



**BLUE**  
INSURANCES

# Travel Insurance 2013-2014

## Health Notice

If **You** or any person who is travelling has a pre-existing **Medical Condition** then **You** must declare that condition to Health Check 0818 286 541.

**Please do not Curtail any Trip or incur inpatient medical expenses without first contacting the Emergency Assistance Service +44 1444 443 222**

VOTED BEST TRAVEL INSURANCE PRODUCT 2012 BY IRISH TRAVEL TRADE

Blue Insurances limited is regulated by the Central Bank of Ireland

# Travel Insurance Policy Schedule 2013-2014

Section/Description	Premier Cover Limit (per Insured Person)	Excess (per Insured Person)
<b>A. Cancellation or Curtailment Charges</b>	Up to €4,000	€90 (Loss of deposit €20)
<b>B. Emergency Medical and Other Expenses*</b>	Up to €6,500,000	€90
Including Emergency Assistance Services		
<b>C. Hospital Benefit*</b>	€600 (€25 per day)	N/A
<b>D. Personal Accident*</b>	Maximum Benefit €40,000	N/A
Loss of Limbs or Sight (Aged 18 to 49yrs)	€40,000	
Permanent Total Disablement (Aged 18 to 49yrs)	€40,000	
Death Benefit (Aged 18 to 49yrs)	€6,500	
Death Benefit (Under 18yrs)	€3,000	
<b>E. Baggage, Baggage Delay &amp; Passport*</b>	Up to €2,000	€90
Single Article Limit	€200	
<b>Valuables</b> Limit in Total	Up to €200	
Delayed Baggage (at least 24hrs)	Up to €180 (€60 per day)	N/A
Replacement of Passport	Up to €250	N/A
Emergency Passport Travel	Up to €250	N/A
<b>F. Personal Money and Documents</b>	Up to €650	€90
Cash Limit	€200	
Travel Documents/Tickets	Up to €250	
<b>G. Personal Liability*</b>	Up to €2,500,000	€300
<b>H1. Delayed Departure</b>	€25 for first 12hrs (€13 each 12 hrs thereafter up to €300)	N/A
<b>H2. Holiday Abandonment</b>	Up to €4,000 (after 24hrs)	€90
<b>I. Hijack</b>	Up to €650 (€65 per day)	N/A
<b>J. Missed Departure</b>	Up to €650	€90
<b>K. Catastrophe</b>	Up to €1,200	€90
<b>L. Scheduled Airline Failure &amp; Insolvency Cover</b>	€4,000	N/A
<b>M. Overseas Legal Expenses and Assistance</b>	Up to €20,000	€300
<b>N. Government Travel Advice (14 days)</b>	Up to €500	N/A
<b>O. Pet Care Cover</b>	Up to €300	N/A
<b>P. Strike</b>	Up to €200	N/A
<b>Q. Tropical Diseases Screening &amp; Treatment</b>	Up to €200	€90
<b>R. Personal Travel Assistance</b>	Included	N/A
<b>Winter Sports</b> (Available upon payment of additional premium)	(per Insured Person)	(per Insured Person)
<b>S1. Ski Equipment*</b> Owned	Up to €650	€90
Hired	Up to €400	
Single Article Limit	€200	
<b>S2. Hire of Ski Equipment*</b>	€250 (€25 per day)	N/A
<b>S3. Ski Pack*</b>	€400 (€95 per day)	N/A
<b>S4. Piste Closure*</b>	€250 (€30 per day)	N/A
<b>S5. Avalanche Closure*</b>	Up to €250	€90
<b>Travel Disruption</b> (Available upon payment of additional premium)	(per Insured Person)	(per Insured Person)
<b>T1. Extended Cancellation</b>	Up to €1,000	€90
<b>T2. Extended Delayed Departure</b>	€20 for first 12hrs (€10 each 12 hrs thereafter up to €200)	N/A
<b>T3. Extended Holiday Abandonment</b>	Up to €1,000	€90
<b>T4. Extended Missed Departure</b>	Up to €500	€90
<b>T5. Accommodation</b>	Up to €1,000	€90
<b>Optional Extras</b> (Available upon payment of additional premium)	(per Insured Person)	(per Insured Person)
<b>U. Flight Disruption</b>	Up to €750	€90
<b>V. Cruise Connection</b>	Up to €750	€90
<b>W. Wedding/Civil Partnership</b>	Up to €1,000	€90
Single Article or Set of Articles Limit	€250	
<b>X. Business Equipment</b>	Up to €1,000	€90
<b>Y. Golf Equipment</b>	Up to €1,000	€90
Single Article or Set of Articles Limit	€150	
<b>Z. Exam Failure</b>	N/A	

\* You are not covered under sections, B, C, D, G and S for **Winter Sports** activities unless an additional premium has been paid and shown on the validation certificate.

