Europesure

Travel Insurance

Employer Paid Group Business Travel - Annual Multi-Trip Cover

Travel Insurance Policy

status europesure INSURANCE CYPRUS

europesure INSURANCE

EUROPESURE TRAVEL INSURANCE POLICY

To assist You in finding Your way around this document, We have identified key information for You by the use of colour coding and icons:

- **Sections denoted WHAT IS COVERED are highlighted in green**
- **Sections denoted WHAT IS NOT COVERED are highlighted in red**

Throughout the Policy Wording Your attention is drawn to IMPORTANT INFORMATION by the following icon :

The Contract of Insurance

This is a Group Business Travel Insurance Policy which has been purchased by an employer (the **Policyholder**) for the benefit of their company Directors, officers and employees. This document, together with the **Schedule of Insurance** make up the contract between the **Policyholder** and **Us**. The contract does not give, or intend to give, rights to anyone else. No-one else has the right to enforce any part of this contract. The insurance provided by this document covers liability, loss, damage, death or disability that happens during any **Period of Insurance** for which the **Policyholder** has paid, or agreed to pay, the premium. This insurance is provided under the terms and conditions contained in this document or in any amendment made to it. This document and the **Schedule of Insurance** are issued to Companies domiciled in the EU, EEA or Monaco by Status Europesure Insurance Cyprus on behalf of Lloyd's Insurance Company S.A. in performing its duties under the Coverholder Agreement with the Unique market Reference B1802YM8367823 and to Companies domiciled in the UK or Gibraltar by Europesure on behalf of Canopius Managing Agents Limited in performing its duties under the Agreement with the Unique Market Reference of B0595PM8367823.

Signed by:

Signature of Coverholder

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Welcome

Thank you for choosing **Us** for your insurance. This document sets out what is and what is not covered.

Certain words shown in **bold** throughout this document have specific meanings and these are explained in the General Definitions Section.

This travel insurance has been arranged by Status Insurance Management Ltd on behalf of Europesure. Please contact Europesure if **You** need any documents to be made available in braille and/or large print and/or in Audio format.

This policy is issued in the EU, EEA and Monaco by Status Insurance Agents, Sub Agents and Consultants CY Limited trading as Status Europesure Insurance Cyprus as Coverholder in accordance with the authorisation granted to the Coverholder under the Coverholder Appointment Agreement with the Unique Market Reference stated within this policy. This policy is insured by Lloyd's Insurance Company S.A.. Lloyd's Insurance Company S.A. is a Belgian limited liability company (société anonyme / naamloze vennootschap) with its registered office at Bastion Tower, Marsveldplein 5, 1050 Brussels, Belgium and registered with Banque-Carrefour des Entreprises / Kruispuntbank van Ondernemingen under number 682.594.839 RLE (Brussels). It is an insurance company subject to the supervision of the National Bank of Belgium. It's Firm Reference Number(s) and other details can be found on www.nbb.be.

This policy is issued in the UK and Gibraltar by Status Insurance Management Ltd trading as Europesure as Coverholder in accordance with the authorisation granted to the Coverholder under the Coverholder Appointment Agreement with the Unique Market Reference stated within this policy. It is insured by Canopius Managing Agents Limited. Canopius Managing Agents Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority under reference number 204918. Canopius Managing Agents Limited is regulated in England at Gallery 9, One Lime Street, London EC3M 7HA.

Please check that the cover explained in this document, and in the **Schedule of Insurance** meets your needs and that **You** understand it. If **You** have any questions about **Your** insurance, please contact your local insurance intermediary who arranged this insurance or Europesure in the UK: Suite 9, Chalkwell Lawns, 648-656 London Road, Westcliff on Sea, Essex SS5 9HR, United Kingdom email: info@statusglobalinsurance.com ; or Status Europesure Insurance Cyprus: 5 Rafael Santi, 1st Floor, Office 101, Larnaca 6052, Cyprus, email: cyprus@statusglobalinsurance.com

Subject to the policy terms and conditions, this insurance lasts for a year. The **Period of Insurance** is shown on the **Schedule of Insurance.**

Please take time to read "Important Information" (pages 5 and 6) in this document. It highlights things that need to be checked, actions which must be taken, and things which **We** need to be told about once the insurance has started and 'Making a Claim' (page 7). This document gives details of many sections of cover. Some sections of cover only apply if the Section has been chosen and an additional premium paid. The sections of cover which have been selected, and the level of benefit which will be payable in the event of a valid claim are shown in the **Schedule of Insurance**.

Important Information

DOCUMENTATION AND INFORMATION TO BE PROVIDED TO INSURED PERSONS

The **Policyholder** must ensure that, upon inclusion in the Europesure Group Business Travel Insurance, each **Insured Person** must receive:

- A copy of the **Schedule of Insurance**
- The Member's guide and Policy Summary
- A copy of the full policy wording

COOLING-OFF PERIOD

If this cover does not meet the **Policyholder** requirements, the insurance documentation should be returned to the insurance intermediary, who arranged the policy within fourteen (14) days of the date of purchase or the day on which the documents are received , whichever is the latter. **We** will refund all premiums paid within thirty (30) days from the date **We** receive the notice of the cancellation from the **Policyholder**. **We** will not refund premiums if a **Trip** has been taken or a claim made within the fourteen (14) days. Please contact the insurance intermediary who issued this Policy to obtain this refund.

CANCELLATION

Your right to cancel this insurance

The Policyholder may cancel this insurance by giving **Us** 30 days' notice in writing to **Our** address as stated in this Policy. If **the Policyholder c**ancels this insurance **We** will pay a refund of any premium paid less a deduction in respect of the time for which cover has been in place up to the effective date of cancellation in accordance with the terms below.

Our right to cancel this insurance

We may cancel this insurance where there is a valid reason by giving **the Policyholder** 30 days' notice in writing to their last known address. Examples of valid reasons are as follows:

- A change in risk occurring which means that insurance cover can no longer be provided ;
- Non-cooperation or failure to supply any information or documentation **We** request;
- Failure to inform **Us** of changes to information provided by the **Policyholder** or **You** or that have been requested by **Us**.

Provided no claim has been paid or is payable and no incident has occurred which could give rise to a claim under this Policy **We** will refund the **Policyholder** for the exact number of days that were left on the Policy. The premium for the period up to the date when the cancellation takes effect will be calculated and the portion of the premium paid by the **Policyholder** for the unused days of cover remaining will be returned to the **Policyholder**. However, in calculating the amount of premium to be returned there will be an additional charge to cover the administration cost of providing this Policy and this will be calculated as a minimum amount of one half of the portion of the premium to be returned or £/€ 50, whichever is the lesser. If a claim has been made during the period of cover provided, the full premium must be paid, and the **Policyholder** will not be entitled to any refund.

If **the Policyholder** wishes to cancel the Policy they should contact the insurance intermediary who arranged this Policy.

SPECIAL NOTICE

This is not a private medical insurance and only gives cover in the event of an **Accident** or **Illness** that requires emergency **Treatment** whilst abroad. In the event of any medical **Treatment** becoming necessary which results in a claim under this insurance, **You** will be expected to allow **Us** or **Our** representatives unrestricted reasonable access to **Your** medical records and information.

PRE-EXISTING MEDICAL CONDITIONS

Please refer to Definition number 21 on page 13 and General Exclusion number 27 on pages 16 to 19 for full details of what the **Pre-Existing Medical Condition** exclusion clause says.

EU COMPENSATION RIGHTS

Under European Union (EU) travel regulations, **You** are entitled to claim compensation from **Your** carrier if any of the following happen:

1. Denied boarding and cancelled flights - If **You** check in on time but **You** are denied boarding because there are not enough seats available or if **Your** flight is cancelled, the airline operating the flight must offer **You** financial compensation.

2. Long delays - If **You** are delayed for two hours or more, the airline must offer **You** meals and refreshments, hotel accommodation and communication facilities. If **You** are delayed for more than three hours, the airline must pay compensation, the amount of which depends on the delay and the distance travelled

3. Luggage - If **Your** checked-in luggage is damaged or lost by an EU airline, **You** must claim compensation from the airline within 7 days. If **Your** checked-in luggage is delayed, **You** must claim compensation from the airline within 21 days of its return.

4. Death or injury - If **You** are injured in an **Accident** on a flight by an EU airline, **You** may claim damages from the airline. If **You** die as a result of these injuries **Your Family** may claim damages from the airline.

Full details are available at http://europa.eu/youreurope/citizens/travel/passenger-rights/index_en.html

Making A Claim

MEDICAL ASSISTANCE NOTIFICATION

In the event of **Illness** or **Bodily Injury** during **Your Trip** which may require hospitalisation, or if **You** have already been admitted to hospital, **You** must notify **Our** nominated emergency service, Cega Group Assistance Team. It has the medical expertise, contacts and facilities to help **You**. It will liaise with the hospital and arrange transport to **Your Country of Residence** when this is considered to be medically necessary. It will be entitled to decide, at its discretion, to repatriate **You** to **Your Country of Residence** as soon as **Your** medical condition is stable and **You** are fit to fly.

It will also arrange transport to **Your Country of Residence** when **You** have received notice of **Illness** or death of a **Relative** at home. **You** must contact them before making alternative arrangements if **You** wish to return home by any means other than that originally booked (i.e. curtail **Your Trip**).

You should contact:

Cega Medical Assistance Team

Tel: +44 (0) 1243 976 393 (24 hours)

Email: assistance@cegagroup.com

You should tell them **You** have a Europesure travel insurance policy and give them the Contract number and the certificate number shown on the **Schedule of Insurance**

FOR ALL OTHER CLAIMS

Claims under All Sections

You must notify **Our** nominated Claims Company, shown below, of any claim as soon as possible after the occurrence giving rise to a claim and in any event no later than ninety (90) days after the occurrence. **You** must provide all requested documentation and information requested by the Claims Company.

Payment of claims for **Insured Persons** who are resident in the UK, EU, EEA or Monaco will be referred to the **Policyholder** who will confirm to the Claims Company whether the payment should be made to them or to the **Insured Person.** Payment of claims for **Insured Persons** who are resident anywhere else in the world must be paid to the **Policyholder**.

Nominated Claims Company:

Charles Taylor (CEGA)

PO Box 1124

Portsmouth

PO1 9XY

United Kingdom

Tel: +44 (0) 1243 976 250 (UK time 9.00 to 17.00 – Monday to Friday)

Email: ClaimsService@cegagroup.com

CLAIMS CO-OPERATION

You shall provide assistance and co-operate with **Us** or **Our** representatives in obtaining any other records **We** deem necessary to evaluate the incident or claim. In no event shall **We** be liable to pay any claim hereunder unless **You** co-operate with **Us** and/or **Our** representatives as **We** reasonably require in the investigation of the claim. All information, evidence, details of household insurance and medical certificates, as required by **Us**, must be sent at **Your** own expense.

