

Fly Safe Travel Guard Policy Wording

Claims

Write to us at msaad@gig.com.lb within 24 hours of loss or damage.

Assistance

Call our global assistance number **+1 817 826 7276** and quote your policy number for assistance.

ENDORSEMENT

This travel insurance Policy has been amended to address certain situations pertaining to COVID-19. This means that for some benefits, cover is expanded to include losses occurring after COVID-19 was a known event and could reasonably have been expected to lead to a claim. This Endorsement addresses what Insured Person is and is not covered for as it pertains to COVID-19.

Please note:

1. This Endorsement will attach to and form part of **Insured Person's** Policy.
2. This Endorsement is subject to all the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Endorsement. If any provision, limitation or exclusion in the policy is inconsistent with this Endorsement, the terms of this Endorsement shall prevail.
3. Please note in particular the "**INTRODUCTORY CLAUSES**", "**UNIFORM EXCLUSIONS**", and "**SPECIFIC EXCLUSIONS**" sections of the policy.
4. All terms defined and references construed in the policy shall have the same meaning and construction in this Endorsement. Terms shown in bold in this Endorsement have defined meanings given to them in the **GENERAL DEFINITIONS** section of this Endorsement or the policy.
5. Cover for one-way **Insured Journey** ends 168 hours after **Insured Person's** arrival at **Insured Person's** final destination outside of **Insured Person's Country of Residence**.

GENERAL DEFINITIONS

Quarantine means a restriction on movement or travel placed by a medical or governmental authority, in order to stop the spread of a communicable disease.

COVID-19 COVER

The policy will cover and **Insurer** will pay up to the amount shown in the table below (or where applicable, in the table of benefits in **Insured Person's** Policy) for claims relating directly to COVID-19, subject to the exclusions listed below and the terms and exclusions of **Insured Person's** Policy.

BENEFIT	COVERED CONDITIONS AND EXCLUSIONS
Emergency Medical Expenses & Emergency Medical Evacuation	<p>If Insured Person is diagnosed with COVID-19 whilst outside Insured Person's Country of Residence, Insurer will pay up to \$250,000 for the necessary and reasonable medical costs incurred during Insured Person's Insured Journey, as a result of Insured Person contracting COVID-19 during Insured Person's Insured Journey.</p> <p>Included within the Emergency Medical Expenses benefit limit of \$250,000 above, if Insured Person contracts COVID-19 during Insured Person's Insured Journey, Insurer will cover the cost of emergency evacuation if deemed medically necessary.</p> <p>This benefit includes the cost of returning Insured Person's body or Insured Person's ashes to Insured Person's Country of Residence up to the limit stated in the Policy.</p> <p>Insurer will not cover any loss if Insured Person is travelling against a medical practitioner or doctor's advice, or any claim arising from Insured Person acting in a way that goes against the advice of a medical practitioner or doctor (including, but not limited to, travelling with COVID-19 symptoms).</p> <p>In all cases, Insured Person or someone on Insured Person's behalf must contact Insurer's assistance department immediately.</p>
Trip Cancellation	Insurer will pay up to the amount shown in the table of benefits in Insured Person's Policy if the cancellation of Insured Person's Insured Journey ,

	<p>for which Insured Person has paid under a contract and which is not refundable, is necessary and unavoidable as a result of either:</p> <ol style="list-style-type: none"> 1. Insured Person or a relative being diagnosed with COVID-19 prior to the scheduled Insured Journey departure date; or 2. An extension of the school year due to COVID-19, if Insured Person or a relative is a full-time teacher, other full-time employee, or a student at a primary or secondary school and is required to complete an extended school year that falls on or beyond the departure date of Insured Person's Insured Journey. <p>Insurer will not cover any Insured Journey cancellation solely due to epidemic- or pandemic-related travel advisories issued by governments, health authorities or the World Health Organization, by or for destination country or origin country.</p> <p>Insurer will not cover any Insured Journey cancellation resulting solely from border closures, Quarantine or other government orders, advisories, regulations or directives.</p> <p>Insurer will not cover Insured Journey cancellations if Insured Person cancels Insured Person's Insured Journey because of disinclination to travel, change of mind or fear of travelling.</p> <p>Insurer will not cover Insured Journey cancellation if an airline, hotel or a travel service provider has offered a voucher or credit or re-booking of the Insured Journey for cancellation refund or compensation.</p> <p>Insurer will not cover any loss if Insured Person is travelling against a medical practitioner or doctor's advice, or any claim arising from Insured Person acting in a way that goes against the advice of a medical practitioner or doctor (including, but not limited to, travelling with COVID-19 symptoms).</p>
<p>Trip Curtailment</p>	<p>Insurer will pay up to the amount listed in the table of benefits in Insured Person's Policy if the cutting short of Insured Person's Insured Journey is necessary and unavoidable because Insured Person or Insured Person's relatives are diagnosed with COVID-19 while travelling and need to return to Insured Person's Country of Residence earlier than planned. In that event, Insurer will cover:</p> <ol style="list-style-type: none"> 1. reasonable and necessary travel and accommodation expenses for which Insured Person has paid, and which are not refundable; 2. reasonable and necessary additional travel costs to return back to Insured Person's Country of Residence. <p>Insurer will not cover business associates for this benefit.</p> <p>Insurer will not cover Insured Journey curtailment resulting solely from border closures, Quarantine or other government orders, advisories, regulations or directives.</p> <p>Insurer will not cover any loss if Insured Person is travelling against a medical practitioner or doctor's advice, or any claim arising from Insured Person acting in a way that goes against the advice of a medical practitioner or doctor (including, but not limited to, travelling with COVID-19 symptoms).</p>
<p>Travel Delay and Abandonment</p>	<p>Insurer will pay up to the amount listed in the table of benefits if Insured Person fails a COVID-19 related test or a medical screening at the airport and as a result are required to abandon Insured Person's Insured Journey. Insurer will not pay for any travel delay under this section.</p>
<p>Resumption of Journey</p>	<p>Insurer will pay Insured Person's reasonable extra expenses, up to \$5,000, less any refund Insured Person is due to receive for the unused prepaid travel and accommodation arrangements, to complete Insured Person's original pre-booked travel arrangements, if Insured Person's Insured Journey is interrupted after departure owing to Insured Person's or a relative's exposure to COVID-19 leading to Quarantine.</p>

Out-of-country COVID-19 Diagnosis Quarantine Allowance (New Benefit)	<p>Insurer will pay \$150 per day, per person for up to 14 consecutive days if, while Insured Person is outside Insured Person's Country of Residence, Insured Person tests positive for COVID-19, and as a result are unexpectedly placed into a mandatory Quarantine outside Insured Person's Country of Residence.</p> <p>Insurer will pay the amount specified above to cover reasonable and necessary accommodation costs, meals or other expenses directly related to Quarantine.</p> <p>This benefit replaces the accommodation expenses covered under Trip Curtailment for the period during which Insured Person is in Quarantine during Insured Person's Insured Journey.</p> <p>This benefit will not apply where Quarantine measures are mandatory for all arriving passengers or Quarantine mandates exist for all passengers from a particular country/region of origin.</p>
ASSISTANCE SERVICES	Please note: Expenses incurred from third-party vendors as well as administrative case fees for assistance services not covered as part of this insurance plan are the responsibility of the Policyholder (see policy fulfillment for assistance contact details).
Denied boarding due to fever or other medical concern	An Assistance Service staff member will be available to discuss next steps and options. If necessary, Insurer will provide assistance with making a medical appointment, booking hotel accommodation and/or return flight to Country of Residence when Insured Person is medically cleared to fly. For contact details, please refer to Insured Person's Policy .
Denied entry to country due to fever or other medical concern	Insurer will provide assistance with making a medical appointment, booking hotel accommodation and/or a return flight to Insured Person's Country of Residence when Insured Person is medically cleared to fly. For contact details, please refer to Insured Person's Policy .
Feel ill while traveling internationally (To access benefits, Insured Person must contact Insurer's assistance department immediately)	An Assistance Service staff member will be available to discuss Insured Person's options. Insurer will provide assistance with making a medical appointment, booking hotel accommodation and/or return flight to Insured Person's Country of Residence when Insured Person is medically cleared to fly. For contact details, please refer to Insured Person's Policy .

