



International Emergency Medical Expenses & Travel Insurance

0345 450 85 49
www.bannergroup.com

Pre-Existing Medical Conditions

Cover is excluded for any defined Pre-Existing Medical Condition.

Important Declaration

This insurance policy can only provide cover in respect of an event/occurrence which is sudden, unforeseen and beyond **Your** reasonable control. Any questions **We** ask must be answered completely and truthfully otherwise **You** may not be covered. In addition, anyone named under the policy must have read and understood the following relating to **Pre-Existing Medical Conditions**:

Conditions that ARE NOT excluded:

Asthma (under control), Attention Deficit Hyperactivity Disorder, Blindness, Blood Pressure (regulated and under control), Cholesterol (under control), Colitis (no hospital admissions in last 12 months), Common Cold /Influenza, Cuts & Abrasions (non self-inflicted), Deafness, Diabetes diet controlled, Diabetes tablet controlled, Diabetes Insulin controlled (only if under control and no other health conditions / no hospital visits or hypo black outs in last 12 months), Diarrhoea and/or vomiting (resolved), Eczema, Fungal Nail Infection, Gastric Reflux, Glaucoma, Gout, Haemorrhoids (Piles), Hay Fever, Hip Replacement (provided not within 6 months), Migraine (confirmed diagnosis, no ongoing investigations), Nasal Polyp(s) (benign), Neuralgia, Neuritis Nut Allergy, Reflux Oesophagitis, Rhinitis (Allergic), Sinusitis.

Any conditions arising from any Medical operations that occurred over 12 months prior to the date of booking the **Covered Trip** that have had NO complications since the surgery was undertaken. If **You** wish to discuss this further, please contact the **Insurance Intermediary** who sold **You** this Policy.

Definitions of a Pre-Existing Medical Condition:

Means any condition for which **You** (or any other person not necessarily travelling but upon whom travel depends such as an Immediate Relative) have ever received treatment (including surgery, tests or investigations by **Your** doctor or a consultant/specialist, or prescribed drugs/medication). Any Medical Condition for which **You** (or any other person not necessarily travelling but upon whom travel depends such as an Immediate Relative) have received surgery, in-patient treatment or investigations in a hospital or clinic within the last twelve months, or prescribed drugs/medication.

Please Note

One of the many benefits of travel insurance is the easy access it affords to professional assistance if **You** suddenly fall ill abroad. However, travel insurance is not a substitute for private medical insurance. It is important to note that cover is only provided for necessary emergency treatment in the event of an accident or unexpected **Illness** that has been approved by **Our Assistance Company**.

There is no cancellation or curtailment cover for a **Pre-Existing Medical Condition** of persons not necessarily travelling but upon whom travel depends, such as an **Immediate Relative**. Please also see general exclusions for additional details of other excluded Medical Conditions.

THIS IS NOT A PRIVATE MEDICAL INSURANCE POLICY AND WILL NOT RESPOND IN THE SAME WAY A PRIVATE MEDICAL INSURANCE POLICY DOES.

THIS POLICY RESPONDS TO MEDICAL EMERGENCIES AND ASSISTANCE AND REPATRIATION WHERE NECESSARY.

SHOULD YOU REQUIRE A MORE COMPREHENSIVE MEDICAL EXPENSES COVER YOU SHOULD SEEK A SEPARATE PRIVATE MEDICAL INSURANCE POLICY.

This Policy (which includes all endorsements attached to it) is only valid when issued in conjunction with a **Certificate of Insurance**.

If **Your** health changes after the date this policy was purchased, then **You** must contact the medical helpline immediately if:

You have reason to believe that **Your** journey may need to be cancelled or curtailed, or

You are aware of any other circumstance that could reasonably be expected to result in a claim on this policy; or

a doctor has advised **You** against travelling or **You** believe would do so if his/her advice was sought; or

You have any medical condition for which **You** received a terminal prognosis.

Provided the journey was booked before the change of health occurred, **You** may have a valid cancellation claim if **You** have to cancel **Your** journey, or if **We** cannot provide the cover required.

If advised about **Your** change of health, the medical screening helpline will tell **You** if **We** can provide cover for any claim arising from this change of health, and if so, whether any additional premium is required, or any additional terms apply. If **We** agree to cover any change in health, then **We** will confirm this in writing. If **You** do not let the medical screening helpline know about any of **Your** changes of health, then **You** may not have the cover **You** need and it may invalidate **Your** policy or reduce the amount of any claim.

International Emergency Medical Expenses and Travel Insurance Certificate

This Policy is a contract between **You** (named in the schedule) and Antares Syndicate 1274 at Lloyd's (hereafter referred to as **Us, Our, We**).

Provided the premium specified has been paid in the required manner **We** will provide the insurance specified in this Policy and *schedule* and any attached endorsements during the **Period of Insurance**.

All information supplied to **Us** by or on behalf of **You** is deemed to be incorporated in and shall form the basis of this Policy.

Each **Insured Person** is insured separately, the terms and conditions of the Certificate apply separately to each **Insured Person**.

Antares Managing Agency Limited is the managing agent for Antares Syndicate 1274 at Lloyd's. Antares Managing Agency Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Registration Number 06646629). Registered address is 21 Lime Street London EC3M 7HB.

Please read this document carefully in conjunction with Your validating Certificate of Insurance

If **You** have any reason to believe that the validating Certificate of Insurance is incorrect and does not provide the cover **You** requested, then please return it to the Banner Financial Services, Globe House, 24 Turret Lane, Ipswich, IP4 1DL for their consideration immediately with a note detailing **Your** query.

Schedule of Sums Insured applicable to each Insured Person

(PLEASE SEE THE CERTIFICATE WORDING FOR COVERAGE DETAILS)

Sections	Excess GBP	Sum Insured GBP
1. EMERGENCY MEDICAL AND DENTAL EXPENSES		
Emergency Medical, Repatriation, Evacuation and Travel Expenses	GBP50	up to GBP5,000,000
Emergency Medical Expenses in Home Country	GBP50	up to GBP10,000
Emergency Dental Expenses (for the relief of immediate pain only)	GBP50	up to GBP500
2. TRAVEL EXPENSES		
Cancellation and Curtailment, Travel Delay and Journey Continuation	GBP50	up to GBP2,000
3. PERSONAL ACCIDENT		
Death	GBPNil	up to GBP10,000
Loss of limb(s)/eye(s)	GBPNil	up to GBP25,000
Permanent total disablement (For persons under 18 the maximum payment under this section is GBP5,000)	GBPNil	up to GBP25,000
4. PERSONAL LIABILITY		
	GBP50	up to GBP2,000,000
5. PERSONAL PROPERTY		
Personal Baggage (Single Item Limit of GBP300)	GBP50	up to GBP2,000
Money and Cash (Cash Limit GBP500)	GBP25	up to GBP1,000
6. BUSINESS EQUIPMENT (Included with Short Term & Multi-Covered Trip cover, optional extra with Annual cover)		
	GBP100	up to GBP1,500
7. HIJACK		
	GBPNil	up to GBP1,000

Lloyd's is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority

Important Information

This document, the **Insurance Schedule** and any **Endorsements** attached form **Your Policy**. This document sets out the conditions of the insurance between **You** and **Us**. Please read this **Policy** carefully and if the coverage or benefits provided do not meet **Your** requirements or **You** do not comply with the conditions set out in this section, please return these documents within the Cooling-Off Period to the **Insurance Intermediary** who arranged this **Policy** on **Your** behalf.

