

# Standard travel insurance policy 2018

ref: WTIS Standard 2018

**Single trip** - valid for issue no later than 30th June 2019 in respect of departures on or before 30th June 2020.

**Annual multi-trip** - valid for issue no later than 30th June 2019 in respect of policies starting no later than 31st August 2019.

Provided **You** have paid the appropriate premium as shown in **Your** policy schedule, **You** are covered in accordance with the full wording shown herein up to the limits indicated below for the cover chosen. The limits shown apply per person for each separate **Trip**. The excesses apply for each person and each section of each claim. If **You** have chosen to double **Your** excess this will be shown in **Your** policy schedule and double the excess stated below will apply for each person and each section of each claim.

Benefits schedule	Limits	Excess <sup>+</sup>
1. Cancellation or curtailment/loss of holiday	£1,500	£75 (£35)*
2. Emergency medical expenses <i>including emergency repatriation including Relative's additional expenses including funeral expenses abroad including emergency dental treatment</i>	£2,500,000	£75
	£5,000 £350	Nil Nil
3. Hospital stay benefit (amount per day)	£300 (£10)	Nil
4. Personal Accident - loss of sight, limb(s) or permanent total disablement <i>maximum payable in the event of death in flight maximum payable in the event of death except in flight maximum payable in the event of death if under 16</i>	£10,000 £10,000 £5,000 £2,000	Nil Nil Nil Nil
5. Travel delay (a) £ after 12 hours delay (b) £ each 12 hours thereafter (c) £ max abandonment (after 24 hours)	(a) £20 (b) £10 (c) £100 £1,500	Nil £75
6. Missed departure	£500	Nil
7. Baggage - overall limit <i>maximum per item, pair or set total limit for all Valuables emergency purchases</i>	£1,000 £200 £200 £100	£75 Nil Nil
8. Personal money (cash limit)	£500 (£200)	£75
9. Loss of passport	£250	Nil
10. Catastrophe & travel disruption cover	Not available	N/A
11. Personal liability	£2,000,000	£100
12. Legal expenses	£10,000	£100
13. Business personnel replacement	Not available	N/A
14. Financial failure insurance	Not available	N/A
<b>Cover under sections 15, 16 &amp; 17 only apply if You have purchased an annual multi-trip policy or paid the Wintersports premium for single trip.</b>		
15. Ski equipment - overall limit <i>maximum per item, pair or set owned maximum per item, pair or set hired</i>	£300 £200 £150	£75
16. Ski pack	£200	£75
17. Piste closure (amount per day)	£100 (£10)	Nil

\* Loss of deposit claims only.

+ Excess applicable unless **You** have selected the excess waiver option where no excess will apply or the double excesses option where double the excess limits shown in the benefits schedule above will apply. **Your** selection will be shown on **Your** policy schedule under the policy Top-Up(s) section if selected.

Policy features table	
Annual multi-trip policy features	
Maximum age at start/renewal of cover	59
Maximum duration per Trip	31 days
Business travel	No
Home country Trips (min 2 nights using pre-paid accommodation and/or transport)	No
Family members can travel separately	No
Wintersports - up to total maximum of	10 days
Single Trip policy features	
Maximum age at date of travel	59
Maximum period per Trip	94 days
Business travel	No

## Territorial limits

**You are covered for Trips** to countries within the following areas provided that **You** have paid the appropriate premium, as shown in **Your** policy schedule;

**Area 1** The United Kingdom, Channel Islands, the Isle of Man and Republic of Ireland.

**Area 2** The continent of Europe (as defined), any country with a Mediterranean coastline.

**Area 3** Australia and New Zealand.

**Area 4** Worldwide excluding North America.

**Area 5** Worldwide including North America.

Depending on the area of travel you have purchased, **You** will be insured for travel within the following areas;

a) Worldwide excluding North America - area 1, 2, 3 & 4

b) Worldwide including North America - area 1,2,3,4 & 5

**Trips** within **Your Home country** are not covered.

**Please note:** this policy does not cover **Your** travel to a country or specific area or event to which the Travel Advice Unit or the Foreign and Commonwealth Office has advised against all, or all but essential travel.

Stop-overs in a country within a higher area are insured provided they do not exceed 48 hours in each direction.

## Reciprocal health agreements EU, EEA or Switzerland

If **You** are travelling to countries within the European Union (EU) or the European Economic Area (EEA) or Switzerland **You** are strongly advised to obtain a European Health Insurance Card (EHIC). **You** can apply for an EHIC online at [www.ehic.org.uk](http://www.ehic.org.uk) or by telephoning 0300 330 1350. This will entitle **You** to benefit from the health care arrangements which exist between countries within the EU/EEA or Switzerland. In the event of liability being accepted for a medical expense which has been reduced as a direct result of **You** presenting your European Health Insurance Card to the medical facility at the time of treatment **We** will not apply the deduction of excess under section 2 - emergency medical expenses.

### Australia

If **You** are entitled to reciprocal health care and require medical treatment in Australia **You** must enrol with a local MEDICARE office. **You** do not need to enrol on arrival but **You** must do this after the first occasion **You** receive treatment. In-patient and out-patient treatment at a public hospital is then available free of charge. Details of how to enrol and the free treatment available can be found by visiting the MEDICARE website at [www.humanservices.gov.au/medicare](http://www.humanservices.gov.au/medicare) or by emailing [medicare@humanservices.gov.au](mailto:medicare@humanservices.gov.au). Alternatively please call **Our** nominated emergency service for guidance. If **You** are admitted to hospital contact must be made with **Our** nominated emergency service as soon as possible and their authority obtained in respect of any treatment NOT available under MEDICARE.

In the event of liability being accepted for a medical expense which has been reduced by the use of either a EHIC, Medicare in Australia or private health insurance, **We** will not apply the deduction of a policy excess under section 2 - Emergency medical expenses.

**Our nominated emergency service is here to help**

**Need medical help abroad?  
Call Our nominated emergency service first on  
+44 (0) 203 824 0742**

**For emergencies:** if **You** are taken by ambulance to hospital following an emergency call, **You** or a travelling companion should call **Our** nominated emergency service as soon as possible once **You** have been admitted to hospital.

**For non-emergencies:** if **You** need a GP, or need to go to A&E or a clinic, Call our nominated emergency service first, before **You** try to locate help, so the nominated emergency service can guide **You** to the safest and most appropriate source of treatment. If **You** are unfortunate enough to need medical help whilst abroad please Call the nominated emergency service first on

**+44 (0) 203 824 0742**

The highly experienced multi-lingual team are available to talk 24 hours a day, to advise **You** or **Your** travelling companion of what steps to take. Their aim will always be to establish the best treatment available to **You** in the country **You** are visiting.

**Their first steps will always be to...**

- Confirm that you're in a place of safety;
- Establish the best local treatment available to **you**; and
- Consider **Your** health and best interests;

**Important note:** it may affect **Your** claim if **You**, **Your** travelling companion or a doctor/nurse does not contact our nominated emergency service on the number above. **Our** nominated emergency service do not cover any costs over £500 where prior agreement regarding treatment has not been obtained from **Our** nominated emergency service.

The highly experienced multi-lingual team of in-house doctors, nurses and experienced case managers will advise **You**, **Your** travelling companion, and/or **Your** treating doctor, of what steps to take.

**They understand how important it is to have someone who...**

- **You** can contact at any time of the day or night
- **You** can trust has the medical expertise to guide **You** to the right course of treatment
- Has an in-depth understanding of how and when to transfer sick and injured patients back **Home**
- Will speak to **You** in a language **You** can understand.

The team is focused on trying to take some of the worry out of what can be an incredibly stressful situation so **They** will keep **Your** key contacts updated on **Your** progress for **You** and if need be, **They** will fly a doctor or nurse out, with specialist repatriation equipment, to accompany **You Home**.

**They** actively monitor the capabilities of medical facilities throughout the world and use this knowledge to determine whether **You** need to be transferred to a different facility. Once **They** are satisfied that **You** are getting the appropriate treatment, **They** will agree a treatment plan with **Your** treating doctor and **you**. If **You** cannot be discharged in time to continue **Your Trip** as planned, **They** will make arrangements to bring **You Home** at the appropriate time.

## Special notice

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

For details of how to make a claim, please go to page 2.

## Important conditions relating to health & activities

Please answer these questions in relation to Yourself and Your travelling companions insured under this policy and contact Worldwide if necessary.

1. Have any of **You** ever suffered from, been investigated, treated for or diagnosed with;
- any cancer or malignant condition.
  - any lung related condition (other than stable, well controlled asthma that requires not more than 2 medications, including inhalers).
  - any heart related condition (including angina).
  - any circulatory condition (including hypertension unless it is the only condition **You** have and it is well controlled)?

Yes

No

2. Do any of **You** suffer from any other **Existing medical condition**, as defined?

Yes

No

3. Are **You** aware of any **Existing medical conditions** suffered by **Non-travellers** whose state of health is likely to cause **You** to cancel or amend **Your** travel plans?

Yes

No

Your medical conditions (if any) will be covered.

4. Are **You** planning to take part in any hazardous activities (see general exclusions 11-15)? If so, please contact **Worldwide** on **01892 833 338** to see what cover may be available.

There is **no** cover for claims related to these conditions.

## Please note

**You are not covered** for any directly or indirectly related claims if at the time this insurance was arranged and each time **You** make arrangements for a **Trip**;

- You** or **Your** travelling companions are planning to travel against the advice of a **Medical practitioner**, or
- You** or **Your** travelling companions are travelling specifically to seek, or **You** know **You** will need, medical treatment while **You** are away, or
- You** or **Your** travelling companions are on a waiting list for treatment or investigation, or
- You**, **Your** travelling companions or any **Non-travellers** have been given a terminal diagnosis.
- You** or **Your** travelling companions have any medical condition for which the recommended treatment or prescribed medication as directed by a **Medical practitioner** is not being taken.
- You** or **Your** travelling companions are aware of any medical condition which **You**/they have but for which a diagnosis has not yet been received.

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

## How to make a claim

For all claims please request an appropriate claim form by telephoning the number below. Please quote **WTIS Standard 2018**.

Claims Settlement Agencies Ltd  
308 London Road, Hadleigh, Benfleet,  
Essex,  
SS7 2DD  
Tel: 01702 746560  
Email: [info@csal.co.uk](mailto:info@csal.co.uk)  
To download a claim form please visit  
[www.csal.co.uk](http://www.csal.co.uk)

We are now able to offer you the facility to submit your claim online which is the fastest and easiest way to make a claim at:

[www.submitclaim.co.uk/wtis](http://www.submitclaim.co.uk/wtis)

The process should take approximately 10-15 minutes to complete (depending on the type of claim), but before continuing you should ensure you have your policy certificate, trip dates, supporting documentation and details of the incident.