I. Introductory Clauses

Period of Coverage

This Policy's coverage will commence on the Inception Date appearing on the Travel Insurance Certificate.

This policy must be purchased before the Insured Person travels out of Lebanon.

This Policy will provide cover for Insured Journeys that are:

- A. Booked after; or
- B. Commenced after; the Inception Date appearing on the Travel Insurance Certificate.

Contract of Travel Insurance

No change in the Policy shall be valid until approved by an officer of the Company and unless such approval be endorsed hereon or attached hereto. No broker / corporation / agent / visa originator has authority to change the Policy or to waive any of the provisions of the Policy. It contains certain conditions and exclusions in each section and uniform provisions and exclusions applying to all the sections. The Insured Person must meet these conditions or the Company may not accept the Insured Person's claim.

Premium Payments

The Insured Person is liable for the premium; the premium is payable in advance and the Company shall not be liable for any claim arising under this Policy that occurs prior to receipt of the premium. The Company shall not be obliged to accept premium tendered to it or to any intermediary after such date, but may do so upon such terms as it in its sole discretion may determine. The Company reserves the right to ask for proof of payment of premium at any time. Such proof must be to the Company's satisfaction.

Maximum Amount Payable

1. No Insured Person shall be entitled to recover a benefit exceeding the sum for an Insured Event as reflected in the Table of Benefits in Section 2.2 of this Policy.
2. If two or more travel policies issued by the Company apply to the same claim, the maximum amount payable by the Company under all such policies shall not exceed the limit of liability of whichever of such policies has the highest applicable limit of liability. Nothing contained herein shall be construed to increase the limit of liability of this Policy.

Cancellation

The Company may cancel the Policy at any time by written notice delivered to the Insured Person or mailed to the last address as shown by the records of the Company stating not less than seven (7) days thereafter such cancellation shall be effective. Such cancellation shall be without prejudice to any valid claim-originating prior thereto.

In the event the individual insurance offered to an Insured Person under the Policy for which the Premium has been paid in advance is cancelled by written notice delivered to the Company and by returning the original copy of the Policy (if applicable) prior to the Insured Journey commencements, 100% of the Premium shall be refunded, unless claim is incurred prior to the Insured Journey Commencement.

This Policy cannot be extended or cancelled following the commencement of the Insured Journey.

Termination

This Policy will terminate on the earliest of the following dates:

1. The date the Insured Person returns to the Country of Residence. For Annual Multiple Entry plan, cover will terminate upon Insured Person's return to the Country of Residence or upon completion of the 90 day limit on Insured Journey, whichever is earlier; or
2. The date that Period of Coverage gets over; or
3. The date that the Insured Person reaches the maximum age; or
4. The date the Insured person is no longer eligible within the classification of Insured Persons; or
5. The date the benefits are paid to the extent of the Sum Insured in respect of any Insured.

Any such termination shall be without prejudice to any valid claim originating prior to the date of termination.

Complaints and Disputes

If you have a complaint or dispute about your Policy, please contact:

msaad@gig.com.lb

Data Disclosure

By executing this application or by entering into this contract of Insurance, the Insured Person consents to the Company processing data relating to the Insured Person for providing insurance products and services, legal, administrative and management purposes and in particular to the processing of any sensitive personal data relating to the Insured Person.

The Insured Person consents to the Company making such information available to third parties including but not limited to any Group Company, those who provide products or services to the Insurer or any Group Company, and regulatory authorities, within and outside the Insured Person's country of domicile.

II. Plans and Table of Benefits

2.1 Insurance Plan

Travel Insurance Certificate states the “Insurance Plan” purchased. The “Insurance Plan” names are as follows:

1. Platinum
2. Gold
3. Schengen

2.2 Platinum Plan

Excluding USA/Canada:

Scope /Territory: 24 Hours / While on travel outside Country of Residence, but excluding United States of America, Canada, Afghanistan, Iraq, Cuba, Iran, Sudan, Syria, Crimea region, and North Korea

Worldwide:

Scope /Territory: 24 Hours / While on travel outside Country of Residence, but excluding Afghanistan, Iraq, Cuba, Iran, Sudan, Syria, Crimea region, and North Korea

2.2.1 Table of Benefits

Insured Event	Sum Insured
Section 1 - Personal Accident Benefits	Principal Sum Insured: \$25,000
Accidental Death (Common Carrier)	100% of the Principal Sum Insured
Section 2 - Medical and Related Benefits	
Emergency Medical Expenses	\$55,000
Deductible (70 years - 75 years)	\$250
Deductible (3 months - 69 years)	\$100
Dental Expenses	\$1,000
Per Tooth	\$200
Emergency Medical Evacuation	Included under Emergency Medical Expenses
Repatriation of Remains	\$55,000
Section 3 - Travel Inconvenience Benefits	
Baggage Loss (Common Carrier)	\$1,000
Per Bag	\$500
Per Item	\$50
Baggage Delay	\$50 per hour up to \$250
In Excess	4 hours
Personal Liability	\$500,000
Emergency Family Travel and Convalescence Cost	\$2,500
Loss of Passport	\$500
Trip Cancellation or Curtailment	\$200
Return of Companion / Spouse / Children	\$2,500
Assistance Department (24 Hours / Worldwide Services)	Covered
Medical Evacuation Transportation Assistance	Free of Charge
Physician, Hospital, Dental, Vision Referrals	Free of Charge

Insured Event	Sum Insured
Medical Monitoring	Free of Charge
Travel Document Requirements	Free of Charge
Immunization Requirements	Free of Charge
Medical & Safety Advisories	Free of Charge
Currency and ATM Locations	Free of Charge
Cash Transfer Assistance	Free of Charge
Lost / Stolen Travel Documents / Tickets	Free of Charge
Embassy or Consulate Information	Free of Charge
Telephone Interpretation	Free of Charge
Baggage Tracking and Assistance	Free of Charge
Legal Referrals Assistance	Free of Charge
Urgent Message Relay to Family or Business Contact	Free of Charge
Flight, Hotel, Car Re-Bookings	Free of Charge
Emergency Return Travel Arrangements	Free of Charge

Family includes Insured Person, Spouse and unlimited number of Children.

An individual policy purchased by a Child is charged 50% of the premium charged for adults.

Children are covered for 10% of the Insured Person Sum Insured and up to a maximum of \$10,000 under Accidental Death.

2.3 Gold Plan

Excluding USA/Canada:

Scope /Territory: 24 Hours / While on travel outside Country of Residence, but excluding United States of America, Canada, Afghanistan, Iraq, Cuba, Iran, Sudan, Syria, Crimea region, and North Korea

Worldwide:

Scope /Territory: 24 Hours / While on travel outside Country of Residence, but excluding Afghanistan, Iraq, Cuba, Iran, Sudan, Syria, Crimea region, and North Korea

2.3.1 Table of Benefits

Insured Event	Sum Insured
Section 1 - Personal Accident Benefits	Principal Sum Insured: \$25,000
Accidental Death (Common Carrier)	100% of the Principal Sum Insured
Section 2 - Medical and Related Benefits	
Emergency Medical Expenses	\$50,000
Deductible (70 years - 75 years)	\$250
Deductible (3 months - 69 years)	\$100
Dental Expenses	\$1,000
Per Tooth	\$200
Emergency Medical Evacuation	Included under Emergency Medical Expenses
Repatriation of Remains	\$5,000
Section 3 - Travel Inconvenience Benefits	
Assistance Department (24 Hours / Worldwide Services)	Covered
Medical Evacuation Transportation Assistance	Free of Charge
Physician, Hospital, Dental, Vision Referrals	Free of Charge
Medical Monitoring	Free of Charge
Travel Document Requirements	Free of Charge
Immunization Requirements	Free of Charge
Medical & Safety Advisories	Free of Charge
Currency and ATM Locations	Free of Charge
Cash Transfer Assistance	Free of Charge
Lost / Stolen Travel Documents / Tickets	Free of Charge
Embassy or Consulate Information	Free of Charge
Telephone Interpretation	Free of Charge
Baggage Tracking and Assistance	Free of Charge
Legal Referrals Assistance	Free of Charge
Urgent Message Relay to Family or Business Contact	Free of Charge
Flight, Hotel, Car Re-Bookings	Free of Charge
Emergency Return Travel Arrangements	Free of Charge

Family includes Insured Person, Spouse and unlimited number of Children.