It is important that:

- **You** check that the Sections of Cover that **You** have requested are included in the **Insurance Schedule**
- **You** check that the information **You** have given **Us** is accurate – please see the “Information That **You** Provide to **Us**” further below
- **You** notify **Your Insurance Intermediary** as soon as practicable of any inaccuracies in the information that **You** have provided to **Us**
- **You** comply with **Your** duties under each Section of Cover for which **You** are insured, and under the terms and conditions of this **Policy** as a whole

Reciprocal Health Agreements

If **You** are travelling to countries within the European Union (EU), the European Economic Area (EEA) or Switzerland **You** can use a valid European Health Insurance Card (EHIC). This will entitle **You** to benefits from the reciprocal health care arrangements which exist between countries within the EU/EEA or Switzerland and the United Kingdom. **Your** EHIC will be honoured for the remainder of its validity.

From 04th January 2021, if **You** do not have a valid EHIC **You** will need to apply for a Global Health Insurance Card (GHIC) and can apply by a postal application from **Your** local Post Office or online through www.dh.gov.uk/travellers or by telephoning 0845 606 2030. Please note that the GHIC will no longer provide reciprocal health care arrangements in Iceland, Liechtenstein, Norway and Switzerland.

If **We** agree to pay for a medical expense which has been reduced because **You** have used either an EHIC, GHIC or private health insurance, **We** will not deduct the excess under Section 1 – Emergency Medical and Dental Expenses

Information that You Provide to Us

We are relying upon the information **You** provide to **Us**, either directly or through **Your Insurance Intermediary**, in deciding whether to provide **You** with this **Policy** and on what terms and at what premium.

If **You** become aware that any information **You** have given **Us** is not complete or accurate or **You** fail to notify **Your Insurance Intermediary** that the information **You** have provided **Us** is inaccurate or incomplete, and **We** establish that **You** deliberately or recklessly provided **Us** with false or misleading information, then **We** may 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, then the cover and benefits under this **Policy** could be affected and **We** might, for example:

- Treat this **Policy** as if never existed and return **Your** premium paid; or
- Cancel **Your Policy** and refuse to pay any claim; or
- Revise the premium; or
- Charge an additional premium or not pay a claim in full.

We will write to **You** through **Your Insurance Intermediary** if **We** are going to treat this **Policy** as if it never existed or need to amend the terms of **Your Policy**.

Privacy Notice

Who We are

We are the Lloyd's Underwriter(s) identified in the contract of insurance and/or in the certificate of insurance and/or in the **Insurance Schedule**.

Basic information

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

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

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

The way insurance works means that **Your** information may be shared with and used by a number of third parties in the insurance sector for example, insurers, agents or brokers, reinsurers, loss adjusters, sub-contractors, regulators, law enforcement agencies, fraud and crime prevention and detection agencies and compulsory insurance databases. **We** will only disclose **Your** personal information in connection with the insurance cover that **We** provide and to the extent required or permitted by law. **We** will never sell any personal information **You** provide **Us**.

Other people's details You provide to Us

Where **You** provide **Us** or **Your** agent or broker with details about other people, **You** must provide this notice to them.

Want more details?

For more information about how **We** use **Your** personal information please see **Our** full privacy notice(s), which is available online on **Our** website or in other formats on request. Website: www.antaresunderwriting.com

Contact Details

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

Antares Managing Agency Ltd
21 Lime Street
London
EC3M 7HB

Email: Compliance2@antaresunderwriting.com

Telephone: 0044 (0) 20 7959 1900

Claims Procedures – How to Make a Claim

Medical Assistance Notification

In the event of **Illness** or **Injury** during **Your Trip** which results in **You** needing hospitalisation or emergency medical treatment, **You** must notify **Our** medical assistance company, CEGA Group, on:

Telephone: + 44 (0) 1243 621173

E-mail: assistance@cegagroup.com

For all other claims, **You** should notify **Your** claim as soon as practicable but no later than ninety (90) days after an Injury to **Our** Claims Administrator, at the following address:

Roger Rich & Co
2a Marston House
Cromwell Park
Chipping Norton
Oxfordshire
OX7 5SR

Telephone: 0044 (0) 1608 641351

Fax: 0044 (0) 1608 641176

E-mail: enquiries@rogerrich.co.uk

Our Claims Administrator will promptly send **You** a Claim Form once contact is made. If **You** encounter any issues with this process, **You** should contact **Your Insurance Intermediary** who sold **You** this **Policy** (whose contact details will appear on their correspondence sent to **You**). **Your Insurance Intermediary** will be able to assist **You** with making the claim and any further issues that may arise.

Fraudulent Claims

If **You** or any other person acting on **Your** behalf submits any claim under this **Policy** through concealment, misstatement or deliberate provision of false information, **We** shall be under no liability to make payment in respect of such claim and **You** must pay back any benefit that **We** have already paid that was subject to the concealment.

Cooling-Off Period and Cancellation

If this **Policy** does not meet **Your** requirements and **You** wish to cancel this insurance, **You** must notify **Your Insurance Intermediary** who arranged this **Policy** for **You** within the Cooling-Off Period, which is fourteen (14) days from the commencement of the **Period of Insurance** specified in the **Insurance Schedule** or within fourteen (14) days from receipt of the **Policy** documents from **Your Insurance Intermediary**, whichever time period is later.

If **You** have not made a claim during this Cooling-Off Period, **We** will refund the premium **You** have paid to **Us** in full to **You** via **Your Insurance Intermediary**. Please contact **Your Insurance Intermediary** to obtain this refund. Their address and telephone number will appear on their correspondence to **You**.

If **You** wish to cancel this **Policy** after the Cooling-Off Period has expired, **You** may do so provided **You** have not made a claim by giving thirty (30) days written notice to **Us**. In this event, **We** will refund the premium **You** have paid to **Us** to **Your Insurance Intermediary** less the amount of premium which relates to the time period under which **You** have been covered under this **Policy**.

Disputes and Complaints

We are dedicated to providing **You** with a first class service and **Our** wish is to ensure that all aspects of **Your** insurance are dealt with promptly, fairly and efficiently at all times. If **You** feel that **We** have not offered a first class service or **You** have any questions or concerns about this **Policy** or the handling of **Your** claim, please contact **Us** and **We** will do **Our** best to resolve the problem. **Our** contact details are:

Compliance Department
Antares Managing Agency Limited
21 Lime Street
London EC3M 7HB

Telephone: 0044 (0) 20 7959 1900
Fax: 0044 (0) 20 7959 1901
Email: Compliance2@antaresunderwriting.com

If **Your** concerns relate to any other aspect of the **Policy** please contact the **Insurance Intermediary** who sold **You** this **Policy**.

If at any time **You** feel that **Your** complaint has not been resolved, **You** may refer the matter to the Complaints Department at Lloyd's. Their address is:

Complaints
Fidentia House
Walter Burke Way
Chatham Maritime
Chatham
Kent
ME4 4RN

Telephone: 0044 (0) 20 7327 5693
Fax: 0044 (0) 20 7327 5225
Email: complaints@lloyds.com

We always seek to improve **Our** service and **We** therefore welcome feedback and suggestions for improvement. Should **You** wish to raise any comments regarding the Lloyd's complaints process **You** may raise those with the Lloyd's Head of Market Conduct at HeadofConduct@lloyds.com. However, **We** would ask that **You** do not use this email to notify Lloyd's of individual complaints, but please instead use the contact details above.