Please do not send in any documentation until **You** have a completed claim form to go with it. The claim form lists the additional documentation necessary to support **Your** claim. Always make sure that any loss or theft of **Valuables** or any items are reported to the police within 24 hours of discovering the loss, or as soon as possible after that, and a written report or reference obtained in the country where the incident occurred. If **Your Baggage** is damaged or lost in transit whilst "checked-in" **You** must report it to the handling agents or airline as soon as possible on collection and obtain a Property Irregularity Report. These reports (if applicable to **Your** claim), together with all available receipts and any other requested documentation, must be submitted with **Your** claim form.

## Important

**You** must tell **Us** if, at any time during the period of insurance and each time **You** make arrangements to travel, there is a change in circumstances and **You** answer 'yes' to any of the important conditions relating to health and activities by **Us** as soon as possible so that **We** may reassess **Your** coverage relating to any **Trips** **You** have booked or may wish to book in the future.

## Changes in Your health

1. If **Your** health changes after **You** purchased **Your** policy or before booking **Your** Trip but before **You** travel, **You** must tell **Us** about these changes if because of these **You**:

- Have seen a doctor and have seen or been referred to a consultant or specialist
  - Have been admitted to hospital for, or are waiting to receive treatment (including surgery, tests or investigations) or the results of tests and investigations
- We** will then tell **You** if **We** can cover **Your** medical conditions free of charge or for an additional premium.

2. If **We** cannot cover **Your** medical conditions, or **You** do not want to pay the additional premium quoted, **We** will give **You** the choice of either:

- Making a cancellation claim for any pre-booked **Trips**; or
- Cancelling **Your** policy and receiving a proportionate/partial refund (provided that **You** have not made a claim or are about to).

**Individuals with whom You are travelling or have arranged to travel, a person with whom You have arranged to reside with temporarily, a Relative or Business Colleague, who are not insured under the policy.**

We will not provide cover for any claim if, at the time **Your** policy starts or booking a **Trip**, whichever was the later, any person on whom the **Trip** depends including the person with whom **You** are travelling or have arranged to travel, a person with whom **You** have arranged to reside with temporarily, a **Relative**, friend or **Business colleague** had a medical condition for which he or she:

## Insurers

This insurance is administered by Worldwide Travel Insurance Services who are authorised and regulated by the Financial Conduct Authority and is registered in England & Wales No. 2735488, FRN number 307592. Registered Office: The Business Centre, 1-7 Commercial Road, Paddock Wood, Kent, TN12 6YT.

The Insurance is underwritten by Chaucer Syndicates Limited. Chaucer Syndicates Limited are authorised and regulated by the Financial Conduct Authority and registered in England & Wales No. 184915, Financial Services Register number 204915. Registered Office: Plantation Place, 30 Fenchurch Street, London, EC3M 3AD.

Details of the extent of Our regulation by the Financial Conduct Authority are available on request.

You can check this information on the Financial Services Register by visiting the Website <https://register.fca.org.uk/> or by phoning 0800 111 6768 or 0300 500 8082.

## Our regulator

Worldwide Travel Insurance Services Ltd (FRN: 307592) are authorised and regulated by the Financial Conduct Authority. These details can be checked on the Financial Services Register by visiting the FCA's Website at [www.fca.org.uk/register](http://www.fca.org.uk/register) or by contacting them on 0800 111 6768.

## Financial Services Compensation Scheme

Worldwide Travel Insurance Services Limited and Chaucer Syndicates Limited are covered by the Financial Services Compensation Scheme. You may be entitled to compensation from the Scheme if an insurer is unable to meet its obligations to you under this policy. If you are entitled to compensation under the Scheme, the level and extent of the compensation will depend on the nature of this policy. Further information can be obtained from the Financial Services Compensation Scheme ([www.fscs.org.uk](http://www.fscs.org.uk)) or by contacting the FSCS at 10th Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU or by calling 0800 678 1100 or 020 7741 4100 or 0300 500 8082.

## Period of insurance

If **You** have paid the appropriate annual multi-trip travel insurance premium and **You** are 59 or under the overall period of insurance shall be for 12 months starting from the date shown in **Your** documentation. This insurance then covers an unlimited number of holiday or leisure **Trips** starting within that period, except that if **You** are undertaking a **Trip** that exceeds the maximum number of days shown in the benefits schedule **You** will not be covered for those days that exceed the maximum limit. **Wintersports** are covered up to a total of 10 days in each period of insurance.

Except as stated below, cover for each separate **Trip** under this insurance starts when **You** leave **Your Home** or place of business in **Your Home country** at the start of **Your Trip**, and finishes as soon as **You** return to **Your Home** or place of business in **Your Home country** for any reason.

For cancellation only (section 1), cover starts from the date shown on **Your** policy schedule or the date **You** book **Your Trip**, whichever is the later.

**Personal money** (section 8) will be covered from the time of collection but not more than 72 hours before travel.

If **You** are going on a one-way trip all cover will finish 48 hours after **Your** arrival in the country of final destination.

If **Your** return is unavoidably delayed for an insured reason, cover will be extended free of charge for the period of delay.

**Important note (applicable to single trip policies only)** notwithstanding the period definition above,

if **You** have already departed on **Your Trip** prior to purchasing **Your** travel insurance, or if **Your** previous insurance has expired, cover is available, subject to;

- all cover must start on the day following purchase or expiry of **Your** previous insurance.
- no cover applies in respect of pre-existing medical conditions and no screening is available.
- 14 day waiting period before medical expenses cover commences in respect of illness if departure from **Home Country** or expiry of any previous policy or expiry of **Your** previous insurance was more than 7 days before purchase date.
- the 14 day 'cooling off period' for cancelling the policy does not apply.

## Definitions

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

**Accident/Accidental** means a sudden, unexpected, unusual, specific, violent, external event which occurs at a single identifiable time and place and independently of all other causes, resulting directly, immediately and solely in physical bodily injury which results in a loss.

**Baggage** means personal belongings, including clothing worn, and personal luggage owned by **You** that **You** take with **You** or buy on **Your Trip**.

**Breakdown** means that the vehicle in which **You** are travelling stops as a result of mechanical or electrical failure due to any cause other than lack of fuel, oil or water.

**Business colleague** means any person that **You** work closely with whose absence for a period of one or more complete days necessitates the cancellation or **Curtailment** of the **Trip** as certified by a director of the business.

**Curtailment/Curtail/Loss of holiday** means cutting **Your** planned **Trip** short by early return to **Your Home country** or admission to hospital as an in-patient so that **You** lose the benefit of accommodation **You** have paid for or being confined to **Your** accommodation.

**Cyber Event** means an unauthorised or malicious act or series of related unauthorised or malicious acts or the threat or hoax thereof involving access to, processing of, use of or operation of any Information Technology System or any electronic data by any person or group(s) of persons.

**Europe** means Albania, Andorra, Austria, Azores, Balearic Islands, Belarus, Belgium, Bosnia and Herzegovina, Bulgaria, Canary Islands, Channel Islands, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Faroe Islands, Finland, France, Germany, Gibraltar, Greece, Hungary, Iceland, Isle of Man, Italy, Kosovo, Latvia, Liechtenstein, Lithuania, Luxembourg, Macedonia, Madeira, Malta, Moldova, Monaco, Montenegro, Netherlands, Norway, Poland, Portugal, Republic of Ireland, Romania, Russia (west of the Ural mountains), San Marino, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey, Ukraine, **United Kingdom** and the Vatican City.

**Existing medical condition** means any condition that has required referral to or consultation with a specialist or hospital for treatment, investigation or check up within the 12 months prior to:

1. the date that this insurance was arranged, or
2. the date **You** subsequently made arrangements for a **Trip** (if this is an annual multi-trip policy), or
3. the date that **You** extended the original period of **Your** insurance, whichever is the latest.

**Family** means up to two adult partners and their dependent children under the age of 18 if still in full time education that are normally living together in one household. Cover for families shall apply where the appropriate premium has been paid. On annual multi-trip policies only the first named insured adult is insured to travel independently.

**Home** means **Your** normal place of residence in the **United Kingdom** or Isle of Man.

**Home country** means whichever one of the **United Kingdom** or Isle of Man is **Your** usual place of residence.

**Information Technology System** means any computer, hardware, software, information technology and communications system or electronic device, including any associated input, output or data storage device, networking equipment or back up facility.

**Insurer** means Chaucer Syndicates Limited.

**Loss of holiday** means the number of days **You** are confined to a hospital, hotel room or cabin on **Your** treating doctor's orders and are unable to participate in **Your** planned **Trip**, due to death, serious injury or illness.

**Manual work** means work that involves;

- i. hands-on use, installation, assembly, maintenance or repair of electrical, mechanical or hydraulic plant, heavy power tools and industrial machinery, and
- 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;

unless **Your** proposed activity or work is declared to **Us** and confirmed in writing. Please contact **Worldwide Travel Insurance Services Ltd** on **01892 833338** or

**Email: customerservices@worldwideinsure.com**. We reserve the right to apply special terms or conditions and/or charge an additional premium as **We** think appropriate. Please refer to the **Manual work** notes on page 9 for details of work that is not considered **Manual work**.

**Medical practitioner** means a registered practising member of the medical profession, registered in the country where **You** are treated, who is not related to **You** or any person with whom **You** are travelling or **Your** employee.

**Non-traveller** means **Your Relatives** or **Business colleagues** who are not travelling with **You**, and people with whom **You** have arranged to stay.

**North America** means the United States of America, Canada, Mexico, the Caribbean Islands, Bahamas & Bermuda.

**Personal money** means cash, being bank notes and coins, travellers' cheques and postal orders, travel tickets and accommodation vouchers carried by **You** for **Your** personal use.

**Public transport** means any aeroplane, ship, train or coach on which **You** are booked to travel.

**Relative** means husband, wife or civil partner (or partner with whom **You** are living at the same address), parent, grandparent, parent-in-law, brother, sister, child, grandchild, brother-in-law, sister-in-law, son-in-law, daughter-in-law or fiancé(e).

**Ski equipment** means skis, snowboards, ski-poles, bindings, ski-boots and snowboard boots.

**Sports equipment** means items of personal equipment or specialised clothing that are specifically designed for use exclusively in connection with a recognised sport or pastime.

**Trip** means any holiday or leisure **Trip** which begins and ends in **Your Home country** and for which **You** have paid the appropriate premium. Each **Trip** under annual multi trip cover is considered to be a separate insurance, with the terms, definitions, exclusions and conditions contained in this policy applying to each **Trip**.

**Unattended** means out of **Your** immediate control and supervision such that **You** are unable to prevent loss, theft or damage occurring.

**United Kingdom** means England, Scotland, Wales and Northern Ireland.

**Utilisation of nuclear, chemical or biological weapons of mass destruction** means the use of any explosive nuclear weapon or device; or the emission, discharge, dispersal, release or escape of: fissile material emitting a level of radioactivity, or any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesised toxins), or any solid, liquid or gaseous chemical compound which, when suitably distributed; which is capable of causing incapacitating disablement or death amongst people or animals.

**Valuables** means jewellery, gold, silver, precious metal or precious or semiprecious stone articles, watches, cameras, camcorders, photographic, audio, video, computer, television and telecommunications equipment (including CDs, DVDs, tapes, films, cassettes, cartridges, headphones, electronic readers, laptops, tablets, smartphones and mobile phones), computer games and associated equipment, telescopes, binoculars and satellite navigation equipment.