An individual policy purchased by a Child is charged 50% of the premium charged for adults.

Children are covered for 10% of the Insured Person Sum Insured and up to a maximum of \$10,000 under Accidental Death.

2.4 Schengen Plan

Schengen:

Scope /Territory: 24 Hours / While on travel in Schengen countries, outside Country of Residence

2.4.1 Table of Benefits

Insured Event	Sum Insured
Section 1 - Personal Accident Benefits	Principal Sum Insured: \$20,000
Accidental Death (Common Carrier)	100% of the Principal Sum Insured
Section 2 - Medical and Related Benefits	
Emergency Medical Expenses	\$50,000
Deductible (70 years - 75 years)	\$250
Deductible (3 months - 69 years)	\$100
Dental Expenses	\$1,000
Per Tooth	\$200
Emergency Medical Evacuation	Included under Emergency Medical Expenses
Repatriation of Remains	\$5,000
Section 3 - Travel Inconvenience Benefits	
Assistance Department (24 Hours / Worldwide Services)	Covered
Medical Evacuation Transportation Assistance	Free of Charge
Physician, Hospital, Dental, Vision Referrals	Free of Charge
Medical Monitoring	Free of Charge
Travel Document Requirements	Free of Charge
Immunization Requirements	Free of Charge
Medical & Safety Advisories	Free of Charge
Currency and ATM Locations	Free of Charge
Cash Transfer Assistance	Free of Charge
Lost / Stolen Travel Documents / Tickets	Free of Charge
Embassy or Consulate Information	Free of Charge
Telephone Interpretation	Free of Charge
Baggage Tracking and Assistance	Free of Charge
Legal Referrals Assistance	Free of Charge
Urgent Message Relay to Family or Business Contact	Free of Charge
Flight, Hotel, Car Re-Bookings	Free of Charge
Emergency Return Travel Arrangements	Free of Charge

Family includes Insured Person, Spouse and unlimited number of Children.

An individual policy purchased by a Child is charged 50% of the premium charged for adults.

Children are covered for 10% of the Insured Person Sum Insured and up to a maximum of \$10,000 under Accidental Death.

III. Definitions

In this Policy the following definitions apply:

Accident means a sudden unexpected and specific event caused solely and directly by violent, external and visible means which occurs at an identifiable time and place, resulting in Injury.

Accidental Death means a sudden, unexpected and specific event caused solely and directly by violent, external and visible means which occurs at an identifiable time and place, resulting in death.

AIDS mean an opportunistic infection or a malignant neoplasm. For the purpose of this definition, the term "Acquired Immune Deficiency Syndrome" shall have the meaning assigned to it by the World Health Organization "Acquired Immune Deficiency Syndrome" shall include H.I.V. (Human Immune Deficiency Virus), encephala (dementia) or H.I.V. wasting syndrome.

Beneficiary means the person or persons nominated by the Insured Person as stated on the Travel Insurance Certificate. If no Beneficiary is stated on the Travel Insurance Certificate, Beneficiary will be the legal heirs of the Insured Person and if "Family Plan" is selected, then the Beneficiary, in case of death of the Spouse or the child, is the Insured Person.

Children means the Insured Person's dependent children who are not in full-time employment and who are between the ages of 3 months and 18 years (or under the age of 23 years provided they are in full-time education), unmarried, not pregnant, without children and primarily dependent on the Insured Person for support.

Common Carrier means any air, land, or water motorized conveyance operated in accordance with all locally applicable laws and regulations and under a valid license for the transportation of passengers for hire for which a ticket has been issued and in which the Insured is travelling only as a fare-paying passenger, including taxis and hired motor vehicles but excluding minibuses, non-standard motor vehicles and non-pressurized single engine piston aircraft. Common Carrier will not mean cruise ships at sea or any conveyance that is hired or used for a sport, gamesmanship, contest and/or recreational activity, regardless if such conveyance is licensed, such as, but not limited to, race cars, bob sleds, hunting vehicles, sightseeing helicopters, fishing boats, parasailing/paragliding and boat cruises.

Contact Sport means any sport in which physical contact between players is an accepted part of play.

Company / Insurer / We means GIG Fajr AL Gulf Insurance

Country of Residence means the country in which the Insured Person is currently residing and holding a valid residency visa.

Day means a period of 24 consecutive hours including the day of admission but excluding the day of discharge.

Emergency Evacuation means: (a) the Insured Person medical condition warrants immediate transportation from the place where he is injured or sick to the nearest Hospital where appropriate medical treatment can be obtained; (b) after being treated at a local Hospital, his medical condition warrants transportation to the country where the trip commenced to obtain further medical treatment or to recover; or (c) both (a) and (b) above.

Excess or Deductible means the first amount, or period, of each and every loss payable by the Insured Person.

Expiry Date means the policy expiry date stated in the Travel Insurance Certificate.

Hazardous Sports means skiing, land-skiing, mono-skiing, cross-country skiing, heli-skiing, off-piste skiing (only when accompanied by an official guide), ice skating (no speed skating), snowboarding, ski boarding, sledging, tobogganing, fishing, sail boarding, sailing, surfing, water skiing, wind surfing, trekking.

Hospital means a place that:

- (a) holds a valid license (if required by law);
- (b) operates primarily for the care and treatment of sick or injured persons;
- (c) has a staff of one or more physicians available at all times;
- (d) provides 24-hour nursing service and has at least one registered professional nurse on duty at all times;
- (e) has organized diagnostic and surgical facilities, either on premises or in facilities available to the hospital on a pre-arranged basis; and
- (f) is not, except incidentally, a clinic, nursing home, rest home, or convalescent home for the aged, or a facility operated as a drug and/or alcohol treatment center.

Illness / Sickness means any fortuitous sickness or disease contracted, commencing or first manifesting itself during an Insured Journey.

Inception Date means the policy effective date stated in the Travel Insurance Certificate.

Injury means bodily injury caused solely and directly by violent, accidental, external and visible means occurring during the Insured Period.

Insurance Plan means plans, as stated under Section 2.1, that are available to the Insured Person.

Insured Card means all Credit Cards held by the Insured Person (s) but not by those under 18 years of age.

Insured Event means an event stated in the purchased plan's Table of Benefits in Section 2.

Insured Journey means a journey commencing at the time when the Insured Person leaves his Country of Residence to travel outside the territorial limits of the Country of Residence in a direct, uninterrupted manner, including the return journey to his home address in his Country of Residence. The Insured Journey should start and end in the Insured Person's Country of Residence and within the time frame of the Period of Coverage.

Insured Person means the person aged between 3 months and 70 years with an optional extension to 75 years, whose name appears on the Travel Insurance Certificate, and who pays for the required premium.

For "Family Plan", Insured Person will mean the person whose name appears as the Insured Person on the Travel Insurance Certificate, Spouse, and Children whose names also appear on the Travel Insurance Certificate.

This Policy offers coverage only to individuals ordinarily resident in Lebanon and is null and void as to

nonresidents of Lebanon.

Loss means the act or instance of losing and / or the disappearance of something cherished and / or a measurable reduction in some substance or process.

Manual Labor means physical labor involving the use of hands or the use or operation of mechanical or non-mechanical machinery or equipment.

Medical Expenses means all Reasonable and Customary Charges for Illness or Injury on an Insured Journey resulting in hospitalization, surgical or other diagnostic or remedial treatment given or prescribed by a Medical Practitioner.

Medical Practitioner means a person registered with a current, legal license to practice medicine, but excludes an Insured Person or Insured Person's Relative.

Medical Treatment means a Medical Practitioner's medical advice, treatment, consultations and prescribed or repeat maintenance medication.

