from authorities/**public transport** providers/airlines, depending on which section of cover **you** are claiming for).

If **you** do not have any documents with **you**, **your claim** might be delayed, please ask the operator for assistance. **You** may need to get additional information about **your claim** while **you** are away. **You** may also be asked to send **us** additional information and documentation (**we** will give **you** advice if this becomes necessary). The nature of the documentation **we** need may include hotel bills, hospital bills, pharmacy receipts and/or taxi receipts and will depend on **your** individual circumstances and the type of **claim you** are making. Please read the General Conditions of this **policy** document and the relevant sections of **your policy** for more information.

All information, evidence, details of household insurance and medical certificates as required by **us** must be sent at **your** own expense. **We** reserve the right to require **you** to undergo an independent medical examination at **our** expense. **We** may also request and will pay for a post-mortem examination.

You must retain any property which is damaged, and, if requested, send it to **us** at **your** own expense. If **we** pay a **claim** for the full value of the property and it is subsequently recovered or there is any salvage then it will become **our** property. **We** may also pursue any **claim** to recover any amount due from a **third party** in the name of anyone claiming cover under this **policy**.

We may refuse to reimburse **you** for any expenses for which **you** cannot provide receipts or bills.

Subrogation

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

Fraud

You must not act in a fraudulent manner.

If **you** or anyone acting for **you**:

- a) Make a **claim** under the **policy** knowing the **claim** to be false or fraudulently exaggerated in any respect or;
- b) Make a statement in support of a **claim** knowing the statement to be false in any respect or;
- c) Submit a document in support of a **claim** knowing the document to be forged or false in any respect or;
- d) Make a **claim** in respect of any loss or damage caused by **your** wilful act or with **your** connivance.

Then

- a) **We** shall not pay the **claim**.
- b) **We** shall not pay any other **claim** which has been or will be made under the **policy**.
- c) **We** may at **our** option declare the **policy** void.
- d) **We** shall be entitled to recover from **you** the amount of any **claim** already paid under the **policy**.
- e) **We** shall not make any return of **premium**.
- f) **We** may inform the Police of the circumstances.

Disclosure of information

In the unfortunate **event** that **you** need to make a **claim** then **we** will need to disclose information to any other party involved in the **claim**. This may include:

- Third parties involved with the **claim**, their insurer, solicitor or representative.
- Medical teams, the Police or other investigators.
- **Our claims** handlers or other agents involved in dealing with **your claim**.

Please note

Should there be any contradiction between the General Conditions and the specific **policy** conditions relating to each section of insurance, the specific **policy** conditions shall take precedence over the General Conditions. The following General Conditions set out the circumstances for which **you** can make a **claim** and the benefits **you** can expect if **you** make a **claim**. Any breach of the General Conditions may mean that **your claim** is invalidated.

General conditions

The following conditions apply to this **policy**:

1. **You** must be a resident of the **United Kingdom**.
2. **You** must take reasonable care to protect yourself and **your** property against **accident**, injury, loss and damage and take all reasonable steps to recover **your** property if it is lost or stolen.
3. The date of the incident which leads to **you** making a **claim** must fall within the **period of insurance** shown on **your Validation Certificate**.
4. If **you** make a **claim** for medical reasons, **you** must get a medical certificate from the **doctor** who treated **you**. In the event of **your** death, **we** need to see the death certificate, and any other necessary documents. When **you** call to **claim**, the operator will be able to provide further guidance on the documentation required.
5. **You** must write to **us** as soon as reasonably possible with full details of anything which may result in a **claim**.
6. **You** must send **us** every **claim** form, summons or other communication to do with a **claim** as soon as possible after **you** get it.
7. **You** must provide **us** with any information, documents, evidence, vouchers, receipts and bills **we** need to process **your claim**. **You** must do this at **your** own expense.
8. **You** must provide **us** with details of **your** household insurance under which **your valuables** may need to be insured separately depending on their value. **You** must do this at **your** own expense.
9. **You** must not admit liability or offer to pay any **claim** to a **third party** unless **you** have **our** written permission.
10. **You** accept that no alterations to the cover and conditions of the **policy** apply, unless **we** have agreed them in writing.
11. **Single trip cover** – **you** accept that **we** may not extend the period of cover for a journey if the original **policy** plus any extensions have either ended, been in force for 104 days or **you** know **you** will be making a **claim**.
12. **You** must not be 86 or over at the start date of the **policy**. If **you** wish to purchase the **Winter Sports** extension, **you** must not be 66 or over at the inception date of the **policy**.
13. If **you** have a **single trip policy**, all **dependent children** must be travelling with an adult insured under the same **Validation Certificate** number.

14. **We** will not extend the period of cover. The period of cover ends 12 months after the start date if **you** have an annual **policy**, or at the end date shown on **your Validation Certificate** **you** have a **single trip policy**.

We have the right to:

1. Cancel **your policy** if **you** make a fraudulent **claim** without making any payment to **you**.
2. Cover **you** for no more than the whole of **your trip** and refuse to issue a **policy** if **you** have already begun **your trip**.
3. Obtain information from **your** medical history to help **us** or **our** agents deal with any **claim**, providing **you** have given **us** permission to do so. **We** will not pass on any of **your** information to another individual or organisation unless **you** have given **us** permission to do so.
4. Send **you home** at any point during **your trip** if **you** suffer **illness** or **injury** if the emergency assistance company **doctor** and the **doctor** treating **you** agree. If they do not agree **we** will seek independent medical advice.
5. Not pay **your claim** if **you** refuse to be repatriated.
6. Refuse to refund **your premium** or transfer **your premium** to any other **policy**. If **you** are not satisfied with the cover or the terms and conditions of **your policy**, **you** may cancel the **policy** and receive a full refund of **premium** providing **you** do this within 14 days after **you** have paid the **premium**.
7. Cancel **your policy** without any refund if **you** have a **single trip policy** and **your trip** is cancelled or cut short.
8. Cancel the cover for **your trip** if **you** have an **annual multi-trip policy** and **you** decide to cancel or cut short that particular **trip**.
9. Withhold any **claim** payment if **your claim** will also be covered by another travel insurance **policy**.
10. Take over the defence or settlement of any **claim**, recover expenses or compensation from any other third parties involved at any time, or take legal action in **your** name or in the name of anyone else claiming under this **policy**.

General exclusions

We will not pay any **claim** for loss, damage, **illness**, **injury**, death or legal liability:

1. Resulting directly or indirectly from an incident or a relevant fact which **you** knew about before **you** travelled unless **we** agreed to it in writing.
 2. If **you** have not complied with the conditions of the medical declaration on pages 17 to 21.
 3. If **you** are 86 years old or over at the date of **policy** purchase or if you are 66 or over at the inception date of the **policy** if you are participating in **winter sports**.
 4. If **you** have **annual multi-trip** cover and **your trip** is within the **United Kingdom** only and lasts less than two days unless this involves a sea crossing.
 5. If **you** have **annual multi-trip** cover and **your trip** is within the **United Kingdom** only and **you** have not pre-booked **your** accommodation.
 6. If **you** have **annual multi-trip** cover and **your trip** lasts longer than 31 days.
-

7. If **you** have **single trip** cover and **your trip** which lasts longer than the period of cover **you** have selected and is shown on **your Validation Certificate**.
8. Arising or resulting from **you** being involved in any malicious, reckless, illegal or criminal act.
9. Relating to extraordinary natural phenomena such as floods, earthquakes, landslides, atypical cyclonic storms, falling objects from space (including meteorites), and in general any extraordinary atmospheric, meteorological, seismic or geological phenomenon (unless the additional **premium** for cover under Section Q has been paid.)
10. Arising from war, civil war, invasion, revolution, **terrorism** or similar event.
11. For loss or damage directly or indirectly caused by any Government, Customs Officials or public or local authority legally taking or damaging **your** property.
12. Arising from currency exchange fluctuations.
13. Resulting from the contamination by ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel or the radioactive, toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of it.
14. Arising from **your** participation in any **dangerous activity**, or any sporting or physical activity not listed as an acceptable activity or agreed in writing by **us**.
15. Arising from **you** being in, entering or leaving any aircraft other than as a fare paying passenger in a fully licensed passenger carrying aircraft or any **claim** arising from **you** being in, entering or leaving any helicopter.
16. Resulting from **you** doing manual labour in connection with **your** trade, business or profession unless specifically approved by **us**.
17. Resulting from the tour operator, airline or any other company, firm or person becoming insolvent or being unable or unwilling to fulfil any part of their obligations to you except in those cases accepted by us in writing (unless the additional premium for cover under Section O has been paid).
18. Relating to charges for services that **you** have arranged for yourself, without the consent of **Mapfre Assistance**, except in the case of emergency. In the **event** of emergency, **you** must provide **us** with original receipts and invoices.
19. For assistance or compensation for events that occurred during a **trip**:
 - a) that began before the **period of insurance**.
 - b) **you** took with the intention to receive medical treatment.
 - c) for medical treatments, medical compensation and medical assistance after **you** were diagnosed with a terminal **illness** unless **we** have agreed in writing.
20. For expenses that:
 - a) arise once **you** are at **your** usual place of residence in the **United Kingdom**,
 - b) occur after the **trip** has finished
21. Resulting from **your** failure to get the inoculations or vaccinations that **you** need for the **trip**.
22. Arising from **you** acting against the advice of a **medical practitioner**.
23. For any search and rescue costs unless **you** have comprehensive cover.
24. Operational duties of a member of the Armed Forces other than **claims** arising from authorised leave being cancelled due to operational reasons, as provided under subsection 7 of Section A – Cancellation or Curtailment charges.

25. **Your** travel to a country or specific area or **event** to which the travel advice unit of the Foreign & Commonwealth Office or the World Health Organisation (WHO) or similar body has advised against all or all but essential travel.
26. Arising from **you** being intoxicated by alcohol, solvents or under the influence of drugs that have not been prescribed by a **doctor**.
27. Arising from volcanic ash clouds (unless the additional premium for cover under Section Q has been paid).

Medical declaration

It is important that **you** declare all **medical conditions** for yourself and anyone **insured on your policy**. If **you** make a **claim** for a **pre-existing medical condition** that **you** have not declared to **us** and has not been agreed in writing by **us**, **your claim** will be declined.

Telephone: 0844 692 8450

Medical Screening Lines Opening Hours: Monday to Friday, 8.30am - 9pm, Saturday 8.30am - 6pm, Sunday 9am - 6pm (excluding bank holidays)

Ref: Travelinsurancemedical.co.uk Travel Policy

You must comply with the following conditions to have the full protection of **your policy**.

If **you** do not comply **we** may at **our** option cancel the **policy** or refuse to deal with **your claim** or reduce the amount of any **claim** payment.

1. It is a condition of this **policy** that **you** will not be covered under Section A - Cancellation or Curtailment, Section B - Medical Expenses and Repatriation, Section C - Hospital Benefit and Section D - Personal Accident for any **claims** arising directly or indirectly from:

a) At the time of taking out this **policy**:

- i) Any **medical condition you** have, or have had, 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**.
- ii) 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**.

unless **you** have contacted Travelinsurancemedical.co.uk on 0844 692 8450 or declared this via our website and we have agreed, in writing, to cover **you**. When **you** contact **us you** must provide details of ALL **medical conditions**.

If **you** have **medical conditions** and they are all within the table of Automatically Accepted Minor Conditions* below these will be covered under the **policy** without the need to contact **us** and without additional charge provided:

- the **insured person** is not awaiting surgery for the condition and
- the **insured person** has been fully discharged from any post-operative follow-up
- the **insured person** meets the criteria stated next to the condition

- iii) Any **medical condition** for which **you**, a **close relative** or a **travelling companion** have received a terminal prognosis.

- iv) Any **medical condition** for which **you**, a **close relative** or a **travelling companion** are aware of but have not had a diagnosis.
 - v) Any **medical condition** for which **you**, a **close relative** or a **travelling companion** are on a waiting list for or have knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing **home**.
 - vi) Any **medical condition** affecting a **close relative** or a **travelling companion** which **you** knew about and which has caused them to have been hospitalised in the last 12 months or be put on a waiting list for hospital treatment.
 - vii) Any **medical condition** **you** have in respect of which a **medical practitioner** has advised **you** not to travel (or would have done so had **you** sought his/her advice), but despite which **you** still travel.
 - viii) Any surgery, treatment or investigations for which **you** intend to travel outside of **your home area** to receive (including expenses incurred due to the discovery of other **medical conditions** during and/or complications arising from these procedures).
 - ix) Any **medical condition** for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**.
 - x) **Your** travel against any health requirements stipulated by the **carrier**, their handling agents or any other Public Transport provider.
2. It is a condition of this **policy** that **you** will not be covered under Section A -Cancellation or Curtailment, for any **medical condition** affecting **you**, a **close relative** or a **travelling companion** that **you** are aware of at the time of booking any **trip** which could reasonably have been expected to lead to cancellation or **curtailment** of the **trip**.
3. If **your** health changes after the start date of **your policy** and the date **your** travel tickets or confirmation of booking were issued, **you** must telephone Travelinsurancemedical.co.uk Customer Services on 0844 692 8450.

