



TRAVEL GUARD POLICY WORDING

What to do if *You* need assistance:

Please Contact:

AIG Asia Pacific Insurance Pte. Ltd.
AIG Building, 78 Shenton Way, #09-16 Singapore 079120
Phone: 65 6419 3000
Website: www.aig.sg/customer-form

What to do if *You* have a claim:

Please Contact:

AIG Asia Pacific Insurance Pte. Ltd.
AIG Building, 78 Shenton Way, #09-16 Singapore 079120
Phone: 65 6224 3698
Website: <https://www.aig.sg/TravelClaims/>



Table of Benefits

The following covers are provided for each insured person. It is important that you refer to the terms and conditions below for full details of cover.

Benefit Schedule

	<u>Coverage (SGD\$)</u>	<u>Excess (SGD\$)</u>
A Trip Cancellation and Curtailment		
1 Trip Cancellation	67,000	135 / 20 for loss of deposits
2 Trip Curtailment	67,000	135 / 20 for loss of deposits
B Personal belongings & Travel inconvenience		
1 Personal Baggage	13,400	135
Single Item Limit	4,355	
Valuables Limit	2,145	
2 Baggage Delay	405	12 hours
3 Personal Money	1,340 / (670 cash)	135
4 Passport and Travel Documents	1,340	135
5 Credit Card Benefit	4,020	135
6 Travel Delay and Abandonment	70 per 12 hrs/up to 1,120	12 hours
7 Missed Departure	2,680	Nil
8 Hijack & Kidnap Benefit	540 per 24 hrs/up to 16,200	24 hours
C Medical and other expenses		
1 Emergency Medical Expenses (incl. emergency dental)	Unlimited	135
2 Hospital Daily Cash Benefit	67 per 24 hrs/up to 5,360	Nil
3 Emergency Medical Evacuation	Unlimited	Nil
4 Resumption of Journey	Unlimited	Nil
5 Pre-Travel Assistance Benefit	Benefit included	Nil
6 During Travel Assistance Benefit	Benefit included	Nil
7 Concierge Service Benefit	Benefit included	Nil
D Personal Accident (Benefit is reduced to S\$6,700 for insured's aged under 18 and over 65)		
	134,000	Nil
E Others		
1 Personal liability	5,360,000	Nil
2 Legal costs	100,500	Nil
3 Bail Bond Advance	6,700	Nil
4 Pet Care -Kennel and Cattery	67 per 24 hrs/up to 500	24 hours
5 Catastrophe Cover	2,010	Nil
6 Mugging Cover	1,340	Nil
7 Collision Damage Waiver - excess waiver	670	Nil
8 Domestic Trips	As per relevant sections	As per relevant sections



F Optional Covers – Only available when you pay an additional premium

1 Winter Sports Cover

a	Loss of Winter Sports Equipment	3,350	135
b	Ski Hire	40 per day/ up to 800	Nil
c	Ski Pack	405	135
d	Piste Closure	55 per day/ up to 550	Nil
e	Avalanche and Landslide	80 per day/ up to 400	Nil

2 Golf Cover

a	Golf Equipment	4,020	135
b	Golf Equipment Hire	95 per day/ up to 760	Nil
c	Pre-paid Green Fees	670	Nil

3 Business Cover

a	Business Equipment	5,360	135
	Single Article	50%	
b	Loss of Business Money	670	135
c	Business Equipment Hire	1,340	Nil
d	Double PA Benefits	268,000	Nil

4 Wedding Cover

a	Ceremonial Attire	4,020	135
b	Gifts	2,680	135
d	Wedding Ring	1,340	Nil
e	Photography / video recordings	1,340	Nil

5 Air Space Closure Cover

a	Cancellation	8,040	24 hours
b	Additional expense if you are stranded at the point of departure	205 each 24 hours	
c	Additional costs to reach your destination	335	24 hours
d	Additional expense if you are stranded on an international connection	270 each 24 period you are delayed up to a maximum of 1,350	24 hours
e	Additional expense if you are stranded on your return journey	270 each 24 period you are delayed up to a maximum of 1,350	24 hours
f	Additional travel expense to get you home	2,680	24 hours
g	Additional car parking costs	67 each 24 hour period you are delayed up to a maximum of 335	24 hours
h	Additional kennel or cattery fees	67 each 24 hour period you are delayed up to a maximum of 335	24 hours

When claiming under certain sections listed in the table above, **you** have to pay the first part of a TRAVEL GUARD POLICY WORDING



claim. The excess will apply to each person claiming and to each incident and to each section of the policy.



GENERAL INFORMATION ABOUT THIS INSURANCE

Insurance providers

This insurance is underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Your travel insurance

This policy wording along with **your policy schedule** forms the basis of **your** contract of insurance. Together, these documents explain what **you** are covered for. The policy wording contains conditions and exclusions which **you** should be aware of. **You** must keep to all the terms and conditions of the insurance, otherwise any claims **you** make may not be paid.

Please read this policy wording to make sure that the cover meets **your** needs and please check the details outlined within **your policy schedule** to make sure that the information shown is correct.

Law

This insurance, and any dispute between **you** and **us** arising under this insurance, will be governed by the laws of Singapore and will be subject to the jurisdiction of the competent courts of Singapore.

Data Privacy

By entering into this contract of insurance, **you** have agreed and consented that **we** may collect, use and process **your** personal information (whether obtained in the application form or otherwise obtained) and disclose such information to the following, whether in or outside of Singapore: (i) **our** group companies; (ii) **our** (or **our** group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, **your** authorized agent/s or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental/regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in **our** Data Privacy Policy which include:

- a) Processing, underwriting, administering and managing **your** relationship with **us**;
- b) Audit, compliance, investigation and inspection purposes and handling regulatory/governmental enquiries;
- c) Compliance with legal or regulatory obligations, risk management procedures and **our** internal policies;
- d) Managing **our** infrastructure and business operations; and
- e) Carrying out market research and analysis and satisfaction surveys.

Note: Please refer to the full version of Our Data Privacy Policy found at: <https://www.aig.sg/privacy>

If **you** have not opted out, **you** have also consented to **us**, **our** group companies, service providers and business partners using, processing and disclosing **your** personal information to:

- a) enrol **you** in contests, prize draws and similar promotions; and
- b)** contact **you** to market other insurance, and/or **our**, **our** group companies' and/or **our** business partners' financial products and/or services.

If **you** have any questions about **our** collection, use and disclosure of personal information **you** may contact **our** Data Protection Officer at singaporedataprotectionofficer@aig.com

Insurance Act (Chapter 142)



The policy is issued in Singapore and is subject to the Insurance Act (Cap 142) (the "Act") and all rules, regulations, subsidiary legislation and government orders enacted thereunder. For this policy to be treated as a Singapore policy, **you** should be ordinarily resident in Singapore at the date of **your** application for this policy. The Act provides that **you** are treated as being ordinarily resident in Singapore if:

- a) **you** are a citizen of Singapore, unless **you** have resided outside Singapore continuously for 5 or more years preceding the application date of the policy and are not currently residing in Singapore;
- b) **you** are a permanent resident, unless **you** have resided in Singapore for less than a total of 183 days in the 12 months preceding the application date of the policy;
- c) **you** have a work pass or permit required under the Employment of Foreign Manpower Act (Cap. 91A), unless **you** have resided in Singapore for less than a total of 183 days in the 12 months preceding the application date of the policy; or
- d) **you** have a pass or permit required under the Immigration Act (Cap. 133) that has duration longer than 90 days and **you** have resided in Singapore continuously for at least 90 days in the 12 months preceding the application date of the policy.

If You do not satisfy any one of the aforesaid definitions of being "ordinarily resident in Singapore", You must notify Us immediately.

Policy Owner's Protection Scheme

This Policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for **your** Policy is automatic and no further action is required from **you**. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please visit AIG Asia Pacific Insurance Pte. Ltd. or visit the AIG, GIA or SDIC websites (www.AIG.sg or www.gia.org.sg or www.sdic.org.sg)

Payment Before Cover Warranty

The premium due must be paid to **us** (or the intermediary through whom this **policy** was effected) on or before the effective date of the **policy**. Payment shall be deemed to have been effected to us or the intermediary when one of the following acts takes place:

- a) Cash or honoured cheque for the premium is handed over to **us** or the intermediary;
- b) A credit or debit card transaction for the premium is approved by the issuing bank;
- c) A payment through an electronic medium including the internet is approved by the relevant party;
- d) A credit in favour of **us** or the intermediary is made through an electronic medium including the internet.

In the event that the total premium due is not paid to us (or the intermediary through whom this **policy** was effected) on or before the effective date of the **policy**, then the insurance shall not attach and no benefits whatsoever shall be payable by **us**. Any payment received thereafter shall be of no effect whatsoever as cover has not attached.

Sanctions Exclusions

We will not be liable to provide any coverage or make any payment hereunder if to do so would be in violation of any law or regulation concerning sanctions which would expose **us**, **our** parent company or **our** ultimate controlling entity to any penalty under such applicable law.

If you have any questions:

If **you** have any questions about the cover provided under this policy or **you** would like more information, please contact assistance department on 65 6419 3000 or go online at



www.aig.sg/customer-form. Arabic speaking clients may also contact assistance department on +971 4 509 6111 or email servicecenter-me@aig.com. Please note this is for customer service only. Claims are to be submitted according to the information provided in the Important Claim Information section below.

IMPORTANT THINGS YOU NEED TO KNOW ABOUT YOUR POLICY BEFORE YOU TRAVEL

Health conditions

This policy contains conditions relating to **your** health and the health of people traveling with **you**. In particular, **we** do not cover medical conditions which **you** or they had before the cover inception. If there is a change in the state of health of **yourself**, and/ or anyone traveling with **you**, please contact the assistance department immediately on 65 6733 2552. By declaring details of the change in health, this will enable **us** to decide whether **we** can continue to provide cover for **your** change in circumstances under the existing terms of the policy. **We** have the right to add further terms and conditions to **your** policy or exclude cover for the newly diagnosed condition. If **we** are no longer able to provide cover for the newly diagnosed condition, **you** will be entitled to make a cancellation claim or if **you** do not wish to cancel **your trip** **you** will be entitled to cancel **your** policy. Provided **you** have not traveled or made a claim **we** will refund **your** premium in its entirety.

This policy does not cover medical conditions relating to the health of a **relative** or a **business** associate if **you** are aware of circumstances in relation to their health at the time of taking out the policy that are likely to make cancellation of **your trip** necessary.

Sports and activities

See pages 36 for a full listing of activities and the level of cover that is available.

Residency in regards to claims

If at the time of purchasing this policy **your country of residence** is not the same as **your country of citizenship**, **we** draw **your** attention to the following:

(1) In the event of **your** illness or injury resulting in a valid claim under Section C Medical and other expenses, **we** reserve the right to move **you** to another medical facility or to evacuate **you** to **your country of residence** or **your country of citizenship**. Also, once the assistance department has determined **you** are able to be moved, they will arrange necessary and reasonable transportation to **your country of residence** or **your country of citizenship**. Cover and liability ends under all sections of this policy once **you** have reached **your** first destination address in either **your country of residence** or **your country of citizenship**. **You** must follow the assistance department instructions at all times. All decisions as to the means of transportation shall be made by the assistance department.