# Travel Insurance Policy Schedule 2013-2014

Section/Description	Backpacker Cover Limit (per Insured Person)	Excess (per Insured Person)
<b>A. Cancellation or Curtailment Charges</b>	Up to €2,000	€100 (Loss of deposit €20)
<b>B. Emergency Medical and Other Expenses*</b>	Up to €3,000,000	€100
Including Emergency Assistance Services		
<b>C. Hospital Benefit*</b>	€200 (€20 per day)	N/A
<b>D. Personal Accident*</b>	Maximum Benefit €38,000	N/A
Loss of Limbs or Sight (Aged 18 to 49yrs)	€10,000	
Permanent Total Disablement (Aged 18 to 49yrs)	€38,000	
Death Benefit (Aged 18 to 49yrs)	€6,500	
Death Benefit (Under 18yrs)	€3,000	
<b>E. Baggage, Baggage Delay &amp; Passport*</b>	Up to €1,200	€100
Single Article Limit	€150	
<b>Valuables</b> Limit in Total	Up to €200	
Delayed Baggage (at least 24hrs)	Up to €150 (€50 per day)	N/A
Replacement of Passport	Up to €250	N/A
Emergency Passport Travel	Up to €250	N/A
<b>F. Personal Money and Documents</b>	Up to €350	€100
Cash Limit	€200	
Travel Documents/Tickets	Up to €250	
<b>G. Personal Liability*</b>	Up to €2,000,000	€300
<b>H1. Delayed Departure</b>	N/A	
<b>H2. Holiday Abandonment</b>	Up to €2,000 (after 24hrs)	€100
<b>I. Hijack</b>	Up to €650 (€65 per day)	N/A
<b>J. Missed Departure</b>	Up to €500	€100
<b>K. Catastrophe</b>	Up to €1,200	€100
<b>L. Scheduled Airline Failure &amp; Insolvency Cover</b>	N/A	
<b>M. Overseas Legal Expenses and Assistance</b>	Up to €10,000	€300
<b>N. Government Travel Advice (14 days)</b>	N/A	
<b>O. Pet Care Cover</b>	N/A	
<b>P. Strike</b>	Up to €200	N/A
<b>Q. Tropical Diseases Screening &amp; Treatment</b>	N/A	
<b>R. Personal Travel Assistance</b>	N/A	
<b>Winter Sports</b> (Available upon payment of additional premium)	(per Insured Person)	(per Insured Person)
<b>S1. Ski Equipment*</b> Owned	Up to €650	€100
Hired	Up to €400	
Single Article Limit	€200	
<b>S2. Hire of Ski Equipment*</b>	€250 (€25 per day)	N/A
<b>S3. Ski Pack*</b>	€400 (€95 per day)	N/A
<b>S4. Piste Closure*</b>	€250 (€30 per day)	N/A
<b>S5. Avalanche Closure*</b>	Up to €250	€100
<b>Travel Disruption</b> (Available upon payment of additional premium)	(per Insured Person)	(per Insured Person)
<b>T1. Extended Cancellation</b>	N/A	
<b>T2. Extended Delayed Departure</b>	N/A	
<b>T3. Extended Holiday Abandonment</b>	N/A	
<b>T4. Extended Missed Departure</b>	N/A	
<b>T5. Accommodation</b>	N/A	
<b>Optional Extras</b> (Available upon payment of additional premium)	(per Insured Person)	(per Insured Person)
<b>U. Flight Disruption</b>	N/A	
<b>V. Cruise Connection</b>	N/A	
<b>W. Wedding/Civil Partnership</b>	N/A	
Single Article or Set of Articles Limit	N/A	
<b>X. Business Equipment</b>	N/A	
<b>Y. Golf Equipment</b>	N/A	
Single Article or Set of Articles Limit	N/A	
<b>Z. Exam Failure</b>	Up to €500	€100

\* You are not covered under sections, B, C, D, G and S for **Winter Sports** activities unless an additional premium has been paid and shown on the validation certificate.