Table of Benefits

Shows the available Levels of Cover and applicable excesses. Please see the **Schedule of Insurance** for the Level of Cover chosen. Benefit limits and excesses in the Table of Benefits are shown in both Sterling (£) and Euros (€) and each **Insured Person** will be covered up to the limits shown in the same currency in which the premium is paid and claims will also be settled in this currency. There are three Levels of Cover options – **Silver**, **Gold** and **Platinum.**

	Section of Cover	Silver £/€	Gold £/€	Platinum £/€	Excess per insured person, per section £/€
1	**Cancellation and Disruption**				
1.1.1	Cancellation or Curtailment	1,500	2,500	5,000	50
1.1.2	Travel Disruption	250	500	750	50
1.1.3	Alternative Accommodation	250	500	750	50
1.2	Missed Departure and Transport diversion	250	500	750	50
1.3	Travel Delay Inconvenience Benefit	10 per day up to 100	20 per day up to 200	30 per day up to 300	Nil
1.4	Alteration of Itinerary	250	500	750	50
2	**Emergency Medical Repatriation and other Expenses**				
2.1	Emergency Medical and Repatriation Expenses	1,000,000	3,500,000	10,000,000	50
2.2	Hospital Inconvenience Benefit	10 per day up to 300	20 per day up to 600	30 per day up to 900	Nil
2.3	Funeral Expenses	1,500	3,500	5,000	50
2.4	Pet Care (Additional Kennel/Cattery)	50 per day up to 500	50 per day up to 500	50 per day up to 500	Nil
3	**Personal Accident With age-related cover limitations**	Ages up to 65 Age-related limitations in column 1	Ages 16-65 Age-related limitations in column 1	Ages 16-65 Age-related limitations in column 1	
	1)Accidental Death Ages 66 to 70 limit 5,000	25,000	25,000	25,000	Nil
	2)Loss of one limb or one eye Ages 66 to 70 limited to 50%	25,000	25,000	25,000	Nil
	3)Loss of two limbs or both eyes or one limb and one eye Ages 66 to 70 limited to 50%	25,000	25,000	25,000	Nil
	4)Permanent Total Disablement Ages 66 to 70 no cover	25,000	25,000	25,000	Nil
4	**Baggage and Personal Effects**				
4.1	Baggage and Personal Effects	750	5000	7500	50
	• Single Item Limit Pair/ Set Limit	150	300	450	50
	• Valuables Total Limit	150	300	450	50
4.2	Delayed Baggage	150	300	450	Nil
5	**Money, Documents and Credit/Debit Cards**				
5.1	Money and Documents	300	600	900	50
	Cash Limit (aged 18 and above)	150	300	450	50
	Cash Limit (under 18)	100	150	225	50
5.2	Fraudulent Use of Lost Credit/Debit Card	150	300	450	Nil
6	**Legal Expenses & Personal Liability**				
6.1	Legal Expenses	10,000	15,000	25,000	250
6.2	Personal Liability	1,000,000	1,500,000	2,000,000	250

7	**Hijack and Kidnap**	50 per day up to 1,000	75 per day up to 1,500	100 per day up to 2,000	Nil
8	**Business Cover**				
8.1.1	Business Equipment	2,000	2,000	2,000	50
	• Single Item Limit	500	500	500	50
8.1.2	Business Documents and Records	50	50	50	Nil
8.2	Business Money	200	200	200	Nil
8.3	Replacement staff	1,500	1,500	1,500	50
8.4	Additional Personal Accident	Normal Benefit x 2	Normal Benefit x 2	Normal Benefit x 2	Nil

Optional Cover Benefits

If any of the optional cover benefits available have been selected, the additional premium required for this cover has been paid and the cover is shown on the **Schedule of Insurance** the following also applies:

Optional Cover Benefits		Silver £/€	Gold £/€	Platinum £/€	Excess per insured person, per section £/€
9	**COVID -19 and SARS-CoV-2 Cover**				
9.1	Cancellation	1,500	2,500	5,000	50
9.2	Extended Stay				
9.2.1	Accommodation	50 per 24 hours up to 700	100 per 24 hours up to 1,400	150 per 24 hours up to 2,100	Nil
9.2.2	Transport costs	300 Europe 500 worldwide	600 Europe 1,000 worldwide	900 Europe 1,500 worldwide	Nil
9.3	Emergency Medical, Repatriation and Other Expenses (cover as Sections 2.1 -2.4)	1,000,000	3,500,000	10,000,000	50
10	**Winter Sports**				
10.1	Owned and Hired Ski Equipment	500	500	500	50
	• Single Item Limit	200	200	200	50
10.2	Hiring Replacement Ski Equipment	20 per day up to 400	20 per day up to 400	20 per day up to 400	Nil
10.3	Lift Pass	300	300	300	Nil
10.4	Piste Closure	30 per day up to 300	30 per day up to 300	30 per day up to 300	Nil
10.5	Avalanche Cover	500	500	500	50
11	**Golf Cover**				
11.1	Owned and Hired Golf Equipment	1,000	1,000	1,000	50
	• Single Item Limit	500	500	500	50
11.2	Hiring Replacement Golf Equipment	20 per day up to 400	20 per day up to 400	20 per day up to 400	Nil
11.3	Green Fees	300	300	300	Nil
12	**Terrorism Disruption** (Extended Cancellation or Curtailment)	1,000	5,000	10,000	50

General Definitions

Certain words in this Policy have a specific meaning. They have this specific meaning wherever they appear in this Policy, the **Schedule of Insurance** or endorsements and are shown in **bold** print.

1. **Accident**
   A sudden and unforeseen event including **Exposure** and the word "accidental" shall be construed accordingly.
2. **Bodily Injury**
   A **Bodily Injury** caused solely by **Accidental** means and occurring solely and directly and independently of any other cause which occurs at an identifiable time and place within twelve (12) calendar months of the date of the **Accident**.
3. **Business Documents and Records**
   Any **Document** related to the Policyholder's business that provides details related to their business's internal and external transactions and which are written or printed on paper. **Business Documents and Records** include but are not limited to letters, invoices, order sheets, printed emails, notes, reports, financial or otherwise, which belong to the **Policyholder's** business and are in **Your** custody and are taken on or acquired during a business **Trip** undertaken by **You**.
4. **Business Equipment**
   Any equipment used in the support of the **Policyholder's** business, which is portable by design, including but not limited to personal computers, telephones and calculators trade samples, or articles which belong to the **Policyholder's** business and are in **Your** custody and are taken on or acquired during a business **Trip** undertaken by **You**.
5. **Business Money**
   Money which belongs to the **Policyholder's** business and which **You** have in **Your** possession for the purpose of paying expenses related to the **Policyholder's** business and which **You** have taken on or acquired during a business **Trip** undertaken by **You**.
6. **Complications of Pregnancy and Childbirth**
   In this Policy **Complications of Pregnancy and Childbirth** will only include the following:
   i. Toxaemia (toxins in the blood);
   ii. Gestational hypertension (high blood pressure arising as a result of pregnancy);
   iii. Pre-eclampsia (where **You** develop high blood pressure, carry abnormal fluid and have protein in **Your** urine during the last 18 weeks of **Your** pregnancy);
   iv. Ectopic pregnancy (a pregnancy that develops outside of the uterus);
   v. Molar pregnancy or hydatidiform mole (a pregnancy in which a tumour develops from the placental tissue);
   vi. Post-partum haemorrhage (excessive bleeding following childbirth);
   vii. Retained placenta membrane (part or all of the placenta is left behind in the uterus after delivery);
   viii. Placental abruption (part or all of the placenta separates from the wall of the uterus);
   ix. Hyperemesis gravidarum (excessive vomiting as a result of pregnancy);
   x. Placenta praevia (when the placenta is in the lower part of the uterus and covers part or all of the cervix);
   xi. Stillbirth;
   xii. Miscarriage;
   xiii. Emergency Caesarean section;
   xiv. A termination needed for medical reasons;

xv. Premature birth more than 8 weeks (or 16 weeks if **You** know **You** are having more than one baby) before the expected delivery date.

7. **Common Law Spouse**
   A partner, including a civil partner, with whom **You** have co-habited continuously for 6 months on a permanent basis.
8. **Country of Residence**
   Any country declared to and agreed by the insurer and shown in the **Schedule of Insurance**.
9. **Document**
   Passport, Driving License, Visa, Green Card, pre-paid travel tickets, accommodation vouchers, car-hire vouchers, excursion vouchers and qualification certificates.
10. **Employee**
    Any person under a contract of employment, service or apprenticeship with **the Policyholder.**
11. **Excess**
    The first amount of each and every loss that each **Insured Person** shall pay for each section of cover.
12. **Exposure**
    Death or **Permanent Total Disablement** solely as a result of unavoidable **e**xposure to severe weather conditions.
13. **Illness/Ill**
    Any disease, infection or bodily disorder which is unexpectedly contracted by **You** or which unexpectedly manifests itself for the first time during the **Period of Insurance**.
14. **Insured Person**
    Employee, Director or officer of the **Policyholder** who is named in the **Schedule of Insurance.**
15. **Manual/Manual Labour**
    Work that involves:
    i. hands-on use, installation, assembly, maintenance or repair of electrical, mechanical or hydraulic plant, heavy power tools and industrial machinery;
    ii. hands-on electrical and construction work or work above two storeys or 3 metres above ground level (whichever is the lower), building sites, any occupation involving heavy lifting;
    iii. supervised animal sanctuary work that has interaction with dangerous wild animals such as lions, tigers or big cats of any kind, elephants, unless under the constant supervision of a trained member of staff;
    iv. professional entertaining except singers and musicians.
16. **Medical Practitioner**
    Any suitably qualified **Medical Practitioner** registered by the General Medical Council (or equivalent in the destination country); or in respect of dental **Treatment** only, a dental practitioner who is registered with the British Dental Association (or equivalent in the destination country); excluding an **Insured Person**, a **Relative** of an **Insured Person** or **an Employee**.
17. **Money**
    Cash consisting of: Coins, bank, and currency notes, signed travellers' cheques, and pre-loaded debit or credit cards.
18. **Period of Insurance**
    The **Period of Insurance** commences on the date shown against the **Period of Insurance** on the **Schedule of Insurance.**

    Cover for cancellation of a **Trip** commences at the time **You** book the **Trip** or at the start of the **Period of Insurance** whichever is the latter.

Cover for a **Trip** commences during the **Period of Insurance** when **You** leave **Your** home or place of work whichever occurs last and ends when **You** return to **Your** home or place of work, or the end date of the **Period of Insurance** shown on the **Schedule of Insurance** whichever occurs first.

19. Permanent Total Disablement

Total Disablement which has lasted for twelve (12) consecutive calendar months and entirely prevents **You** from engaging in any occupation for which **You** are suited by education, training, or experience for the remainder of **Your** life.

20. Policyholder

The Company or legal entity named in the **Schedule of Insurance** which has arranged this policy and is named as the **Policyholder**

21. Pre-Existing Medical Condition

i. Any respiratory condition (relating to the lungs or breathing), heart condition, stroke, Crohn's disease, epilepsy or cancer for which **You** have received **Treatment** during the last 60 consecutive months (including surgery, tests or investigations by **Your** doctor or a consultant/specialist and been prescribed drugs or medication);
ii. Any medical condition for which **You** have received surgery, in-patient **Treatment** or investigations in a hospital or clinic within the last twelve months, including any medical condition which may arise from the surgery, **Treatment** or investigation. Any medical condition for which **You** are on a waiting list, or have knowledge of the need for: surgery **Treatment** or investigation at a hospital, clinic or nursing home;
iii. Any medical condition for which **You** are taking prescribed drugs or medication;
iv. Any medical condition for which **You** have received a terminal prognosis;
v. Any medical condition that **You** are aware of but for which **You** have not had a diagnosis.

22. Property

Personal effects owned by **You** or which are **Your** responsibility, which are taken by **You** on, or acquired during a **Trip**. **Property** excludes **Valuables, Money** and **Documents**, **Business Equipment, Business Money and Business Documents,** which are insured separately by this Policy.

23. Relative

Spouse, parent, parent-in-law, son, son-in-law, daughter, daughter-in-law, grandchild, brother, brother-in-law, sister, sister-in-law, fiance(e) or **Common-Law Spouse**

24. Schedule of Insurance

The document showing details of the cover selected by the **Policyholder**.