(2) **If you** are on a **trip** to **your country of citizenship** and once **you** are deemed fit by us or our assistance department to travel, any costs are not covered if **you** refuse to leave **your country of citizenship** or if **you** are refused admittance back to **your country of residence**.

COVER OPTIONS AVAILABLE

Trip options and durations

Single Trip

This gives **you** cover to travel whether by sea, air or land from and return to **your country of residence** provided that **you** fly at least one sector on Emirates during the period of insurance



shown in **your Policy Schedule**. Cover ends when **you** return to **your home** in **your country of residence**. Cover cannot be incepted after a **trip** has commenced.

Annual Multi-Trip

This gives **you** cover to travel whether by sea, air or land as many times as **you** like within the period of insurance provided no single **trip** lasts longer than 31 days (cover is also provided for up to 17 days in total for winter sports, within the period of insurance).

Adults are entitled to travel independently. **Children** under 12 years of age are only entitled to travel separately from the main **insured person** if they are travelling with a **relative**, guardian or person with a legal duty of care except where travelling as an unaccompanied minor in the custody of an airline.

One way trips

Cover for one way trips ends 48 hours after **your** arrival at **your** final destination outside of **your country of residence**.

Policy options

Individual: One person aged between 12 and 80 at the time of taking out this insurance.

Family: An individual and/or his or her **spouse** and up to four of their dependent **children** up to 12 years of age at the date of buying this policy.

Period of Insurance

The period shown under **your Policy Schedule**.

Cover under section A (Cancelling **your trip**) starts at the time **you** book the **trip** or pay the insurance premium, whichever is later. If **you** have arranged an Annual Multi-Trip policy, cover under section A (Cancelling **your trip**) starts at the time that **you** book the **trip** or the start date shown on **your policy schedule**, whichever is later. For both types of policy cover under section A (Cancelling **your trip**) ends as soon as **you** start **your trip**.

Cover under all other sections starts when **you** leave **your home** address in **your country of residence** or from the start date shown on **your policy schedule**, whichever is the later.

Cover ends when **you** return to **your home** address in **your country of residence** or at the end of the period shown on **your policy schedule**, whichever is earlier.

Cover cannot start after **you** departed on **your trip**.

Unless **you** have bought a One-Way policy, each **trip** must begin and end in **your country of residence**.

Trip extensions

If, due to unexpected circumstances beyond **your** control which fall within the terms and conditions of this cover, **your trip** cannot be completed within the period of insurance outlined in **your policy schedule**, cover will be extended for **you** at no extra cost for up to 30 days. This also applies to one person travelling with **you** who is authorized to stay with **you** by AIG if the extension is due to medical reasons. All requests for more than 30 days must be authorized by the assistance department.

IMPORTANT CLAIM INFORMATION



Medical and other emergencies

The assistance department will provide immediate help if **you** are ill, injured or die during the **trip**. They provide a 24-hour emergency service 365 days a year. The contact details are as follows:

Phone: 65 6733 2552

Please have the following information available when **you** contact the assistance department so that **your** case can be dealt with swiftly and efficiently:

- **Your** name and address;
- **Your** contact phone number abroad;
- **Your** policy number shown on **your policy schedule**; and
- The name, address and contact phone number of **your** General Practitioner

Please note: This is not a private medical insurance. If **you** go into hospital abroad and **you** are likely to be kept as an inpatient for more than 24 hours or if **your** outpatient treatment is likely to cost more than S\$670, someone must contact the assistance department for **you** immediately. If they do not, **we** may provide no cover or **we** may reduce the amount **we** pay for medical expenses.

If **you** have to return to your **country of residence** under section A2 (Cutting **your trip** short) or section C1 (Medical and other expenses) the assistance department, must authorize this. If they do not, **we** may provide no cover or **we** may reduce the amount **we** pay for **your** return to **your country of residence**.

If you need to make a claim

You must register a claim by contacting the following company:

AIG Asia Pacific Insurance Pte. Ltd.
AIG Building, 78 Shenton Way, #09-16 Singapore 079120
Phone: 65 6419 3000
Website: <https://www.aig.sg/TravelClaims/>

Please note: All claims must be notified as soon as it is reasonably practical after the event which causes the claim. If **our** position is prejudiced by the late notification of a claim then this may affect **our** acceptance of a claim.

The claims department is open Mondays to Fridays from 9am to 5pm. A claim form will be sent to **you** as soon as **you** tell them about **your** claim.

To help **us** prevent fraudulent claims, **we** store **your** personal details on computer and **we** may transfer them to a centralized system. **We** keep this information in line with the conditions of the applicable laws on data protection in the country.

Fraud

This contract of insurance is based on mutual trust. **We** provide cover and **we** assume that any claims **you** make are genuine. **Our** experience in handling claims enables **us** to detect many of those which are fraudulent and this includes those which are exaggerated. **We** investigate every



claim and if **we** believe that a fraudulent claim is being made **we** may inform the police. This may result in criminal prosecution.

Customer service

Every effort is made to ensure **you** receive a high standard of service. If **you** are not satisfied with the service **you** have received, please contact:

The Customer Care Manager

AIG Asia Pacific Insurance Pte. Ltd.

AIG Building, 78 Shenton Way, #09-16 Singapore 079120

Website: www.aig.sg/customer-form

Phone: 65 6419 3000

To help **us** deal with **your** comments quickly, please quote **your policy schedule**/claim number and the policyholder/**insured person's** name. **We** will do **our** best to resolve any difficulty directly with **you**.

GENERAL DEFINITIONS

Wherever the following words or phrases appear in the policy wording they will always have the meanings shown under them:

Air space closure / closure of air space: A recommendation or order by any government or travel authority to close air space.

Business associate: Any person you conduct business with and who, if **you** were both away from work at the same time, would prevent the business from running properly.

Child/children: A dependent **child** or a grandchild (including adopted or foster children) of the policyholder or the policyholder's **spouse**, who is under 12 years of age at the date of buying this policy.

Country of residence: shall mean the country where you are living or located or working at the time of purchasing this policy.

Country of citizenship: shall mean the country where you are a citizen or permanent resident.

Home: Your usual place of residence within your country of residence

Insured person: The person or persons shown on the **policy schedule**.

Manual labour: Work involving physical labour, for example, but not limited to, construction, installation and assembly. This does not include bar and restaurant staff, music and singing, or fruit picking (not involving machinery).

Money shall mean coins and banknotes, foreign currency, travelers' cheques, or any other instruments with a monetary value.

Pair or set of items: A number of items associated as being similar or complementary or used together.

Spouse: A legally married spouse.

Policy schedule: The document showing the names and other details of all the people insured under this policy and any special conditions that apply.

Pre-existing medical condition: A condition for which care, treatment, or advice was recommended by or received from a Physician or which was first manifested or contracted within a period up to 12 months preceding the **Insured Person's** Effective Date of coverage.

Relative: **Your spouse** and **you** or **your spouse's** parent, brother, sister, son, daughter, grandparent, grandchild, stepparent, stepchild, stepbrother, stepsister or next of kin, mother-in-law, father-in-law, daughter-in-law, son-in-law, brother-in-law, sister-in-law or the fiancé(e) of a person insured under this Policy.

Trip: **Your** holiday or journey starting from the time that **you** leave **your home** in **your country of residence** or from the start date shown on **your policy schedule**, whichever is the



later, to travel outside of your country of residence until arrival back to **your home** address in **your country of residence**.

Valuables: Photographic, audio, video and electrical equipment (including cds, dvds, video and audio tapes and electronic games), MP3 players, computer equipment, binoculars, antiques, jewellery, watches, furs, silks, precious stones and articles made of or containing gold, silver or precious metals.

War: War, whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other goals.

We, us, our: AIG Asia Pacific Insurance Pte. Ltd.

You, your, yourself: Each **insured person** named on the **policy schedule** who has paid the appropriate premium.

GENERAL CONDITIONS

The following conditions apply to all sections of this insurance:

1. **You** must tell **us** if **you** know about anything which may affect **our** decision to accept **your** insurance (for example, if **you** are suffering from a pre-existing medical condition or if **you** are planning to take part in a sport or activities while **you** are on holiday). If **you** are not sure whether to tell **us**, tell **us** anyway.
2. **You** must take all reasonable steps to avoid or reduce any loss which may mean that **you** have to make a claim under this insurance.
3. **You** must give claims department all the documents they need to deal with any claim. **You** will be responsible for the costs involved in doing this. For example, in the event of a cancellation claim **you** will need to supply proof that **you** were unable to travel, such as a medical certificate completed by **your** doctor.
4. **You** must help **us** get back any money that **we** have paid from anyone or from other insurers by giving **us** all the details **we** need and by filling in any forms.
5. If **you** try to make a fraudulent claim or if any fraudulent means or devices are used when trying to make a claim, this policy may become void and the premium **you** have paid may be forfeited. Any benefits already paid to **you** must be repaid in full.
6. **You** must agree to have a medical examination if **we** ask. If **you** die, **we** are entitled to have a post-mortem examination.
7. **You** must pay **us** back any amounts that **we** have paid to **you** which are not covered by the insurance.
8. After a claim has been settled, any salvage **you** have sent into claims department will become **our** property.
9. The policy is non-renewable (except in case of Annual Travel policies).
10. This policy cannot be cancelled or refund of premium allowed, unless you contact us within 14 days of issuance of the policy and provided you have not already commenced your trip or made a claim under this Policy and in such case, we will cancel this Policy and refund you full premium. However, the Policy can still be cancelled after the above period but no refund of premium would be allowed.

GENERAL EXCLUSIONS

General exclusions apply to all sections of this insurance. **We** will not cover the following:

1. Any claim where the following apply.



a. The claim relates to a **pre-existing medical condition** or an illness related to a **pre-existing medical condition** which **you** or any person who **your trip** depends on knew about before **you** bought this insurance.

You must make sure **you** tell **us** about any change in the state of health of **yourself**, anyone travelling with **you**, occurring after **you** have bought this policy but before **you** travel. Please refer to the Health conditions section of this policy wording for further details.

Pre-existing medical conditions of **relatives** or business associates are not covered if at the time of buying this policy, (or in the case of annual multi trip cover before each trip), **you** are aware of circumstances relating to their health which are likely to lead to **you** needing to cancel your **trip**.

b. **You** are travelling against the advice of a medical practitioner.

c. **You** are travelling with the purpose of receiving medical treatment abroad.

d. **You** or any person who **your trip** depends on are receiving or waiting for hospital investigation or treatment for any undiagnosed condition or set of symptoms.

e. **You** or any person who **your trip** depends on has been given a terminal prognosis and which results in claim for medical expenses covered under this Policy.

2. Any claim relating to a set of circumstances which **you** were aware of at the time **you** took out this insurance and which could reasonably be expected to lead to a claim.