The following **medical conditions** are covered without charge and subject to the normal terms and conditions of this insurance provided:

- the **insured person** is not awaiting surgery for the condition and
- the **insured person** has been fully discharged from any post-operative follow-up
- the **insured person** meets the criteria stated next to the condition

You must declare ALL **medical conditions** if:

- a) an **insured person** has any **medical condition** which is not in the Automatically Accepted Minor Conditions list* and/or
- b) an **insured person** has any **Medical Condition** in the Automatically Accepted Minor Conditions list* which is awaiting surgery or the **insured person** has not been discharged from any post operative follow up and/or;
- c) an **insured person** does not meet the criteria stated next to the condition and/or;
- d) an **insured person** has more than one of the conditions listed in NOTE 1** at the end of the list of conditions.

If **you** are unsure about anything stated on this page, please don't hesitate to contact Travelinsurancemedical.co.uk by calling 0844 692 8450. We will be happy to help.

Abnormal Smear Test	Deaf Mutism	Hernia (not Hiatus)
Achilles Tendon Injury	Deafness	Herpes Simplex (Cold Sore)
Acne	Dental Surgery	Herpes Zoster (Shingles)
Acronyx (Ingrowing Toe-nail)	Dermatitis (no hospital admissions or consultations)	Hip Replacement (no subsequent arthritis and never any dislocation of a joint replacement)
Adenoids	Deviated Nasal Septum	Hives (Nettle Rash)
Allergic Rhinitis	Diarrhoea and/or Vomiting (resolved)	Housemaid's Knee (Bursitis)
Alopecia	Dilatation and Curettage	HRT (Hormone Replacement Therapy)
Anal Fissure/Fistula	Dislocations (no joint replacement or hospital admissions)	Hyperthyroidism (Overactive Thyroid)
Appendectomy	Dry Eye Syndrome	Hypospadias
Astigmatism	Dyspepsia	Hypothyroidism (Underactive Thyroid)
Athlete's Foot (Tinea Pedis)	Ear Infections (resolved must be all clear prior to travel if flying)	Hysterectomy (provided no malignancy)
Attention Deficit Hyperactivity Disorder	Eczema (no hospital admissions or consultations)	Impetigo
Bell's Palsy (Facial Paralysis)	Endocervical Polyp	Indigestion
Benign Prostatic Enlargement	Endocervicitis	Influenza (full recovery made)
Bladder Infection (no ongoing treatment, no hospital admissions)	Endometrial Polyp	Ingrowing Toe-nail (Acronyx)
Blepharitis	Epididymitis	Inguinal Hernia
Blindness	Epiphora (Watery Eye)	Insomnia
Blocked Tear Ducts	Epispadias	Intercostal Neuralgia (no admissions)
Breast Fibroadenoma	Epistaxis (Nosebleed)	Intertrigo
Breast Cyst(s)	Erythema Nodosum	Irritable Bowel Syndrome (IBS) (provided definite diagnosis made and no ongoing investigations)
Breast Enlargement/Reduction	Essential Tremor	Keinboeck's Disease
Broken Bones (other than head or spine) – (no longer in plaster)	Facial Neuritis (Trigeminal Neuralgia)	Keratoconus
Bunion (Hallux Valgus)	Facial Paralysis (Bell's Palsy)	Knee Injury Collateral/cruciate ligaments
Bursitis	Femoral Hernia	Knee Replacement (no subsequent arthritis and never any dislocation of a joint replacement)
Caesarean Section	Fibroadenoma	Kohlers Disease
Candidiasis (oral or vaginal)	Fibroid Uterine	Labyrinthitis
Carpal Tunnel Syndrome	Fibromyalgia	Laryngitis
Cartilage Injury	Fibromyositis	Learning Difficulties
Cataracts	Fibrositis	Leptothrix
Cervical Erosion	Frozen Shoulder	Leucoderma
Cervicitis	Gall Bladder Removal	Lichen Planus
Chalazion	Ganglion	Ligaments (injury)
Chicken Pox (fully resolved)	Glandular Fever (full recovery made)	Lipoma
Cholecystectomy	Glaucoma	Macular Degeneration
Chronic fatigue syndrome (if only symptom is fatigue and no hospital admissions)	Glue Ear (resolved must be all clear prior to travel if flying)	Mastitis
Coeliac Disease	Goitre	Mastoidectomy (resolved must be all clear prior to travel if flying)
Cold Sore (Herpes Simplex)	Gout	Menopause
Common Cold(s)	Grave's Disease	Menorrhagia
Conjunctivitis	Grommet(s) inserted (Glue Ear)	Migraine (provided definite diagnosis made and no ongoing investigations)
Constipation	Gynaecomastia	
Corneal Graft	Haematoma (external)	
Cosmetic Surgery	Haemorrhoidectomy	
Cyst Breast	Haemorrhoids (Piles)	
Cyst Testicular	Hallux Valgus (Bunion)	
Cystitis (no ongoing treatment, no hospital admissions)	Hammer Toe	
Cystocele (fully recovered, no hospital admissions)	Hay Fever	
D & C		

Miscarriage	Rhinitis (Allergic)	Tinea Capitis (Scalp Ringworm)
Mole(s)	Rosacea	Tinea Corporis (Skin Ringworm)
Molluscum Contagiosum	Ruptured Tendons	Tinea Pedis (Athlete's Foot)
Myalgic Encephalomyelitis (ME) (if the only symptom is fatigue and no hospital admissions)	Salpingo-oophoritis	Tinnitus
Myxoedema	Scabies	Tonsillitis
Nasal Infection	Scalp Ringworm (Tinea Capitis)	Tooth Extraction
Nasal Polyp(s)	Scheuermann's Disease (provided no respiratory issues)	Toothache
Nettle Rash (Hives)	Sebaceous Cyst	Torn Ligament
Neuralgia (no hospital admissions)	Shingles (Herpes Zoster)	Torticollis (Wry Neck)
Nosebleed(s)	Sinusitis	Trichomycosis
Nystagmus	Skin Ringworm (Tinea Corporis)	Trigeminal Neuralgia
Osgood-schlatter's Disease	Sleep Apnoea (no machine used to assist breathing)	Turner's Syndrome
Osteochondritis	Sore Throat	Twisted Testicle
Otosclerosis	Sprains	Umbilical Hernia
Overactive Thyroid	Stigmatism	Underactive Thyroid
Parametritis	Stomach Bug (resolved)	Undescended Testicle
Pediculosis	Strabismus (Squint)	Urethritis (fully recovered, no hospital admissions)
Pelvic Inflammatory Disease	Stress Incontinence (no urinary infections)	URTI (Upper Respiratory Tract infection) (resolved, no further treatment)
Photodermatitis	Talipes (Club Foot)	Urticaria
Piles	Tendon Injury	Uterine Polyp(s)
Pityriasis Rosea	Tennis Elbow	Uterine Prolapse
Post Viral Fatigue Syndrome (if the only symptom is fatigue and no hospital admissions)	Tenosynovitis	Varicocele
Pregnancy (provided no complications)	Termination of Pregnancy	Varicose Veins - legs only, never any ulcers or cellulitis (if GP has confirmed that client is fit to travel)
Prickly Heat	Testicles Epididymitis	Vasectomy
Prolapsed Uterus (womb)	Testicles Hydrocele	Verruca
Pruritis	Testicles Varicocele	Vitiligo
Psoriasis (no hospital admissions or consultations)	Testicular Cyst	Warts (benign, non-genital)
Repetitive Strain Injury	Testicular Torsion (Twisted Testicle)	Womb Prolapse (uterus)
Retinitis Pigmentosa	Throat Infection(s)	Wry Neck (Torticollis)
	Thrush	
	Thyroid Overactive	
	Thyroid Deficiency	

NOTE 1**

Arthritis (Juvenile, Osteoarthritis, Rheumatoid or Psoriatic Arthritis, Reiter's Syndrome, Rheumatism):

- There must have been NO hospital admissions within the last 12 months.
- Must NOT affect the back more than any other area of the body.
- No more than 2 medications.
- No mobility aids (other than walking stick or frame).
- There must have been NO dislocations of any joint replacements.
- Must NOT be awaiting surgery.
- Must have NO lung problems/respiratory disorders.

Asthma (Wheezing):

- There must have been NO hospital admissions EVER.
- Must have been diagnosed prior to age 50.
- Must be controlled with no more than 2 medications (NO nebuliser, NO home oxygen)
- Must have been a non-smoker for at least 12 months.
- Must always be able to walk 200 yards on the flat without becoming short of breath.

Diabetes Mellitus (Sugar Diabetes):

- Type 2 (Non-Insulin-Dependent Diabetes Mellitus) only.
- Controlled by diet alone or by no more than 1 medication (no Insulin).
- There must have been NO hospital admissions or diabetic complications EVER.
- Must have been a non-smoker for at least 12 months.

Hypercholesterolaemia (High/Raised Cholesterol):

- No more than 1 medication.
- Must NOT be the inherited (genetic) form.
- Must have been a non-smoker for at least 12 months.

Hypertension (High Blood Pressure, White Coat Syndrome):

- No more than 2 medications.
- There must have been no change in treatment within the last 6 months.
- Must have been a non-smoker for at least 12 months.

Hypotension (Low Blood Pressure):

- Must NOT be associated with any underlying condition.

Osteoporosis (Osteopaenia, Fragile Bones):

- There must have been NO broken bones within the last 5 years.
- There must have been NO vertebral (backbone) fractures.

Important limitations to cover relating to medical conditions of non-insureds

This **policy** will not cover any **claims** under Section A - Cancellation or Curtailment arising directly or indirectly from any pre-existing **medical condition** known to **you** before the start of the **period of insurance** affecting a **close relative** or **travelling companion** who is not insured under this **policy**, or a person with whom **you** intend to stay whilst on **your trip** if:

- they had received a terminal diagnosis at the start of the **period of insurance**; or
- they were on a waiting-list for, or knew they needed surgery, inpatient treatment or investigation at any hospital or clinic at the start of **period of insurance**;
- they have had surgery, inpatient treatment or hospital consultations in the 90 days before the start of the **period of insurance**.

You should also refer to the General Exclusions.

In the event that **you** declare a change of health during the course of **your annual multi-trip policy** period that causes the level of risk of **your** conditions to exceed that which can be accepted by **us**, we reserve the right to exclude cover for all **your medical conditions** for any further trips booked. If **you** are dissatisfied with this, **you** will be permitted to cancel **your policy** and we will provide you with a pro-rata refund, less an administration charge.

Sports and activities

Sports and activities – no additional charge

You are covered for the following activities automatically, provided that the activity is on an **incidental** basis.

Archery+	Netball
Athletics	Orienteering (no climbing)
Badminton	Parascending (over water)
Banana boat rides	Rambling (under 2000m altitude)
Baseball	Ringos
Basketball	Roller blading/line skating
BMX	Rounders
Bowls	Roller hockey/street hockey – wearing pads and a helmet+
Boxing Training +	Running-sprint/long distance
Camel/elephant riding/trekking +	Safari (UK organised - no guns)
Canoeing/kayaking (inland - costal - not white water) life jacket and helmet must be worn +	Scuba diving* down to 30 metres if qualified and not diving alone, or accompanied by a qualified instructor
Cricket	Skate boarding
Cross country running	Snorkelling
Curling	Squash
Cycling (excluding mountain biking) – wearing a helmet	Surfing
Fell walking/running (no climbing)	Swimming
Field hockey +	Tennis
Fishing +	Trekking (under 2,000 metres altitude)
Flying as a passenger in small private aircraft +	Triathlon
Football +	Volleyball
Gaelic Football +	Wake Boarding +
Glacier Walking	Walking
Go-Karting – wearing a helmet+	Water polo
Golf	Water skiing
Heptathlon	White/black water rafting Grades 1 to 4 (Life jacket and helmet must be worn) +
Hiking (under 2,000 metres altitude)	Windsurfing
Horse riding (no polo, hunting or jumping - riding hat must be worn) +	Yachting/crewing (inside territorial waters) Life jacket must be worn
Jet Skiing +	Yoga
Jogging	Zorbing/hydrozorbing
Marathon Running +	
Mountain biking – wearing a helmet+	

+ Cover under Section D – Personal Accident and Section G – Personal Liability for those sports and activities marked with a + is excluded

*You will not be covered under this **policy** if you travel by air within 24 hours of participating in scuba diving.

24 Hour medical emergency and repatriation service

Contact the Emergency Assistance service on:

Tel: 0044 207 748 0675

Ref: Travelinsurancemedical.co.uk

You can use this service outside the **United Kingdom** during **your** journey. If **you** have a medical emergency please contact **Mapfre Assistance** as soon as possible.