25. Ski Equipment

Skis (including bindings), ski boots, ski poles and snowboards.

26. Sports Equipment

Items of a personal nature specifically designed and intended to be used for participation in a particular sport, game or leisure activity.

27. Terrorist Activity

An act, or acts, of any person, or group(s) of persons, committed for political, religious, ideological or similar purposes with the intention to influence any government and/or to put the public, or any section of the public, in fear. **Terrorist Activity** can include, but not be limited to, the actual use of force or violence and/or the threat of such use. Furthermore, the perpetrators of a **Terrorist Activity** can either be acting alone, or on behalf of, or in connection with any organisation(s) or government(s). Terrorist shall be construed accordingly.

28. Treatment

Medical care given to a patient for **Illness** or injury. During **Your Trip, Treatment** is limited to emergency or urgent care for the unexpected occurrence of a medical condition first occurring during **Your Trip**.

29. Trip

A non-**Manual Labour** business **Trip** which commences and ends in the **Country of Residence,** is within the geographical areas stated in the **Schedule of Insurance** and is due to commence within the **Period of Insurance**. Any individual **Trip** must be completed within the maximum number of days per **Trip** shown on the **Schedule of Insurance.**

30. Valuables

Jewellery, antiques, articles made of gold or silver or other precious metals, precious or semi-precious stones set in an item of jewellery, musical instruments that can be carried by hand, furs or leather clothing, watches, smart watches, health and fitness trackers, binoculars, telescopes, photographic equipment, electronic audio or digital media, games consoles, laptops, tablets and other computer equipment and hand-held electronic devices including but not limited to MP3 and MP4 players, mobile and smart phones, Satellite Navigation Devices, Blackberries, iPods, iPads, Kindles and the like and associated software, which are taken by **You** on, or acquired during, the **Trip**.

31. War

Any activity arising out of or attempt to participate in the use of military force between nations and will include:

i. Hostilities or warlike operations (whether **War** be declared or not).
ii. Invasion, civil **War**, rebellion, insurrection, revolution.
iii. Act of an enemy foreign to **Your** nationality, or the country in, or over, which the act occurs.
iv. Civil commotion assuming the proportions of, or amounting to, an uprising.
v. Overthrow of the legally constituted government.
vi. Military or usurped power.
vii. Explosions of weapons of **War**.

32. We, Us, Our

Lloyd's Insurance Company SA or Canopius Managing Agents Limited.

33. Winter Sports

Skiing; sledging; snowboarding; off-piste skiing and snowboarding except in areas considered to be unsafe by resort management and unless with a qualified guide; blade skating; cross-country skiing; dry skiing; heli-skiing; inner tubing; langlauf; mono- skiing; snow mobile; snow shoeing; tobogganing and glacier walking up to 4,000 metres.

34. You, Your.

The person or persons named in the **Schedule of Insurance** and are **Employees** of the **Policyholder**

General Conditions

These Conditions apply to all sections of the Policy.

1. **Observance – Failure to Comply with Policy Conditions**
   Our liability to make any payment under this Policy shall be conditional upon **Your** observance of all terms, provisions, conditions and endorsements of this Policy. If **You** do not comply with **Your** obligations specified in this Policy, this may prejudice **Your** position to recover under any claim and **Your** claim may be rejected or not paid in full.
2. **Information and changes We need to know about**
   The **Policyholder** must take reasonable care to provide complete and accurate answers to the questions **We** ask when the policy is purchased and not to make a misrepresentation to **Us**. Please tell Europesure Insurance if there are any changes required to the information set out in the **Schedule of Insurance**.
   The **Policyholder** must tell **Us** as soon as possible about any changes in the information they have provided to **Us** which occurs before or during any **Period of Insurance**. When **We** are notified of a change, **We** will tell **the Policyholder** if this affects **the** Policy, for example whether **We** are able to accept the change and if so, whether the change will result in revised terms and/or premium being applied to the Policy. The **Policyholder** is responsible for advising all **Insured Persons** of any revised terms. If the **Policyholder** does not inform **Us** about a change it may affect any claim **You** make or could result in **Your** insurance being invalid.
3. **Fraudulent Claims**

   i. **If You make a fraudulent claim under this insurance contract, We:**
      a) are not liable to pay the claim; and
      b) may recover from **You** any sums paid by **Us** to **You** in respect of the claim; and
      c) may by notice to the **Policyholder** treat the contract as having been terminated with effect from the time of the fraudulent act.

   ii. **If We exercise Our right under clause i. c) above:**
      a) **We** shall not be liable to **You** in respect of a relevant event occurring after the time of the fraudulent act. A relevant event is whatever gives rise to **Our** liability under the insurance contract (such as the occurrence of a loss, the making of a claim, or the notification of a potential claim); and
      b) **We** need not return any of the premiums paid.

4. **Access to Additional Materials**
   You shall provide **Us**, or **Our** designated representatives, with all information, documentation, and medical information that **We** may reasonably require during the term of this Policy, or until resolution of all claims, whichever is the latter.
5. **Right to Medical Records and Medical Examination**
   Following notice of a claim, **You** shall provide, when requested by **Us**, all authorisations necessary to obtain **Your** medical records. **We** may request that **You** are examined by a medical expert of **Our** choice, and at **Our** expense, in relation to **Your** claim only.
6. **Applicable Law and Jurisdiction**
   If there are any disputes arising under, out of or in connection with this Insurance they shall be dealt with in accordance with the Service of Suit and Jurisdiction Clause attached to the **Schedule of Insurance**.
7. **Limitation**
   You are covered up to the amount shown in the **Schedule of Insurance**.

8. Language

The language of this Policy and any communication throughout the duration of the **Period of Insurance** will be English. The **Policyholder** has declared their understanding of, and has requested for the contract of insurance to be provided in, the English language. The **Policyholder** confirms they understand such contract and agree to be bound by its Terms and Conditions.

9. Sanctions Provision

We shall not provide any cover or pay any claim or provide any benefit to the extent that this cover, payment of a claim or benefit would expose **Us** to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or the United States of America.

10. Cessation of Employment

Cover under this Policy will cease for the **Employee** named in the **Schedule of Insurance** with immediate effect, or upon their return from the **Trip** if they are on a Business **Trip** when the employment ceases, whichever is the latter, if the **Employee** ceases to remain employed under a contract of employment, service or apprenticeship with the **Policyholder**.

Taxes

There may be circumstances where taxes may be due that are not paid via **Us**. If this occurs, then it is the **Policyholder's** responsibility to ensure that these are paid direct to the appropriate authority.

General Exclusions

WHAT IS NOT COVERED

A. **We** will not pay any claim directly or indirectly caused by or contributed to by:

1. **War**. (This does not apply to SECTION 2 – EMERGENCY MEDICAL EXPENSES) while **You** are away from **Your Country of Residence**. **You** must follow any relevant suggestions or recommendations made by any government or other authority during the **Period of Insurance**.
2. **Terrorist Activity.** (This does not apply to Item 4 – Alteration of Itinerary under SECTION 1 - CANCELLATION AND DISRUPTION or SECTION 2 – EMERGENCY MEDICAL EXPENSES or if **You** have chosen to purchase the optional Terrorism Disruption cover) while **You** are away from **Your Country of Residence. You** must follow any relevant suggestions or recommendations made by any government or other authority during the **Period of Insurance**.
3. the use, release or escape of nuclear materials that directly or indirectly results in nuclear reaction or radiation or radioactive contamination; or
   - 3.1 the dispersal or application of pathogenic or poisonous biological or chemical materials; or
   - 3.2 the release of pathogenic or poisonous biological or chemical materials.
4. **Winter Sports** unless the **Winter Sports** extension is purchased.
5. motor cycling except as shown in Amateur Sporting and Hazardous Activities on pages 40 to 44.
6. mountaineering or rock climbing normally requiring the use of ropes or guides.
7. driving a mechanically propelled vehicle in any kind of race.
8. **You** travelling against medical advice.
9. **You** travelling for the purpose of receiving **Treatment.**
10. **You** travelling for the purpose of receiving cosmetic or elective surgery.

11. **You** being aware of any medical condition which could reasonably be expected to lead to a claim.

12. **You** flying, except as a passenger in an aircraft licensed to carry passengers.

13. **You** travelling to an area that the Foreign and Commonwealth Office (or its equivalent in other EU countries) have advised against all, or all but, essential travel.

14. **You** being under the influence of, or being affected by alcohol or drugs (unless such drug has been prescribed by a qualified **Medical Practitioner** but not for the **Treatment** of drug addiction).

15. **You** attempting to commit or committing intentional self-Injury or suicide.

16. the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfil any part of their obligation or advertised facilities to **You**.

17. **You** taking part in **Manual Labour.**

18. any sport or activity not shown in the Activity and Sports List or **You** participating in any competitive or professional sports.

19. **You** falling as a result of **You** climbing or moving around the outside of a building (apart from access ways), sitting, planking, balconing, owling or lying on any part of any building, and **You** jumping from any height (unless in an attempt to save someone's life).

20. any criminal or illegal act by **You**.

21. **Your** operational duties as a member of the armed forces.

22. Human Immunodeficiency Virus (HIV) and/or Acquired Immune Deficiency Syndrome (AIDS) and/or any HIV or AIDS related **Illness**.

23. **Your** deliberate exposure to exceptional danger (other than in an attempt to save human life).

24. incidents after the expiry of the **Period of Insurance.**

25. loss which at the time of happening is insured by, or would, but for the existence of this Policy, be covered by any other existing guarantee, insurance, compensation scheme or any motoring organisation's service. If **You** have any other Policy in force, which may cover the event for which **You** are claiming, **You** must tell **Us**. This exclusion shall not apply to personal accident cover. Where **You** are able to claim from another insurance covering the risk of the airline or other carrier, with which **You** have travelled, **We** will only pay for the outstanding balance.

26. any claim in any way caused by or resulting from:
    a) Coronavirus disease (COVID-19);
    b) Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2);
    c) any mutation or variation of SARS-CoV-2;
    d) any fear or threat of a), b) or c) above.

    This General Exclusion will not apply if the Section 9 COVID-19 and SARS-CoV-2 cover extension has been purchased.

27. any **Pre-Existing Medical Condition** known about at the inception date of travel.
    However, provided you have not received a terminal prognosis in relation to the condition, if:
    i. any of the **Pre-Existing Medical Conditions** that **You** have are included in the following list;
    and
    ii. the words in brackets apply to **Your Pre-Existing Medical Condition**;
    or

iii. the **Pre-Existing Medical Condition** has been stable and well-controlled for the last 24 months (60 months in the case of any respiratory condition relating to the lungs and breathing, heart condition, stroke, Crohn's disease, epilepsy or cancer unless specifically referred to below) on **Medical Practitioner** administered medication and has not required a hospital admission or referral to a specialist because of a worsening of **Your** condition;

then this exclusion will not apply and **You** will be covered by the normal terms of the Policy.