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# Introduction

This is **Your** travel insurance policy. It contains details of cover, conditions and exclusions relating to each **Insured Person** and is the basis on which all claims will be settled. It is validated by the issue of the validation certificate which must be attached to the policy.

In return for having accepted **Your** premium **We** will in the event of **Bodily Injury**, death, illness, disease, loss, theft, damage or other events happening within the **Period of Insurance** provide insurance in accordance with the operative sections of **Your** policy as referred to in **Your** validation certificate. Monies due to **You** under the policy shall be payable in the State.

The validation certificate and any endorsements are all part of the policy.

**Your** policy is evidence of the contract of insurance.

## Arranged by

This exclusive travel insurance has been organised by Blue Insurances Limited.

Plaza 212, Blanchardstown Corporate Park, Blanchardstown, Dublin 15

*Blue Insurances Limited is regulated by the Central Bank of Ireland.*

## Financial Services Compensation Scheme (FSCS)

**We** are covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from the scheme in the unlikely event **We** cannot meet **Our** obligations to **You**. This depends on the type of insurance, size of the business and the circumstances of the claim. Further information about the compensation scheme arrangements is available from the FSCS ([www.fscs.org.uk](http://www.fscs.org.uk)).

## Master Certificate Number

This evidence of insurance is to confirm that those persons who have paid the appropriate premium are insured under the **Master Certificate** number **ETI/BI/ERV/2013** issued to Blue Insurances.

## Period of Cover

This document only constitutes a valid evidence of insurance when it is issued in conjunction with a validation certificate/invoice issued between 01.08.2013 and 31.07.2014 and for holidays or journeys commencing up to 31.10.2014.

## Residency

This policy is only available to **You** if **You** are permanently resident in **Ireland** and have been for the past six months prior to the date of issue.

## The Law Applicable to this Contract

**You** and **We** can choose the law which applies to this **Policy**. **We** propose that the law of **Republic of Ireland** applies. Unless **We** and **You** agree otherwise the law of **Republic of Ireland** will apply to this **Policy**.

## Underwriter

Europäische Reiseversicherung A.G. Munich, Germany trading as ERV is authorised by Bundesanstalt für Finanzdienstleistungsaufsicht (BAFIN - [www.bafin.de](http://www.bafin.de)) in Germany and is regulated by the Central Bank of Ireland for conduct of business rules.

Section M: Overseas Legal Expenses is underwritten by DAS Legal Expenses Insurance Company Limited, DAS House, Quay Side, Temple Back, Bristol BS1 6NH

## Type of Insurance and Cover

Travel insurance for single Trips – Please refer to **Your** validation certificate for **Your** selected cover.

Some **Winter Sports** may also be included upon payment of an appropriate additional premium – **Your** validation certificate will show if **You** have selected this option.

Exam failure cover may also be included upon payment of an appropriate additional premium – **Your** validation certificate will show if **You** have selected this option.

## Policy Excess

Under most sections of the policy, claims will be subject to an **Excess**. This means that **You** will be responsible for paying the first part of each claim, per section, for each separate incident, payable for each **Insured Person**, unless the additional premium has been paid to waive the **Excess** as shown in the validation certificate.

## Stamp Duty

The appropriate stamp duty has been or will be paid by **Us** to the Revenue Commissioner in accordance with the provisions of the composition agreement entered into with them under section 5 of the Stamp Duties Consolidation Act 1999. All monies which may become due or payable by **Us** shall be payable from **Our** offices in the **United Kingdom** to **You** at the address **You** have notified to **Us** in **Ireland**.

## Territorial Limits

- Area 1** The **United Kingdom**, Channel Islands, Isle of Man and the Republic of **Ireland**
- Area 2** The Continent of Europe west of the Ural Mountains, Madeira, Canary Islands, Iceland, the Azores, Mediterranean Islands and non-European countries bordering the Mediterranean (except Algeria, Lebanon, Libya, and Albania)
- Area 3** Australia/New Zealand
- Area 4** Worldwide including the Caribbean but excluding The United States of America, Canada, Alaska and Hawaii
- Area 5** Worldwide including The United States of America, Canada, Alaska, Hawaii and the Caribbean

## Definitions

Any word or expression to which a specific meaning has been attached will bear the same meaning throughout this policy. For ease of reading the definitions are highlighted by the use of **bold** print and will start with a capital letter.