Mapfre Assistance doctors and nurses and other technical support staff are on call 24 hours a day throughout the year. **You** may reverse the call charges when using this service. Please give **Mapfre Assistance** your age and **your Validation Certificate** number.

The service is available if medically necessary and when **you** have a valid **Validation Certificate**. It includes:

- A guarantee to pay hospital or **doctors** fees;
- A translation service;
- Repatriation arrangements to send **you home** by land, sea or air (accompanied by a nurse or **doctor** if necessary);
- Necessary travel arrangements for **your** next-of-kin or the person with whom **you** are travelling (if covered under this **policy**); and
- An ambulance service to a hospital or nursing **home** or **your home** when **you** arrive in the **United Kingdom**. (If necessary)

Outpatient treatment

For simple out-patient costs **you** should settle the clinic bill directly and **claim** this back upon **your** return.

Reciprocal health agreements

EU, EEA or Switzerland

If **you** are travelling to countries within the European Union (EU), the European Economic Area (EEA) or Switzerland **you** are strongly advised to obtain a European Health Insurance Card (EHIC) application from **your** local Post Office. **You** can also apply either online through www.dh.gov.uk/travellers or by telephoning 0845 606 2030. This will entitle **you** to benefit from the reciprocal health care arrangements which exist between countries within the EU/EEA or Switzerland.

In the **event** of liability being accepted for a medical expense which has been reduced by the use of a European Health Insurance Card **we** will not apply the deduction of **excess** under Section B – Emergency, Expenses and Repatriation.

Australia

If **you** require medical treatment in Australia **you** must enrol with a local MEDICARE office. **You** do not need to enrol on arrival but **you** must do this after the first occasion **you** receive treatment. In-patient and out-patient treatment at a public hospital is then available free of charge. Details of how to enrol and the free treatment available can be found in the health advice for travellers booklet available from **your** local Post Office. Alternatively please call the Emergency Assistance Service for guidance.

If **you** are admitted to hospital contact must be made with the Emergency Assistance Service as soon as possible and their authority obtained in respect of any treatment not available under MEDICARE.

Contact the Emergency Assistance Services on telephone number 0044 207 748 0675

Travel assistance

You can use this service outside the **United Kingdom** during **your** journey. If **you** have an emergency please contact **Mapfre Assistance** as soon as possible. When dialling from outside the **United Kingdom** phone 0044 207 748 0675 **you** may reverse the call charges when using this service. Please give **Mapfre Assistance** **your** age and **your Validation Certificate** number.

The service includes:

- Medical advice abroad related to **your claim**;
- Assistance in locating suitable **doctors**, hospitals, clinics and dentists when consultation or minor treatment is required;
- Assistance with arrangements for a **doctor** to call and if necessary hospitalisation;
- Continued medical monitoring of the patient's condition;
- Help to obtain special drugs if unobtainable locally, and dispatching of them to the patient;
- Arranging for a translation service when necessary, where the provider of an assistance service does not speak English.

Mapfre Assistance will only help arrange these services. **You** or a relative or friend in the **United Kingdom** must pay for the tickets, travel documents, medication, drugs, emergency funds or any extra costs, or **we** can arrange for **your** card to be debited which the operator will discuss with **you** at the time **you** call.

Sections of insurance

Section A Cancellation or curtailment

Cover under this section begins:

- On the start date of the **policy** if **you** have an **annual multi-trip policy**
- On the date **you** have paid the **premium** if **you** are have a **single trip policy**

What is covered:

If **your trip** is cancelled or **curtailed** (cut short), **we** shall pay up to the amount shown in the table of benefits on pages 4 and 5 in compensation for **your** part of the costs of unused personal accommodation, transport charges and extra travel expenses (including pre – paid excursions up to £250), which have been booked and paid for, or where there is a contract to pay before **your** journey began, which cannot be recovered from anywhere else. **We** shall only pay a **claim** under this section for one of the following reasons:

1. If **you**, **your close relative**, **guardian** or someone **you** are travelling with suffer a serious **illness**, serious **accident**, or **bodily injury**.
2. If **you**, **your close relative**, **your close business associate** or someone **you** are travelling with are called to appear in a court hearing, as a witness in a court hearing or member of the jury panel at a court hearing in the **United Kingdom**. However, **you** will not be covered under this section if **you** knew about this before booking the **trip**. **You** must provide **us** with an original copy of the court summons.
3. If serious damage occurs to **your usual** place of residence in the **United Kingdom**, or to **your** business premises, that has been caused by fire, explosion, **theft** or by force of nature, which has rendered the premises uninhabitable or there is a serious risk of greater damage which requires **your** presence.
4. If **you** are injured or ill and are in hospital for the rest of **your** journey.
5. If severe weather prevents **you** from making **your** outward journey from the **United Kingdom**.
6. If **your** passport is lost or stolen after check-in at **your** departure point and prevents **you** from making **your** outward journey from the **United Kingdom**.

7. If **you**, **your** partner, a **close relative**, the person **you** are engaged to or someone **you** are travelling with, is a member of the armed forces and is ordered to return to duty.
8. If **you** are made redundant, provided that **you** are entitled to statutory redundancy pay under the current redundancy law and that **you** were unaware of the likelihood of being made redundant at the time of booking **your trip**.

You must notify us and your travel provider of the cancellation of your trip as soon as you become aware of the circumstances listed above. Unless you notify us, we shall not be liable to pay any costs, expenses or penalties that you incur due to the cancellation of your trip.

We shall not make any payment unless **you** provide **us** with the following documents:

1. A copy of the report relating to any incident such as a medical report, death certificate, firefighters report or police report. That document must, show:
 - a) the date of the **event** and if appropriate the date of hospital admission, death or **accident**;
 - b) the diagnosis of the **medical condition** (if appropriate)
 - c) the type of damage caused;
 - d) the clinical or background history; and where appropriate, the treatment prescribed.
2. The original copy of the invoice and/or receipts from the travel agent, airline, tour operator, hotel, train company, online travel agency or any other provider for payment of the **trip**.
3. A copy of the cancellation expenses invoice issued by the travel agent, airline or tour operator hotel, train company, online travel agency or any other provider.
4. The original cancellation document issued by the travel agency airline, tour operator, hotel, train company, online travel agency or any other provider, as well as the cancellation expenses invoice or payment slip thereof.

What is not covered:

1. Anything mentioned in the General Exclusions.
2. The **excess** shown in the table of benefits on pages 4 and 5.
3. Any **claim** if **you** have not complied with the conditions of the medical declaration on pages 17 to 21.
4. Cosmetic treatment, or medical treatment that is not medically necessary.
5. Failure by **you** to provide to the relevant authorities, for whatever reason the documents which are required to allow travel, such as passport, visa, tickets, identity card or vaccination certificates.
6. Any amount recoverable from a travel agent, tour operator, carrier or any other source;
7. **You** failing to allow sufficient time to reach **your** departure point from the **United Kingdom**.
8. The cost of Airport Departure Duty where separately identified.

Any **claims** arising directly or indirectly from:

9. Circumstances known to **you** prior to the date this insurance is purchased by **you** or the time of booking any **trip** (whichever is the earlier) which could reasonably have been expected to give rise to cancellation or **curtailment** of the **trip**.
10. Disinclination to travel.
11. Normal pregnancy, without any accompanying **bodily injury, illness**, disease or complication. This section is designed to provide cover for unforeseen events, **accidents, illnesses** and diseases and normal childbirth would not constitute an unforeseen **event**.

12. Travel tickets or accommodation costs paid for using any Timeshare, Holiday Property Bond, airline mileage reward scheme, for example air miles or other **holiday** points scheme.

Special conditions relating to claims

1. It is a condition of the **policy** that **you** contact the Emergency Assistance Service prior to any **curtailment** of **your trip**.
2. **You** must obtain a medical certificate from a **medical practitioner** and prior approval of the Emergency Assistance Service to confirm the necessity to return **home** prior to **curtailment** of the **trip** due to death, **bodily injury, illness**, disease or complications arising as a direct result of pregnancy.
3. If **you** cancel the **trip** due to:
 - a) stress, anxiety, depression or any other mental or nervous disorder that **you** are suffering from **you** must provide a medical certificate from a **medical practitioner** specialising in the relevant field; or
 - b) any other **bodily injury, illness**, disease or complications arising as a direct result of pregnancy, **you** must provide a medical certificate from a **medical practitioner** stating that this necessarily and reasonably prevented **you** from travelling.
4. If **you** fail to notify the travel agent, tour operator or provider of transport/accommodation immediately when it is found necessary to cancel the **trip** the amount **we** will pay will be limited to the cancellation charges that would have otherwise applied.

Section B Medical expenses and repatriation

If **you** have a medical emergency while on **your trip** or if **you** have to come **home** early or have to extend the length of **your trip** due to **illness** or injury, **you** must contact the Emergency Assistance Service (**Mapfre Assistance**) as soon as **you** can.

What is covered:

We will pay for **your** necessary emergency expenses, providing these expenses are reasonable and due to **your** unexpected **illness** or injury during **your trip**:

If **you** are outside the **United Kingdom** during **your trip**:

1. Up to the amount shown in the table of benefits on pages 4 and 5 for reasonable fees and charges for:
 - a) emergency medical, surgical and hospital treatment and ambulance costs. (**You** are covered up to £200 for emergency dental treatment, as long as it is for immediate pain relief only).
 - b) necessary expenses for extra transport and accommodation for **you** and one other person who stays with **you**, has to travel to **you** from the **United Kingdom** and/or travel back with **you**, if this is necessary due to medical advice.
 - c) the repatriation of **your** body or ashes back to **your home** or up to £5,000 for funeral expenses in the country where **you** die if it is outside the **United Kingdom**.

If **you** are within the **United Kingdom** during **your trip**:

2. Up to £2,000 for:
 - a) necessary expenses for extra transport and accommodation for **you** and one other person who stays with **you**, or who has to travel to **you** from the **United Kingdom** and/or travel back with **you**, if this is necessary due to medical advice.
 - b) the reasonable cost of transporting **your** body or ashes to **your home**.

Special conditions relating to claims

1. **You** must give notice as soon as possible to the emergency assistance service of any **bodily injury, illness**, disease or complications arising as a direct result of pregnancy which necessitates **your** admittance to hospital as an in-patient or before any arrangements are made for **your** repatriation.
2. In the **event of your bodily injury, illness**, disease or complications arising as a direct result of pregnancy **we** reserve the right to relocate **you** from one hospital to another and arrange for **your** repatriation to **your home area** at any time during the **trip**. **We** will do this if in the opinion of the **medical practitioner** in attendance or the emergency assistance service **you** can be moved safely and/or travel safely to **your home area** to continue treatment.

What is not covered:

1. Services or treatments which **you** have received in the **United Kingdom**.
2. The **excess** shown in the table of benefits on pages 4 and 5 if **you** are claiming under points 1a), 1b) and 1c) and 2 of this section unless **your claim** has been reduced because **you** used an EHC card or any other kind of reciprocal health agreement if **you** were outside the **United Kingdom**.
3. Any **claim** if **you** have not complied with the conditions of the medical declaration on pages 17 to 21.
4. The cost of replacing medication that **you** were using before **your trip**.
5. For rehabilitation treatments.
6. Relating to **Prostheses, Orthopaedic Material** or **Orthesis** and **Osteosynthesis Material** as well as spectacles.
7. For medical treatment for any complication as a result of a voluntary termination of pregnancy.
8. For emergency dental expenses in **excess** of £200.
9. Any **claim** for transport or accommodation costs if it is of a higher standard than the transport or accommodation **you** have already used on **your trip**, unless the emergency assistance company have deemed this medically necessary and **we** have agreed.
10. As a result of the cancellation or delay, caused by **you** or anyone responsible for **you**, of the transfer to the medical centre or to the **United Kingdom** proposed by **us** and agreed by **our** medical service.
11. Any **claim** resulting from **you** being intoxicated by alcohol, solvents or under the influence of drugs that have not been prescribed by a **doctor**.
12. Any **claim** resulting from **your** suicide or attempted suicide, deliberately injuring yourself, or putting yourself in danger (unless trying to save someone's life).
13. **You** travelling on a motorcycle over 125cc, unless the rider holds a valid licence which lets them ride a motorcycle of more than 125c.
14. **You** engaging in manual work or dangerous work unless **we** have agreed in writing.
15. **You** participating in any **dangerous activity** unless **we** have agreed in writing and **you** have paid the appropriate extra **premium**.
16. Hospital treatment or repatriation which the emergency assistance company has not authorised.
17. Any treatment that does not relate directly to the **illness** or **injury** **you** are claiming for.
18. Cremation or burial in the **United Kingdom**.
19. The replacement or repair of artificial or false teeth or dental work involving the use of precious metal.