- Acne
- ADHD (Attention Deficit Hyperactivity Disorder)
- Any disabilities impairing mobility, vision or mental health providing an **Insured Person** is accompanied by an appropriate carer for when any assistance is required
- Arthritis - Juvenile, Osteoarthritis, Rheumatoid or Psoriatic arthritis, Reiter's Syndrome, Rheumatism. (There must have been no hospital admissions within the last 12 months. The arthritis must not affect the back more than any other area of the body. The **Insured Person** must not be taking more than 2 medications. The **Insured Person** must not require any mobility aids, other than a walking stick. There must have been no dislocations or any joint replacements. The **Insured Person** must not be awaiting surgery. The **Insured Person** must have no lung problems/respiratory disorders.)
- Allergies (limited to Rhinitis, Chronic Sinusitis, Eczema, Food intolerance & Hay Fever)
- Asthma (providing it was diagnosed before age 50, and the **Insured Person** is taking/using no more than 2 medications/inhalers and has not been admitted to hospital in the last year)
- Bell's Palsy
- Benign Positional Vertigo
- Bladder Infection
- Breast Cancer/Prostate Cancer (provided the **Insured Person**: -was diagnosed more than 12 months ago; -has not had any chemotherapy or radiotherapy in the last 12 months and the cancer has not spread outside the breast or prostate at any time; - in the case of cancer of the prostate the **Insured Person** must have a PSA of 3.0 or less)
- Bunions
- Carpal Tunnel Syndrome
- Cataracts
- Coeliac Disease
- Congenital Blindness
- Corneal Graft
- Cystitis (provided no ongoing **Treatment**)
- Deafness
- Diabetes (providing there have been no complications such as impaired kidney function, heart disease, peripheral vascular disease, leg or foot ulcers, retinal damage, nerve damage, leg or foot amputation, liver damage).

- Dry Eye Syndrome
- Eczema
- Enlarged Prostate (benign only)
- Essential Tremor
- Folate Deficiency
- Fungal Nail Infection
- Gallbladder Removal (no complications)
- Gastric Reflux
- Glaucoma
- Goitre
- Gout
- Hay Fever
- Hiatus Hernia
- High Cholesterol
- Hormone Replacement Therapy - HRT
- Hypertension - High Blood Pressure
- Hypotension - Low Blood Pressure (Must not be associated with any underlying condition)
- Impetigo
- Insulin Resistance
- Macular Degeneration
- Meniere's disease
- Migraine
- Osteoporosis - Osteopenia, Fragile Bones (There must have been no broken bones within the last 5 years)
- Pernicious Anaemia
- Raynaud Disease
- RSI (Repetitive strain injury/Tendinitis)
- Sinusitis
- Tendonitis
- Tinnitus
- Tonsillitis

- Underactive or Overactive Thyroid

B. **We** will not pay for any indirect losses which result from the incident that caused **You** to make a claim. Examples of losses **We** will not pay for include loss of earnings due to being unable to return to work following **Injury** or **Illness** happening while on a **Trip** or replacing locks if **You** lose **You**r keys.

C. **We** will not pay for any costs of telephone calls or faxes, meals, taxi fares (with the sole exception of the taxi costs incurred 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 only), interpreters' fees, inconvenience, distress, loss of earnings, loss of enjoyment of holiday, time-share maintenance fees, holiday property bonds or points and any additional travel or accommodation costs unless pre-authorised by **Us**.

Cover Options

The Cover Options purchased by the **Policyholder** will be shown in the **Schedule of Insurance**.

ANNUAL MULTI-TRIP

Provides unlimited travel cover during the **Period of Insurance** provided no Single **Trip** lasts longer than the number of days per **Trip** shown in the **Schedule of Insurance**. If the **Trip** is not completed within the planned **Trip** length, as verified by the original booking invoices for the **Trip,** due to circumstances outside **Your** control, cover will continue for an additional maximum of 30 days at no additional premium. Cover is provided for up to 17 days in total per **Insured Person** for **Winter Sports** within the **Period of Insurance** upon payment of the appropriate premium.

OPTIONAL EXTENSIONS

COVID -19 and SARS-CoV-2 Cover – See Section 9 for details of the cover provided.

Winter Sports - See Section 10 for details of the cover provided.

Golf Cover – See Section 11 for details of the cover provided.

Terrorism Disruption Cover – See Section 12 for details of the cover provided.

ANNUAL MULTI-TRIP

Some Cover Options can be amended, and Optional Extensions added after the policy is issued and during the validity period of the policy. However, no changes or additions can be made whilst the policy is being used during a **Trip**.

Territorial Areas

You are covered for **Trips** to countries within the following areas provided that **You** have paid the appropriate premium, as shown in the **Schedule of Insurance**:

Cover whilst travelling within Your Country of Residence

There is no cover under Section 2 in **Your Country of Residence**. Cover under all other sections applies if **Your Trip** is away from **Your** home and involves at least one night's stay in pre-booked accommodation. There is no cover under any section of the insurance for events which take place during the commute from **Your** home to **Your** place of work.

Europe

Albania, Andorra, Austria, Azores, Balearic Islands, Belarus, Belgium, Bosnia Herzegovina, Bulgaria, Canary Islands, Corsica, Croatia, Cyprus, Czech Republic, Denmark, Egypt, Estonia, Finland, France, Germany, Georgia, Gibraltar, Greece, Hungary, Iceland, Isle of Man, Irish Republic, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Macedonia, Madeira, Malta, Moldova, Monaco, Morocco, Netherlands, Norway, Poland, Portugal, Romania, Russia (West of Urals), San Marino, Serbia & Montenegro, Slovakia, Slovenia, Spain, Sweden, Switzerland, Tunisia, Turkey, Ukraine, United Kingdom including the Channel Islands.

Worldwide excluding USA and Canada

Anywhere in the world apart from Cuba, Iran, North Korea, USA and Canada.

Worldwide including USA and Canada

Anywhere in the world apart from Cuba, Iran and North Korea.

Reciprocal Health Agreements

EU, EEA RESIDENTS

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 from **Your** local Health Authority.

This will entitle **You** to benefits from the reciprocal health care arrangements which exist between countries within the EU/EEA or Switzerland.

UK RESIDENTS

If **You** are travelling to countries within the European Union (EU) and **You** have a current European Health Insurance Card (EHIC) **You** can continue to use it until its expiry date. If **You** do not have an EHIC card **You** are strongly advised to obtain a Global Health Insurance Card (GHIC) from the NHS website.

This will entitle **You** to benefits from the reciprocal health care arrangements which exist between the EU and the United Kingdom (UK).

If **We** agree to pay for a medical expense which has been reduced because **You** have used either a European Health Insurance Card, a Global Health Insurance Card or private health insurance, **We** will not deduct the **Excess** under Section 2 – Emergency Medical, Repatriation and Other Expenses.

Australia

If **You** need medical **Treatment** in Australia and reciprocal arrangements are in place, **You** must enrol with a local MEDICARE office. **You** do not need to enrol when **You** arrive, but **You** must do this after the first occasion **You** receive **Treatment**.

In-patient and out-patient **Treatment** at a public hospital will then be available free of charge.

If **You** are admitted to hospital, **You** must contact **Our** Medical Assistance company as soon as possible and get their authorisation in respect of any **Treatment** NOT available under MEDICARE.

SECTION 1 – CANCELLATION AND DISRUPTION

WHAT IS COVERED

1. Cancellation Curtailment and Travel Disruption

1.1.1 If **You** are required to cancel or curtail a **Trip** as a result of any of the Specified Occurrences below **We** will pay any irrecoverable and unused **Trip** expenses for which **You** have paid in advance or for which **You** have contracted to pay, up to the sum insured shown on the **Schedule of Insurance.**

1.1.2 If due to Specified Occurrence d) below, a **Trip** is not cancelled but **Your** travel is disrupted, **We** will pay **Your** reasonable additional travel and accommodation expenses (room only) which are of a similar standard to that of **Your** pre-booked travel and accommodation and which are necessary to get **You** to **Your** destination up to the sum insured shown in the **Schedule of Insurance**.

1.1.3 If due to Specified Occurrence e) below, a **Trip** is not cancelled but **You** have to change accommodation, **We** will pay for the cost of equivalent local accommodation up to the sum insured shown in the **Schedule of Insurance.**

Specified Occurrences:-

a) **Your** death or sustaining **Bodily Injury** or becoming **Ill**.

b) the death, **Bodily Injury** or **Illness** of **Your Relative** or business colleague or of any person with whom **You** had arranged to travel, reside or conduct business or the immediate **Relative** or business colleague of such person.

c) **You** or any person with whom **You** had arranged to travel, reside or conduct business being:

   i. quarantined or called for witness or jury service;

   ii. called for emergency duty as a member of the armed forces, the defence or civil administration, the police force, or the fire, rescue, public utility or medical services;

   iii. required to be present at **Your** home or place of business in the **Country of Residence** following a burglary or major damage caused by storm, flood or fire;

d) the cancellation or delayed departure for 24 hours or more of an aircraft, sea vessel or other publicly licensed form of passenger transport in which **You** had previously booked to travel, resulting from any of the following contingencies: strike, industrial action, avalanche, volcanic eruption, adverse weather conditions, or **Accident** or mechanical breakdown provided always that such contingency had not occurred, commenced or been announced before the booking was made in respect of the flight, voyage or journey thus affected;

e) major damage caused by storm, flood or fire rendering uninhabitable the accommodation in which **You** had previously booked to reside during the **Trip**, excluding any waterborne vessel or craft.

1.2 Missed Departure and Transport Diversion

We will pay **You** up to the sum insured shown in the **Schedule of Insurance** in respect of reasonable additional travel and accommodation expenses (room only) which are of a similar standard to that of **Your** pre-booked travel and accommodation and which are necessarily incurred by **You**:

a) if at any time during the **Trip You** miss **Your** pre-booked international travel connection through **Your** journey to the departure point being disrupted as the direct result of:

i. a fellow passenger or a crew member of the conveyance in which **You** are travelling sustaining a **Bodily Injury** or becoming **Ill** after such journey has commenced; or
ii. strike, industrial action, avalanche, volcanic eruption, adverse weather conditions provided always that such contingency had not occurred, commenced or been announced before the relevant international travel booking was made; or
iii. an **Accident** to or mechanical breakdown of the vehicle **You** are travelling in.

b) if at any time during the **Trip** an aircraft, sea vessel or other publicly licensed passenger conveyance in which **You** are travelling has to be diverted from its pre-arranged destination as the result of:
i. a fellow passenger or a crew member sustaining **Bodily Injury** or becoming **Ill**; or
ii. strike, industrial action, avalanche, volcanic eruption, adverse weather conditions, **Accident** or mechanical breakdown, provided always that such contingency has not occurred, commenced or been announced before the booking was made in respect of the flight, voyage or journey thus affected.

1.3 Travel Delay Inconvenience Benefit

If **You** are delayed because of the late departure of an aircraft, sea vessel or other publicly licensed form of passenger transport in which **You** had previously booked to travel as the result of strike, industrial action, avalanche, volcanic eruption, adverse weather conditions, **Accident** or mechanical breakdown, **We** will pay **You**:

On the outward journey at commencement of the **Trip,** for the first completed 12-hour period that transport is delayed and for each subsequent completed 12-hour period, the sum insured and limitations shown in the **Schedule of Insurance**.

And again, for all subsequent journeys during the **Trip**.

1.4 Alteration of Itinerary

We will pay **You** up to the sum insured shown in the **Schedule of Insurance** for reasonable additional travel and accommodation expenses (room only) necessarily incurred by **You** in the alteration of the arrangements of the **Trip** consequent upon **You** being the victim of a hi-jack, kidnap, **Terrorist Activity** or criminal act.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** amount shown in the **Schedule of Insurance**, except in respect of the Travel Delay Inconvenience Benefit payable under sub-section 1.3 above.
2. under subsections c) of Specified Occurrences above, (ii) and (iii) for claims arising out of any contingency that had occurred, commenced or been announced before this Policy was effected.
3. claims for cancelling or curtailing **Your Trip** due to any medical condition or set of circumstances known to **You** at the time that the insurance was effected or at the time that the **Trip** was booked, whichever is the latter, where such condition or circumstances could reasonably have been expected to give rise to cancellation or curtailment of the **Trip**.
4. claims for **You** not wanting to travel.
5. claims for unused travel or accommodation arranged by using Air Miles, timeshare or similar promotions.