Details of Lloyd's complaints procedures including timescales are set out in a leaflet "**Your** Complaint – How **We** Can Help" available from the above address or on the website www.lloyds.com.

If **You** remain dissatisfied after Lloyd's has considered **Your** complaint, **You** may refer **Your** complaint to the Financial Ombudsman Service (FOS).

The contact details for the Financial Ombudsman Services is:

The Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Telephone: 0044 (0) 800 023 4567 (free from "fixed lines" in the UK)
Telephone: 0044 (0) 300 123 9123 (calls to this number are charged at the same rate as 01 and 02 numbers on mobile phone tariffs in the UK).

Fax: 0044 (0) 20 7964 1001
E-mail: complaint.info@financial-ombudsman.org.uk
Website: www.financial-ombudsman.org.uk

The FOS is an independent service in the UK for settling disputes between consumers and businesses providing financial services.

Following the complaints procedure with the FOS does not affect **Your** rights to take legal action. Further details will be provided at the appropriate stage of the complaints process.

Financial Services Compensation Scheme

We are covered by the Financial Services Compensation Scheme. **You** may be entitled to compensation from the Scheme if **We** are unable to meet **Our** obligations 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 about the scheme is available from the Financial Services Compensation Scheme at the following address or website: www.fscs.org.uk

Financial Services Compensation Scheme
10th Floor
Beaufort House
15 St Botolph Street
London EC3A 7QU

Telephone: 0044 (0) 20 7741 4100

Website: www.fscs.org.uk

Definitions

Wherever the following words or phrases appear in this document, they have the meanings shown below.

Acute	a medical problem which first manifests itself with a sudden, distinct onset of marked intensity and is of such severity and nature as would lead the Insured Person to seek immediate medical attention.
Assistance Company	The company as detailed under Claims Procedure on page 18, appointed by Us to provide assistance in the event of You experience a medical emergency whilst on a Covered Trip during the Period of Insurance .
Banner	Banner Financial Services is a trading name of Harrison Beaumont Insurance Services Ltd who is authorised and regulated by the Financial Conduct Authority. (FCA Registered Number 303968)
Chronic	any condition or manifestation of symptoms that has been experienced over a long period of time, or which is on-going, persistently recurring, requires frequent or regular medical attention or supervision, or which does not respond to treatment and is beyond all reasonable hope of improvement.
Close Business Colleague	any person whose absence from business for one or more complete days at the same time as the absence of the Insured Person prevents the effective continuation of that business.
Computer System	Any computer, hardware, software, communications system, electronic device (including, but not limited to, smart phone, laptop, tablet, wearable device), server, cloud or microcontroller including any similar system or any configuration of the aforementioned and including any associated input, output, data storage device, networking equipment or back up facility, owned or operated by You or any other party
Covered Trip	As defined under Types of Contract.
Cyber Act	An unauthorised, malicious or criminal act or series of related unauthorised, malicious or criminal acts, regardless of time and place, or the threat or hoax thereof involving access to, processing of, use of or operation of any Computer System
Cyber Incident	Any error or omission or series of related errors or omissions involving access to, processing of, use of or operation of any Computer System or any partial or total unavailability or failure or series of related partial or total unavailability or failures to access, process, use or operate any Computer System.
Emergency Medical Expenses	all usual, customary and reasonable costs incurred in the diagnosis and treatment of an Acute medical condition, including medical and surgical treatment, and hospital and nursing home care (if prescribed or ordered by a qualified medical practitioner).
Emergency Medical Evacuation	transportation to another country for treatment if deemed medically essential by the Medical Officer of the Assistance Company .
Emergency Medical Repatriation	transportation to Insured Person's Home Country if deemed medically essential by the Medical Officer of the Assistance Company .
Excess	An Excess is an amount of money which is deducted from any claim made by each Insured Person under any Section of the Insurance to which such Excess applies.
GDPR	GDPR means Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the Processing of Personal Data and repealing Directive 95/46/EC (General Data Protection Regulation).
Heavy Machinery	Heavy-duty vehicles, specially designed for executing construction tasks, most frequently ones involving earthwork operations. Also known as heavy machines, heavy trucks, construction equipment, engineering equipment, heavy vehicles, or heavy hydraulics.
Hijack	the unlawful seizure or wrongful exercise of control of an aircraft or other means of transportation in which the Insured Person is travelling.
Home Country	either the country which is the Insured Person's regular place of abode prior to commencement of the Covered Trip which has been declared on the Application Form, or any country for which the Insured Person holds a passport.
Illness	a sudden, unexpected and distinct deterioration in the health of the Insured Person , which first manifests itself during the Period of Insurance , and is certificated by a qualified medical practitioner, as requiring immediate medical attention.
Immediate Relatives	any of the following persons who are under 75 years of age at the time of the Covered Trip : The Insured Person's wife, husband, fiancé(e), mother, father, son or daughter, (both natural or legally adopted), sister or brother, grandparent, grandchild, mother in law, father in law, brother in law or sister in law.
Kidnap	the illegal taking and holding captive of the Insured Person by a person(s) who then demand a specific form of asset of the Insured Person or a ransom as a condition of their release.
Medical Officer of the Assistance Company	the individual or their authorised representative appointed from time to time.
Period of Insurance	the cover dates specified in the validating Certificate of Insurance.
Portable	capable of being carried in hand luggage or suitcase.

Pre-Existing Medical Condition

any condition for which **You** (or any other person not necessarily travelling but upon whom travel depends such as an Immediate Relative) have ever received treatment (including surgery, tests or investigations by **Your** doctor or a consultant/specialist, or prescribed drugs/medication). Any Medical Condition for which **You** (or any other person not necessarily travelling but upon whom travel depends such as an Immediate Relative) have received surgery, in-patient treatment or investigations in a hospital or clinic within the last twelve months, or prescribed drugs/medication.

Terrorism

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

Us/Our/We

Antares Syndicate 1274 at Lloyd's

Valuables

watches, jewellery and items comprised of precious metals or stones.

War

War, 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.

You/Your/Insured Person

the **Insured Person(s)** as shown on the validating Certificate of Insurance.

Types of Contract

There are three types of contract. The type of contract that applies to **You** is detailed in the validating Certificate of Insurance. They are:

Multi-Covered Trip

This Certificate provides cover for a maximum of 120 days during the **Period of Insurance**.

A **Covered Trip** shall mean a period of travel up to 45 consecutive days duration away from **Your Home Country** which takes place entirely during the **Period of Insurance** and within the Geographical Limits specified in the validating Certificate of Insurance. Such **Covered Trip** shall be deemed to commence from the time **You** leave **Your** home or place of business in **Your Home Country**, whichever is the later, and shall end at the time **You** first return to **Your** home or place of business in **Your Home Country**, whichever is the sooner. A **Covered Trip** which exceeds 45 days duration shall not be deemed a **Covered Trip**.

Annual

This Certificate provides continuous cover for 365 consecutive days.

A **Covered Trip** shall mean a period of travel away from **Your Home Country** which commences during the **Period of Insurance** and within the Geographical Limits specified in the validating Certificate of Insurance. Such **Covered Trip** shall be deemed to commence from the time **You** leave **Your** home or place of business in **Your Home Country**, whichever is the later, and shall end at the time **You** return to **Your** home or place of business in **Your Home Country** or at expiry of the **Period of Insurance**, whichever is the sooner.