20. Any **claims** arising directly or indirectly in respect of:

- a) Costs of telephone calls other than:
 - i. Calls to the Emergency Assistance Service notifying and dealing with the problem for which **you** are able to provide receipts or other reasonable evidence to show the cost of the calls and the numbers **you** telephoned.
 - ii. Any costs incurred by **you** when **you** receive calls on **your** mobile telephone from the Emergency Assistance Service for which **you** are able to provide receipts or other reasonable evidence to show the cost of the calls.
- b) The cost of taxi fares, other than those for travel to or from hospital relating to **your** admission, discharge, attendance for outpatient treatment or appointments or for collection of medication prescribed by the hospital.
- c) The cost of treatment or surgery, including exploratory tests, which are not directly related to the **bodily injury, illness** or disease which necessitated **your** admittance into hospital.
- d) Any expenses which are not usual, reasonable or customary to treat **your bodily injury, illness** or disease.
- e) Any form of treatment or surgery which in the opinion of the **medical practitioner** in attendance and the Emergency Assistance Service can be delayed until **your** return to **your home area**.
- f) Expenses incurred in obtaining or replacing medication, which at the time of departure is known to be required or to be continued outside **your home area**.
- g) Additional costs arising from single or private room accommodation.
- h) Treatment or services provided by a health spa, convalescent or nursing **home** or any rehabilitation centre unless agreed by the Emergency Assistance Service.
- i) Any expenses incurred after **you** have returned to **your home area**.
- j) Any expenses incurred in England, Scotland, Wales or Northern Ireland which are:
 - i. For private treatment, or
 - ii. Funded by, or are recoverable from the Health Authority in **your home area**.
- k) Expenses incurred as a result of a tropical disease where **you** have not had the recommended inoculations and/or taken the recommended medication.
- l) Expenses incurred as a result of **your** decision not to be repatriated after the date when in the opinion of the Emergency Assistance Service it is safe to do so.
- m) Normal pregnancy, without any accompanying **bodily injury, illness, disease** or complication. This section is designed to provide cover for unforeseen events, **accidents, illnesses** and diseases and normal childbirth would not constitute an unforeseen **event**.

21. Anything mentioned in the General Exclusions.

Section C **Hospital benefit**

What is covered:

We will pay **you** up to the amount shown in the table of benefits on pages 4 and 5 for every complete 24 hours **you** have to stay in hospital as an in-patient or are confined to **your** accommodation due to **your** compulsory quarantine on the order of a **medical practitioner** outside of **your home area** as a result of **bodily injury** or **illness you** sustain.

We will pay the amount as shown in the Schedule of Benefits in addition to any amount payable under emergency medical and other expenses. This payment is meant to help **you** pay for additional expenses such as taxi fares and phone calls incurred during **your** stay in hospital.

Special conditions relating to claims

1. **You** must give notice as soon as possible to the Emergency Assistance Service of any **bodily injury** or **illness** which necessitates **your** admittance to hospital as an in-patient, compulsory quarantine or confinement to **your** accommodation on the orders of a **medical practitioner**.

What is not covered:

1. Any **claims** arising directly or indirectly from:
 - a) any additional period of hospitalisation, compulsory quarantine or confinement to **your** accommodation:
 - i. Relating to treatment or surgery, including exploratory tests, which are not directly related to the **bodily injury** or **illness** which necessitated **your** admittance into hospital.
 - ii. Relating to treatment or services provided by a convalescent or nursing **home** or any rehabilitation centre.
 - iii. Following **your** decision not to be repatriated after the date when in the opinion of the Emergency Assistance Service it is safe to do so.
 - b) hospitalisation, compulsory quarantine or confinement to **your** accommodation:
 - i. Relating to any form of treatment or surgery which in the opinion of the **medical practitioner** in attendance and the Emergency Assistance Service can be delayed reasonably until **your** return to **your home area**.
 - ii. As a result of a tropical disease where **you** have not had the recommended inoculations and/or taken the recommended medication.
 - iii. Occurring in England, Scotland, Wales or Northern Ireland and relating to either private treatment or tests, surgery or treatment the costs of which are funded by, or are recoverable from the Health Authority in **your home area**.
2. Any **claim** if **you** have not complied with the conditions of the medical declaration on pages 17 to 21.
3. Anything mentioned in the General Exclusions.

Section D **Personal accident**

What is covered:

We will pay **you** or **your** legal representative up to the amount shown in the table of benefits on pages 4 and 5 for an **accident** which has been caused by something external and visible but not as a result of a **medical condition and under the following circumstances:**

1. **Your** death (**we** will not pay more than £1,000 if **you** are under 19 or over 74 at the time of the **accident**).
2. Total and permanent loss of sight in one or both of **your** eyes or total and permanent loss of use of one or both of **your** hands or feet.
3. Permanent physical disability as a result of which there is no work which **you** are able to do.
4. If **you** are not in paid work, any **permanent disability** which prevents **you** from doing all **your** usual activities.

We will not pay compensation if you are 86 or over at the time of the accident or if you are 66 or over at the time of the accident and were participating in winter sports.

What is not covered:

1. Anything mentioned in the General Exclusions or General Conditions;
2. Any **accident** that **you** suffer before **you** go on **your trip**;
3. **Your** sickness, disease, physical or mental condition that is gradually getting worse;
4. **You** travelling in an aircraft (except as a passenger in a fully-licensed, passenger carrying aircraft);
5. **Your** suicide, self-injury or deliberately putting yourself at risk (unless **you** were trying to save another person's life);
6. **You** being under the influence of drugs (except those prescribed by a registered **doctor** but not for the treatment of drug addiction);
7. **You** being under the influence of alcohol or solvents;
8. **You** travelling on a motorcycle over 125cc, unless the rider holds a valid licence which lets them ride a motorcycle of more than 125cc;
9. **You** taking part in manual work or dangerous work, unless **we** have agreed in writing beforehand;
10. **You** taking part in any **sports and activity which is listed in the sports and activity section as excluded from cover under this section** (unless **we** have agreed in writing beforehand and **you** have paid the appropriate extra **premium** for this activity).

Section E **Baggage, replacement passport and baggage delay**

E1 – Baggage

What is covered:

We shall pay up to the amount shown in the table of benefits on pages 4 and 5 in compensation to **you** for any loss, **theft** or damage to **your baggage** (not including ski equipment) during **your trip**. There is a limit for each **single item** and for **valuables** as shown in the table of benefits on pages 4 and 5.

What is not covered:

1. Any compensation payment made under this section will be net of any compensation **you** received for the delay of that **baggage** as claimed under Section E3.
2. The **excess** shown in the table of benefits on pages 4 and 5.
3. For more than the amount shown in the table of benefits pages 4 and 5 for any **single item** or **valuable** item whether jointly owned or not.
4. **Baggage** or possessions damaged due to:
 - a) wear and tear, depreciation, moth, vermin, mechanical or electrical breakdown, any process of cleaning or restoration or alteration, atmospheric or climatic conditions or any gradually occurrence;
 - b) them being of a fragile nature other than photographic and telescopic lenses.
5. **Baggage** or possessions are lost or stolen due to:
 - a) delay, detention or confiscation by customs or other officials;
 - b) them being left unaccompanied in **your** tent and/or caravan;
 - c) them being left unaccompanied.
6. The **baggage** or possessions are:
 - a) sports equipment;

- b) contact or corneal lenses, dentures, hearing aids, cycles, unset precious stones, motor vehicles and their accessories, water craft and their accessories, caravans, trailers and trailer tents and their accessories, and property carried in connection with any business, profession or trade;
 - c) made of china, pottery, glass or other fragile items, other than photographic and telescopic lenses;
 - d) accessories and/or subscriptions of mobile or satellite telephones;
 - e) money, cheques, bank cards and travel documents.
7. **You** have failed to take ordinary and reasonable precautions for the safety of **your baggage**, clothing and personal effects. **Claims** for the **theft of baggage** which is left **unattended** shall not be covered unless it has been stored and locked in safe storage space or secure premises, or locked out of sight, in the boot of a motor vehicle. This exception shall only apply between the hours of 8am to 10pm. In addition valuables are not covered, at any time, when left **unattended** in a motor vehicle, whether in a locked boot or not.
8. Any **claim** for **baggage** or the contents of any **baggage** that is not sufficiently well packaged and labelled, as being fragile or perishable goods or as containing fragile or perishable goods.
9. Any loss, **theft** or damage to checked-in **baggage** or personal possessions unless **you** have provided supporting receipts or proof of ownership.
10. A **claim** relates to any items which are not documented on the police report, or other official report, compiled at the time that the **theft** is reported to the respective authority.
11. If **you** have left **your baggage** or possessions in a motor vehicle and the **baggage** or possession are not stored in:
- a) a separate, locked boot in a passenger car;
 - b) a boot of a hatchback (3-door or 5-door) passenger car including an estate car which has been covered by a roller sheet, back shelf or similar means;
 - c) the interior of a camper, delivery van, car or caravan allowing no outside view of the goods due to a properly fixed provision;
 - d) a properly fixed and locked **baggage** boot or **baggage** compartment.
12. If during the **trip**, **you** fail to take the remaining **baggage** to **your** accommodation address.
13. If during the cruise, flight or the journey by train, bus or boat **you** have failed to carry the **valuables**, breakable goods, money and medicines as hand-**baggage**.
14. If at the time of loss, damage or liability arising under this section there is any other insurance covering the same loss, damage or liability or under EU directives **you** are able to **claim** money from the airline they travelled with, **we** will only pay for any balance due.
15. During a stay at the **holiday destination**: if **you** do not leave valuable documents, valuable goods and **baggage** behind **unattended** locked away in a secure place of storage.

In any of the above circumstances, **you** will not be covered if **you** have failed to take reasonable measures to prevent or limit any damage to **your** personal possessions or **baggage**.

Special conditions relating to claims

1. **You** must provide a list of contents of any item of **baggage** lost or damaged. The list of contents must include:
- a) An estimated price of each item;
 - b) Date of purchase of each item; and
 - c) Details of any compensation paid by the airline or tour operator.
2. Any payment will be based on the value of the item at the date of the loss and not on a new for old or replacement cost basis.

3. **Baggage** shall be considered to have been lost once a minimum of 21 days have passed since the loss was reported.
4. **You** must report to the local police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, **theft** or attempted **theft** of all **baggage/valuables**. A holiday representative's report is not sufficient.
5. For items damaged whilst on **your trip you** must obtain an official report from an appropriate local retailer confirming the item is damaged and beyond repair.
6. If **valuables** are lost, stolen or damaged while in a hotel safe or safety deposit box **you** must report to the hotel in writing, details of the loss, **theft** or damage and obtain written confirmation.
7. If **baggage** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **you** must report to them, in writing, details of the loss, **theft** or damage and obtain written confirmation.

If **baggage** is lost, stolen or damaged whilst in the care of an airline **you** must:

- a) obtain a property irregularity report from the airline;
 - b) give formal written notice of the **claim** to the airline within the time limit contained in their conditions of carriage (please retain a copy);
 - c) retain all travel tickets and tags for submission if a **claim** is to be made under this **policy**.
8. **You** must provide an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your claim**.

In the **event** that **your baggage** or possessions are recovered, **we** will either forward them to **you** at **your** location on the **trip** or if the **trip** has ended to **your** usual place of residence in the **United Kingdom**. Should **you** have received any compensation under Section E1, **you** must return any payment to **us** within 14 calendar days of the receipt of **your baggage** and/or possessions.

E2 – Replacement passport

What is covered:

If **you** lose **your** passport whilst on **your trip**, **we** will pay up to the amount shown in the table of benefits on pages 4 and 5 towards any reasonable travel and accommodations costs incurred by **you** and deemed necessary in order to obtain a new passport or equivalent consular document.

What is not covered:

1. **You** cannot **claim** for daily living expenses under this section.

E3 – Baggage delay

In the **event** of a delay from the arrival of the flight to the delivery of **your** checked-in **baggage**, **we** will pay up to the amount shown in the table of benefits on pages 4 and 5 for the cost of replacing essential items provided that **you** have given **us** the relevant original copies of the invoices and/or receipts.

Special conditions relating to claims

1. If **baggage** is delayed while in the care of a carrier, transport company, authority or hotel **you** must report to them, in writing, details of the loss, **theft** or damage and obtain written confirmation. If **baggage** is lost, stolen or damaged whilst in the care of an airline **you** must:
 - a) obtain a Property Irregularity Report from the airline.
 - b) give formal written notice of the **claim** to the airline within the time limit contained in their conditions of carriage (please retain a copy).
 - c) retain all travel tickets and tags for submission if a **claim** is to be made under this **policy**.

Section F **Personal money**

What is covered:

We will pay up to the amount shown in the table of benefits on pages 4 and 5 if **you** lose **your** cash or if **your** traveller's cheques are stolen. **You** must produce copies of the relevant receipts, certificates or crime report before payment can be made.