6. any claim that occurs due to pregnancy or childbirth, except as provided for under the benefits in section 2, unless a **Medical Practitioner** confirms that the claim comes from the **Complications of Pregnancy or Childbirth**.

7. claims arising from delay caused by strike or industrial action known to the public and already notified at the time **You** booked **Your Trip** or the Policy was purchased, whichever is the latter.

No claim can be made for Travel Delay and full cancellation of the **Trip.**

CONDITIONS AND LIMITATIONS

In addition to the General Conditions and Exclusions on pages 14 to 19 above **We** shall only be liable:

1. for claims arising from delayed departure under Subsection d) of Specified Occurrences above and 3. if **You** have obtained written confirmation from the Carriers or their Agents stating the actual date and time of departure and the reason for the delay. For the purposes of claims payment under these Subsections the period of delay shall be taken as commencing at the departure time of the conveyance as specified in the booking confirmation supplied to **You**.

   Under Subsection 1.2.a) if in the selection of the route, means of travel and time of departure **You** have done all things reasonably practicable to minimise the possibility of late arrival at the departure point and allowing reasonable time to make an onward connection. This is defined as 120 minutes before the final check-in time as specified in the booking confirmation supplied to **You** for the flight, rail or sea .

2. for claims under Subsection 1.2.a) iii. attributable to mechanical breakdown, if **You** have obtained a garage or motoring organisation report confirming the date, cause and time of such breakdown.

3. Any claim arising out of a contingency that had occurred, commenced, been announced or of which **You** were aware of before this Policy was effected.

SECTION 2 – EMERGENCY MEDICAL, REPATRIATION AND OTHER EXPENSES

WHAT IS COVERED

We will pay up to the sum insured shown in the **Schedule of Insurance** in respect of:

2.1 Emergency Medical and Repatriation Expenses

Expenses necessarily incurred outside **Your Country of Residence** as the result of **You** sustaining **Bodily Injury** or becoming **Ill** during the **Trip** for:

2.1.1 **Your** medical, hospital and **Treatment** expenses (including reasonable additional travel, evacuation, ambulance transportation costs and accommodation expenses).

2.1.2 **Your** additional repatriation expenses; including compulsory quarantine.

2.1.3 emergency dental **Treatment** for the immediate relief of pain only.

2.1.4 accompanying medical attendants if agreed by prior consultation between **Your** attending physicians and **Us** or **Our** appointed advisors.

2.1.5 Reasonable travel and accommodation expenses of a **Relative** or friend who, on medical advice is required to travel to, remain with, or escort **You**.

Emergency Return to Your Country of Residence

We will pay reasonable additional travel and accommodation expenses necessarily incurred by **You,** following:

2.1.6 The death or **Illness** or **Bodily Injury** of **Your Relative** or business colleague necessitating **Your** return to **Your Country of Residence**.

2.1.7 Burglary or major damage at **Your** home or place of business in **Your Country of Residence**.

The death or **Illness** or **Bodily Injury** of an accompanying **Insured Person**, or the repatriation of such person as provided for in Subsections 2.1.1 and 2.1.2 above.

We will also pay:

2.2 Hospital Inconvenience Benefit

We will pay the sum insured shown in the **Schedule of Insurance** for each completed 24 hour period that **You** spend as a hospital in-patient outside the **Country of Residence** as the result of **You** sustaining a **Bodily Injury** or becoming **Ill** during the **Trip**, up to a maximum of the sum insured shown in **Your Schedule of Insurance**.

2.3 Funeral Expenses

We will pay up to the sum insured in the **Schedule of Insurance** for the cost of transporting **Your** remains or ashes to **Your** former place of residence in the **Country of Residence** if **You** die during the **Trip**, and/or the cost of burial or cremation if this takes place in the country abroad where the death occurred.

2.4 Pet Care

We will pay up to the sum insured shown in the **Schedule of Insurance** for extra kennel and/or cattery costs for **Your** dog or cat if **You** are delayed in returning from **Your Trip** due to **Your** death, **Bodily Injury** or **Illness**. **We** will only pay for each complete 24-hour period and for a maximum of 5 such 24-hour periods in total.

We will not pay for any claim unless **You** can provide medical evidence to confirm such death, **Bodily Injury** or **Illness**.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** amount shown in the **Schedule of Insurance**.
2. the cost of any medication, visit to a **Medical Practitioner** or **Treatment** the need for which could reasonably have been foreseen by **You** at the time that the **Trip** commenced, nor for any travel, accommodation or other expense incurred in connection therewith.
3. any expense incurred after **You** have returned to the **Country of Residence.**
4. any claim as a result of pregnancy or childbirth, unless a **Medical Practitioner** confirms that the claim is a result of **Complications of Pregnancy or Childbirth**.
5. any medical expenses incurred more than 12 months after incurring the first expense.
6. any **Treatment** or surgery which the treating **Medical Practitioner** believes is not essential or could wait until **You** return to **Your Country of Residence**.

SECTION 3 – PERSONAL ACCIDENT

WHAT IS COVERED

We will pay **You** one of the **Personal Accident** benefits shown in the **Schedule of Insurance** if at any time during the **Trip You** sustain **Bodily Injury** including **Exposure**, which results in **Your** death or disablement.

If **You** disappear during the **Trip** and if, after 12 months has elapsed and all available evidence has been examined, there is reason to presume that **Your** death has occurred in accordance with the terms, provisions and conditions of this section of the Policy, the **Accidental** Death

Benefit shall become payable. If at any time after such payment **You** are found to be living, the **Accidental** Death Benefit sum paid shall be refunded to **Us**.

IMPORTANT

For **Insured Persons** between the ages of 66 to 70 years the **Accidental** Death Benefit is limited to £/€ 5,000 and benefits 2 and 3 are reduced by 50%. Benefit 4 (**Permanent Total Disablement**) is deleted.

CONDITIONS AND LIMITATIONS

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. In no case shall **Our** liability in respect of **You** exceed in all the largest sum insured applicable under the benefits shown in the **Schedule of Insurance**.
2. No claim shall be payable under more than one item in the Personal Accident Table of Benefits in respect of the same **Bodily Injury**.
3. In the event that **Bodily Injury** results in **Your** death within thirteen weeks of the date of **Bodily Injury** and prior to the settlement of a claim for disablement under Items 2, 3 or 4 of the Personal Accident Table of Benefits, the **Accidental** Death Benefit shall be payable.
4. In the event of a claim **Our** appointed medical adviser(s) shall be allowed to examine **You** as often as may be deemed necessary.
5. For the purpose of this section:
   - 5.1 Loss of a limb shall mean the permanent and complete loss of or loss of use of a limb or limbs at or above the ankle or wrist.
   - 5.2 Loss of an eye shall mean permanent and total loss of sight without hope of improvement and where the degree of sight remaining after correction is 3/60 or less on the Snellen Scale.
   - 5.3 Loss of both eyes shall mean permanent and total loss of sight without hope of improvement and where **Your** name is added to the Register of Blind Persons on the authority of a registered qualified ophthalmic specialist.

SECTION 4 – BAGGAGE AND PERSONAL EFFECTS

WHAT IS COVERED

4.1 Baggage and Personal Effects

We will pay **You** up to the sum insured shown in the **Schedule of Insurance** in respect of loss of or damage to **Property** and / or **Valuables**.

4.2 Delayed Baggage

We will pay up to the sum insured shown in the **Schedule of Insurance** in respect of the cost of immediate necessities purchased or hired by **You** if on arrival at **Your** outward destination **You** are deprived of **Your** travel baggage for more than 12 hours because of temporary loss or mis-direction by the carriers (provided always that any amounts paid, other than hire charges, shall be deducted from the total of any claim payable under this section if the baggage proves to be permanently lost).

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** amount shown in the **Schedule of Insurance,** except in respect of the Delayed Baggage and General Average and Salvage provisions of section 4.
2. claims for theft which are not reported to any appropriate police authority within 24 hours of discovery and an official report obtained.

3. claims for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official report obtained and specifically for claims arising against common carriers and hotels. In the case of an airline, a Property Irregularity Report will be required.
4. Any loss of, theft of or damage to **Property** or **Valuables,** left unattended by **You** in a public place, or location that the public has access to at any time.
5. any loss of, theft of or damage to **Property** or **Valuables** left in an unattended motor vehicle if:
    i. they have not been locked out of sight in a secure baggage area of the vehicle;
    ii. no forcible and violent means have been used by an unauthorized person to gain entry into the vehicle; and
    iii. no evidence of such entry is available.
6. any loss of, theft of or damage to **Valuables**
    i. left in checked-in baggage, whilst in the custody of a carrier; and/or
    ii. packed in baggage left in the baggage hold, or storage area of a carrier; or
    iii. left in a left baggage facility, which incudes, but is not limited to, the left baggage storage area of a hotel or other accommodation supplier; a locked left luggage locker.
7. any loss of, theft or damage to **Property** or **Valuables** left unattended at **Your** accommodation other than in securely locked accommodation which is for **Your** sole use.
8. liability in respect of a pair or set of articles; **We** will be liable only for the value of that part of the pair or set which is lost or damaged.
9. any loss of, theft of, or damage to any item including clothing and equipment of any kind which has been loaned, hired or entrusted to **You** unless more specifically covered under Sections 10 or 11 of this Policy and the required additional premium paid.
10. loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning, repairing or restoring, or any gradual occurrence.
11. any claim for loss or damage to **Property** or **Valuables**, in a suitcase, bag or other item of luggage caused by contact with perishable goods or powder or liquid which has leaked from its bottle, jar or other receptacle.
12. any loss of, theft of, or damage to household effects.
13. any loss of, theft of, or damage to food, drink, or tobacco products.
14. electrical or mechanical breakdown or malfunction.
15. any loss of, theft of, or damage to securities, deeds, **Documents**, or **Property** held for business purposes as these will be covered under SECTION 8 – Business Cover.
16. any damage to china, pottery, glass or other fragile or brittle articles, other than photographic equipment and telescopic lenses, unless by fire, or resulting from an **Accident** to a seagoing vessel, aircraft or vehicle.
17. any loss of, theft of, or damage to the following items:
    i. contact or corneal lenses, dentures, hearing aids, cycles, unset precious stones, mobility scooters, motor vehicles and their accessories, watercraft and their accessories, trailers and trailer tents and their accessories and **Property**, carried in connection with any business, profession or trade as this will be covered under SECTION 8 - Business Cover.
    ii. accessories and/or subscriptions, unused rental charges, or pre-payments of mobile or satellite phones
18. any theft, loss of or damage to **Sports Equipment** whilst in use or in transit, unless **You** have requested cover under SECTION 11 – GOLF COVER and paid the required additional premium.
19. any loss of, theft of, or damage to **Winter Sports Equipment**, unless **You** have requested cover under SECTION 10 – **WINTER SPORTS** and paid the required additional premium.
20. confiscation, detention, damage or destruction by customs, governmental or other authority.
21. checked-in baggage that has not been retrieved and taken to **Your** accommodation address.

22. general average or salvage charges which are covered or would, but for the existence of this Policy, be covered by any other insurer or indemnifying organisation, except in respect of any excess beyond the amount payable by such other insurer or organisation.
23. any loss or damage to any reeds, strings or other replaceable accessory needed to play any musical instrument or to the musical instrument while it is in use.