Short-Term

This Certificate provides cover for a specific period.

A **Covered Trip** shall mean a period of travel away from **Your Home Country** which takes place entirely during the **Period of Insurance** and within the Geographical Limits specified in the validating Certificate of Insurance. Such trips shall be deemed to commence from the time **You** leave **Your** home or place of business in **Your Home Country**, whichever is the later, and shall end at the time **You** first return to **Your** home or place of business in **Your Home Country**, whichever is the sooner.

Hijack or Kidnap

If **You** are the victim of a **Hijack** or **Kidnap**, cover will continue for up to 52 weeks from the date of **Hijack** or **Kidnap** or until **You** return to **Your Home Country**, whichever is the earlier.

Recreational Activities

This Insurance may not cover **You** when **You** take part in certain sports or activities where there is a high risk of injury. **You** must check that this Insurance covers **Your** requirements.

Activities Automatically Covered

This Insurance provides automatic cover for **You** whilst participating in the following activities during a **Covered Trip** provided that **You** are not participating in competitions and/or sports tours:

archery, angling, athletics, badminton, banana boating, baseball, basketball, body boarding, bowls, camping, cricket, croquet, cycling (excluding touring and racing), football, golf, gymnastics, handball, hill walking (not involving ropes/guides), hiking, jet skiing (excluding third party liability), jogging, marathon running, motor cycling (up to 200cc), mountain biking (excluding stunts/racing), orienteering, netball, parascending (over water only), pony trekking, kayaking, canoeing or white water rafting up to grade 3 (inland waters only and provided under the control of an officially licensed outdoor pursuits organisation), rambling, racquetball, roller skating, rounders, rowing (inland waters only), safari (provided an organised excursion with a tour operator), scuba diving to a depth of 30 metres (provided **You** hold a recognised diving qualification and are accompanied by a fellow certificated diver), shooting (excluding hunting), snorkelling/skin diving, skate boarding, softball, squash, surfing, swimming, table tennis, ten pin bowling, tennis, trekking (maximum altitude 3,000m), trampolining, volleyball, water polo, water skiing (excluding jumping), yachting, boating or windsurfing in inland or coastal waters (12 mile limit and excluding third party liability). No other sports or activities will be covered by this Insurance unless specifically agreed by **Us** and the validating Certificate of Insurance endorsed accordingly.

Recreational Activities Extension

(available at an additional premium)

You may extend this Insurance to cover **You** whilst participating in the activities listed below during a **Covered Trip**, subject to payment of an additional premium:

abseiling, alpine skiing (including off piste provided such activity is not undertaken alone and/or against local authoritative warning or advice), American football, ballooning, curling, cycle touring, dry slope skiing, fencing, go karting, hockey, horse riding (excluding hunting/show jumping/eventing), ice skating, ice hockey, judo, lacrosse, martial arts, Nordic skiing, off road driving (excluding third party liability), paintballing, kayaking, canoeing or white water rafting grades 4 & 5 (inland waters only and provided under the control of an officially licensed outdoor pursuits organisation), rugby, ski bobbing/ski doo, snow boarding, weight lifting, wrestling.

Cover under this Extension will be operative if agreed in advance by **Us** and the validating Certificate of Insurance endorsed accordingly. This Extension will not apply if **You** are participating in competitions and/or sports tours. No other sports or activities will be covered unless specifically agreed by **Us** and the validating Certificate of Insurance endorsed accordingly.

Section One

Emergency Medical and Dental Expenses

What is covered

(a) Emergency Medical Expenses

Emergency Medical Expenses which cannot be reasonably delayed until the **Insured Person** returns to their **Home Country**, including costs of **Emergency Medical Evacuation** and **Emergency Medical Repatriation** in the event that the **Insured Person** sustains bodily injury or suffers from an **Acute** condition during the **Covered Trip**.

If, after consultation with the local treating doctor, the **Medical Officer** of the **Assistance Company** deems it necessary, then the **Assistance Company** will make the appropriate arrangements for **You** to be treated at the hospital or clinic which the **Assistance Company** decide is most suitable having regard to the treatment required.

Should it be deemed medically essential by the **Medical Officer** of the **Assistance Company**, **You** will be transported to a country with adequate facilities or **Your Home Country**. All expenses will be covered up to the sum insured stated in the Schedule of Sums Insured for **Emergency Medical Expenses**, **Emergency Medical Repatriation**, **Emergency Medical Evacuation** and travel expenses.

(b) Emergency Dental Expenses (not covered in Home Country)

Up to the sum insured stated in the Schedule of Sums Insured for Emergency Dental Expenses in respect of emergency dental treatment for the immediate relief of pain only to sound and natural teeth. No cover is available for cosmetic treatment or any treatment which could reasonably be delayed until the **Insured Person** returns to their **Home Country**.

(c) Emergency Medical Treatment in the Home Country

This section is only available if **You** have Annual cover for which the **Covered Trip** is still in force and **You** have returned to **Your Home Country** where there is no National Health Service or the equivalent available.

i) **You** will be covered for the cost of **Emergency Medical Expenses**, up to the sum insured stated in the Schedule of Sums Insured for **Emergency Medical Expenses** in **Your Home Country**, incurred by **You** in respect of an **Acute** condition which first manifests itself whilst **You** are in **Your Home Country**. The **Medical Officer** of the **Assistance Company** must deem this necessary, after consultation with the local treating doctor. This section excludes costs incurred more than three months after return to **Your Home Country**.

or

ii) In the event that **You** are repatriated to **Your Home Country**, this having been deemed medically necessary by the **Medical Officer** of the **Assistance Company**, **You** will be covered for the cost of **Emergency Medical Expenses** which are incurred as a continuation of treatment for the **Acute** condition which necessitated the **Emergency Medical Repatriation**, up to a maximum of GBP50,000.

(d) Emergency Travel Expenses

If following a valid claim for **Emergency Medical Expenses** it is deemed medically essential by the **Medical Officer** of the **Assistance Company**, then economy class return air travel and reasonable accommodation and reasonable additional living costs for up to a maximum of two **Immediate Relatives** to travel to, or with, or remain with **You**, will be met up to a maximum of 10 days subject to the sum insured stated in the Schedule of Sums Insured.

(e) Provision of fully screened and tested blood

Emergency Medical Expenses covered under sub section (a) of Section 1 shall include the cost of sourcing and transporting fully screened and tested blood and resuscitating fluids only where reasonably possible allowing for conditions and time scales, but only if deemed medically necessary by the **Assistance Company** after consultation with the local treating doctor. These will be delivered to the nearest airstrip used by scheduled airlines and from there transported to the place of treatment by the fastest means reasonably available.

If a particular type of blood is not available from the local blood transfusion service, which has been fully screened and tested, where reasonably possible supplies are obtained on an international basis from a leading national blood authority.

(f) Death of the Insured Person

All the costs of transporting **Your** mortal remains and personal effects back to **Your Home Country** will be met following death during the **Period of Insurance**. Alternatively the costs of burial or cremation outside **Your Home Country** will be met, subject to a maximum of GBP9,000 and the costs of repatriation of personal effects.

(g) Hospital Benefit

We will pay GBP50 for each completed 24 hour period up to GBP1,000 in total should the **Insured Person** suffer accidental bodily injury or **Illness** during the **Covered Trip** which necessitates in-patient hospital treatment outside the United Kingdom.