Special conditions relating to claims

1. **You** must report to the local police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, **theft** or attempted **theft** of all **personal money**. A Holiday Representative report is not sufficient.
2. **You** must provide an original receipt for items lost, stolen or damaged including foreign currency exchange receipts showing the amount to help **you** to substantiate **your claim**.
3. If **personal money** is lost, stolen or damaged while deposited in a hotel safe or safety deposit box **you** must report to the hotel, in writing, details of the loss, **theft** or damage and obtain written confirmation.
4. **You** must retain all travel tickets and tags for submission if a **claim** is to be made under this **policy**.

What is not covered:

1. The **excess** shown in the table of benefits on pages 4 and 5.
2. Loss, **theft** or of damage to **personal money** left **unattended** at any time (including in a vehicle, in checked in luggage or while in the custody of a carrier, tour operator or **public transport** operator) unless deposited in a hotel safe or safety deposit box.
3. Loss, **theft** or of damage to travellers' cheques if **you** have not complied with the issuers' conditions or where the issuer provides a replacement service.
4. Loss or damage due to delay, confiscation or detention by customs or other authority.
5. Loss or damage due to depreciation in value, variations in exchange rates or shortages due to error or omission.

Anything mentioned in the General Exclusions.

Section G **Personal liability**

What is covered:

We will pay all **damages** and **losses** which **you** become legally liable to pay to a **third party** as a result of a **claim** for up to the amount shown in the table of benefits on pages 4 and 5 due to:

- a) accidental injury or death to a **third party** caused by **you**;
- b) damage to property of a **third party** caused by **you**. The damage must occur during the **period of insurance** and be as a result of **your** private holiday pursuits whilst on the **trip**.

We will also pay legal costs and expenses recoverable by any claimant provided this is agreed in writing with **you**.

Special conditions relating to claims

1. **The insurer's** liability shall not exceed the sum **insured** in respect of any or all occurrences in a series resulting from one original cause.
2. In the **event of your** death, cover will be transferred to **your** personal legal representatives as if they were **you**.

3. If **you** receive any communication from any person in connection with any event which may result in a **claim** under this section, **you** must immediately pass this to **us** without acknowledging the communication to the party who sent the communication.
4. No admission of liability, offer, promise of payment, or payment must be made by **you**, without **our** written consent.

What is not covered:

1. The **excess** shown in the table of benefits on pages 4 and 5;
2. **Your** ownership, use, possession, occupation of any building including **your** use of temporary holiday accommodation or;
3. **Your** ownership, possession or use of horse drawn, motorised or mechanically propelled vehicles, caravans, trailers, trailer tents, aircraft or watercraft;
4. Anything caused by a wilful act by **you** or deliberate neglect on **your** part;
5. **Bodily injury** or **illness** to **you** or loss of or damage to property belonging to **you** or held in trust by **you** or in **your** custody or control;
6. **Bodily injury** or **illness** to **you** or loss of or damage to property belonging to any person employed by **you** arising out of or in the course of the employment;
7. **Bodily injury** to or **illness** of or loss of or damage to property belonging to a person who is **your** relative, **your travelling companion** or a member of **your** household, or damage to their property;
8. Any profession, trade or business, or work experience;
9. Any agreement entered into by **you**, except where **you** would have incurred the liability even if the agreement had not existed;
10. Any action not brought under the jurisdiction of the courts of the country where the incident giving rise to the **claim** occurred;
11. The use and/or ownership of weapons.

Section H **Travel delay**

What is covered:

If the flight or sea vessel booked by **you** is delayed by more than 12 hours due to:

- a) strike or;
- b) industrial action or;
- c) adverse weather conditions or;
- d) mechanical breakdown of or a technical fault occurring in the scheduled **public transport** on which **you** are booked to travel.

We will pay £20 for the first 12 hours and £10 for each further 12 hours up to the amount shown in the table of benefits on pages 4 and 5 under Comprehensive cover only.

You may claim under only one of the following sections:

Section H – Travel Delay, Section I – Holiday Abandonment or Section J – Missed Departure for the same event.

Special conditions relating to claims

1. **You** must check in according to the itinerary supplied to **you**.

2. **You** must obtain confirmation from the carriers (or their handling agents) in writing of the number of hours of delay and the reason for the delay.
3. **You** must comply with the terms of contract of the travel agent, tour operator or provider of transport.
4. Compensation for flight delays shall only be payable if **you** were a fare paying passenger on a fully licensed passenger carrying aircraft.

What is not covered:

1. Strike or industrial action or air traffic control delay existing or publicly declared by the date this insurance is purchased by **you** or the date **your trip** was booked whichever is the later.
2. Any **trip** within the **United Kingdom** if **you** do not make a sea crossing.
3. Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the civil aviation authority or a port authority or any such regulatory body in a country to/from which **you** are travelling.
4. Any **claim** that results from volcanic ash unless **you** have paid the appropriate **premium** for cover and claim under Section Q.
5. Anything mentioned in the General Exclusions.

Section I **Holiday abandonment**

What is covered:

If departure of the scheduled **public transport** on which **you** are booked to travel is delayed at the final departure point from the **United Kingdom** for at least 24 hours from the scheduled time of departure due to:

- a) strike or;
- b) industrial action or;
- c) adverse weather conditions or;
- d) mechanical breakdown of or a technical fault occurring in the scheduled **public transport** on which **you** are booked to travel or **we** will pay **you**:

Up to the amount shown in the table of benefits on pages 4 and 5 for any irrecoverable unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay if after a minimum 24 hours has elapsed, **you** choose to cancel **your trip** before departure from the **United Kingdom**.

You may claim under only one of the following sections:

Section H – Travel Delay, Section I – Holiday Abandonment or Section J – Missed Departure for the same **event**.

Special conditions relating to claims

1. **You** must check-in according to the itinerary supplied to **you**.
2. **You** must obtain confirmation from the carriers (or their handling agents) in writing of the number of hours of delay and the reason for the delay.
3. **You** must comply with the terms of contract of the travel agent, tour operator or provider of transport.

What is not covered:

1. The **excess** shown in the table of benefits on pages 4 and 5.
2. **Claims** arising directly or indirectly from:

- a) strike or industrial action or air traffic control delay existing or publicly declared by the date this insurance is purchased by **you** or the date **your trip** was booked whichever is the later.
 - b) withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the civil aviation authority or a port authority or any such regulatory body in a country to/from which **you** are travelling.
 - c) costs that are recoverable from the **public transport** provider.
3. Any claim that results from volcanic ash unless **you** have paid the appropriate **premium** for cover and claim under Section Q.
 4. Anything mentioned in the General Exclusions.

Section J **Missed departure**

What is covered:

We will pay **you** up to the amount shown in the table of benefits on pages 4 and 5 for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** overseas **destination** or returning to the **United Kingdom**, if **you** fail to arrive at the international departure point in time to board the scheduled **public transport** on which **you** are booked to travel on the initial international journey of the **trip** as a result of:

1. The failure of scheduled **public transport** or;
2. An **accident** to or breakdown of the vehicle in which **you** are travelling or;
3. An **accident** or breakdown occurring ahead of **you** on a motorway or dual carriage way which causes an unexpected delay to the vehicle in which **you** are travelling or;
4. Strike, industrial action or adverse weather conditions.

You may claim under only one of the following sections:

Section H – Delayed Departure, Section I – Holiday Abandonment or Section J – Missed Departure for the same event.

Special conditions relating to claims

1. In the **event** of a **claim** arising from any delay arising from traffic congestion **you** must obtain written confirmation from the Police or emergency breakdown services of the location, reason for and duration of the delay.
2. **You** must allow sufficient time for the scheduled **public transport** or other transport to arrive on schedule and to deliver **you** to the departure point.

What is not covered:

1. The **excess** shown in the table of benefits on pages 4 and 5.
2. **Claims** arising directly or indirectly from:
 - a) strike or industrial action or air traffic control delay existing or publicly declared by the date this insurance is purchased by **you** or the date **your trip** was booked whichever is the later.
 - b) an **accident** to or breakdown of the vehicle in which **you** are travelling for which a professional repairers report is not provided.
 - c) breakdown of any vehicle in which **you** are travelling if the vehicle is owned by **you** and has not been serviced properly and maintained in accordance with manufacturers instructions.

- d) withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the civil aviation authority or a port authority or any such regulatory body in a country to/from which **you** are travelling.
 - e) **your** failure to arrive at the departure point in time to board any connecting **public transport** after **your** departure on the initial international outbound and return legs of the **trip**.
3. Additional expenses where the scheduled **public transport** operator has offered reasonable alternative travel arrangements.
 4. Any **claim** that results from volcanic ash unless **you** have paid the appropriate **premium** for cover and claim under Section Q.
 5. Anything mentioned in the General Exclusions.

Section K **Hijack**

What is covered:

We will pay up to the amount shown in the table of benefits on pages 4 and 5 if the aircraft or ship **you** are travelling in is **hijacked** (on the original journey **you** booked) for more than 24 hours.

Special conditions relating to claims

You must give **us** a written statement from an appropriate authority confirming the **hijack** and how long it lasted.

Please read the General Conditions and Exclusions.

Section L **Legal expenses**

What is covered:

In the event of a **claim you** may telephone the Assistance Company for advice on any personal legal matter arising from **your** journey. If **you** die, or suffer an **illness** or injury during the **period of insurance** and **you** or **your** legal representative take legal action to get compensation, **we** will do the following to get compensation for **your** death, injury or **illness**:

1. Offer the following loans to **you**:
 - a) up to the amount shown in the table of benefits on pages 4 and 5 for legal costs and expenses, directly related to the legal action.
 - b) up to £1,000, for travel and accommodation costs that **you** have to pay to go to a foreign court in connection with any legal action under point 1a) above.
2. If **you** do not get any or much compensation, **we** will cover **you** for any fees, costs and expenses of the proceedings, but only for the amount that these fees, costs and expenses are more than the compensation received, up to a maximum limit of £25,000.

What is not covered:

1. Costs or expenses that **we** have not agreed to.
2. Any **claim** not reported to **us** within 90 days after the **event** giving rise to the **claim**.
3. Any **claim** against a travel agent, tour operator or carrier, accommodation provider, **us**, **our agent** or an **insurer** who provides the cover of any section of this **policy**.
4. Any **claim** where **we** think a reasonable settlement is unlikely or where the cost of the action could be more than the settlement.

5. Actions between members of the same family or household, or actions to enforce a judgement or legally binding decision.
6. Anything mentioned in the General Exclusions.

Special conditions relating to claims

1. **We** have complete control over the legal proceedings, although **you** do not have to accept the lawyer **we** choose. If **you** and the **insurer** cannot agree on a suitable lawyer, **we** will ask the Law Society or Bar Council (or similar organisation abroad) to choose another lawyer. In the meantime, **we** may appoint a lawyer to protect **your** interests.
2. If **you** or **your** lawyer receive any compensation, they must repay any amounts **we** have paid.
3. **We** will not pay the legal expenses for bringing legal action in more than one country for the same **event**.

Section M Optional winter sports cover

This **policy** specifically excludes participating in or practising for certain **winter sports** and activities. If **you** are under 65 years of age and have bought a Comprehensive **policy**, **your policy** must be extended to cover some of these sporting activities when **you** have paid the additional **winter sports premium**. **Your policy** can be extended before departure from **your home country**.

You will only be covered under this section if **you** are under 66 at the date of **policy** inception, have opted for **winter sports** cover and have paid the appropriate extra **premium**.

Section M1 – Ski equipment

What is covered:

We will pay up to the amount shown in the table of benefits on pages 4 and 5 if **you** accidentally lose, or have **your** skis, poles, ski boots and bindings, ski helmets, snowboards, snowboard boots and bindings or ice skates damaged or stolen. **We** will pay for their replacement or repair, whichever is lower, after making an allowance for wear and tear and loss of value using the scale below.

Age of Item	Amount Payable
Up to 12 months old	90% of the price you paid
Up to 24 months old	70% of the price you paid
Up to 36 months old	50% of the price you paid
Up to 48 months old	30% of the price you paid
Up to 60 months old	20% of the price you paid
Over 60 months old	Nothing

What is not covered:

1. The **excess** shown in the table of benefits on pages 4 and 5.
2. Any item that was lost or stolen if **you** did not report it to the police within 24 hours that **you** discovered it was lost or stolen, and for which **you** have not obtained a written police report.
3. Any **winter sports** equipment that **you** lost or was stolen or damaged during a journey, unless **you** report this to the carrier and get a property irregularity report at the time. **You** must make any **claims** to the airline within seven days.

4. Any **winter sports** equipment that was damaged while **you** were using it.
5. **Winter sports** equipment **you** left **unattended** in a public place, unless the **claim** is about skis, poles or snowboards, and **you** have taken all reasonable care to protect them by leaving them in a ski rack between 10am and 8pm.
6. Any **winter sports** equipment that is lost or damaged by people it was not designed for.