**We, Us** and **Our** means Worldwide Travel Insurance Services Ltd who administer the insurance on behalf of Chaucer Syndicates Limited.

**Wintersports** means cross country skiing (Nordic skiing), glacier skiing, recreational racing, snowmobiling, mono-skiing, off-piste skiing or snow-boarding when **You** are skiing within the ski area boundaries of a recognised ski resort and following ski patrol guidelines, on-piste skiing, on-piste snow-boarding, snow blading & snow sledging all provided local safety guidelines and warnings are observed.

**You** and **Your** means each person for whom the premium has been paid and whose age does not exceed the maximum shown in the benefits schedule. **You** must be resident in the **United Kingdom** or Isle of Man and registered with a **Medical practitioner** in **Your Home country**. Each person is separately insured.

## Important notice

**We** would like to draw **Your** attention to some important features of **Your** insurance including;

1. **Insurance document** - **You** should read this document carefully. It gives full details of what is and is not covered and the conditions of the cover. Cover can vary from one policy to another so **You** should familiarise yourself with this particular insurance.
2. **Conditions and exclusions** - Specific conditions and exclusions apply to individual sections of **Your** insurance, whilst general exclusions and conditions will apply to the whole of **Your** insurance.
3. **Health** - This insurance contains restrictions regarding existing health conditions concerning the health of the people travelling and of other people upon whose health the **Trip** depends. **You** are advised to read the policy schedule carefully.
4. **Property claims** - These claims are paid based on the value of the goods at the time **You** lose them and not on a 'new for old' or replacement cost basis. Allowance will be made for their age and likely condition.
5. **Limits** - This insurance has limits on the amount the **Insurer** will pay under each section. Some sections also include other specific limits, for example, for any one item or for **Valuables** in total.
6. **Reasonable care** - **You** need to take all reasonable care to protect Yourself and **Your** property, as **You** would if **You** were not insured. **Insurers** will not pay for property left **Unattended** in a public place or **Unattended** vehicle, as specified in the wording.
7. **Sports & activities** - **You** may not be insured if **You** are going to take part in sports & activities where there is a generally recognised risk of injury. Please check that this insurance covers **You**, or ask **Us**.
8. **Residency** - This policy is only available if **You** are permanently resident in the **United Kingdom** or Isle of Man and registered with a **Medical practitioner** in **Your Home country**.
9. **Excesses** - Under some sections of this insurance, claims will be subject to an excess. This means **You** will be responsible for paying the first part of the claim under each applicable section.
10. **Customer service** - **We** always try to provide a high level of service. However if **You** think **We** have not lived up to **Your** expectations, please refer to the complaints procedure on page 10.
11. **Fraudulent claims** - It is a criminal offence to make a fraudulent claim.

## Choice of Law and Jurisdiction

This policy, schedule and any endorsements shall be governed by and construed in accordance with the law of England and Wales. Each party agrees that the Courts of England and Wales shall have exclusive jurisdiction in respect of any dispute which may arise out of or in connection with this policy or any claim.

## Interest

No sum payable under this policy shall carry interest.

## Rights of Third Parties

The Contracts (Rights of Third Parties) Act 1999 or any amendment thereto shall not apply to this policy. Only **You** and **We** can enforce any terms of this policy which may be varied or cancelled without consent of any third party.

## Section 1

### Cancellation or curtailment/loss of holiday

Cover under this section starts from the date shown in **Your documentation or the date travel is booked, whichever is the later.**

**You are covered** up to the amount shown in the benefits schedule for **Your** proportionate share of the unused travel and accommodation costs (including unused pre-booked excursions and attraction tickets up to a value of £100 and car hire charges) 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. i. unforeseen injury, illness or death, or  
ii. unforeseen complications arising as a direct result of pregnancy;  
suffered by **You**, a travelling companion or a **Non-traveller**.
- b. the **Accidental injury, illness or death of Your Relative** or that of a travelling companion, a **Business colleague** or person with whom **You** intended to stay.
- c. receipt of a summons for jury service, being subpoenaed as a court witness (except as an expert witness) or being placed in compulsory quarantine.
- d. **Your** unexpected requirement for emergency and unavoidable duty as a member of the armed forces, police, fire, nursing, ambulance or coastguard services resulting in cancellation of previously agreed leave.
- e. redundancy, provided that **You** are entitled to payment under the current redundancy payments legislation and that at the time of booking **Your Trip You** had no reason to believe that **You** would be made redundant. **You** must have had 2 years continuous employment with that employer.
- f. **Your** presence being required to make **Your** property safe and secure following fire, flood or burglary that causes damage at **Your Home** within 48 hours prior to **Your** departure, or whilst **You** are away.
- g. **Your** car becoming unusable as a result of theft, fire or **Accident** within 7 days prior to **Your** departure. This only applies if **You** are planning to go on a self-drive **Trip** in the car.
- h. the injury or illness of **Your** horse, dog or cat within 14 days prior to **Your** departure or whilst **You** are away that requires emergency life saving surgery, as certified by **Your** vet.

**Under a. above this cover extends to include the Loss of holiday, where applicable, for a period in excess of 24 hours.**

#### **You are not covered for**

- a. the amount of the excess shown in the benefits schedule.
- b. anything not included in **You are covered** above.
- c. any directly or indirectly related claims if **You** or **Your** travelling companions have;
  - i. any **Existing medical condition**, as defined, or
  - ii. ever suffered from, been investigated, treated for or diagnosed with;
    - any cancer or malignant condition.
    - any lung related condition (other than stable, Well controlled asthma that requires not more than 2 medications, including inhalers).
    - any heart related condition (including angina).
    - any circulatory condition (including hypertension, unless it is the only condition **You** have and it is well controlled).
- d. any claim related to the health of a **Non-traveller** if **You** made arrangements for **Your Trip** in the knowledge that their state of health is likely to cause **You** to cancel or amend **Your** travel plans.

**We** may agree not to apply (c) or (d) above or to accept this insurance at special terms if **You** supply **Us** with details of **Your** condition. Please contact Worldwide on 01892 833338.

- e. any directly or indirectly related claims if at the time this insurance was arranged and each time **You** make arrangements for a **Trip**;
  - i. **You** or **Your** travelling companions are planning to travel against the advice of a **Medical practitioner**, or
  - ii. **You** or **Your** travelling companions are travelling specifically to seek, or **You** know **You** will need, medical treatment while **You** are away, or
  - iii. **You** or **Your** travelling companions are on a waiting list for treatment or investigation, or
  - iv. **You**, **Your** travelling companions or any **Non-travellers** have been given a terminal diagnosis.
  - v. **You** or **Your** travelling companions have any medical condition for which the recommended treatment or prescribed medication as directed by a **Medical practitioner** is not being taken.

vi. **You** or **Your** travelling companions are aware of any medical condition which **You/they** have but for which a diagnosis has not yet been received.

- f. any costs incurred in respect of visas obtained in connection with the **Trip**.
- g. disinclination to travel.
- h. failure to obtain the necessary passport, visa or permit for **Your Trip**.
- i. claims arising from **Your** anxiety, stress, depression or any other mental or nervous disorder unless **You** provide a medical certificate from a registered mental health professional stating that this necessarily prevented **You** from travelling.
- j. any claim if, at the time **Your** policy starts or booking a **Trip**, whichever was the later, any person on whom the **Trip** depends including the person with whom **You** are travelling or have arranged to travel, a person with whom **You** have arranged to reside with temporarily, a **Relative**, friend or **Business colleague** had a medical condition for which he or she:
  - was receiving treatment at hospital (other than where they go to hospital for check-ups for a stable condition, at regular intervals which have been arranged beforehand);
  - was waiting for a hospital consultation, investigations or treatment (other than where they go to hospital for check-ups for a stable condition, at regular intervals which have been arranged beforehand);
  - had been given a terminal prognosis, or been told that their condition is likely to get worse in the next 12 months.
- k. **You** being on a hospital waiting list where the claim relates to **You** accepting an appointment that causes **You** to cancel or **Curtail Your Trip**.
- l. any claim for **Loss of holiday** not supported by a medical certificate from **Your** treating Medical practitioner confirming the number of days that **You** were confined to a hospital, hotel room or cabin.

**Please note that Curtailment** claims will be calculated from the day **You** return to **Your Home country** or **You** are hospitalised as an in-patient so that **You** lose the benefit of accommodation **You** have paid for, or being confined to **Your** accommodation. **Your** claim will be based solely on the number of complete night's accommodation lost out of **Your** originally booked arrangements. In respect of travel expenses, **We** will pay for any additional costs but not for the loss of **Your** pre-booked arrangements.

#### **Conditions**

1. It is a requirement of this insurance that;
  - a. (for cancellation) if **You** become aware of any circumstances which make it necessary for **You** to cancel **Your Trip**, **You** must advise **Your** tour operator or travel agent in writing within 48 hours or as soon as possible after that. The maximum amount **We** will pay will be limited to the applicable cancellation charges at that time.
  - b. (for **Curtailment**) **You** must obtain a medical certificate from a **Medical practitioner** and the prior approval of **Our** nominated emergency service to confirm the necessity to either:
    - i) return **Home** prior to **Curtailment** of the **Trip** due to death, bodily injury or illness, or complications of pregnancy or childbirth; or
    - ii) remain in hospital for the rest of the **Trip** due to bodily injury or illness.
  - c. (for **Loss of holiday**) **You** must obtain a medical certificate from the **Medical practitioner** in attendance confirming their order for **You** to remain confined to a hospital, hotel room or cabin, if applicable.
  - d. (for **Curtailment**) **You** must contact **Our** nominated emergency service for assistance if **You** need to **Curtail Your Trip** for an insured reason.
  - e. (for **Curtailment**) if **You** are **Curtailling Your Trip** (which includes **Loss of holiday**) payments will be calculated on a pro-rata basis taking into consideration all irrecoverable travel, accommodation and excursion expenses. If **You** are unable to revalidate **Your** return ticket **We** will pay for **Your** repatriation costs up to the same class of travel as on **Your** outward journey.
2. Frequent flyer or similar reward programmes – claims for expenses paid for using such programmes will be admitted in respect of flight costs only and shall be limited to the cost of an economy ticket for the same airline, route and, as far as possible under the airline's booking conditions, flight time.

**Please also refer to the general exclusions and conditions.**

## Section 2

### Emergency medical expenses

If **You** or an insured member of **Your** travelling party have to go to hospital as an in-patient during **Your Trip**, require medical treatment that will cost more than £500 (or the equivalent in local currency) or need to travel **Home** differently to **Your** original plans, **Our** nominated emergency service must be contacted BEFORE making any arrangements. If this is not possible because the condition requires immediate treatment to save life or limb, **Our** nominated emergency service must be contacted as soon as possible thereafter (see condition (a) of section 2 - Emergency medical expenses). Failure to obtain proper authorisation will mean the **Insurers** are not liable for the expenses.