Medically Necessary means in the Company's opinion, the Physician's recommendation is:

- (a) Consistent with the symptoms, diagnosis and treatment of the Insured Person's condition;
- (b) Appropriate with regards to standards of good medical practice;
- (c) Its primary purpose is not for the convenience of the Insured Person.

Period of Coverage means the period chosen by the Insured Person as per the Travel Insurance Certificate.

Personal Effects means spectacles, dentures, purses, wallets, cosmetics, mobile phone and other personal effects normally worn or carried on the person.

Physician means a legally licensed practitioner acting within the scope of his license practicing medicine, and concerned with maintaining or restoring human health through the study, diagnosis, and treatment of disease and injury. The attending Physician may not be:

- (a) the Insured Person; nor
- (b) the Insured Person's Relative.

Point of Departure means the point from which an Insured Person commences an Insured Journey, from within the territorial limits of his Country of Residence.

Policy means this document and Travel Insurance Certificate.

Pre-Existing Medical Conditions means a condition for which medical care, treatment, or advice was recommended by or received from a Physician within a two (2) year period preceding the Inception Date, or a condition for which hospitalization or surgery was required within a five (5) year period preceding the Inception Date.

Professional Player means an Insured Person who earns in excess of 50% of his income from playing sport or who participates in a sport that remunerates him as a means of livelihood.

Reasonable and Customary Charges means the charges which: (a) are medically required for the treatment, supplies or medical service to treat an Insured Person's condition; (b) do not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the

expenses are incurred, and (c) do not exceed the charges for treatment that would have been made if no insurance existed.

Related Expenses means additional accommodation and traveling expenses, excluding telephone costs, meals and beverages of necessity incurred by any one person, who on the advice of a Medical Practitioner appointed by the Company remains with or escorts the Insured Person until completion of his Insured Journey or until he resumes the Insured Journey or returns to the Point of Departure, whichever occurs first.

Relative means a Spouse, parent, parent-in-law, grandparent, step-parent, Children, grandchild, brother, brother-in-law, sister, sister-in-law, daughter-in-law, son-in-law, half-brother, half-sister, aunt, uncle, niece, or nephew of the Insured Person.

Sum Insured means the maximum amount afforded to each benefit according to the Table of Benefits.

Ski Equipment means skis, poles, boots and bindings, snow boards or ice skates.

Spouse wherever used in the policy shall mean the Insured Person's legally married husband or wife between the ages of 18 years and 70 years with an optional extension to 75 years.

Table of Benefits means the benefit tables shown in Section 2.

Terrorist Act means any actual or threatened use of force or violence directed at or causing damage, Injury, harm or disruption, or commission of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator/s and victim/s shall not be considered Terrorist Acts. 'Terrorist Act' shall also include any act which is verified or recognized as an act of terrorism by the (relevant) government of the country where the act occurs.

Third Party means any person other than the Insured Person, his spouse or common-law partner, child, parent, friend or relative.

Transportation means any land, water or air conveyance required to transport the Insured Person during an Emergency Evacuation. Transportation includes, but is not limited to, air ambulances, land ambulances and private motor vehicles.

Travel Companion means a person with whom the Insured Person travels with during the Insured Person's trip and shares the same accommodations; including but not limited to a Spouse, Child or other family member.

Travel Insurance Certificate means the certificate which shows the Inception Date of the Policy, Expiry Date of the Policy, Period of Coverage, and Table of Benefits.

War means war, whether declared or not, or any warlike activities (including use of military force) by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

IV. Benefits

4.1 Personal Accident Benefits

4.1.1 Accidental Death (Common Carrier)

If a covered Injury results in death of an Insured Person within one hundred eighty (180) days after the date of the accident, the Company will pay the compensation as stated in the Table of Benefits. Injury must occur while the Insured Person is riding as a passenger in or on, boarding or alighting from, a Common Carrier.

4.2 Medical and Related Expenses Benefits

4.2.1 Emergency Medical Expenses (Accident & Sickness)

If an Insured Person whilst traveling on an Insured Journey incurs Medical Expenses as a result of Illness or Injury, the Company will reimburse for those expenses up to the amount as stated in the Table of Benefits.

4.2.1.1 Specific Conditions

- 1 Medical Expenses as a result of emergency dental treatment are limited to dentistry received within 30 days of the Accident.
- 2 Medical and Related Expenses shall only be paid until such time as a Medical Practitioner appointed by the Company decides that an Insured Person is capable of being repatriated. If the Insured Person is capable of being repatriated and elects not to return to the Point of Departure, all expenses incurred in respect of the occurrence including those prior to the date of possible repatriation will be from the Insured Person's own account.

4.2.1.2 Specific Exclusions

The Company will not pay for any medical expenses:

- 1 incurred for continuing treatment, including any medication commenced prior to the commencement date of the Insured Journey, which the Insured Person has been advised to continue whilst on an Insured Journey; or
- 2 incurred due to investigatory treatment that is not specified by a Medical Practitioner as immediately necessary; or
- 3 for fillings or crowns of precious metal; or
- 4 for any procedures relating to dental or oral hygiene; or
- 5 for specialist Medical Treatment without referral from a Medical Practitioner; or
- 6 relating to contraceptive devices, prosthetic devices, medical appliances or artificial aids; or
- 7 for preventative treatment, including but not limited to any vaccination and/or immunization; or
- 8 Incurred in Country of Residence

4.2.2 Dental Expenses

The Company will reimburse for emergency dental treatment to restore dental function or alleviate pain provided by a registered and legally qualified dentist. Where dentistry to restore dental function or alleviate pain is required as a result of Illness or Injury whilst on an International Journey, these expenses will form part of the benefit amount as stated in the Table of Benefits with per tooth limit of \$200.

4.2.3 Emergency Medical Evacuation

The Company will reimburse the usual Reasonable and Customary charges up to the maximum shown in the Table of Benefits shown above or covered expenses incurred if Injury or Sickness results in the Insured Person necessary Emergency Evacuation. An Emergency Evacuation must be ordered by the Assistance Department or a Physician who certifies that the severity or the nature of the Insured Person Injury or Sickness warrants his Evacuation.

Covered expenses are those for Transportation and medical treatment, including medical services and medical supplies necessarily incurred in connection with the Emergency Evacuation. All Transportation arrangements made for evacuating the Insured Person must be by the most direct and economical route possible. Expenses for Transportation must be: (a) recommended by the attending Physician; (b) required by the standard regulations of the conveyance transporting; and (c) arranged and authorized in advance by the Assist Service.

4.2.4 Repatriation of Remains

The Company will reimburse benefits up to the amount stated in the Table of Benefits as shown for covered expenses reasonably incurred to return the Insured Person's body to his country of origin if he dies.

Covered expenses include, but are not limited to, expenses for: (a) embalming; (b) cremation; (c) coffins; and (d) transportation.

4.3 Travel Inconvenience Benefits

4.3.1 Baggage Loss (Common Carrier) (Schengen and Gold Plan Excluded)

The Company will reimburse the Insured Person, subject to any Excess, up to the Sum Insured stated in the Table of Benefits for the replacement cost of his baggage and its contents due to theft or Loss by a Common Carrier while the Insured Person was a ticketed passenger on the Common Carrier during the trip.