Special conditions which apply to Section M1

1. Under this **policy** **you** must bring any damaged **winter sports** equipment **you** own back to the **United Kingdom** so **we** can inspect it.
2. **You** should make **claims** about **you** losing **your winter sports** equipment or it being stolen or damaged while being held by an airline, to the airline first. Any money **you** get under this **policy** will be reduced by the amount of compensation **you** receive from the airline for the same **event**.

Please read the General Conditions and General Exclusions.

Section M2 – Ski Hire

What is covered:

If **you** hire **winter sports** equipment, and it is lost, stolen or damaged by **accident** during **your trip**, **we** will pay for its replacement or repair up to amount shown in the table of benefits on pages 4 and 5.

What is not covered:

1. Any item that was lost or stolen if **you** did not report it to the police within 24 hours that **you** discovered it was lost or stolen, and for which **you** have not obtained a written Police report.
2. Any **winter sports** equipment **you** lose or that is stolen or damaged during a journey, unless **you** report this to the carrier and get a property irregularity report at the time.
3. **Winter sports** equipment **you** have left **unattended** in a public place, unless the **claim** is for skis, poles or snowboards and **you** have taken all reasonable care to protect them by leaving them in a ski rack between 10am and 8pm.
4. Any **winter sports** equipment that is lost or damaged by people it was not designed for.

Special conditions relating to claims

Under this policy you must:

1. Be aware that **we** take any payment made under this section from any claim under Section M1 (**winter sports** equipment) of this insurance; and
2. Bring any damaged **winter sports** equipment back to the **UK** so **we** can inspect it. **You** should make **claims** for **your winter sports** equipment being delayed while being held by an airline, to the airline first. Any money **you** get under this **policy** will be reduced by the amount of compensation **you** receive from the airline for the same **event**.

Please read the General Conditions and Exclusions.

Section M3 – Ski pack

What is covered:

If, due to **illness** or injury, **you** are medically certified as being unable to ski or snowboard, **we** will pay up to the amount shown in the table of benefits on pages 4 and 5 for a percentage of the cost of **your** ski pack (if **you** have already paid and can't get the money back). **You** must get a medical certificate to prove that **you**

were not well enough to use the ski pack. A ski pack includes ski-school fees or ski instructor fees, hired skis, ski boots and bindings, snowboards, snowboard boots and bindings or ice skates, and the cost of any lift pass **you** have booked.

What is not covered:
Anything mentioned in the General Exclusions.

Section M4 – Piste closure

This section only applies between 1st December and 15th April if **you** are travelling to the northern hemisphere or between 1st May and 30th September if **you** are travelling to the southern hemisphere.

What is covered:

We will pay up to the amount shown in the table of benefits on pages 4 and 5 if all the lift systems are closed for more than 12 hours as a result of high winds, or not enough or too much snow in **your holiday resort**.

Special conditions relating to claims

1. **You** must get a written statement from the resort managers confirming the reason for the piste closing and how long it lasted.
2. The **holiday resort** where **you** are staying must be at least 1000 metres above sea level and outside the **United Kingdom**.

What is not covered:
Anything mentioned in the General Exclusions.

Section M5 – Avalanche cover

What is covered:

We will pay up to the amount shown in the table of benefits on pages 4 and 5 for extra travel and accommodation costs **you** need to pay if **your** outward or return journey is delayed for more than 12 hours because of an avalanche.

What is not covered:
Anything mentioned in the General Exclusions.

Special condition which applies to Section M5

Under this **policy you** must get a written statement from the appropriate authority confirming the reason for the delay and how long it lasted.

Please read the General Conditions and General Exclusions.

Section N Optional golf cover

You will only be covered under this section if **you** have opted for golf cover and have paid the appropriate extra **premium**.

Section N1 – Golf equipment

What is covered:

We will pay **you**, up to the amount shown in the table of benefits on pages 4 and 5, for the accidental loss, **theft** or damage to **your own golf equipment**. The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (calculated from the table below) or **we** may at **our** option replace, re-instate or repair the lost or damaged **golf equipment**.

Age of Item	Amount Payable
Up to 1 year old	90% of purchase price
Up to 2 years old	70% of purchase price
Up to 3 years old	50% of purchase price
Up to 4 years old	30% of purchase price
Up to 5 years old	20% of purchase price
Over 5 years old	Nil payment

The maximum **we** will pay for any **single item** will be calculated from the table above or as shown in the table of benefits, whichever is the less.

Special conditions relating to claims

- You** must report to the local police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, **theft** or attempted **theft** of all **golf equipment**. A holiday representatives report is not sufficient.
- For items damaged whilst on **your trip**, **you** must obtain an official report from a retailer confirming the item is damaged and beyond repair.
- If **your golf equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **you** must report to them, in writing, details of the loss, **theft** or damage and obtain written confirmation. If **golf equipment** is lost, stolen or damaged whilst in the care of an airline **you** must:
 - obtain a Property Irregularity Report from the airline.
 - give formal written notice of the **claim** to the airline within the time limit contained in their conditions of carriage (please retain a copy).
 - retain all travel tickets and tags for submission if a **claim** is to be made under this **policy**.
- You** must provide an original receipt or proof of ownership for items lost, stolen or damaged to help **you** substantiate **your claim**.

What is not covered:

- The **excess** shown in the table of benefits on pages 4 and 5.
- Loss, **theft** of or damage to **golf equipment** contained in or stolen from an **unattended** vehicle.
- Claims** arising from **golf equipment** left **unattended** in a place to which the general public has access (e.g. on a golf course) or left in the custody of anyone other than an **insured person** or **your travelling companion**.
- Claims** arising from damage caused by leakage of powder or liquid carried within personal effects or **golf equipment**.
- Loss or damage due to delay, confiscation or detention by customs or other authority.
- Claims** arising from loss or **theft** from **your** accommodation unless there is evidence of forced entry which is confirmed by a police report.
- Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.

8. **Claims** arising for loss, **theft** or damage of **golf equipment** carried on a vehicle roof rack.
9. Anything mentioned in the General Exclusions on page 15.

Section N2 – Golf equipment hire

What is covered:

We will pay **you** up to the amount shown in the table of benefits on pages 4 and 5, for the cost of necessary **golf equipment** hire following:

- a) accidental loss, **theft** or damage to of **your golf equipment**; or
- b) temporary loss in transit during the outward journey for at least 24 hours of **your golf equipment**.

Special conditions relating to claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, **theft** or attempted **theft** of all **golf equipment**. A Holiday Representative's report is not sufficient.
2. For items damaged whilst on **your trip**, **you** must obtain an official report from a retailer confirming the item is damaged and beyond repair.
3. If **your golf equipment** is temporarily lost **you** must obtain written confirmation from the carrier as to the exact nature and length of delay or temporary loss.
4. If **your golf equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **you** must report to them, in writing, details of the loss, **theft** or damage and obtain written confirmation. If **your golf equipment** is lost, stolen or damaged whilst in the care of an airline **you** must:
 - a) obtain a property irregularity report from the airline.
 - b) give formal written notice of the **claim** to the airline within the time limit contained in their conditions of carriage (please retain a copy).
 - c) retain all travel tickets and tags for submission if a **claim** is to be made under this **policy**.
5. **You** must provide an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your claim**.

What is not covered:

1. Loss, **theft** of or damage to **golf equipment** contained in or stolen from an **unattended** vehicle:
 - a) overnight between 10pm and 8am (local time) or;
 - b) at any time between 8am and 10pm (local time) unless it is in the locked boot which is separate from the passenger compartment, or for those vehicles without a separate boot, locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a police report.
2. **Claims** arising from **golf equipment** left **unattended** in a place to which the general public has access (e.g. on a golf course) or left in the custody of anyone other than an **insured person** or **your travelling companion**.
3. Loss or damage due to delay, confiscation or detention by customs or other authority.
4. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
5. **Claims** arising from damage caused by leakage of powder or liquid carried within personal effects or **golf equipment**.

6. **Claims** arising from loss or **theft** from **your** accommodation unless there is evidence of forced entry which is confirmed by a Police report.
7. **Claims** arising for loss, **theft** or damage of **golf equipment** carried on a vehicle roof rack.
8. Anything mentioned in the General Exclusions.

Section N3 – Non refundable golfing fees

What is covered:

We will pay **you** up to the amount shown in the table of benefits on pages 4 and 5, for the proportionate value of any non-refundable, pre-paid green fees, **golf equipment** hire or tuition fee necessarily unused due to the following:

- a) **bodily injury** or **illness** of an **insured person**; or
- b) loss or **theft** of **your** documentation which prevents **your** participation in the pre-paid golfing activity.

Special conditions relating to claims

1. **You** must report to the local police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, **theft** or attempted **theft** of golfing documentation. A holiday representative's report is not sufficient.
2. **You** must obtain a medical certificate from the treating **doctor** substantiating **your medical condition** and confirming **your** inability to play golf.

What is not covered:

1. Anything mentioned in the General Exclusions.

Section N4 – Hole-in-one

What is covered:

We will pay **you** up to the amount shown in the table of benefits on pages 4 and 5 for customary celebratory expenses **you** incurred within the golf club premises immediately following **you** achieving a hole-in-one during a competition round.

Special conditions relating to claims

1. **You** must obtain a written report from the golf club secretary confirming the competition details countersigned by **your** playing partner together with a certified copy of **your** score card.
2. Receipts from the golf club for expenditure incurred immediately following **your** hole-in-one must be retained as these will help **you** to substantiate **your claim**.

What is not covered:

Anything mentioned in the General Exclusions.

Section O **Optional end supplier failure**

Cover in respect of Section O only operates if the appropriate extension has been chosen, the appropriate additional **premium** has been paid and is shown on the **Validation Certificate**.

This cover is provided by International Passenger Protection Limited, IPP House, 22-26 Station Road, West Wickham, Kent BR4 0PR, United Kingdom and is underwritten by a consortium of Association of British Insurers Member Companies and Lloyds Syndicates.

Claims procedure:

International Passenger Protection **claims** only.

Any occurrence which may give rise to a **claim** should be advised as soon as reasonably practicable and in any **event** within 14 days to:

International Passenger Protection Claims Office

IPP House, 22-26 Station Road, West Wickham, Kent BR4 0PR, United Kingdom

Telephone: +44 (0)20 8776 3752

Facsimile: +44 (0)20 8776 3751

Email: info@ipplondon.co.uk

Quote reference: Staysure

IPP will only accept **claims** submitted up to six months after the failure. Any **claims** submitted after the six month period will NOT be processed.

All other claims – refer to your insurance document and see alternative claims procedure.

What is covered:

The insurer will pay up to £3,000 in total for each person (insured) named on the certificate for:

- 1) Irrecoverable sums paid in advance in the **event** of insolvency of the travel or accommodation provider not forming part of an inclusive **holiday** prior to departure or;
- 2) In the **event** of insolvency after departure:
 - a) additional pro-rata costs incurred by the person insured in replacing that part of the travel arrangements to a similar standard to that originally booked; or
 - b) if **curtailment** of the holiday is unavoidable – the cost of return transportation to the **United Kingdom**, Channel Islands, Isle of Man or Ireland to a similar standard to that originally booked. Provided that in the case of a) and b) above, where practicable the person insured shall have obtained the approval of **the insurer** prior to incurring the relevant costs by contacting **the insurer** as set out above.

What is not covered:

The insurer will not pay for:

* Travel or accommodation not booked within the **United Kingdom**, Channel Islands, Isle of Man or Ireland prior to departure.

* The financial failure of:

- a) any travel or accommodation provider in chapter 11 or any threat of insolvency being known at the date of issue of the certificate;
- b) any travel or accommodation provider who is bonded or **insured** elsewhere (even if the bond is insufficient to meet the **claim**);
- c) any travel agent, tour organiser, booking **agent** or consolidator with whom the **insured** has booked travel or accommodation.

* Any loss for which a **third party** is liable or which can be recovered by other legal means see Guidance Notes relating to End Supplier Failure.

What is covered:

For the insolvency of any travel arrangements booked in the **United Kingdom**, Channel Islands, Isle of Man or Ireland (not forming part of an inclusive holiday) and not bonded or insured already.

These would include:

Scheduled airlines;
Hotels;
Car ferries;
Villas abroad & cottages in the **United Kingdom**;
Railway journeys including the Eurostar;
Coach journeys;
Cruises not bonded;
Car hire;
Caravan sites/campsites/mobile homes;
Travel Insurance Policy Documents;
Camper rental;
Safaris;
Excursions;
Eurotunnel;
Theme parks such as Disneyland Paris.

What is not covered:

The booking **agent** or consolidator.

Section P **Optional Travel Legal Dispute**

Cover in respect of Section P only operates if the appropriate extension has been chosen, the appropriate additional **premium** has been paid and is shown on the **Validation Certificate**.