**You are covered** up to the amount shown in the benefits schedule for the reasonable costs necessarily incurred as a result of **Your** unforeseen bodily injury, illness, death or complications arising as a direct result of pregnancy during **Your Trip** in respect of;

- a. emergency medical, surgical and hospital treatment and transportation. At the sole discretion of **Our** nominated emergency service, who reserve the right to make the final decision as to whether or not it is medically necessary, this also includes the cost of repatriation to **Your Home country**, by whatever means deemed medically necessary. The cost of emergency dental treatment to natural teeth is covered up to the amount shown in the benefits schedule provided that it is for the immediate relief of pain only.
- b. additional travel and accommodation expenses (on a bed & breakfast basis) to enable **You** to return **Home** if **You** are unable to travel as originally planned.
- c. additional travel and accommodation expenses (on a bed & breakfast basis) for;
  - i. a travelling companion to stay with **You** and accompany **You Home**, or
  - ii. a **Relative** or friend to travel from **Your Home country** to stay with **You** and accompany **You Home**. This is extended for up to two people if **You** are under 18 years of age.
- d. returning **Your** remains to **Your Home** or of a funeral in the country where **You** die, up to the equivalent cost of returning **Your** remains to **Your Home country**.
- e. or, with the prior agreement of **Our** nominated emergency service, **Your** necessary additional travel expenses to return **Home** following the death, injury or illness of a travelling companion or of **Your Relative** or **Business colleague** in **Your Home country**.

#### **You are not covered for**

- a. the amount of the excess shown in the benefits schedule unless a recovery can be made under the terms of the EHC of any other reciprocal agreement.
- b. any directly or indirectly related claims if **You** or **Your** travelling companions have;
  - i. any **Existing medical condition**, as defined, or
  - ii. ever suffered from, been investigated, treated for or diagnosed with;
    - any cancer or malignant condition.
    - any lung related condition (other than stable, well controlled asthma that requires not more than 2 medications, including inhalers).
    - any heart related condition (including angina).
    - any circulatory condition (including hypertension, unless it is the only condition **You** have and it is well controlled).
- c. any claim related to the health of a **Non-traveller** if **You** made arrangements for **Your Trip** in the knowledge that their state of health is likely to cause **You** to cancel or amend **Your** travel plans.

**We** may agree not to apply (b) or (c) above or to accept this insurance at special terms if **You** supply **Us** with details of **Your** condition. Please contact Worldwide on 01892 833338.
- d. any directly or indirectly related claims if at the time this insurance was arranged and each time **You** make arrangements for a **Trip**;
  - i. **You** or **Your** travelling companions are planning to travel against the advice of a **Medical practitioner**, or
  - ii. **You** or **Your** travelling companions are travelling specifically to seek, or **You** know **You** will need, medical treatment while **You** are away, or
  - iii. **You** or **Your** travelling companions are on a waiting list for treatment or investigation, or
  - iv. **You**, **Your** travelling companions or any **Non-travellers** have been given a terminal diagnosis.
  - v. **You** or **Your** travelling companions have any medical condition for which the recommended treatment or prescribed medication as directed by a **Medical practitioner** is not being taken.
  - vi. **You** or **Your** travelling companions are aware of any medical condition which **You/they** have but for which a diagnosis has not yet been received.

- e. any treatment or surgery;
  - i. which is not immediately necessary and can wait until **You** return **Home**.
  - ii. which in the opinion of **Our** nominated emergency service is considered to be cosmetic, experimental or elective.
  - iii. carried out in **Your Home country** or more than 12 months after the expiry of this insurance.
- f. any expenses incurred after the date which, in the opinion of **Our** nominated emergency service, **You** should be moved to an alternative facility or repatriated to **Your Home country**, but despite which advice, **You** decide not to be moved or repatriated.
- g. any expenses related to treatment or services provided by a health spa, convalescent or nursing **Home** or any rehabilitation centre unless agreed by **Our** nominated emergency service.
- h. any expenses for treatment not related to the injury or illness which necessitated **Your** admittance to hospital.
- i. normal pregnancy, without any accompanying bodily injury, illness or complication. This section is designed to provide cover for unforeseen events, **Accidents** and illnesses and normal childbirth would not constitute an unforeseen event.
- j. exploratory tests unless they are normally conducted as a direct result of the condition which required referral to hospital.
- k. claims related to **manual work** unless declared to and accepted by Insurers.
- l. the additional costs of accommodation in a single or private room, unless it is medically necessary or there is no alternative.
- m. the costs of medication or treatment that **You** knew at the time of **Your** departure would need to be continued during **Your Trip**.
- n. the costs of replacing or repairing false teeth or of dental work involving the use of precious metals.
- o. costs of telephone calls, other than:
  - i. calls to **Our** nominated emergency service notifying and dealing with the problem for which **You** are able to provide receipts or other evidence to show the cost of the calls and the numbers **You** telephoned
  - ii. any costs incurred by **You** when **You** receive calls on **Your** mobile from **Our** nominated emergency service for which **You** are able to provide receipts or other evidence to show the cost of the calls.
- p. the cost of taxi fares, other than those for **Your** travel to or from hospital relating to **Your** admission, discharge or attendance for outpatient treatment or appointments or for collection of medication prescribed for **You** by the hospital. However, any costs incurred by **You** to visit another person or by another person visiting **You** in hospital are not covered.

**Please note** that it is essential under the terms of this insurance that;

- a. in the event of any illness, injury, **Accident** or hospitalisation involving anyone insured under this policy where the anticipated costs are likely to exceed £500 (or the equivalent in local currency) **You** must notify **Our** nominated emergency service. They will direct **You** to an appropriate medical facility and may be able to guarantee costs on **Your** behalf. If it is not possible to notify them in advance because the condition requires immediate treatment to save life or limb, **Our** nominated emergency service must be contacted as soon as possible. Failure to do so will affect the assessment of **Your** claim.
- b. wherever possible **You** must use medical facilities that entitle **You** to the benefits of any reciprocal health agreement such as the EHIC in **Europe** and **MEDICARE** in **Australia**.
- c. if **You** are injured or become ill during **Your Trip**, **Our** nominated emergency service may:
  - move **You** from one hospital to another; and /or
  - arrange for **You** to return to the **United Kingdom** or the **Isle of Man** at any time.
 They will do this if they and the treating doctor think that it is safe for **You** to be moved or returned to the **United Kingdom** or the **Isle of Man**. If **You** choose not to, **Our** liability will end on the date it was deemed safe for **You** to be moved or returned to the **United Kingdom**, or the **Isle of Man**.

**Please also refer to the general exclusions and conditions.**

## Section 3 Hospital stay benefit

**You are covered** for the amount shown in the benefits schedule for each night spent receiving in-patient hospital treatment outside of **Your Home country** that is covered under section 2 - Emergency medical expenses.

**Please also refer to the exclusions and conditions relating to section 2 - Emergency medical expenses and the general exclusions and conditions.**

## Section 4 Personal Accident

**You are covered** for the amount shown in the benefits schedule if **You** have an **Accident** whilst **You** are on **Your Trip** which is the sole and independent cause of **Your** death, **Permanent total disablement**, **Loss of sight** or **Loss of limb(s)** within 12 months of the **Accident**.

If **You** are aged under 16 at the date of the **Accident**, the amount **You** are covered for in the event of **Your** death is shown in the benefits schedule.

Payment under this section in respect of all the consequences of an **Accident** shall be limited in total to the amount shown in the benefits schedule.

In the event of **Your** death within 12 months of the **Accident**, the total payment will be limited to the amount shown for death.

**'Permanent total disablement'** means that for the 12 months following **Your Accident** **You** are totally unable to work in any and every occupation and at the end of that time there is no prospect of improvement.

**'Loss of limb(s)'** means physical loss of a hand or foot or complete loss of use of a hand, arm, foot or leg.

**'Loss of sight'** means total and permanent loss of sight which shall be considered as having occurred;

- a. in both eyes if **Your** name is added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist, or
- b. in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen scale.

**'In flight'** means whilst travelling as a fare paying passenger in a properly licensed, multi-engined passenger carrying aircraft.

**You are not covered for**

- a. claims resulting from motorcycling or quad biking.
- b. claims arising out of **Manual work**.
- c. a **Permanent total disablement** claim if at the date of the **Accident** **You** are over the statutory retirement age and are not in full time paid employment.
- d. more than one of the benefits relating to the same injury.
- e. the contracting of any disease, illness and/or medical condition.
- f. the injection or ingestion of any substance.
- g. any event which directly or indirectly exacerbates a previously existing physical bodily injury.
- h. any claim for sickness, disease, nervous shock or naturally occurring condition or degenerative process.

**Special condition relating to section 4 - Personal accident**

- a. the death benefit will be paid to the deceased person's estate.

**Please also refer to the general exclusions and conditions.**

## Section 5 Travel delay and abandonment

*The benefit provided under Travel delay below is intended to provide compensation if **You** are delayed at **Your** point of departure and is only applicable if **You** have travelled there and checked-in. If **You** have not travelled to **Your** departure point **You** will not be covered even if **You** have checked-in online.*

**Travel delay**

**You are covered** up to the amounts (a), (b) and (c) shown in the benefits schedule if the departure of the **Public transport** on which **You** are booked to travel is delayed by at least 12 hours.

- (a) for the first complete 12 hour period of delay and (b) for each subsequent complete 12 hour period, up to the maximum payable (c).

**Abandonment**

However, if **Your** departure from **Your Home country** is delayed for more than 24 hours and **You** choose to abandon **Your Trip**, instead of a payment for delay, **You** are covered for the cost of the **Trip**, up to the maximum claimable under section 1 - Cancellation or curtailment/ loss of holiday.

**You are not covered**

- a. for the amount of the excess shown in the benefits schedule.
- b. for a claim caused by a strike if it had started or been announced before **You** arranged this insurance or booked **Your Trip**, whichever is the later.
- c. if **You** fail to check-in on time.
- d. if transport services are withdrawn as the result of a recommendation or instruction from the Civil Aviation Authority, Port Authority or similar body.
- e. to claim under this section if **You** have also claimed under section 6 - Missed departure or section 10 - Catastrophe & travel disruption cover from the same cause.

**Conditions**

- a. if **You** are a **UK** resident living in Northern Ireland and **Your** travel itinerary requires **You** to use Republic of Ireland departure/arrival points, **Your** cover will be as if **You** were still travelling from Northern Ireland with respect to claims coverage.

**Please also refer to the general exclusions and conditions.**

## Section 6 Missed departure

**You are covered** up to the amount shown in the benefits schedule for necessary additional travel and accommodation expenses that **You** incur in reaching **Your** destination if **You** arrive at any departure point shown on **Your** pre-booked itinerary too late to board the **Public transport** on which **You** are booked to travel as a result of;

- a. the failure of **Public transport**, or
- b. a road traffic Accident or vehicle **Breakdown** delaying the vehicle in which **You** are travelling.
- c. a delay involving **Your** own vehicle because of unexpected and unforeseen heavy traffic or road closures that were sufficiently severe to warrant reporting on a recognised motoring association website, Highways Agency website, on television, news bulletins or in the press.