4.3.1.1 Specific Conditions

- (a) The Sum Insured payable in respect of any one article shall not exceed the Sum Insured shown on the Table of Benefits;
- (b) The Company may make payment or, at its own discretion and as it may elect, reinstate or repair articles not older than one year;
- (c) The Company may at its own discretion elect to reinstate or repair more than one year old articles or make payment subject to due allowance of wear and tear and depreciation;
- (d) Loss or damage must occur:
 - i. while the baggage or items inside the baggage is/are a Common Carrier and proof of such Loss must be obtained in writing from the Common Carrier management and such proof must be provided to the Company; or
 - ii. as a result of theft of the baggage or items inside the baggage provided that such Loss is reported to the police having jurisdiction at the place of the Loss no more than twenty-four (24) hours from the time of the incident. Any claim must be accompanied by written report/documentation from such police;
- (e) The Insured Person must take every possible step to ensure that the baggage or items inside the baggage are not left unattended.
- (f) Benefits for baggage and items inside the baggage will be in excess of all other valid and collectible insurance. If, at the time of any Loss, there is another valid and collectible insurance in place, the Company will only be liable for the exceeding difference between its Sum Insured and the other insurance's Sum Insured subject to any applicable Excess.
- (g) Benefits for baggage and items inside the baggage will be in Excess of any Sum Insured paid or payable by a Common Carrier or other third party responsible for the Loss.
- (h) Any Loss or theft must be documented by a police or other local authority report or documentation and shall be obtained by the Insured Person.
- (i) In case of Loss to a pair or set, the Company may elect to:
 - i. Repair or replace any part, to restore the pair or set to its value before the Loss; or
 - ii. Reimburse the difference between the cash value of the property before and after the Loss.
- (j) There is a per bag and a per item maximum limit stated in the Table of Benefits. Any or all of the following items are subject to a maximum limit of 10% of the Baggage Loss amount stated in the Table of Benefits: jewelry, watches, articles consisting in whole or in part of silver, gold or platinum, furs, articles trimmed with or made mostly of fur, and cameras, including related camera equipment, computers and electronic equipment.

4.3.1.2 Specific Exclusions

The Company will not be liable to reimburse any Sum Insured for:

1. The following classes of property: animals, birds, fish, motor vehicles (including accessories), motorcycles, boats, motors, any conveyance, snow skis, household effects, antiques, computers (including software and accessories), contact or corneal lenses or eyeglasses, artificial teeth or limbs or dental bridges, prosthetic limbs, hearing aids, music instruments, perishables, consumables, money, securities, tickets or documents, mobile or laptops;
2. Loss or damage caused by wear and tear, gradual deterioration, moths, vermin, inherent vice;
3. Damage sustained due to any process to repair, clean or alter any property;
4. Loss of or damage to hired or leased equipment;
5. Loss of or damage to property resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, or action taken by government authorities in hindering, combating or defending against such an occurrence, seizure or destruction under quarantine or customs regulation, confiscation by order of any government of public authority or risk of contraband or illegal transportation or trade, radioactive contamination;
6. Loss or damage to laptop computers recoverable under another insurance or from another source;
7. Loss of Insured Person baggage left unattended in any vehicle or public place or as a result of the Insured Person failure to take due care and precautions for the safeguard and security of such property;
8. Loss of the Insured Person's baggage, souvenirs or articles sent in advance or mailed or shipped separately;
9. Loss of business goods or samples;
10. Loss of data recorded on tapes, cards, discs or otherwise;
11. Loss of or damage to property resulting directly or indirectly from confiscation or expropriation by order of any government or public authority;
12. Loss of or damage to property resulting directly or indirectly from seizure or destruction under quarantine or custom regulation;
13. Transporting contraband or illegal trade;
14. Mysterious disappearance;
15. Breakage or damage of baggage or contents
16. Pilferage or missing contents from baggage

4.3.2 Baggage Delay (Schengen and Gold Plan Excluded)

The Company will reimburse the Insured Person for reasonable essential expenses incurred following the Excess period and up to the amount stated in the Table of Benefits, for the emergency purchase of essential items if his baggage is delayed, misdirected or temporarily misplaced by a carrier.

4.3.2.1 Specific Conditions

1. Written proof of delay from the transport provider must be submitted with any claim and the Company's liability is subject to it receiving original receipts for the essential expenses incurred.
2. The baggage delay must exceed the Excess.

- 3 Confiscation or requisition by customs or other government authority cannot form the basis of a claim for loss or expenses.
- 4 Claims in respect of essential clothing or requisites purchased as a result of delayed baggage will only be considered if items have been purchased within 4 days after the actual arrival time at the intended destination.
- 5 If baggage appears to be delayed or lost at the destination airport, the Insured Person must formally notify the relevant carrier airline immediately. Evidence of notification should be provided

4.3.3 Personal Liability (Schengen and Gold Plan Excluded)

The Company will reimburse all damages, compensation and legal expenses for which the Insured Person becomes legally liable up to the amount stated in the Table of Benefits under the plan opted for as a result of his actions causing:

- 1 Injury, including resultant death, of another person;
- 2 Loss of or damage to property.

4.3.3.1 Specific Conditions

- 1 It is a condition of payment that the Insured Person not admit fault or liability to any other person without the Company's prior written consent.
- 2 No offer, promise, payment or indemnity may be made by the Insured Person without the Company's prior written consent.
- 3 The Insured Person must give the Company written notice with full particulars of an event that may give rise to a claim within 30 days of the conclusion of an Insured Journey.
- 4 Every letter, writ, summons and process must be forwarded to the Company as soon as possible.
- 5 The Company is entitled to take over the defense and settlement of claim in the name of the Insured Person for the Company's benefit. The Company shall have full discretion in the conduct of any proceedings and settlement of the claim.
- 6 The Company may at any time pay the Insured Person the amount for which a claim can be settled less any damages already paid. The Company will then be under no further liability other than for costs and expenses incurred prior to making such payment.
- 7 No indemnity will be provided for legal liability arising from Injury or loss as a result of any willful or malicious act of the Insured Person.

4.3.3.2 Specific Exclusions

The Company will not pay damages, compensation or legal expenses in respect of any liability directly or indirectly arising out of or in connection with:

- 1 Injury to the Insured Person or to any member of his family ordinarily residing with him; or
- 2 Injury to the Insured Person or his employees arising out of or in the course of employment; or
- 3 loss of or damage to property owned by or in control of the Insured Person or any member of his family ordinarily residing with him; or
- 4 the ownership, possession or use by or on behalf of the Insured Person of any caravan, mechanically propelled vehicle (other than golf carts and motorized wheelchairs), aircraft or other aerial device, hovercraft (other than hand-propelled or sailing craft in territorial waters) or animals; or
- 5 loss of or damage to property or Injury arising out of the Insured Person's profession, business or trade, or out of professional advice given by him; or
- 6 any contract unless such liability would have arisen in the absence of that

- contract; or
- 7 judgments which are not in the first instance either delivered by or obtained from a court of competent jurisdiction within the country where the Policy has been issued or the country in which the event occurred giving rise to the Insured Person's liability; or
- 8 any claim for fines, penalties, punitive, exemplary, aggravated or vindictive damages.

4.3.4 Emergency Family Travel (Schengen and Gold Plan Excluded)

If the Insured Person is hospitalized for more than 5 days following a covered hospitalization during the Insured Person trip, the Company will reimburse up to the amount stated in the Table of Benefits for:

1. The cost of round-trip economy airfare to bring a person chosen by the Insured Person to and from the Insured Person bedside if the Insured Person is alone during his trip.
2. The reimbursement of the Hotel room charge due to convalescence after the Insured Person Hospital discharge, which has been approved by the Assistance Department up to a daily amount and total maximum amount stated in the Table of Benefits.

These expenses must be authorized in advance by the Assistance Department.

Benefits will not be provided for any expenses provided by another party at no cost to the Insured Person or already included in the cost of the trip.

4.3.5 Loss of Passport (Schengen and Gold Plan Excluded)

The Company will reimburse costs incurred by the Insured Person limited to fees, penalties and courier charges towards replacement of travel documents in lieu of lost passport as per amount stated in the Table of Benefits, under plan opted for and subject to letter intimating loss of passport acknowledged by appropriate authorities.

4.3.5.1 Specific Exclusions

1. Impounding of Passport by any authorities
2. If the loss is recoverable under other insurance or recoverable from other source.

4.3.6 Trip Cancellation or Curtailment (Schengen and Gold Plan Excluded)

The Company will reimburse up to the overall limit shown on the Table of Benefits, for travel and accommodation expenses that the Insured Person has paid or has agreed to pay under a contract and which the Insured Person cannot get back, if it is necessary and unavoidable for the Insured Person to cancel or cut short the Insured Journey as a result of the following:

1. The Insured Person dying, becoming ill or injured.
2. The death, injury or illness of a relative, close Business Associate or a person with whom the Insured Person has booked to travel or a Relative or friend living abroad with whom the Insured Person plans to stay.
3. If the Insured Person is called for jury service (and the Insured Person requests to defer has been rejected), attending court as a witness (but not as an expert witness) or the Insured Person is put in compulsory quarantine.
4. If the police or the Insurers of the Insured Person home needs the Insured Person to stay after a fire, flood or burglary at the Insured Person home within 48 hours before the date the Insured Person planned to leave.
5. The extra cost for the Insured Person to return home following the death, serious injury or serious illness of a relative in the Insured's Person Country of Residence.