For the purposes of this section the following definitions apply:

Agent

The **Agent** appointed by the Coverholder to transact this insurance with **you**.

Authorised Representative

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

Claims specialist

Our own claims panel solicitor or claims handler.

Event

The initial **event** act or omission which sets off a natural and continuous sequence of events that subsequently gives rise to a **claim** for indemnity against **us**.

Excess

The first £35 of each and every **claim**.

Holiday

A **holiday trip** outside the **United Kingdom** or a **holiday** within the **United Kingdom** which includes two or more consecutive nights stay in pre-booked holiday accommodation.

Insured person

The persons named within the **policy** schedule attached to this **policy**.

Insurer

UK General Insurance Limited on behalf of Ageas Insurance Limited, Registered in England No.354568.
Registered office: Ageas House, Tollgate, Eastleigh, Hampshire, SO53 3YA.

Legal Insurance Management Limited, UK General Insurance Limited and Ageas Insurance Limited are authorised and regulated by the Financial Services Authority (FSA). This can be checked on the FSA's register by visiting the FSA's website at www.fsa.gov.uk/register.

Legal proceedings

When formal **legal proceedings** are issued against an opponent in a Court of Law.

Limit of indemnity

£25,000 Being the maximum **we** will pay including incidents related by time or cause.

Pre-booked accommodation

A commercially run premises where a fee is charged which has been booked prior to **your** departure.

Professional fees

Legal fees and costs reasonably and properly incurred by the Authorised Representative, with **our** prior written authority including costs incurred by another party for which **you** are made liable by court order, or may pay with **our** consent in pursuit of a civil **claim** in the Territorial Limits arising from an **insured** incident.

In the **event** that the matter falls within the limits of a Small Claims Court, the maximum amount payable to the Authorised Representative shall be limited to the maximum amount recoverable from that respective Court.

Standard professional fees

The level of **professional fees** that would normally be incurred by **us** in either handling this matter using **our own claims** specialists or a nominated Authorised Representative of **our** choice.

Territorial limits

Worldwide but only where **legal proceedings** can be brought in a **United Kingdom** or European Union (EU) country's court jurisdiction.

Time of occurrence

When the **event** occurred or commenced whichever is the earlier.

We, us, our

The Insurers and/or Legal Insurance Management Limited, the coverholder.

Insured events

Section A – Consumer disputes

What is covered:

Pursuing a breach of contract **claim** arising from a contract (which must be evidenced and recorded in writing) entered into by or on **your** behalf for the purposes of undertaking a **holiday** in order to seek compensation and or implementation of the contract from the following:

- a) **your** tour operator or holiday company;
- b) **your** travel agent;
- c) a car hire company with whom **you** have pre-booked a vehicle;
- d) an airline, ferry, train, cruise liner or coach operator;
- e) a hotelier or property owner.

Subject to the cause of action arising within the territorial limits and where legal proceedings are able to be brought in a **United Kingdom** or European Union (EU) country's court jurisdiction.

What is not covered:

1. Any matter where the value of the goods or services in dispute or the total instalments due at the time of making the **claim** is less than £150.
2. An **event** not reported to **the insurer** within 30 days of returning from the **holiday** subject to the dispute.

3. **Professional fees** and expenses which a court of criminal jurisdiction orders to be paid.
4. Actions pursued in order to obtain satisfaction of a judgement or legally binding decision.
5. The **insured person's** travelling expenses, subsistence allowances or compensation for absence from work.

Any **claim** where the **event** arises from incidents which have occurred or services and the like which have been provided prior to the first inception date of this insurance.

Section B – Illness

What is covered:

Pursuing a civil action for compensation against someone else who negligently causes **you illness** whilst undertaking or as a direct consequence of taking a **holiday**.

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

What is not covered:

1. Any **claim** where in **our** opinion there is insufficient prospect of success in obtaining reasonable compensation.
2. **Professional fees** and expenses incurred prior to **our** written acceptance of the case.
3. Any **claim** where the **professional fees** and expenses are likely to be greater than the anticipated amount of compensation.
4. Any **claim** where the **professional fees** and expenses are based directly or indirectly on the amount of compensation awarded (for example a Contingency Fee Agreement).
5. Legal costs and expenses incurred if an action is brought in more than one country.
6. Any **claim** where in **our** opinion the estimated amount of compensation payment is less than £1,000 for each **insured person**.
7. Travel, accommodation and **incidental** costs incurred to pursue a civil action for compensation.
8. The costs of any appeal.
9. **Claims** by **you** other than in **your** private capacity.
10. Any **claim** where cover is available under a travel insurance **policy**.

General Exclusions

You are not covered for:

1. **Professional fees** incurred:
 - a) in respect of any insured incident where the **event** commenced prior to the inception of the insurance.
 - b) before **our** written acceptance of a **claim**.
 - c) before **our** approval or beyond those for which **we** have given **our** approval.
 - d) where **you** fail to give proper instructions in due time to **us** or to the Authorised Representative.
 - e) where **you** are responsible for anything which in **our** reasonable opinion prejudices **your** case.
 - f) if **you** withdraw instructions from the Authorised Representative, fail to respond to the Authorised Representative, withdraw from the legal proceedings or the Authorised Representative refuses to continue to act for **you**.
 - g) in respect of the amount in **excess** of **our** standard **professional fees** where **you** have elected to use an Authorised Representative of **your** own choice.

- h) that exceed the maximum amount recoverable from that respective court in relation to matters that fall within small **claims** court limits.
 - i) where **you** decide that **you** no longer wish to pursue **your claim** as a result of disinclination. All costs incurred up until this stage will become **your** responsibility.
2. The pursuit of any **claim** if **we** consider it is unlikely a reasonable settlement will be obtained or where the likely settlement amount is disproportionate compared with the time and expense incurred.
 3. **Claims** which are conducted by **you** in a manner different from the advice or proper instructions of the Authorised Representatives.
 4. Appeals unless **you** notify **us** in writing of **your** wish to appeal at least six working days before the deadline for giving notice of appeal expires, and **we** consider the appeal to have a reasonable chance of success.
 5. Any **professional fees** and expenses that could have been recovered under any other insurance except beyond the amount which would be payable under such insurance had this **policy** not been effected.
 6. **Damages**, fines or other penalties **you** are ordered to pay by a Court Tribunal or arbitrator.
 7. **Claims** arising from an **insured** incident arising from **your** deliberate act, omission or misrepresentation.
 8. **Claims** arising from:
 - a) ionising, radiations or contamination by radioactivity from irradiated nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
 - b) any radioactive toxic explosive or other hazardous properties of any nuclear assembly or component thereof.
 - c) war, **terrorism** or any like or any associated risk.
 - d) seepage pollution or contamination of any kind.
 - e) pressure waves caused by aircraft or other aerial devices.
 9. Any dispute relating to written or verbal remarks which damage **your** reputation.
 10. Any **professional fees** relating to **your** alleged dishonesty, criminal act, or violent behaviour.
 11. **Legal proceedings** outside the European Union (EU) (other than for Section 2 Illness) and proceedings in Constitutional International or Supranational Courts or tribunals including the European Court of Justice and the Commission and Court of Human Rights.
 12. A dispute which relates to any compensation or amount payable under a contract of insurance.
 13. A dispute with **us** not dealt with under the arbitration condition.
 14. An application for judicial review.
 15. Any **claim** involving medical or clinical negligence, or pharmaceutical or any related **claims** (including but not limited to tobacco products).
 16. Any **claim** arising from stress or a stress related condition.
 17. Disputes between an **insured person** and their family or a matrimonial or co-habitation dispute.
 18. Fees payable to the Appointed Representative that exceed the maximum amount recoverable from the respective court where the dispute falls within the limits of a Small Claims Court.
 19. **Legal proceedings** between an **insured person** and a Central or Local Government Authority.
 20. Any matter in respect of which an **insured person** is entitled to Legal Aid.
 21. Any **claims** made or considered against **us**, the **agent** or **authorised representatives** used to handle any **claim**.
 22. Any **claims** relating to cosmetic treatment, surgery or tanning.

Observance

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

Claims

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

We will give such consent if **you** can satisfy **us** that there are sufficient prospects of success in pursuing **your claim** and that it is reasonable for **professional fees** to be paid and **you** have paid the **excess**.

We may require **you** at **your** expense to obtain the opinion of an expert or counsel on the merits of a **claim** or **legal proceedings**. If **we** subsequently agree to accept the **claim**, the costs of such opinion will be covered.

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

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

We will write to **you** giving **our** reasons and **we** will not then be bound to pay any further **professional fees** for this **claim**. **We** may limit any **professional fees** that **we** will pay under the **policy** in the pursuit continued pursuit or defence of any **claim**:

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

Alternatively **we** may at **our** option pay to **you** the amount in dispute which shall be deemed to represent full and final settlement under this **policy**.

Representation

We will take over and conduct in **your** name the prosecution, pursuit, or settlement of any **claim**.

The Authorised Representative nominated and appointed by **us** will act on **your** behalf and **you** must accept **our** nomination. If **legal proceedings** have been agreed by **us**, **you** may nominate **your** own Authorised Representative whose name and address **you** must submit to **us**. In selecting **your** Authorised Representatives **you** shall have regard to the common law duty to minimise the cost for **your claim**. Any dispute arising from this shall be referred to arbitration in accordance with the conditions of this **policy**.

Where **you** have elected to use **your** own nominated Authorised Representative **you** will be responsible for any **professional fees** in **excess** of **our** standard **professional fees**.

Conduct of claim

1. **You** shall at all times co-operate with **us** and give to **us** and the Authorised Representative evidence, documents and information of all material developments and shall attend upon the Authorised Representative when so requested at **your** own expense.
2. **We** shall have direct access at all times to and shall be entitled to obtain from the Authorised Representative any information, form, report, copy of documents, advice computation, account or correspondence relating to the matter whether or not privileged, and **you** shall give any instructions to the Authorised Representative which may be required for this purpose. **You** or **your** Authorised Representative shall notify **us** immediately in writing of any offer or payment into court made with

a view to settlement and **you** must secure **our** written agreement before accepting or declining any such offer.

3. **We** will not be bound by any promise or undertaking given by **you** to the Authorised Representative or by either of **you** to any court, witness, expert, **agent** or other person without **our** agreement.

Recovery of costs

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

Fraud

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

Claims helpline

All potential **claims** must be reported initially to the **claims** helpline which operates between the hours of 9am – 5pm Monday to Friday excluding bank holidays, for advice and support.

We will not accept responsibility if the helpline services fail for reasons beyond **our** control. **Claims** helpline service – 01384 377000

* This is a **policy** where **you** must notify **us** within 30 days of returning from the **holiday** which is subject to the dispute and which may give rise to any **claim** under this **policy**. Failure to do so could mean that **we** decline to pay a **claim** for **your professional fees**.

* Whilst the **policy** may include **events** that occur worldwide, **policy** cover will only operate where Legal Proceedings can be brought in a **United Kingdom** or European Union (EU) country's court jurisdiction.

Section Q **Optional travel disruption extension**

You will only be covered under this section if you opted for the optional travel disruption extension and have paid the appropriate extra premium.

This extension to the **policy** provides the following amendments to the insurance, specifically for costs and expenses that are not recoverable from any other source.

Extended Cancellation or Curtailment cover

What is covered:

Cancellation or **curtailment** charges is extended to include the following cover.

We will pay **you** up to £1,000 for any irrecoverable unused travel and accommodation costs (and other pre-paid charges) which **you** have paid or are contracted to pay, together with any reasonable additional travel expenses incurred if:

- **you** were not able to travel and use **your** booked accommodation; or
- the **trip** was **curtailed** before completion as a result of the Travel Advice Unit of the Foreign & Commonwealth Office (FCO) or the World Health Organisation (WHO) or regulatory authority in a country to/from which **you** are travelling issuing a directive:
 - a) prohibiting all travel or all but essential travel to; or
 - b) recommending evacuation from

the country or specific area or event to which **you** were travelling, providing the directive came into force after **you** purchased this insurance or booked the **trip** (whichever is the later), or in the case of **curtailment** after **you** had left the **United Kingdom** to commence the **trip**.

Extended Travel Delay cover

What is covered:

Travel Delay is extended to include the following cover.