CONDITIONS AND LIMITATIONS

1. **You** shall at all times exercise reasonable care in the supervision of the **Property**.
2. Claims settlements for articles lost or destroyed will be based on the cost price of comparable new articles, less an appropriate allowance for age and condition as follows:
   Up to 1 year 85%
   Up to 2 years 65%
   Up to 3 years 45%
   Up to 4 years 30%
   Up to 5 years 20%
   Over 5 years NIL
3. The limit for any single item or pair or set of items is shown in **the Schedule of Insurance**.

SECTION 5 – MONEY, DOCUMENTS AND CREDIT/DEBIT CARDS

WHAT IS COVERED

We will pay **You** up to the sum insured shown in the **Schedule of Insurance** in respect of:

5.1 Money and Documents

Loss of personal **Money**, and/or **Documents** occurring during the **Trip**, including expenses. directly consequent upon such loss.

5.2 Fraudulent Use of Lost Credit/Debit Card

Loss resulting from the fraudulent use of any personal credit card, debit card, or charge card held by **You**, following loss of such card during the **Trip,** which is not reclaimable elsewhere. Cover in respect of **Money** and **Documents** shall commence at the time of their collection or receipt by **You**, or 72 hours prior to planned commencement of the **Trip**, whichever is the latter.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** amount shown in the **Schedule of Insurance**.
2. any loss or theft not reported to the local police within 24 hours of discovery and where **You** have not obtained an official police report.
3. **Money** lost in currency exchange, depreciation in value or through errors or omissions in transactions or purchases.
4. loss of, theft of or damage to personal **Money**, **Documents** or Credit/Debit card(s)
   i. from a motor vehicle left unattended at any time; or
   ii. left in checked-in baggage, whilst in the custody of a carrier; and/or
   iii. packed in baggage left in the baggage hold, or storage area of a carrier; or
   iv. left in a left baggage facility, which incudes, but is not limited to, the left baggage storage area of a hotel or other accommodation supplier or a locked left luggage locker.

5. loss of, theft of or damage to **Money**, **Documents** or Credit/Debit card(s) left unattended by **You** in a public place, or location that the public has access to or unattended at any other time unless deposited in a hotel safe, or safety deposit box.
6. any claim for loss or damage to **Money, Documents** or Credit/Debit card(s) in a suitcase, bag or other item of luggage caused by contact with perishable goods or liquid which has escaped from its bottle, jar or other receptacle.
7. any loss, theft or damage to **Money, Documents** or Credit/Debit card(s) carried in connection with any business, profession or trade as this will be covered under SECTION 8 – Business Cover.
8. loss of **Money** where **You** have not produced evidence of the withdrawal of cash.
9. confiscation or detention by customs or other governmental authority.
10. any loss in respect of the fraudulent use of **Your** credit card, charge card or bankers' card if **You** have not complied with the terms and conditions under which the card was issued, including those relating to the safe-keeping and use of the card and the reporting to the Issuing Company or Bank of any misplacement or loss.
11. loss of, theft of or damage to travellers' cheques and pre-loaded credit cards if **You** have not complied with the issuer's conditions or where the issuer provides a replacement service.
12. daily living expenses when obtaining any replacement **Document**.
13. expenses arising whilst **You** are in **Your Country of Residence**.
14. Any extra travel and accommodation expenses incurred in returning to **Your Country of Residence**.

SECTION 6 – LEGAL EXPENSES AND PERSONAL LIABILITY

6.1 Legal Expenses

WHAT IS COVERED

We will pay up to the sum insured shown in the **Schedule of Insurance** in respect of **Your** incurred Legal Expenses in the pursuit of claims for damages against third parties who have caused an **Insured Person's** death, **Bodily Injury** or **Illness** throughincidents occurring during the **Trip**. **We** shall only be liable for expenses incurred with **Our** prior written consent, which will not be unreasonably withheld, but **We** reserve the right to withdraw from the proceedings at any stage and to limit **Our** liability to the expenses incurred during the period up to but not beyond the date of such withdrawal.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** amount shown in the **Schedule of Insurance**.
2. Legal Expenses incurred without **Our** prior written approval.
3. claims against **Us** or anyone acting on **Our** behalf, or a travel agent, tour operator or carrier.
4. the continued pursuit of any claim where **We** consider **You** do not have a likely prospect of establishing a legal liability against the party being pursued and of recovering charges from such party.
5. legal actions between **Insured Persons**.
6. legal actions to obtain a judgment or legally binding decision, or legal proceedings brought in more than one country.
7. Legal Expenses which constitute a valid claim under any other insurance Policy beyond **Our** rateable share of any claim costs.

6.2 Personal Liability

WHAT IS COVERED

We will pay **You** up to the sum insured shown in the **Schedule of Insurance** If **You** become legally liable to pay damages in respect of:

a) **Bodily Injury** to third parties during the **Trip**; and/or

b) for **Property Damage** to the property of third parties occurring during the **Trip, We** will:

   i. indemnify **You** for any such damages;

   ii. pay any claimant costs and/or expenses which the claimant is able to recover from **You**; and

   iii. pay any costs and expenses incurred in defense of the claim with **Our** consent up to, but not exceeding, the sum insured shown in the **Schedule of Insurance.**

It is a condition of cover that **You** shall not admit any liability nor agree to settle any claim without **Our** prior written consent.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** amount shown in the **Schedule of Insurance**.
2. liability for **Bodily Injury** to an Insured Person or to any **Relative**.
3. liability for damage to **Property** owned by, or in the care, custody or control of, **You** except for damage to the structure or contents of any building or permanently or seasonally sited cabin, caravan or tent temporarily hired or let to **You** for the sole purpose of **Your** personal occupancy during the **Trip**.
4. liability arising out of the ownership, possession, custody or use of any aircraft, horse drawn or mechanically propelled vehicle, except E-bikes, waterborne craft or firearm.
5. liability that is covered under any other insurance, except for any excess beyond the amount which would have been covered under such other insurance had this insurance not been in force.
6. fines, penalties or liquidated damages.
7. compensation ordered or awarded by a Court of criminal jurisdiction.
8. punitive and exemplary damages awarded by any Court outside of the United Kingdom.
9. injury, **Illness** or disease caused directly or indirectly by an infectious disease.
10. employer's liability or liability caused by **You** carrying out contracts, supplying goods and services, or doing any paid or voluntary work.
11. Liability for any claim arising from any deliberate act or omission by **You**.
12. liability arising directly or indirectly from taking part in any of the Amateur Sports or Hazardous Activities listed on page 40 to 44.
13. liability arising directly or indirectly in connection with:
    i. any malicious or unlawful act;
    ii. any deliberate act that is intended by **You**, other than where **You** use reasonable force to protect persons or tangible property;
    iii. **You** being under the influence of alcohol;
    iv. asbestos;
    v. **Your** violation of any Road Traffic Acts.

SECTION 7 – HI-JACK AND KIDNAP

WHAT IS COVERED

We will pay **You** up to the sum insured shown in the **Schedule of Insurance** for each complete day that **You** are hijacked or kidnapped during the **Trip**, up to the maximum sum shown in the **Schedule of Insurance**.

SECTION 8 – BUSINESS SUPPLEMENT COVER

SECTION 8.1 – Business Equipment Documents and Records

WHAT IS COVERED

8.1.1 Business Equipment

We will reimburse the **Policyholder** up to the sum insured shown in the **Schedule of Insurance** in respect of the cost of the repair or replacement for **Business Equipment** in **Your** care, custody or control which is lost, damaged, stolen or destroyed.

8.1.2 Business Documents and Records

We will indemnify the **Policyholder** up to the sum insured shown in the **Schedule of Insurance** in respect of the cost of replacing or restoring **Business Documents and Records** which are the **Property** of the **Policyholder** and are **Your** responsibility, following loss or damage during the **Trip**.

WHAT IS NOT COVERED IN RESPECT OF BUSINESS EQUIPMENT

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** amount shown in the **Schedule of Insurance**.
2. claims arising for theft which are not reported to any appropriate police authority within 24 hours of discovery and an official report obtained.
3. claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official report obtained and specifically for claims arising against common carriers and hotels. In the case of an airline, a Property Irregularity Report will be required.
4. loss, theft of or damage to **Business Equipment** left unattended by **You** in a public place, or location that the public has access to at any time.
5. any loss of, theft of or damage to **Business Equipment** left in an unattended motor vehicle if:
   i. it has not been locked out of sight in a secure baggage area of the vehicle;
   ii. no forcible and violent means have been used by an unauthorized person to gain entry into the vehicle; and
   iii. no evidence of such entry is available.
6. any loss of, theft of or damage to **Business Equipment**:
   i. left in checked-in baggage, whilst in the custody of a carrier; and/or
   ii. packed in baggage left in the baggage hold, or storage area of a carrier; or
   iii. left in a left baggage facility, which includes, but is not limited to, the left baggage storage area of a hotel or other accommodation supplier; a locked left luggage locker.
7. any loss of, theft of or damage to **Business Equipment** left unattended at **Your** accommodation other than in securely locked accommodation which is for **Your** sole use.
8. liability in respect of a pair or set of articles, **We** will be liable only for the value of that part of the pair or set which is lost or damaged.
9. loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning, repairing or restoring, or any gradual occurrence.

10. any claim for loss or damage to **Business Equipment** in a suitcase, bag or other item of luggage caused by contact with perishable goods or liquid which has escaped from its bottle, jar or other receptacle.
11. electrical or mechanical breakdown or malfunction.
12. damage to china, pottery, glass or other fragile or brittle articles, other than photographic equipment and telescopic lenses, unless by fire, or resulting from an **Accident** to a seagoing vessel, aircraft or vehicle.
13. any loss of, theft of or damage to the following items:
    a. cycles, jewellery or unset precious stones,
    b. accessories and/or subscriptions, unused rental charges, or pre-payments of mobile or satellite phones.
14. confiscation or detention by customs or other governmental authority.
15. **Business Equipment** in checked-in baggage that has not been retrieved and taken to **Your** accommodation address.
16. in respect of musical instruments loss or damage to any reeds, strings or other replaceable accessory needed to play the instrument or to the instrument while it is in use.

WHAT IS NOT COVERED IN RESPECT OF BUSINESS DOCUMENTS AND RECORDS

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. any loss or theft not reported to the local Police within 24 hours of discovery and an official report obtained.
2. loss, theft or damage to **Business Documents and Records**:
    i. from a motor vehicle left unattended at any time; or
    ii. left in checked-in baggage, whilst in the custody of a carrier; and/or
    iii. packed in baggage left in the baggage hold, or storage area of a carrier; or
    iv. left in a left baggage facility, which incudes, but is not limited to, the left baggage storage area of a hotel or other accommodation supplier; a locked left luggage locker.
3. Loss, theft of or damage to **Business Documents and Records** left unattended by **You** in a public place, or location that the public has access to.
4. any claim for loss or damage to **Business Documents and Records** in a suitcase, bag or other item of luggage caused by contact with perishable goods or liquid which has escaped from its bottle, jar or other receptacle.
5. confiscation or detention by customs or other governmental authority.

SECTION 8.2 – Business Money

WHAT IS COVERED

We will reimburse the **Policyholder**, up to an amount not exceeding the sum insured shown in the **Schedule of Insurance**, if during the **Trip**, **Business Money** is lost, stolen or destroyed.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. any loss not reported to the local Police within 24 hours of discovery and an official report obtained.
2. loss of, theft of or damage to **Business Money**:
    i. from a motor vehicle left unattended at any time; or
    ii. left in checked-in baggage, whilst in the custody of a carrier; and/or
    iii. packed in baggage left in the baggage hold, or storage area of a carrier; or

iv. left in a left baggage facility, which incudes, but is not limited to, the left baggage storage area of a hotel or other accommodation supplier; a locked left luggage locker.