4.3.6.1 Specific Conditions

Cover starts at the time the Insured Person books the Insured Journey or pays the insurance premium, whichever is later. If the Insured Person has arranged a Multi-Trip Policy, cover starts at the time that the Insured Person booked the Insured Journey or the Inception Date shown on the Travel Insurance Certificate, whichever is later.

4.3.6.2 Specific Exclusions

1. The Insured Person not wanting to travel.
2. Any extra costs resulting from the Insured Person not telling any provider, as soon as the Insured Person knew about cancelling the International Journey
3. Canceling or cutting short the Insured Journey because of a medical condition or any illness related to a medical condition that the Insured Person knew about or should have known about before the start of this insurance. This applies to the Insured Person, a Relative, close Business Associate or person the Insured Person is traveling with and any person the Insured Person was depending on for the Trip.
4. The cost of the Insured Person original return trip if this has already been paid and the Insured Person need to cut short the Trip.
5. If the Insured Person has to cut short the Insured Journey and do not return to the Country of Residence.
6. Failure to obtain the required visa.
7. Any costs incurred due to fluctuation in exchange rates.
8. Any loss incurred where payment has been made using reward schemes.

4.3.6.3 Specific Definitions

Business associate means any person who works at the Insured Person's place of business and who, if was away from work with the Insured Person at the same time for one or more days, would prevent the effective continuation of that business.

Relative mean husband, wife, partner, grandparent, grandchild, parent, parent-in-law, brother, sister, son, daughter, fiancé or fiancée.

4.3.7 Return Of Travel Companion / Spouse / Children (Schengen and Gold Plan Excluded)

If the Insured Person is hospitalized during the Insured Person trip for more than 5 days, the Company will reimburse up to the amount stated in the Table of Benefits for the cost for of a one way economy return ticket to bring back to the country of residence one Travel Companion or Spouse or Child traveling with the Insured Person during the Insured Person trip.

These expenses must be authorized in advance by the Assistance Department.

Benefits will not be provided for any expenses provided by another party at no cost to the Insured Person or already included in the cost of the trip.

4.3.8 Assistance Department

The Assistance Department provides emergency assistance services, including medical, technical and general services as listed below. Insured Persons may contact the Assistance Department at **+1 817 826 7276** twenty four (24) hours a day.

- **Medical Evacuation Transportation Assistance:** The Assistance Department shall arrange and coordinate the medical evacuation by means of air transportation, including but not limited to commercial air transportation with or without medical escort, air ambulance transport and /or, if appropriate, other forms of transportation of an Insured Person from a foreign hospital or health care facility to another foreign hospital or health care facility, or to a hospital or health care facility in the Insured Person's Country of Residence, when a physician designated by the Assistance Department to monitor the Insured Person's condition and treatment deems such an evacuation or transportation necessary in his/her professional judgment. The Assistance Department shall use its best efforts to ensure that all services so arranged are with Medical Service Providers that meet the professional standards of the country and city in which the evacuation will originate. The Assistance Department will pay reasonable costs on Insured Person's behalf up to the policy limits issued by the Insurer.
- **Physician, Hospital, Dental, Vision Referrals:** The Assistance Department shall provide the Insured Person(s) with the name, address, telephone number, office hours and English language translation assistance for medical and health care professionals in any worldwide location reasonably requested by the Insured Person(s): physicians, hospitals, ambulance, and other emergency medical service (collectively, Medical Service Providers). Whenever the Assistance Department has sufficient information to do so, it shall refer the Insured Person(s) to two or more such Medical Service Providers, set appointments, translate if needed, and coordinate with the Insured Person(s)'s primary medical insurer. The Assistance Department shall use its reasonable best efforts to ensure that its medical referrals are to Medical Service Providers who meet the professional standards of the country and city in which they are located. The Assistance Department will make its reasonable best efforts to pre-negotiate fees for services with Medical Service Providers, steer Insured Person(s) of the Insurer to Medical Service Providers in-network, and to arrange direct billing with its Medical Service Providers whenever possible for expenses incurred by the Insured Person(s) of the Insurer. The Assistance Department will use every effort to supply a qualified Medical Reference within 24 hours of the initial request, however when this is not possible, Assistance Department cannot be held responsible for circumstances beyond its control. In all instances, the Assistance Department will notify the Insured Person(s) of the status of the request within this time frame.
- **Medical Monitoring:** Following all medical referrals or other assistance to a Insured Person in connection with a medical emergency, the Assistance Department shall monitor the Insured Person's medical condition and treatment until the Insured Person is released from treatment or returns home.
- **Travel Documentation Requirements:** Advice on procuring travel documents, passport/visa requirements, and customs entry/exit restrictions and regulations.

- **Immunizations Requirements:** Advice on the immunizations required for the trip, information on local medical advisories, epidemics, and available preventive measures.
- **Medical & Safety Advisories:** The Assistance Department will provide the most up-to-date information regarding safety concerns, medical advisories, epidemics, immunizations and preventative measures in the desired location.
- **Currency and ATM Locations:** Currency exchange rates are available, as well as information on local bank/government holidays.
- **Cash Transfer Assistance:** The Assistance Department will help customers obtain cash advances in local or US currency for medical emergencies or other travel needs based on a personal source of funds.
- **Lost/Stolen Travel Documents/Tickets:** In the event a traveler's personal travel documents are lost or stolen, Insured Person(s) can expect help with obtaining replacement and canceling original documents, including making alternate reservations and arranging for replacement airline/rail tickets when needed. The Assistance Department shall use its best effort to assist the Insured Person in locating lost documents (including, but not limited to lost passports and visas), and upon request, to replace such documents by identifying and contacting appropriate governmental authorities, gathering necessary information, and otherwise taking all reasonable steps necessary to facilitate the replacement of the lost documents in a prompt and timely manner.
- **Embassy or Consulate Information:** Embassies and consulates are excellent sources for information and assistance to customers while traveling. The Assistance Department will provide the customer the address and phone number of the local embassy or consulate.
- **Telephone Interpretation:** For travelers in an emergency medical situation who do not speak the local language, multilingual counselors are available 24 hours a day, seven days a week, for translations via telephone.
- **Baggage Tracking and Assistance:** Insured Person whose luggage or personal effects are lost or stolen can expect help with local authorities and agencies. The Assistance Department shall coordinate with common carriers to locate and recover lost or stolen luggage which shall involve the use of all available tracking systems and establishing, on the Insured Person's behalf and, as appropriate, liaison with transportation carriers, airports, hotels, government authorities and others. The Assistance Department will also coordinate arrangements to assist the Insured Person with processing of insurance claims resulting from the lost luggage.
- **Legal Referrals Assistance:** The Assistance Department will provide the customer with convenient legal referrals in his/her general area.
- **Urgent Message Relay to Family or Business Contact:** The Assistance Department will assist with contacting family or friends in the event of an emergency situation while the customer is traveling.