We will pay **you** one of the following amounts:

1. If the scheduled **public transport** on which **you** are booked to travel is cancelled or delayed, leading to **your** departure being delayed for more than 12 hours at the departure point of any connecting **public transport** in the **United Kingdom** or to **your** overseas **destination** or on the return journey to **your home** we will pay **you**:
 - a) £20 for the first completed 12 hours delay and £10 for each full 12 hours delay after that, up to a maximum of £100 (which is meant to help **you** pay for telephone calls made and meals and refreshments purchased during the delay) provided **you** eventually continue the **trip**.
2. **We** will pay **you** up to £1,000 for either:
 - a) any irrecoverable unused accommodation and travel costs (and other pre-paid charges) which **you** have paid or are contracted to pay because **you** were not able to travel and use **your** booked accommodation as a result of:
 - i) the scheduled **public transport** on which **you** were booked to travel from the **United Kingdom** being cancelled or delayed for more than 24; or
 - ii) **you** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 24 hours

and **you** choose to cancel **your trip** because the alternative transport to **your** overseas **destination** offered by the **public transport** operator was not reasonable; or

- b) suitable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** overseas **destination** and/or in returning to the **United Kingdom** as a result of:
 - i) the **public transport** on which **you** were booked to travel being cancelled, delayed for more than 24 hours, diverted or re-directed after take-off; or
 - ii) **you** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 24 hours

and **you** choose to make other travel arrangements for **your trip** because the alternative transport offered by the scheduled **public transport** operator was not reasonable. The amount payable will be calculated after deduction of the amount of the refund on **your** ticket(s) together with any compensation from the **public transport** operator.

You can only **claim** under subsections i) or ii) for the same event, not both.

If the same costs, charges or expenses are also covered under any other section of this **policy** **you** can only **claim** for these under one section for the same event.

Extended Missed Departure cover

What is covered:

Missed departure cover is extended to include the following cover.

1. **We** will pay **you** up to £500 for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** overseas **destination** or returning to the **United Kingdom** if **you** fail to arrive at the departure point in time to board any onward connecting public transport on which **you** are booked to travel, following completion of the initial international journey, including connections within the **United Kingdom** on the return journey to **your home**;

as a result of:

- a) the failure of other scheduled **public transport**; or
- b) strike, industrial action, adverse weather conditions or disruption due to a volcanic eruption;
- c) **you** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 24 hours.

If the same expenses are also covered under any other section of this **policy you** can only **claim** for these under one section for the same event.

Catastrophe cover

What is covered:

We will pay **you** up to £1,000 for either:

1. any irrecoverable unused accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay because **you** were not able to travel and use **your** booked accommodation or;
2. reasonable additional accommodation and transport costs incurred:
 - i) up to the standard of **your** original booking, if **you** need to move to other accommodation on arrival or at any other time during the **trip** because **you** cannot use **your** booked accommodation; or
 - ii) with the prior authorisation of the Emergency Assistance Service to repatriate **you** to **your home** if it becomes necessary to **curtail the trip**

as a result of, fire, flood, earthquake, explosion, tsunami, landslide, avalanche, snow, volcanic eruption, hurricane, storm or an outbreak of food poisoning or an infectious disease affecting **your** accommodation or resort.

You can only **claim** under one of subsections 1 or 2 of **What you are covered for** for the same event, not both.

If the same costs and charges are also covered under any other section of this **policy you** can only **claim** for these under one section for the same event.

Special conditions relating to claims (applicable to all extended sections of cover)

1. If **you** fail to notify the travel agent, tour operator or provider of transport or accommodation as soon as **you** find out it is necessary to cancel the **trip**, the amount **we** will pay will be limited to the cancellation charges that would have otherwise applied.
2. **You** must get (at **your** own expense) written confirmation from the provider of the accommodation (or their administrators), the local Police or relevant authority that **you** could not use **your** accommodation and the reason for this.
3. For **Curtailment claims** only: **You** must tell the Emergency Assistance Service as soon as possible of any circumstances making it necessary for **you** to return **home** and before any arrangements are made for **your** repatriation.
4. **You** must check in, according to the itinerary supplied to **you** unless **your** tour operator or airline has requested **you** not to travel to the airport.
5. **You** must get (at **your** own expense) written confirmation from the scheduled **public transport** operator (or their handling agents) of the cancellation, number of hours of delay or involuntarily denied boarding and the reason for these together with details of any alternative transport offered.
6. **You** must comply with the terms of contract of the scheduled **public transport** operator and seek financial compensation, assistance or a refund of **your** ticket from them, in accordance with the terms and/or (where applicable) **your** rights under EU Air Passengers Rights legislation in the event of denied boarding, cancellation or long delay of flights.

7. **You** must get (at **your** own expense) written confirmation from the scheduled **public transport** operator/accommodation provider that reimbursement will not be provided.

What is not covered (applicable to all extended sections of cover):

1. The first £65 of each and every **claim**, per incident claimed for, under this section by each **Insured** Person (except **claims** under subsection 1a) of What you are covered for under the Extended Travel Delay cover above).
2. The cost of Airport Departure Duty/Tax (whether irrecoverable or not).
3. Travel tickets paid for using any airline mileage reward scheme, for example Air Miles.
4. Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
5. **Claims** arising directly or indirectly from:
 - a) Strike, industrial action, cancellation of **public transport** or a directive prohibiting all travel or all but essential travel, to the country or specific area or event to which **you** were travelling, existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
 - b) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **you** are travelling.
 - c) Denied boarding due to **your** drug use, alcohol or solvent abuse or **your** inability to provide a valid passport, visa or other documentation required by the **public transport** operator or their handling agents.
6. Any costs incurred by **you** which are recoverable from the providers of the accommodation (or their administrators) or for which **you** receive or are expected to receive compensation or reimbursement.
7. Any costs incurred by **you** which are recoverable from the **public transport** operator or for which **you** receive or are expected to receive compensation, **damages**, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
8. Any accommodation costs, charges and expenses where the **public transport** operator has offered reasonable alternative travel arrangements.
9. Any costs for normal day to day living such as food and drink which **you** would have expected to pay during **your trip**.
10. Any circumstance existing or being publicly announced on or before the date **you** purchased this insurance or at the time of booking any **trip**, whichever is later.
11. Anything mentioned in the General Exclusions applicable to all sections of the **policy**.

Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

1. A copy of the advice against all travel or all but essential travel issued by the Foreign & Commonwealth Office (FCO) or the World Health Organisation (WHO) or the regulatory authority in a country to/from which **you** are travelling.
2. Booking confirmation together with a cancellation invoice from **your** travel agent, tour operator or provider of transport/accommodation.
3. In the case of **curtailment claims**, written details from **your** travel agent, tour operator or provider of transport/accommodation of the separate costs of transport, accommodation and other pre-paid costs or charges that made up the total cost of the **trip**.

4. **Your** unused travel tickets.
5. A letter from the carriers (or their handling agents) confirming the number of hours delay, the reason for the delay and confirmation of **your** check in times.
6. Written confirmation from the scheduled **public transport** operator (or their handling agents) of the cancellation, number of hours of delay or involuntarily denied boarding and the reason for these together with details of any alternative transport offered.
7. Written confirmation from the company providing the accommodation (or their administrators), the local Police or relevant authority that **you** could not use **your** accommodation and the reason for this.
8. Receipts or bills for any transport, accommodation or other costs, charges or expenses claimed for.
9. Any other relevant information relating to **your claim** under this section that **we** may ask **you** for.

To make a claim under this section please call Emergency Assistance on 0044 207 748 0675 for non-emergency claims call 0207 748 0676.

Complaints procedure

We will do everything possible to ensure that **you** receive a high standard of service. If **you** are not satisfied with the service received please follow the procedure below:

Step 1 – Initiating your complaint:

Does **your** complaint relate to:

- a) **Your policy?**
- b) A **claim** on **your policy?**

If A, **you** need to contact Travelinsurancemedical.co.uk on 0844 692 8450.

If B, then for all sections except O and P please contact **Mapfre Assistance claims** on 0207 748 0676.

We expect that the majority of complaints will be resolved at this stage, but if **you** are not satisfied, **you** can take it further:

Step 2 – Contacting Mapfre Management:

If **your** complaint is one of the few that cannot be resolved by this stage contact:

The Customer Relations Department
Mapfre Assistance
Maitland House
Southend-on-Sea
Essex SS1 2JY

In the **event** of a complaint arising under **Section P – Travel Legal Dispute**, **you** should in the first instance write to the **agent** who arranged this insurance and if the matter still remains unresolved thereafter **you** should write to:

The Managing Director
Legal Insurance Management Limited
18 Hagley Road
Stourbridge
West Midlands DY8 1PS

Please ensure **your policy** number is quoted in all correspondence to assist a quick and efficient response. In the event **you** remain dissatisfied and wish to make a complaint, **you** can do so by contacting the following:

Customer Relations Manager
UK General Insurance Limited
Cast House
Old Mill Business Park
Gibraltar Island Road
Leeds LS10 1RJ

Tel: 0845 218 2685
Email: customerrelations@ukgeneral.co.uk

Step 3 – the Financial Ombudsman Service (FOS):

If **you** are still not satisfied with the way in which **we** have handled the complaint then **you** may refer the matter to the FOS who will investigate the complaint:

The Financial Ombudsman Service
SouthQuay Plaza
183 Marsh Wall
London E14 9ST

Tel: 0845 080 1800

Financial Services Compensation Scheme (FSCS)

We are covered by the FSCS and **you** may be entitled to compensation from the scheme if **we** cannot meet **our** obligations. Further information about compensation scheme arrangements is available from the FSCS.

Data protection

Some or all of the information which **you** supply to **the insurer** in connection with this **policy** will be held on their computer records to help with the administration of the **policy**. It may be used for underwriting, **claims** purposes or marketing purposes by **the insurer**. **Your** information may be transferred outside of the European Economic Area. This will only happen when it is necessary for the conclusion, or performance of a contract that is entered into at **your** request, or interest or for administrative, or marketing purposes.

Should **you** not wish **your** details to be used for marketing purposes or if **you** require a copy of the personal information **we** hold, this can be requested by writing directly to **the insurer**.

Mapfre Assistance

Maitland House
Warrior Square
Southend-on-Sea
Essex SS1 2JY

Payment of premium

The present **policy** will be valid ONLY once **you** have paid the **premium**.

If the **premium** has not been paid before a **claim** occurs, **we** shall not be liable for any **claims you** make.

Communication

All correspondence that **we** send to **you** shall be deemed to be valid if **we** sent it to **your** last known address. All correspondence from **you** must be sent to **our** branch office in the **United Kingdom**. It is **your** responsibility to read the terms and conditions in this **policy** document thoroughly.

Your duty to disclose information

It is **your** responsibility to provide complete and accurate information to **the insurer(s)** when **you** take out **your** insurance **policy**, throughout the life of **your** **policy**, and when **you** renew **your** insurance. Failure to disclose any material facts (these are facts that **the insurer(s)** would regard as likely to influence the assessment and acceptance of this insurance), could invalidate **your** insurance cover and could mean that part or all of a **claim** may not be paid.

Overlapping insurance

If **you** are making a **claim** and **you** have another insurance **policy** which provides the same cover as this insurance for an identical period of time **you** must inform **us**.

If **you** fail to disclose details of any other insurance **policy** held, this may result in **your** **claim** not being paid. If **you** make a **claim**, **you** must provide **us** with the name(s) of any other insurance companies. Each insurance company will contribute a proportion of the full amount of **your** **claim** payment (providing **your** **claim** is valid).

Under no circumstances shall **you** benefit from double payment (dual insurance) under the terms of any of **your** insurance policies. In the **event** that **you** have received payment to which **you** were not entitled under this **policy** **we** have the right to recover the value of the overpayment from **you**.

Governing law

This **policy** will be governed by the law of England and Wales unless expressly agreed otherwise. If any legal **claims** arising out of this **policy** are not advised within 6 years of the end of the **period of insurance**, then the legal **claim** shall not subsist.

Requesting assistance

In an emergency, first check that the circumstances are covered by this policy. Having done this telephone Travel Claims Services stating your name and policy number.

Helpline	Number
Customer Services	0844 692 8450
Sales	0844 692 8449
Medical Screening Helpline	0844 692 8450
24 hour Medical Emergency	0044 207 748 0675
Travel Insurance Claims	0207 748 0676

* When calling from inside the UK first dial zero.
(When calling from outside the UK first dial the UK code 0044)

To ensure we are consistent in providing our customers with quality service, we may record your telephone call.

Compensation Scheme

Staysure.co.uk Limited, Mapfre Assistance and Ageas Insurance Limited are covered by the Financial Services Compensation Scheme (FSCS). You may be entitled to compensation from the scheme, if they cannot meet their obligations. This depends on the type of business and the circumstances of the claim. Most insurance contracts are covered for 90% of the claim with no upper limit. You can get more information about compensation scheme arrangements from the FSCS or visit www.fscs.org.uk

Do you have the right cover?

- **Year round annual multi-trip**
- **Single trip up to 104 days**

Travel Insurance important numbers

24 hour Emergency Medical Assistance

0044 207 748 0675

Claims

0207 748 0676

Renewals 0844 692 8270

Email info@travelinsurancemedical.co.uk

Staysure.co.uk Limited

McGowan House, 10 Waterside, The Lakes, Bedford Road, Northampton NN4 7XD

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Registered in England and Wales Company No: 05142148

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