**You are not covered for**

- a. a claim caused by a strike if it had started or been announced before **You** arranged this insurance or booked **Your Trip**, whichever is the later.
- b. a claim under this section if **You** have also claimed under section 5 - Travel delay or section 10 - Catastrophe & travel disruption from the same cause.
- c. any claim for more than the cost of the original booked **Trip**.

**Conditions**

- a. if **You** are a **UK** resident living in Northern Ireland and **Your** travel itinerary requires **You** to use Republic of Ireland departure/arrival points, **Your** cover will be as if **You** were still travelling from Northern Ireland with respect to claims coverage.
- b. **You** must have planned to arrive at **Your** departure point in advance of **Your** earliest scheduled check-in time and provide a written report from the carrier, police or relevant transport authority confirming the delay and stating its cause.
- c. in the event of a claim arising from any delay occurring following an **Accident** to or **Breakdown** of the vehicle in which **You** are travelling **You** must obtain written confirmation from the carrier, police or relevant transport authority confirming the delay and stating its cause.
- d. in the event that the vehicle in which **You** are travelling is delayed by heavy traffic or road closures **You** must obtain confirmation that the delays were sufficiently severe to warrant reporting on a recognised motoring association website, Highways Agency website on television, news bulletins or in the press.

**Please also refer to the general exclusions and conditions.**

## Section 7 Baggage

**You are covered** up to the amount shown in the benefits schedule, after making reasonable allowance for wear, tear and depreciation for the loss or theft of, or damage to;

### a. Your Baggage

#### b. Your Valuables

**We may at Our option replace, reinstate or repair the lost or damaged Baggage.**

**You are also covered** up to the amount shown in the benefits schedule in respect of emergency purchases for the cost of buying necessary requirements if **You** are deprived of **Your Baggage** for more than 12 hours after arrival at **Your** outbound destination. **You** must provide receipts for the items that **You** buy. If **Your Baggage** is permanently lost, any amount that **We** pay for emergency purchases will be deducted from the total claim.

#### You are not covered for

- a. the amount of the excess shown in the benefits schedule.
- b. more than the amount shown in the benefits schedule for any one item, pair or set in respect of **Baggage** and **Valuables**.
- c. any additional value an item may have because it forms part of a pair or set.
- d. **Baggage** stolen from an **Unattended** motor vehicle between the hours of 9p.m and 8a.m or, if the theft occurs at any other time of day, unless the vehicle is being used for travel between different points of overnight accommodation.
- e. loss or theft of or damage to **Valuables** whilst **Unattended** unless locked in a hotel safe (or equivalent facility) or locked in **Your** private accommodation.
- f. the loss of **Valuables** overboard.
- g. breakage of fragile articles unless caused by fire or by an **Accident** to the aeroplane, ship or vehicle in which they are being carried.
- h. loss or theft of or damage;
  - i. to household goods, bicycles, waterborne craft and their fittings of any kind.
  - ii. to motor vehicles, trailers or caravans or any fixtures or accessories therein or thereon.
  - iii. to watersports and **Ski equipment**.
  - iv. to **Baggage** in transit unless reported to the carrier as soon as possible and a written Property Irregularity Report is obtained.
  - v. to **Baggage** sent by post, freight or any other form of unaccompanied transit.
  - vi. to **sports equipment** whilst in use.
  - vii. caused by moth or vermin or by gradual wear and tear in normal use.
  - viii. caused by any process of cleaning, repairing or restoring.
  - ix. caused by leakage of powder or fluid from containers carried in **Your Baggage**.
  - x. to furs.
- i. mechanical or electrical breakdown.
- j. loss, theft or damage to business equipment, business goods, samples, tools of trade and other items used in connection with **Your** business, trade, profession or occupation.

**Please also refer to the special exclusions and conditions shown below and to the general exclusions and conditions.**

## Section 8 Personal money

*Cover under this section starts at the time of collection from the bank, or 72 hours prior to departure, whichever is the later.*

**You are covered** up to the amount shown in the benefits schedule for loss or theft of **Personal money**.

#### You are not covered for

- a. the amount of the excess shown in the benefits schedule.
- b. loss or theft from an **Unattended** motor vehicle at any time.
- c. more than the amount shown in the benefits schedule in respect of cash carried by **You**, whoever it may belong to.
- d. any loss resulting from shortages due to error, omission or depreciation in value.
- e. loss or theft of **Personal money** whilst **Unattended** unless locked in a hotel safe (or equivalent facility) or locked in **Your** private accommodation.

**Please also refer to the special exclusions and conditions shown below and to the general exclusions and conditions.**

## Section 9 Loss of passport

**You are covered** up to the amount shown in the benefits schedule following loss or theft of **Your** passport for any additional necessary travel and accommodation costs, including the cost of any emergency passports, visas or permits, incurred in obtaining a replacement to enable **You** to continue **Your Trip** or return to **Your Home country**.

#### You are not covered for

- a. loss or theft either from an **Unattended** motor vehicle at any time or from **Baggage** whilst in transit unless **You** are carrying it.
- b. the cost of a permanent replacement for the passport itself.

**Please also refer to the special exclusions and conditions shown below and to the general exclusions and conditions.**

## Special exclusions applicable to sections 7, 8 & 9

#### You are not covered for

- a. loss or theft of anything left **Unattended** in a public place, including a beach.
- b. loss or theft of **Valuables**, **Personal money**, passport and any item unless reported to the police within 24 hours of discovering the loss, or as soon as possible after that, and a written report or reference obtained in the country where the incident occurred.
- c. loss of bonds or securities of any kind.
- d. delay, detention, seizure or confiscation by customs or other officials.

## Special conditions applicable to sections 7, 8 & 9

It is a requirement of this insurance that **You** must;

- a. in the event of a claim,
  - i. provide receipts or other documentation to prove ownership and value, especially in respect of **Valuables**, and
  - ii. retain any damaged items for **Our** inspection.
- b. take care of **Your** property at all times and take all practical steps to recover any item lost or stolen. Failure to exercise all reasonable care may result in **Your** claim being reduced or declined.

**Please also refer to the general exclusions and conditions.**

## Section 10 Catastrophe & travel disruption cover

**NOT AVAILABLE**

## Section 11 Personal liability

**You are covered** up to the amount shown in the benefits schedule (inclusive of legal costs and expenses), incurred with **Our** written consent, if **You** are held legally liable to pay as compensation for any claim or series of claims arising from any one event or source of original cause if **You** are held legally liable for causing;

- a. **Accidental** bodily injury, including death, illness and disease to a person, and/or
- b. **Accidental** loss of or damage to material property (property that is both material and tangible).

#### You are not covered for

- a. the amount of the excess shown in the benefits schedule in respect of each claim.
- b. any liability for;
  - i. bodily injury, illness or disease of any person who is **Your Relative**, a travelling companion, or under a contract of employment, service or apprenticeship with **You** when the bodily injury, illness or disease arises out of and in the course of their employment to **You**.
  - ii. loss or damage to property belonging to or held in trust by or in the custody or control of **You** other than temporary accommodation occupied by **You** in the course of the journey;
  - iii. bodily injury or damage caused directly or indirectly in connection with the ownership, possession or use by **You** or on behalf of **You** of aircraft, hovercraft, watercraft (other than non-mechanically powered watercraft less than 30 feet in length used on inland waters), mechanically propelled vehicles (other than golf buggies used on golf courses and not on public roads), firearms (other than sporting guns).

- iv. bodily injury caused directly or indirectly in connection with the ownership, possession or occupation of land or buildings, immobile property or caravans or trailers, any willful or malicious act, carrying on of any trade, business or profession, any racing activity.
- v. fraudulent, dishonest or criminal acts of **You** or any person authorised by **You**.
- vi. any claim assumed by **You** under any contract or agreement unless such liability would have attached in the absence of such contract or agreement.
- vii. punitive or exemplary damages.

#### Conditions

- a. **You** or **Your** legal representatives will give **Us** written notice immediately if **You** have received notice of any prosecution or inquest in connection with any circumstances which may give rise to liability under this section.
- b. no admission, offer, promise, payment or indemnity shall be made by or on behalf of **You** without **Our** prior written consent.
- c. every claim notice, letter, writ or process or other document served on **You** shall be forwarded to **Us** immediately upon receipt.
- d. **We** shall be entitled to take over and conduct in **Your** name the defence or settlement of any claim or to prosecute in **Your** name for **Our** own benefit any claim for indemnity or damages against all other parties or persons.
- e. **We** may at any time pay **You** in connection with any claim or series of claims the sum insured (after deduction of any sums already paid as compensation) or any lesser amount for which such claim(s) can be settled. Once this payment is made **We** shall relinquish the conduct and control and be under no further liability in connection with such claim(s) except for the payment of costs and expenses recoverable or incurred prior to the date of such payment.

**Please also refer to the general exclusions and conditions.**

## Section 12 Legal expenses

**You are covered** up to the amount shown in the benefits schedule for legal costs and expenses incurred in pursuit of a claim for compensation or damages from a third party who causes **Your** death or bodily injury or illness during **Your Trip**.

#### Definitions applicable to this section

**Legal expenses** means;

- a. fees, expenses and other disbursements reasonably incurred (as determined by **Our** legal counsel) by a **Legal representative** in pursuing a claim or legal proceedings for damages and/or compensation against a third party who has caused **Your** bodily injury, death or illness.
  - b. fees, expenses and other disbursements reasonably incurred (as determined by **Our** legal counsel) by a **Legal representative** in appealing or resisting an appeal against the judgement of a court tribunal or arbitrator.
  - c. costs that **You** are legally liable for following an award of costs by any court or tribunal or an out-of-court settlement made in connection with any claim or legal proceedings.
- Legal representative** means a solicitor, firm of solicitors, lawyer, or any appropriately qualified person, firm or company, appointed by **Us** to act on **Your** behalf.

#### You are not covered for

- a. the amount of the excess shown in the benefits schedule in respect of each claim.
- b. any liability for;
  - i. any claim reported to **Us** more than 12 months after the beginning of the incident which led to the claim.
  - ii. **Legal expenses** incurred in the defence against any civil claim or legal proceedings made or brought against **You**.
  - iii. **Legal expenses** incurred before receiving **Our** prior written approval, unless such costs would have been incurred subsequently to **Our** approval.
  - iv. **Legal expenses** incurred in connection with any criminal or willful act committed by **You**.
  - v. **Legal expenses** incurred for any claim or legal proceedings brought against the **Insurer**, **Us**, **Our** agents or Worldwide Travel Insurance Services.
  - vi. fines, compensation or other penalties imposed by a court or other authority.
  - vii. **Legal expenses** incurred after **You** have not accepted an offer from a third party to settle a claim or legal proceeding where the offer is considered by all parties to be reasonable or **You** not accepting an offer from **Us** to settle a claim.

- viii. **Legal expenses** which **We** consider to be unreasonable or excessive or unreasonably incurred (as determined by **Our** legal counsel).
- x. actions between individuals named on the schedule.
- xi. **Legal expenses** incurred in pursuing any claim for compensation against the manufacturer, distributor or supplier of any drug, medication or medicine.