**Appointed Representative:** the **Preferred Law Firm**, law firm or other suitably qualified person which **we** will appoint to act on **your** behalf.

**Baggage:** means luggage, clothing, personal effects, **Valuables** and other articles which belong to **You** (or for which **You** are legally responsible) which are worn, used or carried by **You** during any **Trip** excluding **Ski Equipment** and **Personal Money**.

**Bodily Injury:** means an identifiable physical injury sustained by **You** due to a sudden, unexpected, external and specific event. Injury as a result of **Your** unavoidable exposure to the elements shall be deemed to have been caused by bodily injury.

**Cancellation Period:** means the 14 days following the date the policy is received as new business or the 14 days from the renewal date.

**Close Business Associate:** means any person whose absence from business for one or more complete days at the same time as **Your** absence prevents the proper continuation of that business.

**Close Relative:** means mother, father, sister, brother, wife, husband, civil partner, daughter, son, grandparent, grandchild, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, aunt, uncle, niece, nephew, step parent, step child, step sister, step brother, foster child, legal guardian, next of kin, fiancé/fiancée or partner (any couple, including same-sex, in a common law relationship or who have co-habited for at least 6 months).

**Costs and Expenses:**

- All reasonable and necessary costs charged by **your Appointed Representative** and agreed by **us** in accordance with **our Standard Terms of Appointment**.
- The costs incurred by opponents in civil cases if **you** have been ordered to pay them, or **you** pay them with **our** agreement.

**Curtailment/Curtail:** means either:

- abandoning or cutting short the **Trip** by immediate direct early return to **Ireland** or the **United Kingdom** in which case claims will be calculated from the day **You** returned to **Ireland** or the **United Kingdom** and based on the number of complete days of **Your Trip** **You** have not used, or
- by attending a hospital abroad as an in patient or being confined to **Your** accommodation abroad due to compulsory quarantine or on the orders of a **Medical Practitioner**, in either case for a period in excess of 48 hours. Claims will be calculated from the day **You** were admitted to hospital or confined to **Your** accommodation and based on the number of complete days for which **You** were hospitalised, quarantined or confined to **Your** accommodation.

**Cyber-terrorism:** the use of disruptive activities, or the threat thereof, against computers and/or networks, with the intention to cause real-world harm or severe disruption of infrastructure.

**DAS/we/our/us:** DAS Legal Expenses Insurance Company Limited.

**Excess:** where applicable the **Excess** is the first amount of each claim, per section, for each separate incident, payable for each **Insured Person**.

**Home:** means normal place of residence in **Ireland**.

**Incidental:** means happening on a casual or occasional basis.

**Ireland/Irl:** means the Republic of Ireland.

**Insured Incident:** a specific or sudden accident during an **Insured Journey** which causes **your** death or bodily injury.

**Medical Condition:** means any disease, illness or injury.

**Medical Practitioner:** means a registered practising member of the medical profession recognised by the law of the country where they are practising, who is not related to **You** or any person who **You** are travelling with.

**Period of Insurance:** means if annual multi trip cover is selected: the period for which **We** have accepted the premium as stated in the validation certificate. During this period any **Trip** not exceeding 60 days is covered. **Winter Sports** cover is limited to 21 days in total in each **Period of Insurance** (if **You** have paid the appropriate **Winter Sports** premium to include this cover). Under these policies Section A – Cancellation Cover shall be operative from the start date this insurance is effected by **You** or at the time of booking any **Trip** (whichever is the later) and terminates on commencement of any **Trip**.  
– means if Single **Trip** cover is selected: the period of the **Trip** and terminating upon its completion, but not in any case exceeding the period shown in the validation certificate. Under these policies Section A – Cancellation Cover shall be operative from the time **You** pay the premium and evidence of insurance is issued and will cease upon departure of **Your Trip** or in the event of a cancellation claim on **Your** policy all remaining cover will cease for the planned **Trip**.  
– means if Backpacker cover is selected: the period of the **Trip** and terminating upon its completion, but not in any case exceeding the period shown in the validation certificate.