3. **You** are not covered under this policy for any **trip** in, to or through Cuba and Democratic Republic of Congo.

4. **You** are not covered under this policy if **you** are on any official government or police database of suspected or actual terrorists, members of terrorist organizations, drug traffickers or illegal suppliers of nuclear, chemical or biological weapons.

5. Any claim arising out of **war**, civil **war**, invasion, revolution or any similar event.

6. Any claim arising from civil riots, blockades, strikes or industrial action of any type (except for strikes or industrial action which were not public knowledge when **you** booked **your trip**).

7. Loss or damage to any property, or any loss, expense or liability arising from ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel or the radioactive, toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of it.

8. Any claim if **you** already have a more specific insurance covering this (for example, if an item **you** are claiming for under section B1 (Personal belongings and baggage) is a specified item on **your** household contents insurance policy).

9. Any claim arising from using a two-wheeled motor vehicle as a driver or passenger if **you** are not wearing a crash helmet where the engine size of the two-wheeled motor vehicle exceeds 100cc.

10. Any indirect losses, costs, charges or expenses (meaning losses, costs, charges or expenses which are not listed under the headings 'What **you** are covered for' in sections A to F, for example, loss of earnings if **you** cannot work after **you** have been injured).

11. Any claim arising from the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfill any part of their obligation to **you**.

12. Any claim resulting from **you** travelling to a specific country or to an area where an official government agency have advised against all (but essential) travel. This exclusion applies to "Section C – Medical and other expenses" and "Section D – Personal Accident" only.

13. Any claim arising from **you** flying in any aircraft other than a fully licensed passenger-carrying aircraft.

14. Any claim arising from **you** being involved in any criminal act.

15. Motor vehicle racing of any kind.

16. Any claim involving **you** taking part in **manual labour** or in any sport or activity unless the activity has been authorised by **us**. Please see the Sports and activities section on page 36 for a full listing of cover available.

17. Any claim relating to **winter sports** unless **you** have purchased Winter Sports Cover and this is shown on **your policy schedule**.



18. Any claim arising from
- **you** suicide or attempted suicide; or
 - **you** injuring **yourself** deliberately or putting **yourself** in danger (unless **you** are trying to save a human life).
19. Any claim arising directly from using alcohol, where the treating doctor has confirmed the level of alcohol in the blood, or using drugs, (unless the drugs have been prescribed by a doctor) or **you** are affected by any sexually transmitted disease or condition.
20. Any costs which **you** would have been liable to pay had the reason for the claim not occurred (for example, the cost of food which **you** would have paid for in any case).
21. Any claim arising as a result of **you** failing to get the inoculations and vaccinations that **you** need.
22. Any claim arising from **you** acting in a way which goes against the advice of a medical practitioner.
23. The costs of making any claim against Emirates.

SECTIONS OF COVER

Please note: If **you** are unable to provide any of claims evidence referred to in the following sections of cover, (for example police reports for lost or stolen items of personal baggage), **you** may still be eligible to make a claim dependent upon the circumstances which have prevented **you** from obtaining the necessary documentation. Please contact the Claims Department to discuss why **you** have been unable to obtain the relevant reports and to obtain a claim form so **your** claim can be considered.

SECTION A – TRIP CANCELLATION AND TRIP CURTAILMENT

A.1. Trip Cancellation

What you are covered for

We will pay up to the amount shown in the table of benefits for:

- Travel and accommodation expenses which **you** have paid or have agreed to pay under a contract and which **you** cannot get back;
- The cost of excursions, tours and activities which **you** have paid for and which **you** cannot get back; and
- The cost of visas which **you** have paid for and which **you** cannot get back.

Please note: If payment has been made using frequent flyer points, air miles, loyalty card points or the like, settlement of **your** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cancellation of **your trip** is necessary and unavoidable as a result of the following:

1. **You** dying, becoming seriously ill or being injured.
2. The death, serious illness or injury of a **relative, business associate**, a person who **you** have booked to travel with or a **relative** or friend living abroad who **you** had planned to stay with. The incident giving rise to the claim must have been unexpected and not something **you** were aware of when **you** took out this insurance.
3. **You** being made redundant, as long as **you** are entitled to payment under the current redundancy payments law and that, at the time of booking **your trip**, **you** had no reason to believe that **you** would be made redundant.



4. **You** or a person who **you** have booked to travel with being placed in quarantine or called for jury service (and **your** request to postpone **your** service has been rejected) or attending court as a witness (but not as an expert witness).
5. If your presence is required or the police or relevant authority needs **you** to stay in your **country of residence** after a fire, storm, flood, burglary or vandalism to **your home** or place of business within fifteen days before **you** planned to leave on **your trip** in your **country of residence**.
6. If **you** are a member of the armed forces or police, fire, nursing or ambulance services which results in **you** having to stay in your **country of residence** due to an unforeseen emergency or if **you** are posted overseas unexpectedly.
7. If after the time **you** booked **your trip** an official government agency advises against all (but essential) travel to **your** intended destination.
8. If **you** become pregnant after the date **you** arranged this insurance cover and **you** will be more than 26 weeks pregnant at the start of or during **your trip**. Or, if **your** doctor advises that **you** are not fit to travel due to complications in **your** pregnancy.
9. If you or other persons insured under this Policy are hijacked;

What you are not covered for under section A.1

1. The excess as shown in the table of benefits. The excess will apply for each **trip** that **you** have booked and for each **insured person**.
2. Cancelling **your trip** because of a medical condition or an illness related to a medical condition which **you** knew about and which could reasonably be expected to lead to a claim. This applies to **you**, a **relative**, business associate or a person who **you** are travelling with, and any person **you** were depending on for the **trip**.
3. **You** not wanting to travel.
4. Any extra costs resulting from **you** not telling the holiday company as soon as **you** know **you** have to cancel **your trip**.
5. **You** being unable to travel due to **your** failure to obtain the passport or visa **you** need for the **trip**.
6. Airport taxes and associated administration fees shown in the cost of **your** flights.
7. Costs which have been paid for on behalf of a person who has not taken out insurance cover with the Insurer.

Claims evidence required for section A.1

- **Policy schedule**
- Proof of travel cost (confirmation invoice, travel tickets, unused excursion, tour or activity tickets).
- Cancellation invoice or letter confirming whether any refund is due.
- A medical certificate which **we** will supply for the appropriate doctor to complete.
- An official letter confirming: redundancy, emergency posting overseas, the need for **you** to remain in **your country of residence**.
- **Your** summons for jury service.

A.2 Trip Curtailment

Please note: If **you** need to return **home** to **your country of residence** or earlier than planned, **you** must contact the assistance department immediately (please see the Medical and other emergencies section for further details).

What you are covered for

We will pay up to the amount shown in the table of benefits for:



- Travel and accommodation expenses which **you** have paid or have agreed to pay under a contract and which **you** cannot get back;
- The cost of excursions, tours and activities which **you** have paid for either before **you** left **your country of residence** or those paid for locally upon **your** arrival overseas and which **you** cannot get back; and
- reasonable additional travel costs to return back to **your country of residence** if it is necessary and unavoidable for **you** to cut short **your trip**.

Please note: If payment has been made using frequent flyer points, air miles, loyalty card points or the like, settlement of **your** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cutting short of **your trip** is necessary and unavoidable as a result of the following:

1. **You** dying, becoming seriously ill or being injured.
2. The death, serious illness or injury of a **relative, business associate**, a person who **you** are travelling with or a **relative** or friend living abroad who **you** are staying with.
3. If your presence is required or the police or relevant authority need **you** to return **home** to **your country of residence** after a fire, storm, flood, burglary or vandalism to **your home** or place of business.
4. If **you** are a member of the armed forces or police, fire, nursing or ambulance services which results in **you** having to return **home** to **your country of residence** due to an unforeseen emergency or if **you** are posted overseas unexpectedly.
5. **You** being made redundant, as long as **you** are entitled to payment under the current redundancy payments law and that, at the time of booking **your trip**, **you** had no reason to believe that **you** would be made redundant.
6. **You** or a person who **you** have booked to travel with being placed in quarantine or called for jury service (and **your** request to postpone **your** service has been rejected) or attending court as a witness (but not as an expert witness).
7. If after the time **you** booked **your trip** an official government agency advises against all (but essential) travel to **your** intended destination.
8. If **you** become pregnant after the date **you** arranged this insurance cover and **you** will be more than 26 weeks pregnant at the start of or during **your trip**. Or, if **your** doctor advises that **you** are not fit to travel due to complications in **your** pregnancy.
9. If **you** or other persons insured under this policy are hijacked.

What you are not covered for under section A.2

1. The excess as shown in the table of benefits.
2. Cutting short **your trip** because of a medical condition or an illness related to a medical condition which **you** knew about and which could reasonably be expected to lead to a claim. This applies to **you**, a **relative**, business associate or a person who **you** are travelling with, and any person **you** were depending on for the **trip**.
3. Any claims where assistance department has not been contacted to authorize **your** early return back to **your country of residence**.
4. **You** being unable to continue with **your** travel due to **your** failure to obtain the passport or visa **you** need for the **trip**.
5. The cost of **your** intended return travel to **your country of residence** if **we** have paid additional travel costs for **you** to cut short **your trip**.

Please note: **We** will calculate claims for cutting short **your trip** from the day **you** return to **your country of residence** or the day **you** go into hospital overseas as an inpatient. Your claim will be based solely on the number of complete days **you** have not used.



If **you** have to cut short **your trip** and **you** do not return to **your country of residence** we will only be liable for the equivalent costs which **you** would have incurred had **you** returned to **your country of residence**.

Claims evidence required for section A.2

- **Policy schedule**
- Proof of travel cost (confirmation invoice, flight tickets)
- Invoices and receipts for **your** expenses
- An official letter confirming: the need for **your** return to **your country of residence**, emergency posting overseas

Please note: This is not a full list and **we** may require other evidence to support **your** claim.

SECTION B – PERSONAL BELONGINGS AND TRAVEL INCONVENIENCE

B.1. Personal Baggage

What you are covered for

We will pay for your personal baggage including items which are usually carried or worn by travelers' for their individual use during a **trip**. **We** will pay up to the amount shown in the table of benefits for items owned (not borrowed or rented) by **you** which are lost, damaged, stolen or destroyed during **your trip**.

Please note

- Payment will be based on the value of the property at the time it was lost, stolen or damaged. An allowance may need to be made for wear, tear and loss of value depending on the age of the property.
- The maximum amount **we** will pay for any one item, pair or set of items is noted in the table of benefits. Please refer to the definition of 'pair or set of items' in the General Definitions Section.
- The maximum amount **we** will pay for **valuables** in total is noted in the table of benefits. Please refer to the definition of '**valuables**' in the General Definitions Section.

B.2. Delayed Baggage

What you are covered for

We will pay up to the amount shown in the table of benefits for buying essential items if **your** baggage is delayed in reaching **you** on **your** outward international journey for more than 12 hours.