3. loss of, theft of or damage to **Business Money** left unattended by **You** in a public place, or location that the public has access to or unattended at any other time unless deposited in a hotel safe, or safety deposit box.
4. any claim for loss or damage to **Business Money** in a suitcase, bag or other item of luggage caused by contact with perishable goods or liquid which has escaped from its bottle, jar or other receptacle.
5. **Business Money** lost in currency exchange, or through errors or omissions in transactions or purchases.
6. loss of **Business Money** contained in baggage whilst such baggage is in the custody of Carriers and outside **Your** control.
7. confiscation or detention by customs or other governmental authority.
8. **Business Money** for which **You** have not provided evidence of its withdrawal from a bank or other financial institution or other evidence of its existence.

SECTION 8.3 – Replacement Staff

WHAT IS COVERED

We will reimburse the **Policyholder** up to an amount not exceeding the sum insured shown in the **Schedule of Insurance** for any costs reasonably and necessarily incurred during the **Trip** as a direct result of **Your Bodily Injury** or **Illness** which, in the opinion of a **Medical Practitioner**, will last for a period of more than seventy-two (72) hours, to send one substitute person to complete **Your** original business commitments and objectives.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19

1. the **Excess** amount shown in the **Schedule of Insurance**.
2. Expenses that the **Policyholder** has paid or budgeted to be pay before the commencement of the **Trip**.

SECTION 8.4 – Additional Personal Accident

WHAT IS COVERED

The Benefits provided under Section 3 – Personal **Accident** are multiplied by two when **You** are travelling on a pre-arranged business **Trip** in which **Your** transportation and accommodation expenses have been paid for by the **Policyholder**, and proof is provided that the primary purpose of the **Trip** was the furtherance of their business. All other terms, conditions and exclusions apply as per Section 3.

SECTION 9 – COVID-19 and SARS-CoV-2 Cover Extension

WHAT IS COVERED

NOTE: Section 9 only applies if the **Policyholder** has opted to purchase the COVID-19 and SARS-CoV-2 cover extension and it is shown in the **Schedule of Insurance**. In these instances, General Exclusion 26 on Page 16 will not apply.

SECTION 9.1 – Cancellation

PRIOR TO TRAVELLING:

Provided **You** have been fully vaccinated in accordance with the regulations and recommendations in force in **Your Country of Residence** at least 42 days before the **Trip** is due to start, **We** will pay any irrecoverable or unused travel and accommodation expenses which have been paid in advance or which have been contracted to be paid, up to the sum insured shown on the **Schedule of Insurance**, if:

1. **You**, are hospitalised up to 28 days before **Your Trip** and the dates of **Your Trip** are verified by **Your** original booking invoice or
2. **You**, have tested positive for COVID-19 or SARS-CoV-2 up to 14 days before **Your Trip** and **You** have to quarantine/self-isolate and the dates of **Your Trip** are verified by **Your** original booking invoice or
3. **You** show symptoms of COVID-19 at the point of departure for **Your Trip** and are denied boarding. This is subject to all the following
    i. **Your** transport or accommodation provider not reimbursing **You** or offering alternative dates
    ii. written evidence from **Your** transport provider that **You** have been denied boarding due to potential COVID-19 infection and
    iii. a positive COVID-19 test being taken within 24 hours of this denial at **Your** expense

SECTION 9.2 – Extended Stay

WHILST TRAVELLING:

We will pay:

9.2.1 additional accommodation costs (of a standard no greater than **Your** original booking) up to the amount shown in the **Schedule of Insurance** and

9.2.2 the additional cost of return transportation to **Your Country of Residence** (of a standard no greater than the class of journey and in the same mode of transport **You** originally paid for) up to the amount shown in the **Schedule of Insurance** if:

a. Any person named on the policy and with whom **You** are travelling, or any person whose home **You** have stayed in, or any person with whom **You** have conducted business, contracts COVID-19 during **Your Trip** or **You** are required to follow a personal "track and trace" directive and **You** are forced to quarantine/self-isolate in accordance with local regulations and cannot make the return journey on the planned date. This is subject to the following:

    i. **You** providing evidence of a COVID-19 diagnosis and/or
    ii. **You** providing evidence of the requirement to quarantine
    iii. **Your** transport or accommodation provider not reimbursing **You** or offering alternative dates

b. **You** show symptoms of COVID-19 at the point of departure for **Your** return **Trip** and are denied boarding. This is subject to all the following:

    i. **Your** transport or accommodation provider not reimbursing **You** or offering alternative dates
    ii. written evidence from **Your** transport provider that **You** have been denied boarding due to potential COVID-19 infection and
    iii. a positive COVID-19 test being taken within 24 hours of this denial at **Your** expense

SECTION 9.3 EMERGENCY MEDICAL, REPATRIATION AND OTHER EXPENSES

We will pay up to the amount shown in the **Schedule of Insurance** for Emergency Medical, Repatriation and Other Expenses under Sections 2.1 – 2.4 if you catch COVID-19 whilst on **Your Trip.**

WHAT IS NOT COVERED UNDER SECTION 9

In addition to the General Conditions and Exclusions on pages 14 to 19 :

1. There is no cover if the requirement to quarantine/self-isolate is a general requirement for all persons staying in a specific accommodation or a general lockdown in the region in which **You** are staying and which is not subject to a personal "track and trace" directive.
2. There is no cover if **You** cannot make the return journey on **Your** planned return date because of a legal restriction on outbound travel by the government or local authority in the country in which you are staying.
3. Conditions and Exclusions applicable to Section 1 on pages 24 and 25.
4. Exclusions applicable to Section 2 on page 26.
5. Cover under any other Section of this Policy.

SECTION 10 – WINTER SPORTS

NOTE: Section 10 only applies if the **Policyholder** has opted to purchase the **Winter Sports** Extension and it is shown in the **Schedule of Insurance**.

SECTION 10.1 – Owned and Hired Ski Equipment

WHAT IS COVERED

In addition to Section 4, Baggage and Personal Effects, **We** will pay up to the sum insured shown in the **Schedule of Insurance** for theft or **Accidental** damage to **Your Ski Equipment** which **You** have taken on the **Trip** or hired **Ski Equipment** for which **You** are responsible.

WHAT IS NOTCOVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** amount shown in the **Schedule of Insurance**.
2. more than £/€ 200 for any single article or pair.
3. claims arising from loss, theft or attempted theft or damage to **Ski Equipment** left unattended and/or out of **Your** sight unless it is securely locked in a building.
4. any **Accidental** damage whilst **Your Ski Equipment** is in use.

SECTION 10.2 – Hiring Replacement Ski Equipment

WHAT IS COVERED

We will pay up to the sum insured shown in the **Schedule of Insurance** per day to a maximum of the sum insured shown in the **Schedule of Insurance** for the hiring of replacement equipment if **Your Ski Equipment** is lost or damaged or delayed for more than 12 hours, during **Your** outward or onward **Trip**.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. any claim not supported by a written report from the carrier responsible for the delay or damage to **Your Ski Equipment**.

SECTION 10.3 – Lift Pass

WHAT IS COVERED

We will pay up to the sum insured shown in the **Schedule of Insurance** in respect of any unexpired period of **Your** lift pass (based on a pro-rata calculation on the original value of the lift pass), following **Your Bodily Injury** or should **Your** lift pass be lost or stolen which is confirmed by a Police report.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** amount shown in the **Schedule of Insurance**.

SECTION 10.4 – Piste Closure

WHAT IS COVERED

If all lifts in **Your** pre-booked ski resort are closed due to a lack of snow which means **You** have to travel to an alternative resort for skiing, **We** will pay up to the sum insured shown in the **Schedule of Insurance** per day to a maximum of the sum insured shown in the **Schedule of Insurance** for one of the following:

10.4.1 travel costs to the nearest available ski resort; or

10.4.2 the extra cost of acquiring a new or extended ski pass.

If all lifts in **Your** pre-booked ski resort are closed due to lack of snow and **You** are unable to ski at a different resort, **We** will pay up to a maximum of the sum insured shown in the **Schedule of Insurance.**

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. any claim not supported by a written statement from the management of the resort confirming the reason for the piste closure and the duration of the piste closure.
2. any costs incurred due to lack of snow at ski resorts less than 1,000 metres above sea level.
3. any claim where the piste closure was public knowledge prior to the booking of **Your Trip**.

SECTION 10.5 – Avalanche cover

WHAT IS COVERED

We will pay up to the sum insured shown in the **Schedule of Insurance** for necessary and reasonable extra travelling and accommodation expenses if **Your** arrival or departure from **Your** pre-booked ski resort is delayed by more than 12 hours due to an avalanche.

WHAT IS NOTCOVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** amount shown in the **Schedule of Insurance**.
2. any costs incurred at ski resorts due to avalanche at less than 1,000 metres above sea level.

SECTION 11 – GOLF COVER

NOTE: Section 11 only applies if the **Policyholder** has opted to purchase the **Golf Cover** extension and this is shown in the **Schedule of Insurance**.

SECTION 11.1 – Owned and Hired Golf Equipment

WHAT IS COVERED

We will indemnify **You** in respect of loss or breakage of Golf Equipment up to the amount shown in the **Schedule of Insurance** for owned and hired Golf Equipment. In the case of owned Golf Equipment, each claim is subject to a maximum payment for any Single Items shown in the **Schedule of Insurance**.
The maximum payment for any single Item for which an original receipt, proof of purchase or insurance valuation (obtained prior to the loss) is not supplied is £/€ 50, subject to a maximum of £/€ 200 for all such items.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. The **Excess** as shown in the **Schedule of Insurance**.
2. claims arising from theft which is not reported to a police authority within 24 hours of discovery and an official report obtained.
3. claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official report obtained, and specifically for claims arising against common carriers and hotels. In the case of an airline, a Property Irregularity Report will be required.
4. claims arising from delay, detention, seizure or confiscation by Customs or other officials.
5. claims arising for loss, theft or damage to anything shipped as freight or under a Bill of Lading.
6. claims arising for Golf Equipment left unattended in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the **Property**.
7. claims arising for loss, theft or damage of **Property** from an unattended motor vehicle, unless taken from a locked boot or lockable roof rack between 8am and 8pm local time and there is evidence of damage or forced entry which is confirmed by a police report.

SECTION 11.2 – Hiring Replacement Golf Equipment

WHAT IS COVERED

We will reimburse **You** up to the amount shown in the **Schedule of Insurance** for each 24-hour period for the cost of necessary hire of replacement Golf Equipment following:

a) loss, theft or breakage of **Your** Golf Equipment, following a valid claim under 10.1; or

b) the mis-direction or delay in transit of **Your** Golf Equipment for 12 hours.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. the **Excess** as shown in the **Schedule of Insurance**.
2. claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official report obtained and specifically for claims arising against common carriers. In the case of an airline, a property Irregularity Report will be required.
3. claims arising for loss, theft or damage to anything shipped as freight or under a Bill of Lading.
4. claims arising from delay, detention, seizure or confiscation by Customs or other officials.

SECTION 11.3 – Green Fees

WHAT IS COVERED

We will indemnify **You** up to the amount shown in the **Schedule of Insurance** for the proportionate value of any non-refundable, pre-paid green fees or tuition fees necessarily unused due to the following:-

a) **Accident** or **Illness** of the **Insured Person;**
b) loss or theft of documentation which prevents the participation in the pre-paid golfing activity.

WHAT IS NOTCOVERED

The General Conditions and Exclusions on pages 14 to 19.