Under these policies Section A – Cancellation Cover shall be operative from the time **You** pay the premium and evidence of insurance is issued and will cease upon departure of **Your Trip** or in the event of a cancellation claim on **Your** policy all remaining cover will cease for the planned **Trip**. This policy also entitles **You** to a maximum of two return visits to **Your Home** before **Your** intended return date (as

specified on **Your** validation certificate) for up to a maximum duration of 14 days excluding any return for which a claim is being made as a result of Emergency Medical, Repatriation or **Curtailed**. Cover is suspended from the time **You** arrive at **Your** departure point to **Your Home** and starts again when **You** exit the airport at **Your** overseas destination. During this period no cover is provided by the policy.

For all policy types; All other sections of the policy, whichever cover is selected, the insurance commences when **You** leave **Your Home** or in respect of a **Business Trip** **Your** place of business in **Ireland** or the **UK** (whichever is the later) to commence the **Trip** and terminates at the time of **Your** return to **Your Home** or place of business in **Ireland** or the **UK** (whichever is the earlier) on completion of the **Trip**. Any **Trip** that had already begun when **You** purchased this insurance will not be covered, except where **You** renew an existing annual multi trip policy which fell due for renewal during the **Trip**.

The **Period of Insurance** is automatically extended for the period of the delay in the event that **You** return to **Ireland** or the **UK** is unavoidably delayed due to an event insured by this policy.

– means if one way **Trip** cover is selected: the period of a single outward **Trip** (max 7 days) and terminating upon its completion, but not in any case exceeding 24 hours after the time **You** first leave the immigration control of **Your** final destination country. Under these policies Section A – Cancellation Cover shall be operative from the time **You** pay the premium and evidence of insurance is issued and will cease upon departure of **Your Trip** or in the event of a cancellation claim on **Your** policy all remaining cover will cease for the planned **Trip**.

All other sections of the policy, the insurance commences when **You** leave **Your Home** to commence the **Trip** and terminates 24 hours after the time **You** first leave the immigration control of **Your** final destination country.

**Personal Money:** means bank notes currency notes and coins in current use, travellers' and other cheques, travel tickets, event and entertainment tickets, money cards and credit/debit or charge cards all held for private purposes.

**Policy Schedule:** means the details of cover as outlined on page 2 and 3 of this document.

**Preferred Law Firm:** a law firm or barristers' chambers which **we** choose to provide legal services. These legal specialists are chosen based on their proven expertise to deal with claims like **yours** and must comply with **our** agreed service levels, which **we** audit regularly. They are appointed according to **our Standard Terms of Appointment**.

**Public Transport:** means any publicly licensed aircraft, sea vessel, train or coach on which **You** are booked to travel.

**Reasonable Prospects:** for civil cases, the prospects that **you** will recover losses or damages (or obtain any other legal remedy that **we** have agreed to, including an enforcement of judgment), make a successful defence or make a successful appeal or defence of an appeal, must be at least 51%. **We**, or a **Preferred Law Firm** on **our** behalf, will assess whether there are **Reasonable Prospects**.

**Single Item:** Any one article pair or set of articles (including golf clubs) or collection which are used or worn together.

**Ski Equipment:** means skis (including bindings), ski boots, ski poles, snowboards, snowboard bindings and snowboard boots.

**Standard Terms of Appointment:** the terms and conditions (including the amount **we** will pay to **your Appointed Representative**) that apply to the relevant type of claim, which could include a conditional fee agreement (no win, no fee).

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

**Travelling Companion:** means a person(s) with whom **You** have booked to travel or are travelling with on the same booking invoice and without whom **Your** travel plans would be impossible.

**Trip:** means any holiday, business or pleasure **Trip** or journey made by **You** within the area of travel shown in the validation certificate which begins and ends in **Ireland** or the **UK** during the **Period of Insurance** unless the **Trip** is a one way **Trip** or journey as defined under **Period of Insurance**. If annual multi trip cover is selected any such **Trip** not exceeding 60 days is covered.

In any event **Winter Sports** cover is limited to 21 days in total in each **Period of Insurance** (if **You** have paid the appropriate **Winter Sports** premium to include this cover). In addition the policy extends to cover trips within **Ireland** but only in respect of cancellation/curtailment where **You** have pre-booked at least two nights' accommodation in a hotel, motel, holiday camp, bed and breakfast, holiday cottage or similar accommodation rented for a fee. Each **Trip** under annual multi trip cover is deemed to be a separate insurance, each being subject to the terms, definitions, exclusions and conditions contained in this policy.