Please note: **You** must get written confirmation of the length of the delay from the appropriate airline or Transport Company and **you** must keep all receipts for the essential items **you** buy. If **your** baggage is permanently lost **we** will take any payment **we** make for delayed baggage from **your** overall claim for baggage.

B.3. Personal Money

What you are covered for

We will pay up to the amount shown on the table of benefits for loss or theft, if **you** can provide evidence of their value (this would include receipts, bank statements or cash-withdrawal receipts) of:

- Cash; and
- Travelers' cheques (if these cannot be refunded by the provider).



Please note: The maximum amount **we** will pay for cash carried by one person whether jointly owned or not is the cash limit as shown on the table of benefits (for **children** under 16 years of age a limit of S\$135 applies).

B.4. Loss of Passport and Travel Documents

What you are covered for

We will pay up to the amount shown in the table of benefits for the cost of replacing the following items belonging to **you** if they are lost, damaged, stolen or destroyed during **your** trip:

- Passport;
- Travel tickets, admission tickets, hotel and other holiday vouchers;
- Visas.

Please note: The cost of replacing **your** passport includes the necessary and reasonable costs **you** pay overseas associated with getting a replacement passport to allow **you** to return back to **your country of residence** (this would include travel costs to the local Embassy as well as the cost of the emergency passport itself).

What you are not covered for under sections B1 and B4

1. The excess as shown in the table of benefits (this does not apply if **you** are claiming under section B2).
2. Property **you** leave unattended in a public place.
3. Any claim for loss or theft to personal belongings and baggage which **you** do not report to the police within 24 hours of discovering it and which **you** do not get a written police report for.
4. Any claim for loss, theft, damage or delay to personal belongings and baggage which **you** do not report to the relevant airline or transport company within 24 hours of discovering it and which **you** do not get a written report for. In the case of an airline, a property irregularity report will be required. If the loss, theft or damage to **your** property is only noticed after **you** have left the airport, **you** must contact the airline in writing with full details of the incident within seven days of leaving the airport and get a written report from them.
5. Any loss or theft of **your** passport which **you** do not report to the consular representative of **your home** country within 24 hours of discovering it and get a written report for.
6. Any loss, theft or damage to **valuables** which **you** do not carry in **your** hand luggage while **you** are travelling.
7. Claims where **you** are unable to provide receipts or other reasonable proof of ownership wherever possible for the items being claimed.
8. Breakage of fragile objects or breakage of sports equipment while being used.
9. Damage due to scratching or denting unless the item has become unusable as a result of this.
10. Shortages due to variations in exchange rates.
11. If **your** property is delayed or held as a result of Customs, the police or other officials legally holding it.
12. Losses caused by mechanical or electrical breakdown or damage caused by leaking powder or fluid carried within **your** baggage.
13. Loss, theft or damage to contact or corneal lenses, dentures, hearing aids, paintings, bicycles and their accessories, household equipment, motor vehicles and their accessories, marine craft and equipment or items of a perishable nature (meaning items that can decay or rot and will not last for long, for example, food).



Claims evidence for sections B1 to B4

- **Policy schedule**
- Loss or theft to property – police report.
- Loss, theft or damage by an airline – property irregularity report, flight tickets and baggage check tags.
- Delay by an airline – written confirmation of the length of delay from the airline, flight tickets, baggage check tags, receipts for emergency purchases.
- Loss or theft of a passport – police report, consular report, receipts for additional expenses to get a replacement passport overseas.
- Proof of value and ownership for property.

Please note: This is not a full list and **we** may require other evidence to support **your** claim.

Important information

- **You** must act in a reasonable way as if uninsured to look after **your** property and not leave it unattended or unsecured in a public place.
- **You** must carry **valuables**, passports and money with **you** when **you** are travelling. When **you** are not travelling keep them with **you** or locked in a safety deposit box.
- **You must** report all losses, thefts or delays to the relevant authorities and obtain a written report from them within 24 hours of the incident.
- **You** must provide the claims department with all the documents they need to deal with **your** claim, including a police report, a property irregularity report, receipts for the items being claimed as applicable.

B.5. Credit Card Benefit

We will pay, up to the amount shown in the table of benefits following **your** death during Your Trip for the amount outstanding on any credit card account in **your** name.

What is not covered under section B.5

1. The excess.

B.6. Travel Delay and Abandonment

What you are covered for

We will pay up to the amount shown in the table of benefits if **your** final international departure from or to **your country of residence** by aircraft, sea vessel, coach or train or any other mode of conveyance of public transport is delayed for more than 12 hours due to poor weather conditions, a strike, industrial action or mechanical breakdown. **We** will pay a benefit for each complete 12 hour period that **you** are delayed.

If **your** outward journey is delayed by a minimum of 24 hours **you** can abandon **your** holiday and cancel **your** trip, you can claim up to the amount shown on the table of benefits under Section A1 Cancellation or under Section A2 Curtailment

What you are not covered for under section B.6

1. Any claims where **you** have not checked in for **your trip** at the final international departure point at or before the recommended time.
2. Any claims where **you** have not obtained written confirmation from the appropriate transport company or authority stating the reason for the delay and how long the delay lasted.
3. Delays caused by strike or industrial action which **you** were aware of at the time of taking out this insurance or booking **your trip** under a multi trip policy.
4. Any delay caused by **air space closure**.



Claims evidence required for section B.6.

- **Policy schedule**
- Proof of travel (confirmation invoice, flight tickets)
- An official letter confirming the cause and length of the delay

Please note: This is not a full list and **we** may require other evidence to support **your** claim.

B.7. Missed Departure

Specific definition relating to section B.7.

Public transport: A bus, coach, ferry, sea-vessel or train operating according to a published timetable or any other mode of conveyance of public transport.

What you are covered for

We will pay up to the amount shown in the table of benefits for the reasonable extra costs of travel and accommodation **you** need to arrive at **your** booked holiday destination if **you** cannot reach the final international departure point on the outward or return from or to the **your country of residence** because:

- Public transport services (please refer to the definition of 'public transport' above) fail due to poor weather conditions, a strike, industrial action or mechanical breakdown; or
- The vehicle in which **you** are traveling is directly involved in an accident or suffers a mechanical breakdown or immobilization.

What you are not covered for under section B.7.

- a. Any claims where **you** have not allowed enough time to reach **your** final booked international departure point at or before the recommended time.
- b. Any claims relating to **your** own vehicle suffering a mechanical breakdown if **you** are unable to provide evidence that the vehicle was properly serviced and maintained.
- c. Any delay caused by **air space closure**.

Claims evidence required for section B.7.

- **Policy schedule**
- Proof of travel (confirmation invoice, flight tickets)
- Invoices and receipts for **your** expenses
- An official letter confirming the reason for **your** late arrival and the length of the delay

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances.

B.8. Hijack and Kidnap

What you are covered for under this section

We will pay up to the amount shown in the table of benefits if the aircraft or sea vessel or any other mode of conveyance in which **you** are traveling is hijacked or kidnapped.

Claims evidence required for section B.8.

- **Policy schedule**
- Proof of travel (confirmation invoice, flight tickets)
- An official letter confirming the length of the hijack



Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances.

SECTION C – MEDICAL AND OTHER EXPENSES

C.1. Emergency Medical Expense

Please note: If you are admitted into hospital as an inpatient for more than 24 hours someone must contact the assistance department on your behalf immediately

What you are covered for

We will pay up to the amount shown in the table of benefits for the necessary and reasonable costs as a result of **you** becoming ill, being injured or dying during **your trip**. This includes:

1. Emergency medical, surgical and hospital treatment and ambulance costs.
2. Emergency dental treatment up to S\$500 as long as it is for the immediate relief of pain only.
3. The cost of **your** return to **your country of residence** earlier than planned if this is medically necessary and assistance department approve this.
4. If **you** cannot return to **your country of residence** as **you** originally planned and assistance department approve this, **we** will pay for:
 - Extra accommodation and travel expenses (economy class unless a higher grade of travel is confirmed as medically necessary and authorized by the assistance department) including the cost of a medical escort, if necessary to allow **you** to return to **your country of residence** ; and
 - Extra accommodation and travelling costs for someone to stay with **you** and travel **home** with **you** if this is necessary due to medical advice; or
 - Reasonable expenses for one **relative** or friend to travel from **your country of residence** to stay with **you** (room only) and travel **home** with **you** if this is necessary due to medical advice.
5. **We** will pay up to S\$13,400 for the cost of returning **your** body or ashes to **your country of residence** or to the limit stated in the table of benefits for the cost of the funeral and burial expenses in the country in which **you** die if this is outside **your country of residence**.
6. A single journey air ticket to enable a business colleague to replace **you** abroad if **you** need to return to **your home** when recommended by a qualified medical practitioner or if **you** die during **your trip**.
7. A competent adult to accompany any of **your children** insured under this Policy **home** and any of their additional travelling costs, if no one else to look after them if **you** sustain accidental bodily injury or death or suffer illness.

Please note: If the claim relates to **your** return travel to **your country of residence** and **you** do not hold a return ticket, **we** will deduct from **your** claim an amount equal to **your** original carriers published one way airfare (based on the same class of travel as that paid by **you** for **your outward trip**) for the route used for **your** return.

What you are not covered for under section C.1

1. The excess as shown in the table of benefits.
2. Any medical treatment that **you** receive because of a **pre-existing medical condition** or an illness related to a **pre-existing medical condition** which **you** knew about at the time of taking out this insurance, which could reasonably be expected to lead to a claim.
3. Any costs relating to pregnancy, if **you** are more than 26 weeks pregnant at the start of or during **your trip**.
4. Any treatment or surgery which the assistance department thinks is not immediately necessary and can wait until **you** return to **your country of residence**. The decision of the assistance department is final.
5. The extra cost of a single or private hospital room unless this is medically necessary.



6. Any search and rescue costs (costs charged to **you** by a government, regulated authority or private organization connected with finding and rescuing an individual. This does not include medical evacuation costs by the most appropriate transport).

7. Any costs for the following:

- Telephone calls (other than the first call to assistance department to notify them of the medical problem);
- Taxi fares (unless a taxi is being used in place of an ambulance to take **you** to or from a hospital); and
- Food and drink expenses (unless these form part of **your** hospital costs if **you** are kept as an inpatient).

8. Any medical treatment and associated costs **you** have to pay when **you** have refused to come back to **your country of residence** and assistance department considered **you** were fit to travel.

9. Any treatment or medication of any kind that **you** receive after **you** return to **your country of residence**.

In addition please refer to the General Exclusions Section, General Exclusion 1a to 1e.

C.2. Hospital Daily Cash Benefit

What you are covered for

We will pay up to the limit shown in the table of benefits if, after an accident or illness that is covered under section C1 (Medical and other expenses) of this insurance, **you** go into hospital overseas as an inpatient. **We** will pay up to the limit shown in the table of benefits for each complete 24-hour period that **you** are kept as an inpatient.

Please note: This benefit is only payable for the time that **you** are kept as an inpatient abroad and ceases if **you** go into hospital upon **your** return to **your country of residence**. This amount is meant to help **you** pay any extra expenses such as taxi fares and phone calls.