What is not covered

This Insurance will not meet any costs in respect of the following:

1. The provision of prophylaxis or vaccinations or for any subsequent treatment that may be necessary due to them not having been administered before the journey commenced.
2. Treatment provided after 12 months from the date **You** sustained bodily injury or were diagnosed with an **Acute** condition.
3. Blood supplies in respect of existing blood disorders existing at the time of booking or commencing a **Covered Trip**, whichever is the later.
4. Expenses incurred in respect of any child who has been born outside the **Insured Person's Home Country** during a **Covered Trip** unless such child has been declared to and accepted under this Insurance by **Us**.
5. Routine dental and optical treatment, or the provision of dentures, spectacles, lenses or contact lenses.
6. Any treatment from a chiropractor, physiotherapist or any other source of alternative medicine, unless this has been recommended by the treating doctor and then authorised by the **Medical Officer** of the **Assistance Company**.
7. The cost of continuing regular medication for any condition for which medical advice, or treatment is being followed at the time of booking or commencing a **Covered Trip**, whichever is the later.
8. Any expense recoverable under any reciprocal health arrangement, national health scheme or any other insurance policy.
9. Routine medical examinations including vaccinations, the issue of medical certificates and attestations and examinations as to the suitability for employment or travel. Eye and ear examinations including the cost of spectacles, contact lenses and hearing aids.
10. Treatment or expenses incurred in the **Insured Person's Home Country** unless incurred in accordance with sub section (c) of Section 1.
11. Artificial devices such as hearing aids, limbs and the like.
12. Expenses for routine medical examinations, check-ups, tests, or scans unless they relate to the diagnosis and/or treatment of an **Acute** condition.
13. Body piercing or any claim arising from the process of body piercing.
14. Drugs without a doctor's prescription.
15. The amount of **Excess** as shown in the Schedule of Sums Insured table on page 4.
16. Claims recoverable under any other insurance or Section of this Insurance.
17. Claims for **Emergency Medical Repatriation** on the grounds of the fear of contracting Acquired Immune Deficiency Syndrome (AIDS) from medical treatment.
18. AIDS or AIDS Related Complex (ARC) however this syndrome has been acquired or may be named.
19. Any expenses relating from or relating to elective surgery.
20. Any expenses arising from the failure to follow the advice of the **Assistance Company** or the **Medical Officer** of the **Assistance Company**.
21. For any routine medical expenses resulting from pregnancy or childbirth.
22. For any medical expenses resulting from pregnancy or childbirth incurred within four weeks of the expected date of childbirth.

Section Two

Travel Expenses

(a) Cancellation and Curtailment

Cancellation and Curtailment cover is automatically provided from the time the validating Certificate of Insurance is issued by **Banner**'.

What is covered

This Insurance will reimburse **You** up to the sum insured stated in the Schedule of Sums Insured for Cancellation and Curtailment for the unused portion of any deposits or charges which are irrecoverable elsewhere or to cover the purchase of new economy class tickets, if the **Covered Trip** has to be cancelled or curtailed due to an incident which occurs after the date upon which the validating Certificate of Insurance was issued and prior to the expiry date of the **Period of Insurance** If such Cancellation or Curtailment is due to:

1. **Your Illness** or accidental bodily injury, which must be validated by a qualified medical practitioner.
2. The serious **Illness**, accidental bodily injury or death of an **Immediate Relative** or **Close Business Colleague** validated by a qualified medical practitioner. **This is subject to the individual not being seriously or critically ill at the time of the application**
3. Compulsory quarantine, jury service, subpoena but not in an expert capacity, hijacking, or kidnapping, of an **Insured Person** or a **Close Business Colleague**.
4. Compulsory quarantine, hijacking, or kidnapping of an Immediate Relative.
5. The Cancellation or Curtailment of scheduled public transport services as a result of strike, riot or civil commotion.
6. The police requiring **Your** presence following serious damage to **Your** home caused by fire, flood or storm.
7. Foreign & Commonwealth Office Evacuation/Repatriation where Government Warnings have advised **You must** leave the country **You** are visiting and this has been confirmed by the Foreign Office in London UK, **subject to a maximum of GBP500 per Insured Person**.
8. Other circumstances which prevent **You** from making **Your Covered Trip** as planned and which **You** can reasonably demonstrate were beyond **Your** reasonable control and of which **You** had no prior knowledge.

What is not covered

This Insurance will not meet any costs in respect of the following:

1. Any claim attributable to any condition or set of circumstances known to **You** at the time of effecting this Insurance or booking the **Covered Trip**, whichever is the later, where such condition or set of circumstances could reasonably have been expected to give rise to Cancellation or Curtailment of a **Covered Trip**.
2. Any sum that exceeds **Your** contractual liability to the travel provider.
3. Any claim in respect of **Your** own failure to apply for **Your** required passport or visa within a reasonable period of time.
4. Any claim in respect of **Your** disinclination to travel, phobias, anxiety or personal financial circumstances (other than redundancy after the issue date of the validating Certificate of Insurance provided **You** had no prior knowledge).
5. Any claim in respect of the death of any pets or animals.
6. Any claim in respect of any unlawful or criminal proceedings of anyone on whom the travel plans depend, other than attendance as a witness at a court of law.
7. Any claim arising from **Your** loss of enjoyment of the **Covered Trip** however caused.
8. Any claim in respect of financial failure of a carrier or service provider.
9. We will not pay any claim for any loss, damage, liability, cost or expense arising directly or indirectly out of a Cyber Act or Cyber Incident.
10. The amount of **Excess** as shown in the Schedule of Sums Insured table on page 4.
11. The serious **Illness**, accidental bodily injury or death of an **Immediate Relative** or **Close Business Colleague** (over the age of 75 years), validated by a qualified medical practitioner. **This is subject to the individual not being seriously or critically ill at the time of the application** and only if the **Covered Trip** is in excess of 120 days continuous duration.

(b) Travel Delay

What is covered

This Insurance provides cover should the aircraft, sea vessel, coach or train on which **You** are booked to travel be delayed as a result of strike, locked out workers, industrial action, riot or civil commotion, bomb scare, criminal act, **Hijack**, fire, avalanche, landslide, earthquake, flood, adverse weather conditions or accident to or mechanical breakdown of such passenger transport.

Our liability is limited to:

- (i) GBP20 for the first completed 12 hour period of delay, and
- (ii) GBP10 for each subsequent completed 12 hour period of delay, up to a maximum of GBP120 in total.

and

In the event of delay due to the contingencies specified above including volcanic ash of at least 24 hours, **We** will pay up to the Sum Insured noted in the Schedule of Sums Insured for Cancellation and Curtailment each **Insured Person** for any irrecoverable payments paid or contracted to be paid in respect of travel and accommodation in the event of the Cancellation of the **Covered Trip**.

What is not covered

1. Any claim attributable to any condition or set of circumstances that were known or might reasonably have been expected to be known to **You** at the time of effecting this Insurance or booking the **Covered Trip**, whichever is the later, where such condition or set of circumstances could reasonably have been expected to give rise to a claim under this section.
2. Any claim arising directly or indirectly out of **Your** failure to check-in according to the itinerary supplied to **You**.

3. Any delay of less than 12 hours.
4. If the delay is due to the withdrawal from service temporarily or permanently of any aircraft or ship, on the orders or recommendation of any Civil Aviation or Port Authority or any other similar body in any country.
5. If travel tickets are purchased after notice had been given about a possible strike or industrial action, which subsequently causes the **Covered Trip** to be cancelled or curtailed.