#### Conditions

- a. written consent must be obtained from **Us** prior to incurring **Legal expenses**. This consent will be given if **You** can satisfy **Us** that;
  - i. there are reasonable (as determined by **Our** legal counsel) grounds for pursuing or defending the claim or legal proceedings, and
  - ii. it is reasonable (as determined by **Our** legal counsel) for **Legal expenses** to be provided in a particular case. The decision to grant consent will take into account the opinion of **Your Legal representative** as well as that of **Our** own advisers. **We** may request, at **Your** own expense, an opinion of counsel as to the merits of the claim or legal proceedings. If the claim is admitted, **Your** costs in obtaining this opinion will be covered by this policy.
- b. all claims or legal proceedings including any appeal against judgement resulting from the same original cause, event, or circumstance, will be regarded as one claim.
- c. if **You** are successful in any action, any **Legal expenses** provided by **Us** will be reimbursed to **Us**.
- d. **We** may at **Our** discretion assume control at any time of any claim or legal proceedings in **Your** name for damages and or compensation from a third party.
- e. **We** may at **Our** discretion offer to settle a claim with **You** instead of initiating or continuing any claim or legal proceedings for damages and or compensation from a third party, and any such settlement will be full and final in respect to the claim.
- f. **We** may at **Our** discretion offer to settle a counter-claim against **You** instead of continuing any claim or legal proceedings for damages and or compensation from a third party.

Please also refer to the general exclusions and conditions.

### Section 13

Business personnel replacement  
NOT AVAILABLE

### Section 14

Financial failure insurance  
NOT AVAILABLE

**For single trip policies, cover under sections 15, 16 & 17 only applies if You have paid the appropriate premium for Wintersports cover.**

### Section 15

#### Ski equipment & other expenses

**You are covered** up to the amounts shown in the benefits schedule, after making reasonable allowance for Wear, tear and depreciation and subject to the special condition shown below for;

- a. loss or theft of, or damage to **Ski equipment** owned by **You**.
- b. loss or theft of, or damage to **Ski equipment** hired by **You**.
- c. the cost of necessary hire of **Ski equipment** following;
  - i. loss or theft of, or damage to, **Your Ski equipment** insured by **Us**, or
  - ii. the delayed arrival of **Your Ski equipment**, subject to **You** being deprived of their use for not less than 12 hours.

**We may at Our option replace, reinstate or repair the lost or damaged Ski equipment.**

#### You are not covered for

- a. the amount of the excess shown in the benefits schedule.
- b. **Ski equipment** stolen from an **Unattended** motor vehicle between the hours of 9p.m and 8a.m or, if stolen at any other time, unless they were forcibly removed whilst locked either inside the vehicle or to a purpose designed ski rack.
- c. damage to **Ski equipment** whilst in use for race training or racing.

- d. **Your damaged Ski equipment** unless returned to **Your Home country** for **Our** inspection.
- e. loss or theft of **Ski equipment** not reported to the police within 24 hours of discovering the loss, or as soon as possible after that, and a written report or reference obtained in the country where the incident occurred.
- f. loss or theft of, or damage to, **Ski equipment** whilst in transit unless reported to the carrier and a Property Irregularity Report obtained.
- g. loss or theft of, or damage to, **Ski equipment** over 5 years old.

#### Special condition applicable to section 15

In respect of loss or damage to **Ski equipment**, **We** will not pay more than the proportion shown below depending on the age of the equipment.

Age of equipment	Amount payable
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

Please also refer to the general exclusions and conditions.

### Section 16

#### Ski pack

**You are covered** up to the amount shown in the benefits schedule for the proportionate value of any ski pass, ski hire or ski school fee that **You** are unable to use following;

- a. **Accidental** injury or sickness that prevents **You** from skiing, as medically certified, or
- b. loss or theft of **Your** ski pass.

#### You are not covered

- a. the amount of the excess shown in the benefits schedule.
- b. for loss or theft not reported to the police within 24 hours of discovering the loss, or as soon as possible after that, and a written report or reference obtained in the country where the incident occurred.

Please also refer to the general exclusions and conditions.

### Section 17

#### Piste closure

*Valid for the period 15th December to 31st March only.*

**You are covered** for the daily amount shown in the benefits schedule for each day that it is not possible to ski because all lifts are closed due to a complete lack of snow, adverse weather conditions or avalanche danger in **Your** pre-booked **Trip** resort, up to the total amount shown either;

- a. for the costs **You** have paid for travel to an alternative resort including the necessary additional cost of a ski pass, or
- b. a compensation payment to **You** after **You** return where no alternative is available.

#### You are not covered

- a. if **You** arranged this insurance or booked **Your Trip** within 14 days of departure and at that time there was a lack of snow in **Your** planned resort such that it was likely to be not possible to ski.
- b. any circumstances where transport costs, compensation or alternative skiing facilities are provided to **You**.

#### Conditions

- a. **You** must provide written confirmation from the resort authorities or ski lift operators for the period that there was no skiing available owing to the closure of all ski lifts.
- b. **You** must submit receipts for the travel and ski pass costs that **You** wish to claim.

Please also refer to the general exclusions and conditions.

## General exclusions

**You are not covered** for claims arising out of;

1. loss or damage directly or indirectly occasioned by, happening through or in consequence of war, terrorism, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation, or requisition or destruction of or damage to property by or under the order of any government or public or local authority. However cover is provided in respect of claims under section 2 - Emergency medical expenses, section 3 - Hospital stay benefit or section 4 - Personal accident of the policy arising through terrorism other than losses arising from nuclear, chemical and biological exposures unless **You** planned to travel to areas that were publicly known to be affected or threatened by such risks (please see general condition 3).
2. **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.
3. loss, damage or expense directly or indirectly resulting from or attributable to radioactive contamination of any nature.
4. **You** being exposed to the **Utilisation of nuclear, chemical or biological weapons of mass destruction**.
5. loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other flying objects travelling at sonic or supersonic speeds.
6. **You** travelling in an aircraft other than as a fare paying passenger in a fully licensed passenger carrying aircraft except where **You** have selected Activities option Rate 1 - Flying Light Aircraft: piloting as PPL holder or Gliding: as pilot with necessary licence or option Rate 2 - Flying Light Aircraft: Pilot Training or Gliding: Pilot Training.
7. Your suicide or attempted suicide or **Your** deliberate exposure to unnecessary danger (except in an attempt to save human life).
8. Any form of alcohol abuse including alcohol withdrawal or **You** drinking too much alcohol where it is reasonably foreseeable that such consumption could result in a serious impairment of **Your** faculties and/or judgment resulting in a claim. **We** do not expect **You** to avoid alcohol on **Your Trip** but **We** will not cover any claim arising because **You** have drunk so much alcohol that **Your** judgment is seriously affected and **You** need to make a claim as a result.
9. **Your** wilful, self-inflicted injury or illness, suicide or attempted suicide, solvent abuse, the use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a **Medical practitioner** but not for the treatment of drug addiction) or self-exposure to needless peril (except in an attempt to save human life).
10. **Your** failure to obtain any recommended vaccines, inoculations or medications prior to **Your Trip** departure and take the complete course of any recommended medications, wherever such precautions are strongly recommended (or would have been but **You** failed to seek suitable advice) in the light of **Your** age, personal medical history, circumstances and travel plans.
11. **Your** participation in activities of a hazardous nature except as listed on page 9, unless declared to and accepted by **Us**. **We** reserve the right to apply special terms and conditions (which may include additional premiums) and coverage will be subject to **Your** compliance with them.
12. winter sporting activities, except **Wintersports** as defined and the appropriate premium paid. In no event, however, is cover granted for **Wintersports** if **You** are aged over 74.
13. scuba diving if **You** are;
  - i. not qualified for the dive undertaken unless **You** are accompanied by a properly qualified instructor or,
  - ii. diving alone.Cover applies to depths according to **Your** qualifications but in any event no greater than 30 metres.
14. racing of any kind (other than on foot) and bloodsports.
15. **Your** participation or engagement in **Manual work**, professional entertaining, professional sports, racing (other than on foot), motor rallies and motor competitions, flying except as a fare paying passenger in a fully licensed passenger-carrying aircraft.
16. **You** taking part in civil commotions or riots of any kind.
17. any other loss, damage or additional expense following on from the event for which **You** are claiming, unless **We** provide cover under this insurance. Examples of such loss, damage or additional expense would be the cost of replacing locks after losing keys, costs incurred in preparing a claim or loss of earnings following bodily injury, illness or disease.

18. **You** breaking or failing to comply with any law whatsoever.

19. any financial incapacity, whether directly or indirectly related to the claim other than as provided for under section 1 - Cancellation or curtailment/loss of holiday (e).
20. the bankruptcy or insolvency of a tour operator, travel agent, transport company or accommodation supplier, except as provided for by section 14 - Financial failure insurance. claims where there is another insurance policy covering the same risk costs recoverable elsewhere
21. a tour operator failing to supply advertised facilities.
22. any government regulation or act.
23. **You** travelling against any health requirement stipulated by the carrier, their handling agents or any other transport provider.
24. any search and rescue costs.
25. claims where there is another insurance policy covering the same risk
26. costs recoverable elsewhere
27. claims arising from the unauthorised use of a swimming pool outside the specified times of opening.
28. **You** climbing on top of, or jumping from a vehicle or jumping from a building or balcony, or climbing or moving from any external part of any building to another (apart from stairs) regardless of the height, unless **Your** life is in danger or **You** are attempting to save human life.
29. any claim where **You** are not wearing a helmet whilst on a motorcycle, motor scooter or moped.
30. any claim where **You** are not wearing a seatbelt when travelling in a motor vehicle, where a seatbelt is available.
31. any claim arising directly or indirectly from a **Cyber Event**.

## General conditions

**You** must comply with the following conditions to have full protection of **Your** policy. If **You** do not comply **We** may at **Our** option cancel the policy or refuse to deal with **Your** claim or reduce the amount of any claim payment.

1. **You** must answer the important conditions relating to health shown on page 2 truthfully and to the best of **Your** knowledge and contact **Us** if required. If **You** do not do so then any related claim may be reduced or rejected or **Your** policy may become invalid.
2. **You** must tell **Us** as soon as possible about any change in circumstances which affects **Your** policy, including **You**, a travelling companion, a **Business colleague** or **Relative** receiving confirmation of a new or changed medical condition or currently being under medical investigation, change in sporting activity or leisure activities **You** intend to participate in during **Your Trip** or any additional person(s) to be insured under this policy. **We** have the right to reassess **Your** coverage, policy terms and/or premium after **You** have advised **Us** of such change. This may include **Us** accepting a claim for the cancellation charges applicable at the time if no suitable or alternative cover for **Your** changed circumstances can be provided. If **You** do not advise **Us** of any change then any related claim may be reduced or rejected or **Your** policy may become invalid.
3. **You** must tell **Us** if **Your** plans for **Your Trip** include travel to areas affected or threatened by war or similar risks as set out in general exclusion 1. **We** reserve the right not to cover such **Trips** or, if **We** will cover them, to apply special terms or conditions and/or charge an additional premium as **We** think appropriate. No cover for such **Trips** shall attach unless **You** accept such terms, including any additional premium, before **You** depart.
4. **You** must advise the claims handlers of any possible claim within 31 days of **Your** return **Home**. **You** must supply them with full details of all the circumstances and any other information and documents **We** may require.
5. **You** must keep any damaged articles that **You** wish to claim for and, if requested, send them to the claims handlers at **Your** own expense. If **We** pay a claim for the full value of an article, it will become **Our** property.
6. **You** must agree to have medical examination(s) if required. In the event of **Your** death, **We** are entitled to have a post mortem examination. All such examinations will be at **Our** expense.
7. **You** must assist **Us** to obtain or pursue a recovery or contribution from any third party or other Insurers (including the Department of Work and Pensions) by providing all necessary details and by completing any forms.