- **Flight, Hotel, Car Re-Bookings:** The Assistance Department can assist in re-booking current reservations in the event of a flight cancellation, delay or schedule change.
- **Emergency Return Travel Arrangements:** In the event of an emergency, the Assistance Department is available to assist 24/7 with making hotel, flight and car rental arrangements to assist the customer in returning home.
- **Global Weather:** General climate and up-to-date weather forecasting for domestic and international destinations.
- **Repatriation of Remains Assistance:** When Assistance Department is notified that an Insured Person has died while traveling, the Assistance Department will verify that insurance applicable to repatriation of remains is in force. Subject to any governmental regulations, the Assistance Department will also assist in making all necessary arrangements for the return of the Insured Person's remains to the place designated by the Insured Person's next-of-kin. The Assistance Department will pay on Insured Person's behalf reasonable costs up to the policy limits issued by the Insurer. Any expense associated with the repatriation of the Insured Person's remains over the amount available through Insurance will be the sole responsibility of person(s) acting on the deceased Insured Person's behalf.
- **Advance Payment of Medical Expenses:** When it is deemed medically appropriate, the Assistance Department will advance up to the amount allowed in the Policies issued to the Insured Person(s) for the payment of medical expenses. Any determination by the Assistance Department to advance such amounts will be based on advise and approval from the Insurer. If there is no coverage, or if coverage is insufficient under the Insurance Plan, any uncovered expense associated with the Insured Person's medical expenses will be the sole responsibility of the Insured Person or of the person (s) acting on the Insured Person's behalf.
- **Guarantee of Hospitalization Fee:** When it is deemed medically appropriate, the Assistance Department will guarantee payment of hospitalization fees up to the amount allowed in the Insurance Plan for hospitalization benefits. Any determination by the Assistance Department to guarantee such amounts will be subject to approval of the same advance from the Insurer in accordance with this Policy. If there is coverage under the Policy issued to the Insured Person by the Insurer, then the Assistance Department will pay up to the maximum amount available under the Policy for hospitalization fees. If there is no coverage, or if coverage is insufficient under the Policy, any uncovered expense associated with an Insured Person's hospitalization will be the sole responsibility of the Insured Person or of the person(s) acting on the Insured Person's behalf.
- **Insurance/Claims Coordination:** In a medical emergency, communication and filing issues between an Insured Person's insurance carriers and providers to settle billing medical expenses will be handled.

4.4 Additional Optional Benefits

4.4.1 Hazardous Sports Benefits [Only applicable if specifically purchased]

In consideration of an additional premium, it is hereby understood and agreed that the Company will pay up to the limit shown on the Table of Benefits under Section 1 and Section 2 for covered accidents, which are caused by Hazardous Sports, to the extent that this hazard is not covered by the policy. This benefit is not applicable for indoor winter sports.

4.4.2 Elder Extension [Only applicable if specifically purchased]

In consideration of an additional premium, it is hereby understood and agreed that Insured Person(s) are covered up to the date of their seventy-fifth (75th) birthday for all the benefits under the Plan selected.

4.4.3 Family Extension [Only applicable if specifically purchased]

IN CONSIDERATION OF AN ADDITIONAL PREMIUM, IT IS HEREBY UNDERSTOOD AND AGREED THAT INSURED PERSON(S)' SPOUSE AND UNLIMITED NUMBER OF CHILDREN ARE COVERED FOR ALL THE BENEFITS UNDER THE PLAN SELECTED.

V. Uniform Exclusions

This policy will not cover any loss, injury, damage or legal liability arising directly or indirectly from:

1. War, invasion, act of foreign enemy, hostilities, civil war, rebellion, revolution, insurrection or military or usurped power, labor disturbances, riot, strike or lock-out. However, the Insured Person will continue to be entitled to be covered for 7 calendar days from the start of the hostilities in case he is surprised by such events abroad insofar as he does not actively participate in them.; nor
2. the intentional use of military force to intercept, prevent, or mitigate any known or suspected Terrorist Act; nor
3. any Terrorist Act or bomb incident or threat thereof; nor
4. the use, release or escape of nuclear materials that directly or indirectly results in ionizing, radiation or contamination by radioactivity from any nuclear fuel or from nuclear weapons materials. For the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission; nor
5. the release, the dispersal or application of pathogenic or poisonous biological or chemical materials; or
6. being in service or on duty with or undergoing training with any military or police force, or militia or paramilitary organization; nor
7. engaging in occupational activities underground or requiring the use of explosives; nor
8. willful or deliberate exposure to danger (except in an attempt to save human life), intentional self-inflicted injury, suicide or attempt thereof; nor
9. deliberate violation of criminal law; nor
10. traveling by air on a legally licensed aircraft and where the Insured Person is acting as pilot or part of the aircraft crew; nor
11. mental disorders including, but not limited to anxiety disorders, eating disorders, psychotic disorders, affective disorders, personality disorders, substance use disorders, somatoform disorders, dissociate disorders, psychosexual disorders, adjustment disorders, organic mental disorders, mental retardation and autism; nor
12. pregnancy and all related conditions, including services and supplies related to the diagnosis or treatment of infertility or other problems related to inability to conceive a child; birth control, including surgical procedures and devices; nor
13. sexually transmitted diseases and the conditions commonly known as AIDS or HIV and/or any related illness or condition including derivatives or variations thereof, howsoever, acquired or caused; nor
14. chronic fatigue syndrome or myalgic encephalomyelitis (M.E.) (anticardiolipin antibody positively) or the illness commonly referred to as yuppie flu; nor
15. a) an Insured Person being under the influence of alcohol with more than the legal limit of alcohol in his blood or breath; or
b) an Insured Person being under the influence of drugs or narcotics unless such drugs or narcotics were administered by a Medical Practitioner or unless prescribed by and taken in accordance with the directions of a Medical Practitioner; or c) an Accident occurring whilst an Insured Person was driving a motor vehicle with more than the legal limit of alcohol in his blood or breath; or d) alcohol abuse, alcoholism, substance abuse, solvent abuse, drug abuse or addictive conditions of any kind; nor
16. (a) any Pre-existing Medical Condition; or
(b) any cardiac or cardio vascular or vascular or cerebral vascular illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto, if the Insured Person has received medical advice or treatment (including medication) for hypertension 2 years prior to the commencement of the Insured Journey; nor

17. congenital anomalies and conditions arising out of or resulting there from, and hernia; nor
18. flying in any aircraft owned, leased or operated by or on behalf of an Insured Person or any member of an Insured Person's household; nor
19. an Insured Person traveling against medical advice or to seek medical attention or advice or with a terminal condition which was diagnosed prior to the Insured Journey or when he is unfit to do so; nor
20. employment involving Manual Labor, other than off duty; or b) undertaking employment on a permanent or contract basis which is not casual, other than whilst on a leisure trip; nor
21. participating in any sport as a Professional Player; or b) school sports (unless an Endorsement has been issued and additional premium charged and authorized by the Company and paid by the Insured Person); nor
22. any hazardous pursuits, sports or activities which introduce or increase the possibility of a loss including but not limited to engaging in motor cycling (where the engine capacity exceeds 200cc or the cycle is under control of an unlicensed driver), steeple-chasing, polo or horseback riding, hunting, bungee jumping, abseiling, white water rafting, hiking (unless accompanied by a recognized guide or on a clearly marked route), mountaineering requiring the use of ropes or equipment, scuba diving (unless licensed or accompanied by a qualified instructor), fighting (except in bona fide self defense), racing (other than on foot or under sail in inland waters), being a crew member on a ship or boat traveling from one country to another, speed or endurance racing or practice thereof (other than athletics), or training for or engaging in contact sports where physical contact between players is an accepted part of play. Skiing, land-skiing, mono-skiing, cross-country skiing, heli-skiing, off-piste skiing, ice skating (no speed skating), snowboarding, ski boarding, sledging, tobogganing or ice skating, fishing, sail boarding, sailing, surfing, water skiing, wind surfing, unless an additional premium has been charged and authorized by the Company and paid by the Insured Person. This remains at the discretion of the Company; nor
23. consequential loss of any kind or financial loss and/or expense not otherwise specifically covered; nor
24. default or insolvency of the carrier; nor
25. the Insured Person's intention to emigrate, unless agreed previously in writing by the Company.
26.
 - a) Planned or actual travel in, to, or through Cuba, Iran, Syria, Sudan, North Korea, or the Crimea region.
 - b) Actual travel in, to, or through Afghanistan or Iraq.
27. Any terrorist or member of a terrorist organization, narcotics trafficker, or purveyor of nuclear, chemical or biological weapons.
28. Heart attack or any heart related condition
29. Any condition arising from tumor or relating to cancer

VI. General Conditions

6.1. Age limits

This Policy covers Insured Events which happen to an Insured Person who is 3 months to 70 years of age with an optional extension to 75 years, at the date of such event on all plans.