Conditions

We shall only be liable under this section if **You** have obtained written confirmation from the carrier(s), or their agent(s) stating the actual date and time of departure and the reasons for delay.

For the purposes of claims payment the period of delay shall be taken as commencing at the scheduled departure time of the conveyance as specified in the booking confirmation supplied to **You**.

(c) Journey Continuation

We will pay the costs up to GBP1,500 for reasonable additional travel and accommodation expenses incurred in meeting a pre-booked travel connection or reaching pre-booked accommodation, if at commencement of the **Covered Trip**, an **Insured Person** misses a pre-booked air, sea, coach or rail journey through any of the following contingencies directly affecting the means of transport in which an **Insured Person** is travelling or intending to travel:

- (i) if travel is by non-scheduled transport, interruption caused by strike, locked out workers, industrial action, riot, or civil commotion, bomb scare, criminal act, **Hijack**, fire, avalanche, landslide, earthquake, flood, or accident to or mechanical breakdown of such non-scheduled transport.
- (ii) if travel is by scheduled public transport, the contingencies specified in (i) above and also adverse weather conditions.

What is not covered

1. Any claim arising out of any of the contingencies specified above, if such contingencies had already started or been forecast before this Insurance was effected.
2. Any claim in respect of financial failure of a carrier or service provider.
3. The amount of **Excess** as shown in the Schedule of Sums Insured table on page 4.

Conditions

In the selection of the route, means of travel and time of departure, the **Insured Person** shall do all things reasonable and practical to minimise the possibility of late arrival at the departure point.

We shall only be liable for claims attributable to mechanical breakdown of non-scheduled transport if the **Insured Person** has obtained a garage or motoring organisation report confirming the date, time and cause of such breakdown.

Section Three Personal Accident

What is covered

We shall pay the sum insured stated in the Schedule of Compensation below if during the course of a **Covered Trip You** sustain Bodily Injury which results in **You** suffering:

Schedule of Compensation

SUM INSURED (Each Insured Person)

1. Death	GBP10,000
2. Permanent Total Loss of Sight of One or Both Eyes	GBP25,000
3. Loss of One or More Limbs	GBP25,000
4. Permanent Total Disablement (other than loss of sight of one or both eyes or loss of limb(s))	GBP25,000

Definitions and Limitations

1. If the **Insured Person** disappears during the **Period of Insurance** and the **Insured Person's** body is not found within 90 days after such disappearance, and sufficient evidence is produced satisfactory to **Us** that leads **Us** inevitably to the conclusion that the **Insured Person** sustained accidental bodily injury and that such injury caused the **Insured Person's** death, **We** shall forthwith pay the death benefit under this Section provided that the person or persons to whom such sum is paid shall sign an undertaking to refund such sum to **Us** if the **Insured Person** is subsequently found to be living.
2. If **You** are under the age of 18, the benefit under this Section will be limited to GBP5,000.
3. Only one payment will be made in respect of one Accident.
4. Accident shall mean a sudden, unexpected, unusual, specific event, which occurs at an identifiable time and place, but shall also include exposure resulting from a mishap to a conveyance in which the **Insured Person** is travelling.
5. Bodily injury shall mean identifiable physical injury which:
 - i) is sustained by the **Insured Person**, and
 - ii) is caused by an Accident during the **Covered Trip**, and
 - iii) solely and independently of any other cause, except **Illness** directly resulting from medical or surgical treatment rendered necessary by such injury, occasions the death or disablement of the **Insured Person** within 12 months from the date of the Accident.
6. Loss of an eye(s) shall mean the permanent and total loss of sight which shall be considered as having occurred in both eyes, if the **Insured Person's** name is added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist or in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale (meaning the sight at 3 feet is what it should be at 60 feet).
7. Loss of limb(s) shall mean permanent loss by physical separation of a hand at or above the wrist or of a foot at or above the ankle and includes permanent total and irrecoverable loss of use of a hand, arm, foot or leg.
8. Permanent Total Disablement shall mean disablement caused other than by loss of sight of eye(s) or loss of limb(s), which prevents the **Insured Person** from engaging in any and every occupation for 52 consecutive weeks and where there is no prospect of recovery.

What is not covered

Any Bodily Injury directly or indirectly consequent upon:

1. **You** suffering from sickness or disease not caused by an Accident.
2. **You** engaging in aviation, except as a passenger on a commercial flight.
3. Any extreme sporting or leisure activities involving physical contact or a significant risk of Bodily Injury other than Recreational Activities automatically covered or by the Recreational Activities Extension (if applicable) under this Insurance.

Section Four Personal Liability

What is covered

This Insurance provides cover for damages up to the sum insured stated in the Schedule of Sums Insured for which **You** become legally liable arising from:

1. Accidental injury, death or **Illness** caused to any person who is not an Immediate Relative or **Close Business Colleague**.
2. Accidental loss of or damage to material property other than that which belongs to or is occupied by **You**, an Immediate Relative or a **Close Business Colleague**.

What is not covered

Liability arising directly or indirectly from or caused by:

1. The ownership or occupation of land or buildings or property held in trust.
2. The ownership, possession or use of firearms (other than sporting guns) or any other explosive devices or offensive weapons.
3. Mechanically powered vehicles or anything attached to them.
4. Craft intended to travel through air or space.
5. Hovercraft, watercraft (other than rowing boats, punts or canoes).
6. Animals (other than domestic animals).
7. The carrying out of any business, profession or trade.
8. Racing of any kind.
9. A contract or agreement entered into by the **Insured Person**.
10. Damage to property that **You** rent or own.
11. Any event or loss which is covered under another insurance policy.
12. Any event or loss caused by an unlawful act or omission by **You**.
13. The amount of **Excess** as shown in the Schedule of Sums Insured table on page 4.

Conditions

You must not make any admission of liability whatsoever, or make any arrangements, offer or promise of payment without **Our** written consent.

We shall be entitled, if so desired, to take over and conduct, in **Your** name, a defence of any claim or to prosecute in their name for their own benefit any claims for indemnity or damages or otherwise against any third party, and have discretion in the conduct of any negotiations or proceedings or the settlement of any claim. **You** shall, whenever possible, give all such information and assistance as **We** may require.

Section Five

Personal Property

(a) Personal Baggage

You must at all times take reasonable safety precautions in respect of **Your** property. **Failure to demonstrate compliance will invalidate any claims made.**

What is covered

This Insurance provides:

1. Cover up to the sum insured stated in the Schedule of Sums Insured for Personal Baggage for the loss of or accidental damage to all **Portable** goods (other than Money or Cash) belonging to **You** or for which **You** are responsible arising from an incident which occurs during a **Covered Trip**.
2. Cover for reasonable additional travel and accommodation costs incurred to obtain a replacement passport or driving license up to the sum of GBP250.
3. Cover for reasonable expenses incurred in the purchase of **essential** replacement clothing and toiletries, up to the sum of GBP200, if after a continuous period of 24 hours or more **You** lose or temporarily mislay **Your** personal property during a **Covered Trip**. If the personal property is deemed irretrievably lost or stolen after a period of 14 days, the amount claimed for essentials will be deducted from the total claim made for the loss.