8. **You** must take all reasonable steps to avoid or minimise any loss that might result in **You** making a claim under this insurance.
9. **You** must comply with all the terms, provisions, conditions and endorsements of this insurance. Failure to do so may result in a claim being declined.
10. except for claims under section 3 - Hospital stay benefit, section 4 - Personal accident & section 5 - Travel delay, this insurance shall only be liable for its proportionate share of any loss or damage that is covered by any other insurance.
11. **We** may take action in **Your** name but at **Our** own expense to recover for **Our** benefit the amount of any payment made under this insurance.
12. **We** may at **Our** option discharge any liability under this insurance by replacing or repairing any article or articles lost or damaged, or by issuing **You** with a credit voucher.
13. this insurance is non-transferable. If a **Trip** is cancelled for any reason other than that described in section 1 - Cancellation or curtailment/loss of holiday then the cover for that **Trip** terminates immediately and no refund of premium in whole or part will be made.
14. **You** must not act in a fraudulent manner. If **You** or anyone acting for **You**;
  - i. make a claim under the policy knowing the claim to be false or fraudulently exaggerated in any way, or
  - ii. make a statement in support of a claim knowing the statement to be false in any way, or
  - iii. submit a document in support of a claim knowing the document to be forged or false in any way, or
  - iv. make a claim for any loss or damage caused by **Your** wilful act or with **Your** connivance, then;
    - a. **We** will not pay the claim.
    - b. **We** will not pay any other claim which has been or will be made under the policy.
    - c. **We** may make the policy void from the date of the fraudulent act.
    - d. **We** will be entitled to recover from **You** the amount of any claim already paid under the policy.
    - e. **We** will not refund any premium.
    - f. **We** may inform the police of the circumstances
15. when booking **Your Trip** or purchasing this policy, whichever is later, **You** must be fit to travel and participate in any activities and excursions that **You** have planned during **Your Trip**.
16. **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.
17. Several Liability Notice. The subscribing (re)insurers' obligations under contracts of (re)insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing (re)insurers are not responsible for the subscription of any co-subscribing (re)insurer who for any reason does not satisfy all or part of its obligations.



## Activities - Cover options

**Please note** any involvement in the following sports and/or activities is subject to **Your** compliance with local laws and regulations and the use of recommended safety equipment (such as a helmet, harness, knee and/or elbow pads).  
Please refer to Section 11 - Personal liability for what **We** will and will not cover whilst participating in the listed activities.

Please note the policy terms and conditions will still apply in all other respects.

**Please also refer to the general exclusions and conditions.**

## Activities

**This policy automatically covers You to undertake the activities listed below on an amateur basis.**

Abseiling;  
Aerobics/Fitness Classes;  
Angling;  
Archaeological Digging;  
Archery;  
Assault Course;  
Athletics;  
Badminton;  
Ballooning;  
Banana Boating;  
Baseball/Rounder/Softball;  
Basketball/Korfbal/Netball/Volleyball;  
Biathlon;  
Black water rafting;  
Boating (any craft under 10m long, inside 12 mile limit);  
Boardsailing;  
Boules/Bowling;  
Bungee jumping (max 3 jumps);  
Camel Riding;  
Canoeing/Kayaking (river and lake grades 1-3 only);  
Clay Pigeon Shooting  
Climbing wall;  
Conservation or charity work (hand tools only)  
Cricket;  
Croquet;  
Curling;  
Cycling (recreational). Including touring, not BMX, competition or stunting;  
Dance;  
Dinghy sailing (inside 12 mile limit);  
Dog sleigh (not racing);  
Dry slope Skiing;  
Elephant Riding;  
Falconry;  
Fell (hill) walking/running;  
Fencing;  
Fishing/Deep sea Fishing;  
Flying (in a light aircraft as a passenger, not piloting)  
Football (recreational soccer)  
Gliding (as a passenger, not piloting);  
Golf;  
Go-karting;  
Handball;  
Hill Walking/Orienteering/Rambling;  
Hockey/Hurling/Lacrosse/Shinty;  
Horse riding (no jumping or competition. No hunting);  
Hot Air Ballooning (passenger);  
Ice skating;  
Jet Boating (passenger)  
Jet skiing;  
Kabaddi (Tag);  
Kayaking (grade 1-3 rivers)  
Kite buggying (single seat);  
Kite flying (Traction);  
Light Aircraft/Helicopter (passenger)  
Motorcycling (on road, provided **You** hold an appropriate full licence and are wearing a helmet, max 14 days any one **Trip**);  
Mountain biking (not competition or downhill)  
Overland safaris (organised **Trips** only)  
Paintballing/war games;  
Parasailing / Parasailing (over water)  
Pony trekking;  
Racquetball;  
Roller skating/Rollerblading/Inline Skating;  
Rowing;  
Running/Jogging  
Sail boarding;  
Sailing yachts (longer than 10 metres, within 60 miles of a safe haven);  
Sailing in Territorial Waters (less than 12 miles from shore);  
SCUBA; to 30m (providing **You** hold the appropriate qualification or are diving with an instructor);  
Shooting: Target /Clay Pigeon

Skateboarding (no stunts);  
Sledging/Tobogganing (recreational);  
Sleigh riding (pulled by reindeer, horses or dogs);  
Snooker;  
Snorkelling;  
Squash;  
Surfing;  
Swimming;  
Table Tennis;  
Tai Chi;  
Ten Pin Bowling;  
Tennis  
Tobogganing;  
Trampoline (recreational);  
Trekking (below 4,000m);  
Waterpolo;  
Water skiing;  
Water Tubing;  
White water Rafting: grade 1-2  
Wind Surfing  
Yoga  
Zip Wire  
Zorbing

## Special conditions and exclusions applicable to Rate 1 and Rate 2 activities.

- Please note** whilst participating in any of the activities listed under Rate 1 or Rate 2, the following will apply;
- a. no cover will be provided under section 4 - Personal accident.
  - b. any involvement in these sports and/or activities is subject to **Your** compliance with local laws and regulations and the use of recommended safety equipment (such as a helmet, harness, knee and/or elbow pads)
  - c. no cover will be provided under section 11 - Personal liability.
  - d. the policy excess under section 2 - Emergency medical expenses will be increased to £200 per person per claim.

Please note the policy terms and conditions will still apply in all other respects.

**Please also refer to the general exclusions and conditions**

## Rate 1

**In addition to the activities listed above, the following activities will also be covered on an amateur basis and are subject to a 50% premium load.**

Acrobatics;  
Bouldering (up to 4m with crash mat);  
Boxing;  
Bungee Jumping (more than 3 jumps);  
Canoeing or Kayaking, grade 4 or over; Sea;  
Cycling: event training;  
Dancing: Professional;  
Flying Light Aircraft: piloting as PPL holder;  
Football: competitive, non professional;  
Glacier Walking (2,000-4,000m);  
Gliding: as pilot with necessary licence;  
Gymnastics (competitive);  
High Diving (up to 5m);  
Kite Surfing;  
Marathon Running;  
Martial Arts(casual non-competitive);  
Motorcycle Touring in **Europe** only;  
Outward-bound Pursuits;  
Rapelling;  
Rock Climbing (single pitch tethered climbs only);  
Roller Hockey;  
Rugby (non - professional);  
Running: marathon / half-marathon;  
Sailing: In International Waters, in-shore Regattas & Tall Ships, Dragon Boat Racing;  
Sandboarding;  
Shark Diving;  
Skate Boarding with Stunts;  
Swimming: open Sea;  
Track & Field events: Decathlon, Modern Pentathlon, Triathlon (not exceeding Olympic distance);  
Tree Climbing/Canopy Walking;  
Wake Boarding;  
Weight Lifting;  
Whitewater Rafting / Canoeing:grade 3-4;  
Working with animals (non-professional & see **Manual work** notes);  
Wrestling;

## Rate 2

**In addition to the activities listed above, the following activities will also be covered on an amateur basis and are subject to a 100% premium load.**

American Football (Non-professional);  
Canyoning;  
Cattle (Dude) Ranching;  
Circuit Driving (not Racing);  
Flying Light Aircraft: Pilot Training;  
Gaelic Football  
Gliding: Pilot Training;  
Heli skiing (with a qualified guide);  
Horse Riding: Gymkhana/Show Jumping/Polo;  
Ice Hockey;  
Pelota (Jai Alai);  
Rugby union & league;  
Sailing (more than 60 miles from a safe haven);  
SCUBA: to 40m (providing **You** hold the appropriate qualification or are diving with an instructor);  
Ski Touring;  
Via Ferrata;

**We** can arrange cover for a wide range of sports and activities. If the activity in which **You** are participating is not listed, please contact **Worldwide Travel Insurance Services Ltd** on **01892 833 338**.

## Manual work notes

Please refer to the definition of **Manual work** for what is considered to be **Manual work**.

The exclusion of **Manual work** does not apply to work that is:

- i. purely managerial /supervisory, sales or administrative capacity;
- ii. bar, restaurant and catering trade staff, musicians and singer;
- iii. Fruit pickers (who do not use heavy machinery), casual light work, light agricultural work; supervised conservation work, voluntary charity work labour where there is no financial gain; in such circumstances there will be no cover for hands-on involvement with the installation, assembly, maintenance, repair or use of electrical, mechanical or hydraulic plant, heavy power tools and industrial machinery, or work above two storeys or 3 metres above ground level (whichever is the lower).
- iv. supervised animal sanctuary work but no cover can be provided in relation to any interaction with dangerous wild animals such as lions, tigers or big cats of any kind.

In relation to iii. and iv. above Personal accident and Personal liability cover due to **Your** participation in the work activity is excluded and in the event of an injury the excess under section 2 - Emergency medical expenses will be increased to £200 and an excess waiver will not delete this increased excess.