6.2. Airlines

The Company will have no liability to pay any benefit in relation to any Insured Event for which the Insured Person may be able to seek compensation from an airline. If the Insured Person proves that he has taken all reasonable and necessary steps to claim from the airline, the Company will pay a pro-rata portion of the benefits. The Company's liability will be calculated by reducing the benefits by the amount for which the Company considers the airline to be liable.

6.3. Currency

All amounts are shown in United States Dollar. If expenses are incurred in a foreign currency the rate of exchange used will be the rate at the time of incurring the expense or suffering a loss.

6.4. Endorsements

This Policy may be extended, amended or altered by the Company issuing an endorsement, provided that the application is made in writing to the Company prior to the expiry of the existing Policy and there are neither existing nor initiated claims on the existing Policy.

6.5. Liability

The Company shall not be liable or responsible for: a) the negligence, wrongful acts and/or omissions of any legal and/or health care professional or any other person or persons or legal entity that provide direct or indirect service to the Insured Person; b) The failure of any agent or broker to explain adequately the terms, conditions, endorsements, terminations and exclusions of this Policy.

6.6. Language

The official version of this Policy is in English. Words in the singular include the plural and vice versa and words in the masculine gender include the feminine gender.

6.7. Marketing

Should any discrepancies arise between the Policy and any literature received by the Insured Person, the Terms, Conditions, Endorsements, Terminations and Exclusions in the Policy will govern in all cases.

6.8. Misrepresentation

This Policy shall be considered void (at the discretion of the Company) in the event of misrepresentation, mis-description or non-disclosure by or on behalf of the Insured Person of any information material to this Policy.

6.9. Other financial products and services

The Company will accept no liability whatsoever for any of the insurance or other financial products or services which are sold in conjunction with this Policy that are provided or underwritten by any other insurance or assurance companies and/or assistance companies and/or financial providers.

6.10. Other insurance

Except for Section 4.1 - Personal Accident, if the Insured Person is able to claim under any other policies (including statutory insurance and/or automatic credit card travel insurance) to be covered for the whole or any part of an Insured Event ("Other Claims"), the Company will only be liable to pay its pro rata portion of the claim submitted in terms of this Policy.

- If in the Company's discretion it decides to pay the claim in full, then it will not be obliged to make payment unless the Insured Person cedes to the Company all of their rights in respect of the Other Claims.
- If the Company has already paid benefits in terms of this Policy, all of the Insured Person's rights in respect of the Other Claims will be ceded automatically to the Company.

- Without limiting any provision of this Policy or any legal obligation, the Insured Person must cooperate fully with the Company in relation to the Other Claim or legal proceedings including: a) not doing anything to prejudice or limit the Company's rights; b) giving the Company whatever information and documents it may require; c) signing any document or affidavit that the Company may request to enable it to exercise its rights.

6.11. Third Party

This Policy is between the Company and the Insured Person only and all of its provisions and conditions are for the sole and exclusive benefit of those parties. Nothing in this Policy, expressed or implied, is intended to confer upon any other person any rights or remedies of any nature whatsoever under this Policy or any of its provisions. Without limitation, no third party shall have any rights under this Policy or any right to receive Policy benefits. Receipt of Benefits paid will be a valid discharge of the Company's liability under this Policy.

This Policy cannot be ceded, assigned or in any way transferred to a third party. Benefits shall be payable only to the Insured Person or his legal representative.

6.12. Table of Benefits

The Table of Benefits referred to in this document is the Table of Benefits as listed in Section 2.

6.13. Country of Issuance Law

This Policy will be governed by the laws of country where the policy has been issued and its courts shall have exclusive jurisdiction to the exclusion of the courts of any other country.

6.14. Subrogation

The Company has the right to commence or take over legal proceedings in the Insured Person's name for the defense or settlement of any claim, or to sue or prosecute any other party to recover monies payable by them at law. The Insured Person must co-operate with the Company and do nothing to hinder the Company's rights.

6.15. Tax or Imposts

The onus will always be on the Insured Person to ensure, correctly admit and pay any tax liability in consideration of any benefit being paid that may incur tax or impost of any nature.

6.16. Personal Information Handling

By providing your Personal Information to the Insurer in connection with your application for insurance, you consent to the collection and processing (including the disclosure and international transfer) of your Personal Information stated in the Privacy Policy. You can also request a copy of the Privacy Policy from the Insurer. To the extent that you have provided (or will provide) Personal Information to the Insurer about any other individual, you certify that you have provided information to the individual about the content of this Privacy Policy and you are authorized to disclose his or her Personal Information to the Insurer as detailed in the Privacy Policy.

6.17. Economic Sanctions Exclusion

If, by virtue of any law or regulation which is applicable to an Insurer, its parent company or its ultimate controlling entity, at the inception of this Policy or at any time thereafter, providing coverage to the Insured is or would be unlawful because it breaches an applicable embargo or sanction, that Insurer shall provide no coverage and have no liability whatsoever nor provide any defense to the Insured or make any payment of defense costs or provide any form of security on behalf of the Insured, to the extent that it would be in breach of such embargo or sanction.

6.18. Consumer Notice Analysis

Insurance Company is subject to compliance with US sanctions laws. For this reason, this policy does not cover any loss, injury, damage or liability, benefits, or services directly or indirectly arising from or relating to a planned or actual trip to or through Cuba, Iran, Syria, Sudan, North Korea, or the Crimea region. In addition, this policy does not cover any loss, injury, damage or liability to residents of Cuba, Iran, Syria, Sudan, North Korea, or the Crimea region. Lastly, this policy will not cover any loss, injury, damage or legal liability sustained directly or indirectly by any individual or entity identified on any applicable government watch lists as a supporter of terrorism, narcotics or human trafficking, piracy, proliferation of weapons of mass destruction, organized crime, malicious cyber activity, or human rights abuses.

VII. Claims Conditions

7.1. Compliance

The Insured Person must follow the Company's advice or instruction otherwise the Company may decline to pay the whole or any part of the claim.

7.2. Legal action

If the Company denies liability for any claim and the Insured Person does not institute legal action and serve summons on the Company (or initiate arbitration proceedings if the Company has agreed to submit to arbitration) within 36 months after such repudiation, all benefits of such claim shall be forfeited.

7.3. Notice of claim and proof of loss

The Insured Person must give the Company notice in writing:

- a) Within 60 days of an Accident which may give rise to a claim under this Policy Any benefit related to death will only be payable if the Company receives written notification of the death within 30 days. The Company shall have the right to have a post mortem examination of the body conducted.
- b) Within 30 days of any other occurrence which may give rise to a claim under this Policy. The Insured Person must, at his own cost, provide whatever certificates, information and documented evidence ("Evidence") is required by the Company regarding the Insured Event.

7.4. Recoveries

All recoveries net of the Company's actual recovery costs will be distributed firstly to the Company for all amounts paid and any remainder will be paid to the Insured Person.

7.5. Fraudulent Claims

If the Insured Person or anyone acting on his behalf uses any fraudulent means or devices to obtain any benefit, then any amount payable in respect of such claim shall be forfeited, the Policy will be cancelled and no Premium will be refunded.

7.6. General

- The Insured Person shall submit to medical examination at the expense of the Company as often as shall be required in connection with any claim. Any report generated as a result of such examination shall be the property of the Company and shall be deemed to be confidential information of the Company.
- Medical Treatment shall be sought and followed promptly on the occurrence of an Injury or Illness and the Company shall not be liable for that part of any claim which in the opinion of a Medical Practitioner arises from the unreasonable or willful neglect or failure of any Insured Person to seek and remain under the care of a qualified Medical Practitioner.
- All claims arising from criminal incidents are to be supported and accompanied by a certified police report.
- The due observance and fulfillment of the Policy insofar as it relates to anything being done or complied with by the Insured Person, shall be a condition precedent to liability to make any payment under this Policy.
- The Company shall have the right to access any current or prior medical records of the Insured Person in order to finalize and/or proceed with the assessment of a claim and/or render medical assistance. By virtue of this clause, the Insured Person shall be deemed to have given the Company written consent to access any of the Insured Person's current or prior medical records.
- No amount payable in terms of this Policy shall bear any interest.