Claims evidence required for sections C.1 and C.2.

- **Policy schedule**
- Proof of travel (confirmation invoice, travel tickets)
- Invoices and receipts for **your** expenses
- An official letter from the treating doctor in the resort to confirm the additional expenses were medically necessary
- Proof of **your** hospital admission and discharge dates and times.

Please note: This is not a full list and **we** may require other evidence to support **your** claim.

C.3. Emergency Return Home and Resumption of Journey

What you are covered for

We will pay the reasonable extra expenses, (less any refund **you** are due to receive for the unused prepaid travel and accommodation arrangements) to complete **your** original travel arrangements, if they are interrupted by **your** necessary return **home**, owing to the death or serious illness of a **relative** or damage to or a burglary at your home during **your trip**.

You must have 75% of **your** original **trip** duration still left to run at the point in time **you** are ready to resume **your** journey.



Claims evidence required for section C.3

- **Policy schedule**
- Proof of travel (confirmation invoice, travel tickets)
- Invoices and receipts for **your** expenses

C.4. Pre Travel Advice

We will provide **you** with advice and information before **you** travel on:

- Current visa and/or entry permit requirements.
- Current inoculation or vaccination requirements.
- Current World Health Organisation warnings.
- Weather conditions.
- Languages.
- Time zones and differences.
- Motoring regulations and restrictions including whether **you** will need a Green Card.
- Other motoring insurance issues.
- Main bank opening hours, national or bank holidays.

C.5. During Travel Advice

The following services are not insurance benefits. Any costs associated will be met by **you**.

Emergency Medical Payments - If a Hospital demands a cash deposit or settlement prior to leaving, AIG will assist in arranging the advancement of funds to cover on-site medical expenses.

Prescription Assistance – We can arrange the replacement of lost or stolen medication through a local pharmacy or by special courier.

Transportation of Dependents - In the event of hospitalization, arrangements will be made for unattended minors traveling with **you** to be flown home.

Travel Documents Assistance - AIG will help retrieve, report, and reissue lost or stolen travel documents.

Emergency Message Center - Transmission of emergency messages to family and business associates.

Interpretation Services - AIG provides emergency language support or referral to the appropriate local services.

Emergency Cash Transfer - If **you** need **money** urgently and access to **your** normal financial or banking arrangement is not available locally **we** will transfer emergency funds intended to cover **your** immediate emergency needs to **you** if **you** allow **us** to debit a credit or charge card, or arrange for funds to be deposited with **us** in **your** country of residence. The most **we** will transfer per **trip** is S\$1,340.

C.6. Concierge

AIG can help **you** with arranging **your** travel plans. They can assist with booking tickets and making reservations for the following:

- Ground transportation coordination
- Latest worldwide weather
- Rental car reservations
- Accommodations (hotel, condo, etc.) reservations
- Rail and air reservations
- Private car hire arrangements



Please note AIG will only assist **you** in making the above arrangements, any costs associated will be met by **you**.

SECTION D – PERSONAL ACCIDENT

What you are covered for

We will pay up to the amount shown in the table of benefits to **you** or **your** executors or administrators if **you** are involved in an accident during **your trip** which solely and independently results in one or more of the following within 12 months of the date of the accident.

- Death.
- Permanent total disablement (meaning a disability which prevents **you** from working in any job which **you** are suitably qualified for and which lasts 12 months from the date of the accident and, at the end of those 12 months, is in **our** medical advisor's opinion, not going to improve.)
- Complete loss of limb (meaning permanent loss by physical separation at or above the wrist or ankle or permanent and total loss of use of a limb). A limb means an arm, hand, leg or foot.
- Loss of sight in one or both eyes (meaning physical loss of an eye or the loss of a substantial part of sight of an eye). A substantial part means the degree of sight after the accident is 3/60 or less on the Snellen scale after correction with spectacles or contact lenses. (At 3/60 on the Snellen scale something can be seen at 3 foot which should be seen at 60 foot.)

Please note: An accident is considered to be a sudden, unexpected, unusual, specific and external event which occurs at a specific time during **your trip** and does not result from illness, sickness or disease.

We will only pay for one personal accident benefit for each **insured person** during the period of insurance shown on **your policy schedule**.

If **you** are under 18 years of age or over 65, a reduced benefit will apply. Please refer to the table of benefits for full details.

What you are not covered for under section D

1. Any claim arising from illness, sickness or disease which develops or worsens during **your trip** and results in **your** death or disablement.

Claims advice for section D

- Please phone claims department on 65 6224 3698 to ask for advice

SECTION E – Others

E.1. Personal Liability

What you are covered for

We will pay up to the total amount shown in the table of benefits if, within **your trip**, **you** are legally liable for accidentally:

- injuring someone; or
- damaging or losing someone else's property.

The defence costs and expenses are covered in addition to the limit of liability as stated under the table of benefits.



If you die, cover under this Section is automatically transferred to your legal representative provided that such representative follows the terms and conditions of this Policy as far as they can.

What you are not covered for under section E.1.

1. The excess as shown in the table of benefits.
2. Any liability arising from an injury or loss or damage to property: owned by **you**, a member of **your** family or household or a person **you** employ; or
3. Any liability for death, disease, illness, injury, loss or damage:
 - a to members of **your** family or household, or a person **you** employ;
 - b arising in connection with **your** trade, profession or business;
 - c arising in connection with a contract **you** have entered into unless such liability would incur in the absence of such contract;
 - d arising due to **you** acting as the leader of a group taking part in an activity;
 - e arising due to **you** owning, possessing, using or living on any land or in buildings, except temporarily for the purposes of the **trip**; or
 - f arising due to **you** owning, possessing or using mechanically propelled road-registered passenger-carrying or goods-carrying vehicles, ocean-going vessels watercraft or aircraft of any description, firearms or weapons.

Important information

- **You must** give claims department notice of any cause for a legal claim against **you** as soon as **you** know about it, and send them any documents relating to a claim
- **You must** help claims department and give them all the information they need to allow them to take action on **your** behalf
- **You must not** negotiate, pay, settle, admit or deny any claim unless **you** get claims department permission in writing
- **We will** have complete control over any legal representatives appointed and any proceedings, and **we** will be entitled to take over and carry out in **your** name **your** defense of any claim or to prosecute for **our** own benefit any claims for indemnity, damages or otherwise against anyone else

Claims advice on section E.1

- Do not admit liability, offer or promise compensation
- Give details of **your** name, address and travel insurance
- Take photographs and videos, and get details of witnesses if **you** can
- Tell Claims Department immediately about any claim that is likely to be made against **you** and send them all the documents that **you** receive

E.2 Legal Expenses

What you are covered for

We will pay up to the amount shown in the table of benefits for legal costs and expenses arising as a result of dealing with claims for compensation and damages resulting from **your** death, illness or injury during **your trip**.

Any extra travelling expenses, up to a maximum of S\$670 per person if you have to attend a court outside your **country of residence** about your claim for compensation.

What you are not covered for under section E.2.

1. The excess as shown in the table of benefits.
2. Any claim which **we** have not agreed to accept beforehand in writing.
3. Any claim where **we** or **our** legal representative believe that an action is not likely to be successful or if **we** believe that the costs of taking action will be greater than any award.



4. The costs of making any claim against **us**, Emirates, **our** agents or representatives, or against any tour operator, accommodation provider, carrier or any person who **you** have travelled with or arranged to travel with.
5. Any fines, penalties or damages **you** have to pay.
6. The costs of following up a claim for bodily injury, loss or damage caused by or in connection with **your** trade, profession or business, under contract or arising out of **you** possessing, using or living on any land or in any buildings.
7. Any claims arising out of **you** owning, possessing or using mechanically propelled road-registered passenger-carrying or goods-carrying vehicles, watercraft or aircraft of any description, firearms or weapons.
8. Any claim reported more than 180 days after the incident leading to the claim took place.

Important information

- **We** will have complete control over any legal representatives appointed and any proceedings.
- **You** must follow **our** advice or that of **our** agents in handling any claim.
- **You** must get back all of **our** expenses where possible. **You** must pay **us** any expenses **you** do get back.

Claims advice on the section

- Please phone claims department on 65 6224 3698 to ask for advice.

E.3 Bail Bond Advance

What you are covered for

We will advance up to the amount shown in the table of benefits towards **your** bail bond if **you** are imprisoned following a traffic accident.

Important information

- **You** must reimburse **us** within a period of 3 months from the date of the advance.
- If **you** are summoned to appear in court but do not appear, **we** may immediately demand the reimbursement of the bail bond in case irrecoverable as a result of **you** not attending.
- **We** may institute legal proceedings against **you** if this bail bond is not recovered.

What you are not covered for under section E.3.

We will not pay for any claim where the level of alcohol in **your** blood or breath is in excess of the legal limit in the country where the traffic accident occurred.

E.4. Pet Care -Kennel and Cattery

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for extra kennel or cattery fees if **you** are hospitalized for medical treatment which is covered by this policy during **your** insured **trip** or any other circumstances outside of your control which results in a delay to **your** planned return journey to the **your country of residence** of more than 24 hours, or if **your** final booked return international journey by aircraft, sea vessel, coach or train is delayed due to poor weather conditions, a strike, industrial action or mechanical breakdown or any other circumstances outside of your control.

Please note: In the event **you** should need to submit a claim due to a delay in **your** return travel due to transport failure, **you** must get written confirmation from the appropriate transport company or authority stating the reason for the delay and how long the delay lasted. **You** must keep all receipts for the extra kennel or cattery fees **you** pay



What you are not covered for under section E.4.

1. Any kennel or cattery fees **you** pay outside **your country of residence** as a result of quarantine regulations.
2. Any claims relating to travel delay where **you** have not checked in for **your trip** at the final international departure point at or before the recommended time.

Claims evidence required for section E.4.

- **Policy schedule**
- Proof of travel (confirmation invoice, flight tickets)
- An official letter confirming the cause and length of the delay
- Invoices and receipts for **your** extra kennel or cattery fees

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances.

E.5. – Catastrophe Cover

What you are covered for under the section

We will pay up to the amount shown in the table of benefits if after **you** have commenced **your trip** **you** pay or agree to pay overseas for travel expenses and providing other similar accommodation to allow **you** to continue with **your trip** if **you** cannot live in **your** booked accommodation because of fire, flood, earthquake, storm, hurricane, tornado, rain, wind, weather conditions, lightening, explosion, outbreak of infectious diseases, volcanic eruption, tsunami, rockslide, landslide and avalanche

Please note: **You** must get written confirmation from the appropriate authority stating the nature of the disaster and how long the disaster lasted. **You** must keep all receipts for the extra expenses **you** pay.

What you are not covered for under section E.5.

1. Any expenses that **you** can get back from **your** tour operator, airline, hotel or other service provider.
2. Any claim resulting from **you** traveling against the advice of the appropriate national or local authority.

Claims evidence required for section E.5.

- **Policy Schedule**
- Proof of travel (confirmation invoice, flight tickets)
- An official letter confirming the cause and length of the delay
- Invoices and receipts for your extra kennel or cattery fees

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances.