Conditions and Limitations

1. In the event of a claim for loss or damage **We** shall be entitled to:
 - i) require the provision of the original purchase receipt before considering the claim.
 - ii) take and keep possession of the property and to deal with salvage in a reasonable manner.
 - iii) reimburse, repair or replace any personal property for which liability is admitted at **Our** discretion.
2. If the property was less than 2 years old when it was damaged, lost or stolen then **We** will pay the cost of replacing the item as new subject to the replacement being similar both in model and price to the original item claimed and the original purchase receipt being provided. If the property was older than 2 years when it was damaged, lost or stolen then the cost of replacement, subject to a deduction to reflect normal wear and tear and depreciation, will be met. As a guideline **We** will deduct between 25 and 75 percent dependent on the type and age of the items damaged, lost or stolen.
3. **Our** liability for loss of airline tickets is limited to a maximum of GBP1,500 in total.
4. **Our** liability for loss of or accidental damage to **Valuables** is limited to GBP500 in total.
5. **Our** liability for any one single item, pair, set or collection is limited to GBP300 in total.
6. **Our** liability for loss of or accidental damage to prescription spectacles/sunglasses is limited to GBP250 in total and non-prescription spectacles/sunglasses is limited to GBP100 in total.
7. **Our** liability for loss of or accidental damage to mobile telephones is limited to GBP150 in total.

What is not covered

1. Household or non-**Portable** items.
2. In respect of mobile telephones, the loss of or accidental damage to mobile phone accessories and any related costs.
3. Loss of or damage to contact, corneal or micro- corneal lenses.
4. Pedal cycles and their accessories.
5. Sports equipment whilst in use.
6. In respect of musical instruments, loss of tone, scratching, denting or breakage of strings, reeds or drumheads.
7. Personal possessions in **Your Home Country**.
8. Loss or damage by:
 - i) moth, vermin, wear and tear, atmospheric or climatic conditions or gradual deterioration.
 - ii) mechanical and/ or electrical breakdown, failure or malfunction, faulty or defective design or materials, inherent vice or latent defect.
 - iii) any process of cleaning or drying, restoring, repairing or alteration.
 - iv) any form of electrical power surge.
9. Any loss not reported to either the police or appropriate authorities within 48 hours of discovery and a report obtained.
10. Any loss due to confiscation or detention by Customs or any other similar authority.
11. Losses from unattended vehicles unless items were in a locked boot or luggage compartment and there is evidence of forced entry to the vehicle.
12. **Valuables** not kept in hand luggage whilst in transit.
13. Any loss or damage more specifically insured.
14. Any claim in any way caused or contributed to by the failure of, or the fear of failure of, or the inability of any equipment or any computer program to recognise, interpret correctly or process any date as its true calendar date or to continue to function correctly beyond that date.

15. Any loss or damage of fragile articles (e.g. glass or china) unless caused by fire or by an accident to the aeroplane, ship or vehicle in which they are being carried.
16. Mobility aids.
17. Any loss or damage whilst in the custody of an airline or other carrier unless **You** report it immediately upon discovery to the carrier and obtain a written report. In the case of an airline **You** will need a Property Irregularity Report (PIR).
18. The amount of **Excess** as shown in the Schedule of Sums Insured table on page 4.
19. Loss of or damage to hired equipment.

(b) Money and Cash

You must at all times take reasonable safety precautions in respect of **Your** Money and Cash. Failure to demonstrate compliance will invalidate any claims made.

What is covered

Cover is provided in respect of the loss of Money or Cash up to the Sum Insured shown in the Schedule of Sums Insured for Money and Cash arising from an incident which occurs during the **Period of Insurance**.

Cover for Money held for the purposes of the **Covered Trip** will commence at the time this is collected from a bank up to a maximum of 72 hours prior to the commencement of the **Covered Trip**.

Definitions

Cash shall mean coins or banknotes of any currency.

Money shall mean postal and money orders, signed travellers' cheques, travel tickets, other cheques, cash and charge, bankers or credit cards.

What is not covered

1. Any amount in **Excess** of GBP500 in respect of Cash.
2. Any loss due to errors or omission during any monetary transaction.
3. Any loss not reported to the police or appropriate authorities within 48 hours of discovery and a report obtained.
4. Any loss due to confiscation or detention by Customs or any other similar authority.
5. Any loss due to the devaluation of any currency.
6. Any loss or damage more specifically insured.
7. Any claim arising from the fraudulent use of credit cards, charge cards or banker's cards, if **You** have not reported the loss of the card to the issuing bank or company immediately upon discovery, and have not complied with the terms and conditions under which the card was issued. **Our** liability shall be limited to any loss not covered by any guarantee given by the issuing bank or company to **You**.
8. The amount of **Excess** as shown in the Schedule of Sums Insured table on page 4.
9. Losses from unattended vehicles.

Section Six

Business Equipment

(Included with Short Term & Multi-Covered Trip cover, optional extra with Annual cover)

You must at all times take reasonable safety precautions in respect of Your property. Failure to demonstrate compliance will invalidate any claims made.

What is covered

The loss of or accidental damage to any item of Business Equipment up to the sum insured stated in the Schedule of Sums Insured for Business Equipment arising from an incident which occurs during the **Covered Trip**.

Definitions

Business Equipment shall mean computers, laptops, printers, camcorders, cameras, and musical instruments used for business purposes provided each item is over the value of GBP300.

What is not covered

1. Mobile telephones and their accessories and any related costs.
2. The malfunction of any equipment.
3. Loss or damage by:
 - i) moth, vermin, wear and tear, atmospheric or climatic conditions or gradual deterioration
 - ii) mechanical and/ or electrical breakdown, failure or malfunction, faulty or defective design or materials, inherent vice or latent defect.
 - iii) any process of cleaning or drying, restoring, repairing or alteration.
 - iv) damage caused by any form of electrical power surge.
5. Any loss not reported to either the police or appropriate authorities within 48 hours of discovery and a report obtained
6. Any loss due to confiscation or detention by Customs or any other similar authority.
7. Any loss or damage whilst in the custody of an airline or other carrier unless **You** report it immediately upon discovery to the carrier and obtain a written report. In the case of an airline **You** will need a Property Irregularity Report (PIR).
8. The amount of **Excess** as shown in the Schedule of Sums Insured table on page 4.
9. Losses from unattended vehicles unless items were in a locked boot or luggage compartment and there is evidence of forced entry to the vehicle. In respect of such losses **Our** liability is limited to GBP750 in total.
10. Any loss or damage more specifically insured.

Section Seven

Hijack

In the event of the means of transportation being subjected to **Hijack** during a **Covered Trip** and the **Insured Person** being detained as a result of such **Hijack** for a period in **Excess** of 24 hours, **We** will pay an amount of GBP50 for each 24 hour day of detention up to the amount shown in the Schedule of Sums Insured for **Hijack**.