SECTION 12 - TERRORISM DISRUPTION COVER

Note: Section 12 only applies if the **Policyholder** has opted to purchase the Terrorism Disruption Cover and this is shown in the **Schedule of Insurance**. **We** will pay up to the sum insured shown in the **Schedule of Insurance**

WHAT IS COVERED

Sections 1.1.1 to 1.4 – Cancellation or Curtailment is extended to include the following cover.

We will pay up to the amount shown in the **Schedule of Insurance** for **Your** part of the unused travel and accommodation costs (including unused pre-booked excursions) that have been paid or where there is a contract to pay that cannot be recovered from anywhere else if it is necessary to cancel or curtail the planned **Trip** because of any of the following events involving **You** or a travelling companion that first occur during the **Period of Insurance**:

a. **You** were not able to travel and use **Your** pre-booked accommodation; or
b. the **Trip** was cancelled or curtailed before completion as a result of the travel advice unit of the Foreign and Commonwealth Office (FCO), the World Health Organisation (WHO) or any other regulatory authority in a country to/from which **You** are travelling issuing a directive prohibiting all travel or all but essential travel to, or recommending evacuation from, the country or specific area or event to which **You** are travelling due to **Terrorist Activity**, providing the directive came into force after this insurance was purchased or the **Trip** booked (whichever is the latter), or in the case of curtailment, after **You** had left **Your Country of Residence** to commence the **Trip**.

WHAT IS NOT COVERED

In addition to the General Conditions and Exclusions on pages 14 to 19:

1. Package holidays are not covered by this section of cover.

Amateur Sporting and Hazardous Activities

The following activities listed in the table below are covered under **Your** Policy. The conditions, indicated by numbers within the table, are listed on pages 43 and44. **W/S** indicates that a **Winter Sports** premium must be paid for cover to apply. There is no cover under the Personal Public Liability section whilst taking part in any of the activities listed.

Activity	Acceptability	Condition number
Abseiling	Covered	2, 5, 6
Aerobics	Covered	
Archery	Covered	2
Assault Course	Covered	2, 7
Athletics	Covered	2, 4
Badminton	Covered	
Ballooning (Hot Air)	Covered	2, 3
Banana boat rides (Beach activity)	Covered	
Baseball	Covered	
Basketball	Covered	
Blade skating	Covered **W/S**	4, 6
Bone fishing (see Deep Sea Fishing)	Covered	
BOSS (Breathing Observation Submersible Scooter)	Covered	1, 2, 9
Bowls	Covered	
Bungee Jumping (incidental 1- 3 jumps)	Covered	2, 8
Camel riding	Covered	
Canoeing (grades 1 -3)	Covered	
Catamaran sailing (Coastal waters only)	Covered	1, 4, 9
Clay pigeon shooting	Covered	1, 5, 9
Climbing wall	Covered	2, 7
Cricket	Covered	4, 6, 7
Cross country skiing (on recognised paths)	Covered **W/S**	
Curling	Covered	
Cycling (excluding BMX)	Covered	4, 7
Deep sea fishing (recreational inside 12-mile limit)	Covered	1, 2
Dinghy Sailing (inside 12-mile limit)	Covered	1, 4, 9

Dry skiing	Covered **W/S**	
Fell running	Covered	
Fell walking	Covered	
Fencing	Covered	1, 6, 7, 8, 9
Fishing (see Deep Sea Fishing)	Covered	
Flying (as passenger)	Covered	3
Football (amateur soccer not American football)	Covered	2, 7, 9
Glacier Walking (under 4000m)	Covered **W/S**	
Gliding	Covered	1, 3, 8, 9
Go karting (up to 250 cc)	Covered	2, 6, 9
Golf	Covered	
Gymnastics	Covered	
Handball	Covered	
Heli skiing	Covered **W/S**	1, 3, 6
Heptathlon	Covered	
Hiking/Walking up to 1,500m on recognised hiking trails or footpaths	Covered	
Hobie catting (Coastal waters only)	Covered	1, 4, 9
Horse Riding (no racing, jumping, hunting eventing)	Covered	4, 7
Hot dogging (Grades 1, 2 & 3)	Covered	1, 7, 9
Ice skating	Covered	4, 6
Indoor climbing	Covered	1, 5, 7
Inner tubing (in snow)	Covered **W/S**	4, 5
Inner tubing (on land or water)	Covered	2
Jeep/Car trekking	Covered	2, 3, 9
Jet boating	Covered	2, 9
Jet skiing	Covered	4, 6, 9
Jungle surfing	Covered	5, 7
Kayaking (up to grade 2)	Covered	1, 4, 9
Kite buggying	Covered	4, 6, 7, 9
Kite surfing (water)	Covered	4, 9

Langlauf	Covered **W/S**	
Mono skiing (on Snow)	Covered **W/S**	
Mopeds/Motor Cycles (hired during **Trip**)	Covered (up to 125cc with license)	7
Netball	Covered	
Off-piste skiing	Covered **W/S**	1, 4
Orienteering	Covered	
Paintballing	Covered	2, 7, 9
Parasailing (over water)	Covered	2, 7, 8, 9
Parascending (over water)	Covered	2
Passenger sledge (Horse and Carriage)	Covered	
Pedaloes	Covered	
Polo	Covered	4, 8, 9
Pony trekking	Covered	
Quad Biking	Covered	2, 4, 9
Racket ball	Covered	
Rambling	Covered	
Rifle range	Covered	5, 9
Roller skating/Blading	Covered	
Rounders	Covered	
Rowing	Covered	4, 9
Rubber ring rides (Beach Activity)	Covered	
Running	Covered	4
Safari/Gorilla trekking	Covered	2
Sail boarding	Covered	
Sailing (including Flotilla. Coastal waters only)	Covered	1, 4, 9
Sand yachting	Covered	9
Scuba diving (to 10 metres deep)	Covered	1
Skateboarding	Covered	4
Skiing	Covered **W/S**	
Sky diving indoor	Covered	2, 7
Sledging	Covered **W/S**	

Snorkelling (to 10 metres deep)	Covered	
Snowboarding	Covered **W/S**	
Snow mobile	Covered **W/S**	
Snow shoeing	Covered **W/S**	
Softball	Covered	
Sphering/Zorbing (including aqua)	Covered	2
Squash	Covered	
Street hockey	Covered	9
Surfing	Covered	
Swimming	Covered	
Table tennis	Covered	
Ten pin bowling	Covered	
Tennis	Covered	
Tobogganing	Covered **W/S**	
Tree trekking	Covered	2
Trekking (up to 4000 metres)	Covered	1, 2
Volley ball	Covered	
Wake Boarding	Covered	
War games	Covered	7, 9
Water polo	Covered	4
Water skiing	Covered	
White water rafting (Grades 1 - 4)	Covered	7, 8, 9
Windsurfing (inside 12 mile limit)	Covered	9
Yachting (Coastal Waters only)	Covered	1, 4, 9
Zorbing/Sphering (including aqua)	Covered	2

Basic Conditions

1. **You** are accompanied by, or accessible to, an experienced and/or suitable qualified instructor or guide.
2. **You** are adequately supervised, taking part in an organised event, session or excursion.
3. **You** must be a fare-paying passenger in a chartered craft.
4. **You** are not taking part in a league or competition.

5. **You** are using natural or purpose/built facilities approved for use for the activity by a local or national regulatory authority.
6. This does not constitute the main purpose of the **Trip**.
7. Protective safety clothing and/or headgear must always be worn.

Additional Conditions

For certain activities cover under some sections of the Policy is excluded :

8. Cover under the Personal **Accident** section is excluded.
9. Cover under the Personal public liability section is excluded.

Data Protection Notice

Personal information notice

Who We are
We are Lloyd's Insurance Company S.A. (hereafter referred to as "Lloyd's Brussels") and Canopius Managing Agents Limited identified in the contract of insurance and/or in the **Schedule of Insurance**.

The basics
We collect and use relevant information about **You** to provide **You** with **Your** insurance cover or the insurance cover that benefits **You** and to meet **Our** legal obligations and the obligations of others in the insurance chain.

This information includes details such as **Your** name, address and contact details and any other information that **We** collect about **You** in connection with the insurance cover from which **You** benefit. This information may include special categories of personal data details such as information about **Your** health and any criminal convictions **You** may have.

In certain circumstances, **We** may need **Your** consent to process certain categories of information about **You** (including special categories of personal data details as mentioned above). Where **We** need **Your** consent, **We** will ask **You** for it separately. **You** do not have to give **Your** consent and **You** may withdraw **Your** consent at any time. If you are a resident of the EU, EEA or Monaco resident you can do this by sending an e-mail to data.protection@lloyds.com (without however affecting the lawfulness of processing based on consent prior to its withdrawal). However, if **You** do not give **Your** consent, or **You** withdraw **Your** consent, this may affect **Our** ability to provide the insurance cover from which **You** benefit and may prevent **Us** from providing cover for **You** or handling **Your** claims.

The way insurance works means that **Your** information may be shared with, and used by, a number of third parties in the insurance sector (both inside and outside Belgium, and inside and outside the EU). For example, insurers, insurance agents or brokers, reinsurers, loss adjusters, sub-contractors, regulators, law enforcement agencies, fraud and crime prevention and detection agencies and compulsory insurance databases. **We** will only disclose **Your** personal information in connection with the insurance cover that **We** provide and to the extent required or permitted by law.

We keep your personal details for no longer than is necessary in offering the insurance arranged or to comply with our legal or regulatory requirements.

Other people's details You provide to Us

Where the **Policyholder** provides **Us** or their agent or insurance broker with details about other people, they must provide this notice to them.

Want more details?

For more information about how **We** use all personal information please see **Our** full privacy notices:

For Companies Domiciled in the EU, EEA and Monaco:
Visit **Our** website: https://www.lloydsbrussels.com
The privacy notice is available in other formats on request

For Companies Domiciled in UK and Gibraltar:
Underwriter – Canopius Managing Agents Limited
Privacy notice accessible at: https://www.canopius.com/privacy/privacy-notice/
Contact: privacy@canopius.com

Lloyd's Broker – Besso Limited
Privacy notice accessible at: http:/www.besso.co.uk/web/privacy-notice
Contact: Complaints@besso.co.uk

Contacting Us and Your rights
You have rights in relation to the information **We** hold about **You**, including the right to access **Your** information. If **You** wish to exercise **Your** rights, discuss how **We** use **Your** information or request a copy of **Our** full privacy notice(s), please contact **Us**. Alternatively, **You** may contact the insurance agent or insurance broker that arranged **Your** insurance or:

For UK and Gibraltar residents: Status Insurance Management Limited, Suite 9 Chalkwell Lawns, 648-656 London Road, Westcliff on Sea, Essex, SS0 9HR, United Kingdom.. Email : info@statusglobalinsurance.com

For EU, EEA and Monaco residents: Status Insurance Agents, Sub-Agents and Consultants CY Limited, 5 Rafael Santi, 1st Floor, Office 101, 6052 Larnaca, Cyprus. Email: cyprus@statusglobalinsurance.com

You also have the right to lodge a complaint with **Your** competent data protection authority, but **We** encourage **You** to contact **Us** before.

Complaints

Our aim is to ensure that all aspects of the insurance are dealt with promptly, efficiently and fairly. At all times **We** are committed to providing the **Policyholder** with the highest standard of service. If there are any questions or concerns about the Policy or the handling of a claim the **Policyholder** should, in the first instance, contact **Us** or the intermediary who arranged the insurance where applicable. In the event that the **Policyholder** remains dissatisfied and wishes to make a complaint, they can do so at any time. For full details on making a Complaint, please refer to the Complaints Notice as contained within the **Schedule of Insurance**.

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