E.6. Mugging Cover

A mugging is a violent, unprovoked attack by someone not insured on this policy which results in physical bodily harm, as shown in the police report.



What you are covered for under the section

We will pay up to the amount shown in the table of benefits if **you** are injured as a result of a mugging and **you** go into hospital overseas as an inpatient for more than 24 hours.

Please note: **You** must report the incident to the local police within 24 hours of the attack and get a written police report. Payment under this section is in addition to the benefit payable under section C2 (Hospital Daily Cash benefit).

Claims evidence required for section E.6.

- **Policy schedule**
- Proof of travel (confirmation invoice, travel tickets)
- Invoices and receipts for **your** expenses
- Proof of **your** hospital admission and discharge dates and times
- A police report to confirm the incident

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances.

E.7. Collision Damage Waiver

What you are covered for under this section

We will reimburse **you** for any excess or deductible for which **you** become legally liable to pay in respect of loss or damage to a motor vehicle rented by **you**, as the result of an accident during **your trip**.

The Excess means the Excess which would have been waived had **you** purchased a Collision Damage Waiver option (or similar) when renting the vehicle.

The rental vehicle must be rented from a licensed rental agency. As part of the hiring arrangement **you** must take up all comprehensive motor insurance against loss or damage to rental vehicle during the rental period.

In the event of a claim, **you** are obligated to pay the Rental Vehicle Company Excess in the first instance directly to the hire car company, and it is **your** responsibility to supply a final Loss/repair account to substantiate **your** actual financial Loss.

What you are not covered for under Section E.7.

1. Loss or damage arising from operation of the rental vehicle in violation of the terms of the rental agreement or loss or damage which occurs beyond the limits of any public roads or in the violation of laws, rules and regulations of the country.
2. Loss or damage arising from wear and tear, gradual deterioration, damage from insects or vermin, inherent vice, latent defect or damage

E.8 Domestic Trips

What you are covered for under this section:

The following cover is provided for trips within **your** country of residence providing **your** trip is pre-booked for 3 or more consecutive nights and includes pre-paid accommodation. This section does not apply to one-way trips

Section A1 Trip Cancellation

Section A2 Trip Curtailment



Please note: The assistance department must be contacted to make arrangements for travel back to your home.

Under Section C1 – Emergency Medical Expense

If you suffer injury or illness while on a trip in your country of residence or your country of departure and have to stay as an inpatient for more than 24 hours in a row we will:

1. arrange and pay for you to be transferred to a hospital near to your home.
2. we will pay for the additional travelling and accommodation costs for **one** person to come and stay with you and/or accompany you home.

Please note: If you are admitted into hospital as an inpatient for more than 24 hours someone must contact the assistance department on your behalf immediately

Section B1 Personal Baggage

Section B3 Personal Money

See relevant Sections of cover for full details of what is and is not covered.

What you are not covered for under Section E.8.

- a) any claim where the trip is for less than 3 consecutive nights
- b) any claim when we have not been contacted immediately prior to or when you were hospitalised
- c) any claim where we have not given our permission before any costs were incurred
- d) any claim where you are staying within 50 kilometers of your home
- e) pre-existing medical conditions
- f) anything specifically excluded under each section of this policy.
- g) The cost of medical expenses

SECTION F – Optional Covers

F.1. WINTER SPORTS COVER

Please note: The following sections only apply if **you** have paid the appropriate premium for winter sports cover and this is shown on **your policy schedule**. (If **you** have arranged an Annual Multi-Trip policy, the cover is provided for up to 17 days within the period of insurance.)

Specific Definitions relating to section F1 Winter Sports

Winter sports

Bigfoot skiing, cat skiing or boarding, cross country skiing, glacier skiing, glacier walking (up to 4,000 metres), heli-skiing, ice hockey, ice skating, kite snowboarding, langlauf, mono skiing, off piste skiing or snowboarding (except in areas considered to be unsafe by resort management), skiing, ski mountaineering, ski randonee, ski touring, snowboarding, speed skating and tobogganing.

See pages 37 for a full listing of winter sports that can be covered under this policy.

Winter sports equipment



Skis and snowboards and their bindings, ski poles and ice skates.

F.1. a. Winter Sport Equipment loss

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for winter sports equipment owned or hired by **you** which is lost, or stolen during **your trip**.

Please note:

An allowance will be made for wear, tear and loss of value on claims made for winter sports equipment owned by **you** as follows.

- Up to 12 months old - 90% of the purchase price
- Up to 24 months old - 70% of the purchase price
- Up to 36 months old - 50% of the purchase price
- Up to 48 months old - 30% of the purchase price
- Up to 60 months old - 20% of the purchase price
- Over 60 months old - 0%

The maximum amount **we** will pay for any one item, **pair or set of items** is shown in the table of benefits. Please refer to the definition of '**pair or set of items**'.

F.1.b. Winter Sports Equipment Hire

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for the cost of hiring winter sports equipment if winter sports equipment owned by **you** is:

Delayed in reaching **you** on **your** outward international journey for more than 12 hours; or lost, stolen or damaged during **your trip**.

Please note: **You** must keep all receipts for the winter sports equipment that **you** hire. **You** must bring any damaged winter sports equipment back to **your country of residence** for inspection.

F.1.c -Ski-Pack

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for the loss or theft of **your** lift pass. Claims would be calculated according to the expiry date of the lift pass - depending upon how many days there were left to run on the original lift pass, an unused pro-rata refund would be made of its original value.

What you are not covered for under sections F1- a,b,c,

1. The excess as shown in the table of benefits for each **insured person** and for each incident.
2. Any claim for loss or theft which **you** do not report to the police within 24 hours of discovering it and which **you** do not get a written police report for.
3. Any claim for loss, theft, damage or delay to winter sports equipment which **you** do not report to the relevant airline or transport company within 24 hours of discovering it and which **you** do not get a written report for. In the case of an airline, a property irregularity report will be required. If the loss, theft or damage to **your** winter sports equipment is only noticed after **you**



have left the airport, **you** must contact the airline in writing with full details of the incident within seven days of leaving the airport and get a written report from them.

4. Winter sports equipment **you** have left unattended in a public place unless the claim relates to skis, poles or snowboards and **you** have taken all reasonable care to protect them by leaving them in a ski rack between 8am and 6pm.

5. Claims where **you** are unable to provide receipts or other reasonable proof of ownership wherever possible for the items being claimed.

Claims evidence required for sections F.1.a,b,c

- **Policy schedule**
- Loss or theft - police report
- Loss, theft or damage by an airline - property irregularity report, flight tickets and baggage check tags
- Delay by an airline - written confirmation of the length of delay from the airline, flight tickets, baggage check tags, receipts for the hire of winter sports equipment
- Proof of value and ownership

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances.

F.1. d – Piste Closure

Please note: This section only applies between 1 December and 15 April for travel to the Northern hemisphere or between 1 May and 30 September for travel to the Southern hemisphere.

What you are covered for under the section

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

- the cost of transport to the nearest resort; or
- a benefit for each complete 24-hour period that **you** are not able to ski and there is no other ski resort available.

Please note: **You** must get written confirmation from the management of the resort stating the reason for the closure and how long the closure lasted.

Claims evidence required for section F.1.d

- **Policy schedule**
- Proof of travel (confirmation invoice, flight tickets)
- An official letter confirming the cause and length of the closure
- Receipts for **your** travel expenses if **you** travel to the nearest resort

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances.

F.1. e – Avalanche Cover

What you are covered for under the section



We will pay up to the amount shown in the table of benefits if **you** are prevented from arriving at or leaving **your** booked ski resort for more than 12 hours from the scheduled arrival or departure time because of an avalanche.

Please note: **you** must endeavor to get written confirmation from the appropriate authority stating the reason for the delay and how long the delay lasted.

Claims evidence required for section F.1.e

- **Policy schedule**
- Proof of travel (confirmation invoice, flight tickets)
- An official letter confirming the cause and length of the delay

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances.

F-2 GOLF COVER

Please note: The following sections only apply if **you** have paid the appropriate premium for golf cover and this is shown on **your policy schedule**.

Specific Definition relating to section F2 Golf Cover

Golf equipment
Golf clubs, golf bags, non-motorized trolleys and golf shoes.

F.2.a – Golf Equipment

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for golf equipment owned by **you** (not borrowed or hired) which is lost, stolen or damaged during **your trip**.

Please note:

The maximum amount **we** will pay for any one item, pair or set of items is shown in the table of benefits.

You must bring any damaged golf equipment back to **your country of residence** or **Country of Citizenship** for inspection.

Our liability is solely based upon the golf equipment which has been lost, stolen or damaged and would not extend to the replacement of **your** whole set of woods, or irons in the event of a claim being made for one item.

F.2.b – Golf Equipment Hire

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for the cost of hiring golf equipment if golf equipment owned by **you** is:

- delayed in reaching **you** on **your** outward international journey for more than 24 hours; or
- lost, stolen or damaged during **your trip**.

Please note: **You** must keep all receipts for the golf equipment that **you** hire. **You** must bring any damaged golf equipment back to **your country of residence** for inspection.



What you are not covered for under sections F.2.a,b

- The excess as shown in the table of benefits for each **insured person** and for each incident (this only applies if **you** are claiming under section F.2.a.
- Golf equipment **you** leave unattended in a public place.
- Any claim for loss or theft which **you** do not report to the police within 24 hours of discovering it and which **you** do not get a written police report for.
- Any claim for loss, theft or damage to golf equipment which **you** do not report to the relevant airline or Transport Company within 24 hours of discovering it and which **you** do not get a written report for. In the case of an airline, a property irregularity report will be required. If the loss, theft or damage to **your** golf equipment is only noticed after **you** have left the airport, **you** must contact the airline in writing with full details of the incident within seven days of leaving the airport and get a written report from them.

Claims: where **you** are unable to provide receipts or other reasonable proof of ownership wherever possible for the items being claimed.

Claims evidence required for under sections F.2.a,b

- **Policy schedule**
- Loss or theft - police report
- Loss, theft or damage by an airline - property irregularity report, flight tickets and baggage check tags
- Delay by an airline - written confirmation of the length of delay from the airline, flight tickets, baggage check tags, receipts for the hire of golf equipment
- Proof of value and ownership.

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances.

F.2.c – Green Fees

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for the unused percentage of **your** green fees, golf tuition fees or golf equipment hire which **you** have already paid for and cannot get back if:

- **you** become ill or are injured during **your trip** and cannot take part in the golf activities as planned; or
- loss of theft of documents prevents **you** from taking part in the prepaid golfing activity.

Please note: **Your** claim will be based on the number of complete days **you** have not used. **You** must get written confirmation of the nature of **your** illness or injury from the treating doctor in the resort along with confirmation of how many days **you** were unable to take part in the golfing activities. **You** must report the loss or theft of documents to the local police within 24 hours of discovery and get a written police report.