General Exclusions

We shall not be liable for:

1. Travel to any country or with any persons in breach of the Sanctions, Export and Exchange Control clause;
2. Travel to any country where the Foreign & Commonwealth Office advises or has advised against all or all but essential travel to such country on www.gov.uk/foreign-travel-advice on or before the date of **Your** travel.
3. Failure on **Your** part to follow any suggestions or recommendations made by any government or other official authority including the Foreign, Commonwealth & Development Office during the period of insurance.
4. Loss, damage, death, disablement or expenses directly or indirectly occasioned by, happening through or in consequence of:
 - i) Any claim(s) in any way caused or contributed to by an act of **Terrorism** involving the threat thereof of any nuclear weapon or device or chemical or biological agent.
 - ii) Travel to the following countries unless such trips are declared to and accepted in writing by **Us** prior to commencement and an additional premium paid: Afghanistan, Chechnya, Central Africa Republic, Democratic Republic of Congo, Egypt, Iraq, Israel/Palestine (West Bank, Gaza Strip and Occupied Territories), Libya, Nigeria, Somalia, South Sudan, Sudan, Syria and Yemen.
5. Death, disablement, loss or destruction to any property whatsoever or any loss or expense whatsoever resulting or arising therefrom or any consequential loss or any legal liability of whatsoever nature, directly or indirectly caused or contributed to by or arising from:
 - i) ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel, or
 - ii) the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
6. Any death, disablement, loss or expense arising from or relating to:
 - i) a Covered **Covered Trip** that is undertaken against the advice of a qualified medical practitioner or with the intention of obtaining medical treatment.
 - ii) any condition that is or becomes **Chronic** unless declared to and accepted by **Us** in writing.
 - iii) any persons who have received a terminal prognosis.
 - iv) cover provided by any other insurance policy, national health scheme or reciprocal health agreement.
 - v) claims where medical or other suitable evidence is not provided to support the claim.
 - vi) the failure to take reasonable precautions or preventative treatment or prophylaxis.
 - vii) any **Insured Person** who exceeds the age of 75 years at commencement of the **Covered Trip**.
 - viii) the **Insured Person** being under the influence of alcohol, non-prescribed drugs or solvent abuse.
 - ix) wilful self-injury, suicide, attempted suicide, deliberate exposure to exceptional danger (except in an attempt to save human life) or participation in any illegal occupation or criminal act.
 - x) any condition caused by, prolonged by, or aggravated by any psychiatric, mental or nervous disorder including stress, anxiety and/or depression.
 - xi) any **Pre-Existing Medical Condition** that is not agreed and accepted in writing by **Us**
7. Any death, disablement, loss or expense arising from or relating to:
 - i) any activities listed in the Recreational Activities Extension (unless the validating Certificate of Insurance is endorsed to include such activities).
 - ii) acrobatics; aviation other than travelling by air as a passenger; base jumping; bouldering; boxing; bungee jumping; canyoning; caving; free climbing; gliding; hang gliding; heli skiing; hunting; microlighting; mountaineering or rock climbing normally involving the use of ropes or guides; motor sports; parachuting; paragliding; paramotoring; parapenting; polo; potholing; ski flying; ski jumping; ski mountaineering; ski racing; ski randonee; ski stunting/acrobatics; sky diving; all forms of racing other than on foot; white water rafting in **Excess** of Grade 5; any form of operational duties as a member of the armed forces; professional sports; professional entertaining; sports tours or competitions; any other sport or activity not listed above which involves physical contact or a significant risk of bodily injury (except when stated in the validating Certificate of Insurance as being included).
 - iii) driving or riding on motor cycles or motor scooters other than those under 200cc or where the **Insured Person**:
 - a) is found to have been driving at the time of the accident with a level of alcohol in his blood above that permitted under prevailing legislation, or
 - b) was not wearing a safety crash helmet, or
 - c) did not hold a current UK driving license or foreign equivalent and/or was unqualified to drive such motorcycle.
 - iv) manual work involving the use of **Heavy Machinery**.
8. Any loss of or damage, directly or indirectly resulting from or attributable to **War**, invasion, civil war, armed hostilities, rebellion, revolution, insurrection, or military or usurped power, unless whilst airborne or waterborne

General Condition applicable to all Sections

1. Any word or expression to which specific meaning has been attached shall bear such meaning wherever it appears in this Insurance. The Schedule of Sums Insured, Definitions, What is Covered, What is not Covered, General Exclusions, General Conditions, Claims Procedure and any endorsements/appendices incorporated herein are part of this Insurance and shall be read as one contract.
2. The liability of the **Us** to make any payment under this Insurance shall be conditional on the observance by **You** of the terms, conditions and any endorsements of the Insurance.
3. No sum payable under the Insurance shall carry interest.
4. On the happening of any occurrence likely to give rise to a claim under this Insurance, **You** shall notify **Us** in accordance with the Claims Procedure as soon as reasonably possible and in any event within 60 days of the date of the occurrence, after which date the claim will be invalidated. **You** shall at **Your** expense furnish to **Us** any certificates, information and evidence that may from time to time be required by **Us** and in the form prescribed by **Us**. **We** shall be allowed, at **Our** own expense and upon reasonable notice, to have a medical examination of the **Insured Person**.
5. The parties are free to choose the law applicable to this insurance Contract. Unless specifically agreed to the contrary this Insurance shall be exclusively subject to English Law and the English Courts shall have jurisdiction in any dispute arising.
6. In the event of any one occurrence giving rise to claims under more than one section of this Certificate which have a monetary **Excess**, only one monetary **Excess** of GBP50 each **Insured Person** shall be deducted from the total amount of the claim (excluding Business Equipment – **Excess** GBP100).
7. No Endorsement or Amendment to this Insurance shall override the Exclusions applicable to Section 4, Personal Liability.
8. The Contracts (Rights of Third Parties) Act 1999 or any amendment thereto shall not apply to this Contract of Insurance. Only **Us** and the Policyholder can enforce the terms of this Contract of Insurance. No other party may benefit from this contract as of right. The Contract of Insurance may be varied or cancelled without the consent of any third party.
9. No (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that (re)insurer 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 United States of America.
10. You shall co-operate with Us in the review of a claim and provide Us and Our designated representatives with all information, documentation and medical information We may require as may be necessary for the purpose of reviewing the claim and You shall provide upon Our request all authorisations necessary to obtain Your medical records that We may require as may be necessary for the purpose of reviewing the claim.
11. No sum payable under this Policy shall carry interest.
12. In no case shall Our liability in respect of any claim by You exceed the largest sum insured stated in the Schedule of Benefits to be read in conjunction with Your Insurance Schedule.
13. If the premium is calculated on a declaration basis You shall within one (1) month of the expiry of this Policy provide the premium adjustment information required by Us.
14. Cover in respect of each Covered Trip shall commence when You leave Your home or place of work whichever occurs last and terminates at the time You return to Your home or place of work whichever occurs first.
15. This insurance is not subject to, and does not provide certain of the insurance benefits required by, the United States' Patient Protection and Affordable Care Act ("ACA"). This insurance does not provide, and Insurers do not intend to provide, minimum essential coverage under ACA. In no event will benefits be provided in Excess of those specified in the contract documents. This insurance is not subject to guaranteed issuance or renewability other than as specified in the Policy. ACA requires certain US citizens and US residents to obtain ACA compliant health insurance coverage. In some circumstances penalties may be imposed on persons who do not maintain ACA-compliant coverage. You should consult Your attorney or tax professional to determine if ACA's requirements are applicable to You.
16. The GDPR and Data Protection Act 2018
For the purpose of providing this insurance and handling of claims or complaints, We may need to transfer certain information which You have provided to Us to other parties. Any information You have provided will be dealt with by Us in compliance with the provisions of the GDPR and Data Protection Act 2018.
17. Except for Section Two Travel Expenses **We** will pay for any otherwise covered loss, damage, liability, cost or expense caused by a **Cyber Act** or **Cyber Incident**, subject always to the Policy's full terms, conditions, limitations and exclusions.