## Complaints procedure

Our aim at all times is to provide a first class standard of service. However, there may be times when **You** feel that this objective has not been achieved. When this happens, **We** want to hear about it so **We** can try and put things right. Should **You** have any query or complaint regarding;

A. The sale of **Your** policy, please contact;

**Worldwide Travel Insurance Services Ltd**  
**Business Centre, 1-7 Commercial Road,**  
**Paddock Wood, Tonbridge, Kent, TN12 6YT.**  
**Tel: 01892 833338**

**Email: [customerservices@worldwideinsure.com](mailto:customerservices@worldwideinsure.com)**

B. **Your** claim, please contact;

**Claims Settlement Agencies Ltd**  
**308 London Road,**  
**Hadleigh, Benfleet,**  
**Essex,**  
**SS7 2DD**  
**Tel: 01702 746560**  
**Email: [info@cсал.co.uk](mailto:info@cсал.co.uk)**

When **You** make contact please provide the following information;

- **Your** name, address and postcode, telephone number and e-mail address (if **You** have one).
- **Your** policy and/or claim number, and the type of policy **You** hold.
- the reason for **Your** complaint.

Any written correspondence should be headed complaint and **You** may include copies of supporting material.

### Unable to resolve your complaint?

In the event that you remain dissatisfied and wish to make a complaint, you can do so at any time by referring the matter to either Chaucer Syndicates Limited. The address of the complaints team at Chaucer is:

**Chaucer Complaints,**  
**Plantation Place, 30 Fenchurch Street,**  
**London,**  
**EC3M 3AD**

**Tel: 020 7105 8161 Fax: 020 7105 8010**

**E-mail: [complianceenquiries@chaucerplc.com](mailto:complianceenquiries@chaucerplc.com)**

or the Complaints Team at Lloyd's. The address of the Complaints Team at Lloyd's is:

**Complaints, Lloyd's,**  
**One Lime Street, London EC3M 7HA**  
**Tel: 020 7327 5693 Fax: 020 7327 5225**  
**E-mail: [complaints@lloyds.com](mailto:complaints@lloyds.com)**  
**Website: [www.lloyds.com/complaints](http://www.lloyds.com/complaints)**

Details of Lloyd's complaints procedures are set out in a leaflet "Your Complaint - How We Can Help" available at [www.lloyds.com/complaints](http://www.lloyds.com/complaints) and are also available from the above address.

If you remain dissatisfied after Lloyd's has considered your complaint, you may have the right to refer your complaint to the Financial Ombudsman Service (FOS). The contact details for the FOS are:

**The Financial Ombudsman Service,**  
**Exchange Tower,**  
**London,**  
**E14 9SR.**  
**Telephone 0800 023 4 567**

(calls to this number are free from "fixed lines" in the UK) or 0300 1239123 (calls to this number are charged at the same rate as 01 and 02 numbers on mobile phone tariffs in the UK).

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

The FOS is an independent service in the UK for settling disputes between consumers and businesses providing financial services. You can find more information on the FOS at [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

Making a complaint does not affect your right to take legal action.

## Data Protection Notice

### Introduction

Please make sure that **You** read and understand this Data Protection notice as it explains to **You** what **We** will do with the information that **You** give **Us** in respect of this travel insurance policy.

In certain circumstances, **We** may need **Your** consent to process certain categories of information about **You** (including sensitive details such as information about **Your** health). 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. 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.

**You** should show this notice to any other person covered under **Your** insurance policy. If **Your** application includes other individuals **You** should obtain their consent to **Us** using their personal information as described in this notice before **You** give their information to **Us**.

When **We** use the terms '**We**', '**Our**' or '**Us**' in this Data Protection notice, **We** mean both Worldwide Travel Insurance Services Limited and Chaucer Syndicates Limited.

The ways in which **We** use the personal information **You** give to **Us** are described below. **Your** insurance policy is made available to **You** by Worldwide Travel Insurance Services Limited and Chaucer Syndicates Limited.

**We** will sometimes use the personal information **You** give to **Us** for different purposes than Worldwide Travel Insurance Services Limited.

### The Data Controllers

Worldwide Travel Insurance Services Limited and Chaucer Syndicates Limited are the Data Controllers of all information collected and processed in the context of the insurance policy.

### Protection And Uses Of Your Personal Data

The security of **Your** personal information is very important to **Us**. All personal information that **You** supply to **Us** either in respect of yourself or other individuals in connection with **Our** products and/or services will be treated in confidence by **Us** and will be used by **Us** for the purpose of providing and administering **Our** products and services. This may involve the collection and processing of sensitive data (as defined in the Data Protection Act 1998 and from 25th May 2018 the General Data Protection Regulation (EU) 2016/649) and if **You** complete an application form for **Our** products and/or services **You** will be giving **Your** consent to such information being processed by **Us** (which may include other companies within the Worldwide Travel Insurance Services Limited and Chaucer Syndicates Limited or **Our** agents. **We** may collect **Your** personal information from third parties where this is necessary in order to provide insurance services to **You**.

**We** may analyse the personal information **You** provide in combination with any other information that **We** lawfully hold or receive for the purposes of reviewing, tailoring and improving **Our** products and services. **We** may also engage the services of third parties to perform any such analysis on **Our** behalf, however in doing so **We** will ensure that all such activities are carried out in compliance with the applicable data protection legislation.

In order to protect **Your** privacy, **We** will anonymise any information **We** analyse as far as possible. **Your** personal and sensitive data may also be shared with the underwriter of **Our** insurance products. It may be necessary to pass **Your** personal and sensitive data to other companies for processing on **Our** behalf, or to organisations with which **We** work to provide the benefits under **Your** policy (for example, to a hospital which is responsible for any treatment **You** receive through **Your** policy). Some of these companies or organisations may be based outside **Europe** in countries which may not have the laws to protect **Your** personal data, but in all cases **We** will ensure that it is kept securely and only used for the purposes described in this notice.

### Want more details?

For more information about how **We** use **Your** personal information please see our full privacy notice(s), which is/are available online on **Our** website [www.chaucerplc.com/privacy-cookie-policy/](http://www.chaucerplc.com/privacy-cookie-policy/) or in other formats on request.

For details of Worldwides full privacy notice please visit [www.worldwideinsure.com/privacy-notice.htm](http://www.worldwideinsure.com/privacy-notice.htm)

### Inaccurate Data

If **You** believe that **We** are holding inaccurate information about **You** in relation to **Your** insurance policy, please contact **Us** and **We** will be happy to correct any errors.

### Telephone Calls

Please note that for **Your** and **Our** mutual protection telephone calls to **Us** may be monitored and/or recorded for the purposes of:

- establishing facts relevant to **Our** business;
- checking that **We** comply with laws, regulations and self-regulatory procedures;
- checking and/or demonstrating the standards that **We** should be meeting, for example, for quality control and staff training purposes;
- preventing or detecting crime;
- investigating or detecting the unauthorised use of **Our** systems, to secure **Our** system and to ensure the effective operation of **Our** systems.

### Fraud Prevention, Detection and Claims History

In order to prevent and detect fraud **We** may at any time:

- Share information about **You** with other organisations and public bodies including the Police, loss adjustors and other third parties that **We** engage to investigate claims;
- Check and/or file **Your** details with fraud prevention agencies and databases, and if **You** give **Us** false or inaccurate information and **We** suspect fraud, **We** will record this. **We**, and other organisations involved in the administration of **Your** policy, may also search these agencies and databases to:
- Help make decisions about the provision and administration of insurance, credit and related services for **You** and members of **Your** household;
- Trace debtors or beneficiaries, recover debt, prevent fraud and to manage **Your** accounts or insurance policies;
- Check **Your** identity to prevent money laundering, unless **You** furnish **Us** with other satisfactory proof of identity;
- Undertake credit searches and additional fraud searches.

**We** can supply on request further details of the databases **We** access or contribute to. [When **We** investigate claims, **We** may conduct searches of publicly accessible information about **You** available on the internet, including using sources such as search engines and social media].

### Customer Satisfaction Surveys

**We** aim to continuously improve the services **We** offer to **Our** customers.

Occasionally **We** carry out customer satisfaction surveys which may be for **Our** own benefit or for more general interest, and **We** may need to collect further information about **You** in connection with them. Surveys will usually be carried out by **Us** but in some circumstances **We** will use an external firm. **Your** participation in such a survey is entirely optional but **Your** help and feedback would be appreciated.

### Contact Us

If **You** have any questions about the way in which **We** use **Your** personal information, please contact the Customer Helpline or **Our** Data Protection Officer by calling **Us** on 01892 833338 .

## Information you have given us

In deciding to accept this policy and in setting the terms and premium, **We** have relied on the information **You** have given **Us**. **You** must take care when answering any questions **We** ask by ensuring that all information provided is accurate and complete.

If **We** establish that **You** deliberately or recklessly provided **Us** with false or misleading information **We** will treat this policy as if it never existed and decline all claims.

If **We** establish that **You** carelessly provided **Us** with false or misleading information it could adversely affect your policy and any claim. For example, **We** may:

- treat this policy as if it had never existed and refuse to pay all claims and return the premium paid. **We** will only do this if **We** provided **You** with insurance cover which **We** would not otherwise have offered;
- amend the terms of **Your** insurance. **We** may apply these amended terms as if they were already in place if a claim has been adversely impacted by **Your** carelessness;

- reduce the amount **We** pay on a claim in the proportion the premium **You** have paid bears to the premium **We** would have charged **You**; or
- cancel **Your** policy in accordance with the Right to cancel condition below.

**We** or **Your** insurance broker will write to you if we:

- intend to treat **Your** policy as if it never existed; or
- need to amend the terms of **Your** policy.

If **You** become aware that information **You** have given **Us** is inaccurate, **You** must inform **Worldwide** on 01892 833338 as soon as practicable.

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## Cancellation rights

**We** hope **You** are happy with the cover this policy provides. However, if after reading this policy, this insurance does not meet with **Your** requirements, please return it to Worldwide, within 14 days of receipt and **We** will refund **Your** premium other than in respect of renewing annual multi-trip policies where **You** may cancel the policy within 14 days of the renewal date. Any premium already paid will be refunded to **You** provided **You** have not travelled, no claim has been made or is intended to be made and no incident likely to give rise to a claim has occurred. If **You** cancel after the cancellation period, **You** may be entitled to a pro rata refund of premium unless **Your** policy has a duration of less than one month. **We** shall not be bound to accept renewal of any insurance and may at any time cancel any insurance document by sending 21 days notice to **You** at **Your** last known address. Provided the premium has been paid in full, **You** shall be entitled to a proportionate rebate of premium in respect of the unexpired period showing on the insurance. **We** reserve the right to cancel this policy immediately in the event of non payment of the premium.

Worldwide Travel Insurance Services Ltd reserve the right to deduct from the rebate of premium the reasonable costs incurred in processing the original sale and cancellation.

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## Important information

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 five hours, the airline must also offer to refund **Your** ticket.

### 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://ec.europa.eu/transport/passenger-rights/en/index.html>

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## Have a safe Trip

**We** are working with the Foreign and Commonwealth Office to do all that **We** can to help British Travellers stay safe overseas. Before **You** go overseas, check out the FCO Website at [www.fco.gov.uk/knowbeforeyougo](http://www.fco.gov.uk/knowbeforeyougo). It is packed with essential travel advice and tips, and up-to-date country specific information.