Claims evidence required for section F.2.c

- **Policy schedule**
- Proof of travel (confirmation invoice, travel tickets)
- Invoices and receipts for **your** prepaid golf expenses



- An official letter from the treating doctor in the resort to confirm **your** inability to take part in the planned golfing activities
- Loss or theft of documents - police report

Please note: We may require other evidence to support **your** claim dependent upon the circumstances.

F.3. BUSINESS COVER

Please note: The following sections only apply if you have paid the appropriate premium for business cover and this is shown on your policy schedule.

Specific definition relating to section F.3 Business Cover

Business equipment

Mobile Phones, portable personal computers, personal electronic organizers, calculators, Dictaphones, portable facsimile machines, telephone modems, portable overhead projectors, Computer equipment, communication devices and other business-related equipment which **you** need in the course of **your** business.

F.3.a – Business Equipment

What you are covered for

We will pay up to the amount shown in the table of benefits for the following.

- Business equipment which is lost, damaged, stolen or destroyed during **your trip**. Please refer to the table of benefits for the maximum amount **we** will pay for any one item, **pair or set of items** (please also refer to the definition of '**pair or set of items**' on page X).

F.3.b – Loss of Business Money

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for the loss or theft of business money (meaning cash or traveller's cheques) which is the property of **you** (if self-employed) or **your** employer while it is being carried with **you** or it is held in locked safety deposit facilities.

F.3.c. Business Equipment Hire

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for the cost of hiring business equipment if business equipment owned by **you** or by **your** employer is:

Delayed in reaching **you** on **your** outward international journey for more than 24 hours; or lost, stolen or damaged during **your trip**.

Please note: **You** must keep all receipts for the business equipment that **you** hire. **You** must bring any damaged business equipment back to **your country of residence** or **country of citizenship** for inspection. **You** must also provide an official letter from the carrier confirming the length and cause of the delay.

F.3.d. Double Personal Accident Benefit



What you are covered for

We will pay up to the amount shown in the table of benefits to **you** or **your** executors or administrators if **you** are involved in an accident during **your trip** which solely and independently results in one or more of the following within 12 months of the date of the accident.

- Complete loss of limb (meaning permanent loss by physical separation at or above the wrist or ankle or permanent and total loss of use of a limb). A limb means an arm, hand, leg or foot.
- Loss of sight in one or both eyes (meaning physical loss of an eye or the loss of a substantial part of sight of an eye). A substantial part means the degree of sight after the accident is 3/60 or less on the Snellen scale after correction with spectacles or contact lenses. (At 3/60 on the Snellen scale something can be seen at 3 foot which should be seen at 60 foot.)
- Permanent total disablement (meaning a disability which prevents **you** from working in any job which **you** are suitably qualified for and which lasts 12 months from the date of the accident and, at the end of those 12 months, is in **our** medical advisor's opinion, not going to improve.)
- Death.

Please note: An accident is considered to be a sudden, unexpected, unusual, specific and external event which occurs at a specific time during **your trip** and does not result from illness, sickness or disease.

We will only pay for one personal accident benefit for each **insured person** during the period of insurance shown on **your policy schedule**.

If **you** are under 18 years of age a reduced benefit will apply. Please refer to the table of benefits for full details.

What you are not covered for under section F.3.d

1. Any claim arising from illness, sickness or disease which develops or worsens during **your trip** and results in **your** death or disablement.

Claims advice for section F.3.d

- Please phone claims department on 65 6224 3698 to ask for advice

F.4.-WEDDING COVER

Please note: The following sections only apply if you have paid the appropriate premium for wedding cover and this is shown on your policy schedule.

F.4.a – Ceremonial Attire

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for clothing, dress, suits, shoes and accessories including cost of make-up, hair styling and flowers paid for or purchased for the wedding which are lost, damaged, stolen or destroyed during **your trip**. Payment will be based on the value of the attire at the time it was lost, damaged, stolen or destroyed.

F.4.b –Wedding Gifts

What you are covered for under the section



We will pay the insured couple up to the amount shown in the table of benefits for wedding gifts which are lost, damaged, stolen or destroyed during **your trip**.

F.4.c – Wedding Rings

What you are covered for under the section

We will pay up to the amount shown in the table of benefits for the bride and grooms wedding rings which are lost, damaged, stolen or destroyed during **your trip**. The maximum amount we will pay for any one ring is shown in the table of benefits.

What you are not covered for under the sections F.4.a,b,c

- The excess as shown in the table of benefits for each **insured person** and for each incident.
- Property **you** leave unattended in a public place.
- Any claim for loss or theft of items which **you** do not report to the police within 24 hours of discovering it and which **you** do not get a written police report for.
- Any claim for loss, theft or damage to items which **you** do not report to the relevant airline or transport company within 24 hours of discovering it and which **you** do not get a written report for. In the case of an airline, a property irregularity report will be required. If the loss, theft or damage to **your** property is only noticed after **you** have left the airport, **you** must contact the airline in writing with full details of the incident within seven days of leaving the airport and get a written report from them.
- Claims where **you** are unable to provide receipts or other reasonable proof of ownership wherever possible for the items being claimed.
- Losses caused by leakage from items in **your** luggage.

F.4.d – Photography / video recordings

What you are covered for under the section

The reasonable additional costs incurred to reprint / make a copy of or retake the photographs / video recordings either at a later date during **your** trip or at any venue if:

- a) the photographer who was booked or assigned to take the photographs / video recordings on **your** wedding day was unable to get to the wedding venue due to accidental bodily injury, illness, unavoidable and/or unforeseen transport problems; or
- b) the photographs / video recordings of the wedding day taken by the photographer are lost, damaged, stolen or destroyed within 14 days after the wedding day and whilst **you** are still on **your** trip insured under this Policy.

Claims evidence for the sections F.4

- **Policy schedule**
- Loss or theft to property - police report.
- Loss, theft or damage by an airline - property irregularity report, flight tickets and baggage check tags.
- Proof of value and ownership for property.

Please note: We may require other evidence to support **your** claim dependent upon the circumstances.

F.5 – Air Space Closure Cover



Single Trip Purchases - if at the time of purchasing this insurance **you** are due to depart on **your** trip within the next 7 days, and **you** are aware of circumstances that could lead **you** to an air space closure that will directly disrupt **your** travel plans (for example a volcanic eruption), the amounts in the table of benefits will be reduced by 75%.

Annual Multi Trip Purchases - if at the time of purchasing this insurance or at the point in time **you** book **your** trip, whichever is the later, **you** are due to depart on **your** trip within the next 7 days, and **you** are aware of circumstances that could lead **you** to an air space closure that will directly disrupt **your** travel plans (for example a volcanic eruption) **you** are aware of circumstances that could lead **you** to an air space closure that will directly disrupt **your** travel plans (for example a volcanic eruption), the amounts in the table of benefits will be reduced by 75%.

Section F.5.a – Cancellation

We will pay up to the amount shown in the table of benefits for:

- travel and accommodation expenses which **you** have paid or have agreed to pay under a contract;
- the cost of excursions, tours and activities which **you** have paid or agreed to pay under a contract; and
- the cost of visas which **you** have paid for

if **your** departure is delayed by more than 24 hours due to the occurrence of a **closure of air space** and it becomes reasonable and necessary for **you** to cancel **your trip**.

Section F.5.b – Additional expense if you are stranded at the point of departure

If **you** have checked in prior to departure on the outward part of **your trip** from **your country of residence** and **your** departure is delayed by more than 24 hours due to the occurrence of a **closure of air space**, we will pay **you** up to the amount shown on the table of benefits for reasonable additional and unexpected costs of:

- Accommodation
- Making alternative travel arrangements to return **home** or to reach **your** final point for international departure if **you** are on a connecting flight within **your** country of residence.
- Food and drink
- Necessary emergency purchases

that **you** may incur for the first 24 hours **you** are stranded, waiting to depart.

If **you** are still unable to depart on **your** trip after 24 hours, **you** may submit a claim under Section F.5.a – Cancellation.

Please note: If **you** are unable to check in, **you** may still be eligible to make a claim dependent upon the circumstances which have prevented **you** from checking in. Please contact the claims department to discuss **your** circumstances and to obtain a claim form so **your** claim can be considered.

Section F.5.c – Additional costs to reach your destination

If, after **you** have been delayed by 24 hours in **your country of residence** due to the occurrence of a **closure of air space**, **you** still decide to go on **your trip**, we will pay up to the amount shown in the table of benefits, for the additional and unexpected costs **you** incur re-arranging **your** outbound travel to reach **your** original destination.



Section F.5.d– Additional expense if you are stranded on an international connection

We will pay up to the amount shown in the table of benefits if **your** international connection is delayed by more than 24 hours due to the occurrence of a **closure of air space** for reasonable additional and unexpected costs of:

- Accommodation
- Travel to an alternative point of departure or to alternative accommodation
- Travel from **your** accommodation to **your** point of intended departure
- Food and drink
- Necessary emergency purchases

that **you** may incur for up to 5 days, whilst **you** are stranded, waiting to make **your** international connection. Please note that there is a maximum of 5 days cover throughout the duration of **your trip**.

Section F.5.e – Additional expense if you are stranded on your return journey home

We will pay up to the amount shown in the table of benefits if **your** return journey **home** is delayed by more than 24 hours due to the occurrence of a **closure of air space** for reasonable additional and unexpected costs of:

- Accommodation
- Travel to an alternative point of departure or to alternative accommodation
- Travel from **your** accommodation to **your** point of intended departure
- Food and drink
- Necessary emergency purchases

that **you** may incur for up to 5 days whilst **you** are stranded, waiting to return **home**. Please note that there is a maximum of 5 days cover throughout the duration of **your trip**.

Section F.5.f – Additional travel expense to get you home

If **your** return journey home is delayed by more than 24 hours due to the occurrence of a **closure of air space** and the carrier **you** are booked to travel **home** with is unable to make arrangements for **your** return journey within 72 hours of **your** original date of return, as shown on **your policy schedule**, we will pay up to amount shown on the table of benefits for alternative travel arrangements to get **you home**.

You must contact the assistance department before making alternative travel arrangements, because if appropriate under the circumstances, they will make these arrangements for you.

If **your trip** involves multiple destinations, cover under this section applies if **your** onward connection is delayed by more than 24 hours due to a **closure of air space**. **You** must contact the assistance department before making alternative travel arrangements, because if appropriate, they will make these arrangements for **you**. The assistance department will decide under the circumstances whether to bring **you home** or re arrange **your** onward journey.

Section F.5.g – Additional car parking costs

We will pay up to the amount shown on the table of benefits for additional car parking costs **you** incur if **your** return to **your country of residence** is delayed by more than 24 hours due to the occurrence of a **closure of air space**.

Section F.5.h– Additional kennel or cattery fees

We will pay up to the amount shown on the table of benefits for additional kennel or cattery fees if **your** return journey to **your country of residence** is delayed by more than 24 hours due to the occurrence of a **closure of air space**.

Special conditions which apply to Sections F



1. We will only pay costs which are not recovered from any other source, for example an airline or a tour operator.
2. The insurance under this Section F.5 does not cover any expenses met by the airline under Regulation 261/2004
3. All additional expenses must be reasonable and necessary and incurred as a direct result of an Air space closure. For example, if you live near your departure point, we may deem additional accommodation unnecessary and unreasonable if you could easily return home.
4. We may ask you to provide an official letter from your carrier confirming the cause and length of the delay.
5. You must contact the assistance department before making arrangements to return home.

Claims evidence required by us in support of a claim

- We will require **your policy schedule** along with proof of **your** original travel plans (for example, confirmation invoice or travel tickets).
- For claims under section F.5.a **we** will require cancellation invoices or letters from **your** tour operator, travel or accommodation provider confirming that **you** did not use their service and whether any refund is due to **you** from them.
- **You** must provide proof of all **your** additional expenses (for example, receipts for food and drink, invoices detailing additional accommodation, receipts for additional car parking).
- If required by **us we** may ask **you** to provide an official letter from **your** carrier confirming the cause and length of the delay.

Please note: **We** may request other evidence to support **your** claim dependent upon **your** circumstances.



Sports and Activities Listing

Where cover is provided in the table below this is on the basis that:

- **You** follow the safety guidelines and where applicable use recommended safety equipment
- The activity is not undertaken on a professional basis.

Name of Activity (Activities marked with an * are considered to be Winter Sports)	Activity Covered	Winter Sports Upgrade Premium Payable	Activity Excluded	Applicable condition
Abseiling	+			Must be with professional organisers
Adventure Racing			+	
Aerobics	+			
Air Boarding	+			
Alpine Mountain Biking			+	
Amateur Athletics	+			Cover provided if part of a non professional tournament or competition
American Football			+	
Angling	+			
Archery	+			
Assault Courses	+			
Badminton	+			
Bamboo Rafting	+			
Banana Boating	+			
Base Jumping			+	
Baseball	+			
Basketball	+			
Battle Re-enactment	+			Must be with professional organisers. Excludes the use of live ammunition
Beach Games	+			
Biathlon	+			
Big Game Hunting			+	
Bigfoot Skiing *		+		
Black Water Rafting			+	
BMX Riding - stunt / obstacle			+	
Boardsailing / Windsurfing	+			
Bobsleigh			+	
Body Boarding / Boogie Boarding	+			
Body Flying / Wind Tunnel Flying	+			
Bouldering			+	
Bowling	+			
Bowls	+			
Boxing			+	
Breathing Observation Bubble Diving (to 30 metres)	+			



Bridge Swinging			+	
Bridge Walking	+			Must be adequately supervised and full safety equipment used
Bungee Jumping	+			Maximum of 3 jumps in any one trip
Camel Riding	+			
Canoeing (river - not white water)	+			
Canopy Walking / Tree-Top Walking	+			
Canyoning			+	
Cascading			+	
Cat Skiing / Boarding *		+		
Catamaran Sailing	+			
Cave Tubing / River Tubing	+			
Caving / Pot Holing			+	
Charity Work / Conservation Work	+			Excludes working with wild animals
Clay Pigeon Shooting	+			No Personal Liability cover
Cliff Jumping			+	
Climbing (indoor)	+			
Climbing / Mountaineering (up to 4,000 metres using guides and ropes)			+	
Coasteering			+	
Cricket	+			Cover provided if part of a non professional tournament
Croquet	+			
Cross Country Running	+			
Cross Country Skiing *		+		
Curling	+			
Cycling	+			On recognised routes, no racing or mountain biking
Dancing	+			Must be non professional
Darts	+			
Deep Sea Fishing	+			
Dinghy Sailing	+			Within coastal waters
Diving (High Diving)			+	
Dog Sledding	+			
Drag Racing			+	
Dragon Boating	+			
Dry Slope Skiing / Boarding		+		
Dune / Wadi Bashing	+			
Elephant Trekking	+			Must be with official organisers
Endurance Tests			+	
Equestrian Events			+	
Expeditions			+	
Fell Running	+			
Fell Walking	+			



Fencing	+			Must be wearing appropriate safety equipment
Fishing	+			
Fives	+			
Flying as a non-fare-paying passenger in a private aircraft or helicopter	+			
Flying as a pilot or trainee pilot in a private aircraft or helicopter			+	
Football – American	+			Cover provided if part of a non professional tournament
Football / Soccer	+			Cover provided if part of a non professional tournament
Free Mountaineering			+	
Freestyle Skiing *		+	+	
Glacier Skiing *		+		
Glacier Walking up to 4,000 metres *		+		
Gliding	+			No Personal Liability cover
Go-Karting	+			
Golf	+			
Gorge Scrambling			+	
Gorge Swinging / Canyon Swinging			+	
Gorge Walking			+	
Gorilla trekking	+			Must be with official organisers
Gymnastics	+			Provided not professional
Handball	+			
Hang Gliding			+	
Harness Racing			+	
Heli-skiing *		+		
High Diving			+	(5 metres or over)
Hiking (below 4,000 metres)	+			
Hockey	+			Cover provided if part of a non professional tournament
Horse Jumping			+	
Horse Racing			+	
Horse Riding (not polo, jumping or hunting)	+			Must be wearing a hard hat if available
Hot Air Ballooning	+			Organised pleasure rides as fare paying passenger only
Hunting on horse back			+	
Hurling	+			Cover provided if part of a non professional tournament
Husky Sledge Rides *		+		Organised and non-competitive with an experienced local driver. Insured can drive the dogs themselves if supervised by



				an experienced local driver
Hydro Speeding			+	
Ice Climbing *		+		Must be adequately supervised and full safety equipment used
Ice Curling *		+		
Ice Diving *		+		Must be with official organisers
Ice Hockey *		+		
Ice Skating on a recognised rink *		+		
Ice Speedway			+	
Inline Skating	+			
Jet Boating	+			No Personal Liability cover
Jet Biking	+			No Personal Liability cover
Jet Skiing	+			No Personal Liability cover
Jogging	+			
Jousting			+	
Judo			+	
Karate			+	
Kayaking (up to grade 4 rivers only)	+			No cover kayaking in grade 5 waters and above
Kendo			+	
Kite Buggyng	+			No Personal Liability cover
Kite Skiing *		+		No Personal Liability cover
Kite Snowboarding *		+		No Personal Liability cover
Kite Surfing (over land)	+			No Personal Liability cover
Kite Surfing (over water)	+			No Personal Liability cover
Kloofing			+	
Korfball	+			
Lacrosse	+			
Langlauf *		+		
Luging/Bobsleigh			+	
Marathon Running	+			
Martial Arts			+	
Mono Skiing *		+		
Motocross			+	
Motor Cycle Racing			+	
Motor Racing			+	
Motor Rallies			+	
Mountain Biking (competitive)			+	
Mountain Biking (recreational)	+			Must be on recognised routes. No cover for downhill racing, biking on vertical paths or competitions.
Mountain Boarding			+	
Mountaineering			+	



Mud Bugging	+			No Personal Liability cover
Netball	+			
Off Piste Skiing (within local ski patrol guidelines) *		+		
Off Piste Snowboarding (within local ski patrol guidelines) *		+		
Orienteering	+			
Ostrich Riding			+	
Outdoor Endurance Events			+	
Paintballing	+			Must wear eye protection. No Personal Liability cover
Parachute Jumping (static line)			+	
Parachute Jumping (tandem)			+	
Paragliding			+	
Parapenting	+			Must be adequately supervised
Parascending / Para-sailing (over land)			+	
Parascending / parasailing (over water)	+			
Pistol Shooting			+	
Polo			+	
Pony Trekking	+			Must wear hard hat if available
Pool	+			
Pot Holing			+	
Powerboat Racing			+	
Power lifting			+	
Professional Sports of any kind			+	
Quad Biking			+	
Racquetball	+			
Rackets	+			
Rafting	+			
Rambling	+			
Rap Jumping			+	
Refereeing	+			Must be on an amateur basis
Reverse Bungee Jumping	+			Maximum of 3 jumps in any one trip
Rifle Shooting			+	
Ringos / Doughnuts	+			
River Bugging			+	
Rock Climbing - solo / freestyle / without ropes over 20 foot			+	
Rock Scrambling			+	
Rodeo			+	
Roller Blading / Skating	+			
Roller Hockey			+	
Rounders	+			
Rowing	+			



Rugby	+			Cover provided if part of a non professional tournament
Running (not long distance)	+			
Running with Bulls			+	
Safari (no guns)	+			Must be organised by bona fide tour operator
Safari (with guns)			+	
Safari Trekking in a Vehicle	+			Must be organised by bona fide tour operator
Safari Trekking on Foot	+			Must be organised by bona fide tour operator
Sail Boarding	+			
Sailing / Yachting (within territorial waters)	+			
Sand Boarding	+			
Sand Dune Surfing / Skiing	+			
Scuba Diving (up to 30 metres depth if qualified or with an instructor)	+			
Sea Canoeing	+			
Sea Kayaking	+			
Shark Diving (in a cage)	+			
Skate Boarding	+			
Skeletons			+	
Ski Acrobatics / Aerials *			+	
Ski Biking / Snow Biking *		+		
Ski Blading / Snow Blading *		+		
Ski Jumping *			+	
Ski Racing *		+		Excludes Federation Internationale de Ski (or International Federation of Ski) events
Ski Randonee *		+		
Ski Stunting *			+	
Ski Touring *		+		
Ski-Dooing *		+		No Personal Liability cover
Skiing *		+		
Skiing – Off Piste *		+		
Sky Diving			+	
Sledging / Sleighing *	+			
Sleighing as passenger	+			
Small Bore Target Shooting	+			No Personal Liability cover
Snooker	+			
Snorkelling	+			
Snowboarding *		+		
Snowboarding – Off Piste *		+		
Softball	+			
Solo Climbing			+	
Speed Skating *		+		



Speedway			+	
Squash/ Rackets	+			
Street Dancing	+			
Street Hockey	+			Must wear pads and helmets. Not covered if part of a professional tournament.
Surfing	+			
Swimming	+			
Swimming with Dolphins	+			
Swimming with Stringrays	+			Must be with official organisers
Sydney Harbour Bridge Walk	+			Must be adequately supervised and full safety equipment used
Table Tennis	+			
Tae Kwon Do			+	
Tall-Ship Crewing			+	
Tennis	+			
Tenpin Bowling	+			
Tobogganing *		+		
Trampolining	+			
Trekking / Walking / Hiking up to 4,000 metres without need for ropes / pulley/ climbing equipment	+			
Triathlon			+	
Tug-of-War	+			
Ultimate Frisbee	+			
Via Ferrata			+	
Volleyball	+			
Wake Boarding	+			No Personal Liability cover
War Games	+			Must wear eye protection.
Water Polo	+			
Water Skiing no jumping	+			
Water Skiing Jumping			+	
White Water Canoeing / Rafting (Grade 4+)			+	
White Water Canoeing / Rafting (up to Grade 3)	+			
Windsurfing	+			
Wrestling			+	
Yachting	+			In territorial waters
Yoga	+			
Zip lining	+			Must be adequately supervised and full safety equipment used
Zorbing	+			