**Unattended:** means when **You** are not in full view of and not in a position to prevent unauthorised interference with **Your** property or vehicle.

**United Kingdom (UK):** means England, Scotland, Wales, Northern Ireland, Isle of Man and the Channel Islands.

**Valuables:** means jewellery, gold, silver, precious metal or precious or semiprecious stone articles, watches, furs, leather goods, cameras, camcorders, photographic, audio, video, computer, game console, television (including CD's, DVD's, tapes, films, cassettes, cartridges and head-phones), computer games and associated equipment, telescopes and binoculars, portable DVD players, ipods, MP3/4 players and portable satellite navigation equipment.

**We/Us/Our:** means ETI – International Travel Protection trading address: Albany House, 14 Bishopric, Horsham, RH12 1QN the insurer – of Europäische Reiseversicherung A.G., an Ergo Group Company incorporated and regulated under the laws of the Germany, Companies House Registration FC 25660 and Branch Registration BR 007939. Trading under the name of ERV.

**Winter Sports:** Guided cross country skiing (Nordic skiing), glacier skiing, mono skiing, off piste skiing or snowboarding except in areas designated as unsafe by local resort management unless accompanied by a locally qualified guide, recreational racing, skiing, snowboarding, snowmobiling and snow sledging.

**You/Your/Insured Person (s):** means each person travelling on a **Trip** whose name appears in the validation certificate.

# Important Conditions Relating to Health

 0818 286 541

## Medical Screening Line Opening Hours

Monday – Friday 9am – 8pm

Saturday 9am – 5pm

Sunday 11am – 3pm

Quoting Reference: Blue KMT Retail Scheme 2013 – 2014

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

At the time of taking out this policy:

Do **You** have or have **You** had any **Medical Condition(s)** for which **You** are taking or have taken prescribed medication or are waiting to receive, or have received treatment (including surgery, tests, or investigations) within the last 2 years?

### If No (including if **You** have had no **Medical Conditions**)

Please read the conditions below to see if they apply to **You**.  
(if none of them apply then **Your Medical Condition(s)** will be covered)

### If Yes

It is a condition of this policy that **You** will not be covered under Section A – Cancellation or curtailment Charges, Section B – Emergency Medical and Other Expenses, Section C – Hospital Benefit, and Section D – Personal Accident and Section Y3 – Green Fees for any claims arising directly or indirectly from this **Medical Condition(s)** unless **You** contact **Us** on **0818 286 541** and **We** have agreed in writing to cover **Your Medical Condition(s)**.

If **You** have only one **Medical Condition** and it is one of those shown in the table of NO screen conditions on the following page then this will be covered under the policy without the need to contact **Us**.

### In Either Circumstances:

It is a condition of this policy that **You** will not be covered under Section A – Cancellation or curtailment Charges, Section B – Emergency Medical and Other Expenses, Section C – Hospital Benefit, and Section D – Personal Accident and Section Y3 – Green Fees for any claims arising directly or indirectly from:

A. At the time of taking out this policy:

- i) Any **Medical Condition** for which **You** or a **Close Relative** or a **Travelling Companion** are aware of but have not had a diagnosis.
- ii) Any **Medical Condition** for which **You** or a **Close Relative** or a **Travelling Companion** have received a terminal prognosis.
- iii) Any **Medical Condition** for which **You** or a **Close Relative** or a **Travelling Companion** are on a waiting list for or have the knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home.

B. At any time

- i) Any **Medical Condition** **You** have in respect of which a **Medical Practitioner** has advised **You** not to travel or would have done so had **You** sought his/her advice but despite this **You** still travel.
- ii) Any surgery, treatment or investigations for which **You** intend to travel outside of **Ireland** to receive (including any expenses incurred due to the discovery of other **Medical Conditions** during and/or complications arising from these procedures).
- iii) Any **Medical Condition** for which **You** are not taking the recommended treatment or prescribed medication as directed by a **Medical Practitioner**.
- iv) **Your** travel against any health requirements stipulated by the carrier, their handling agents or any other **Public Transport** provider.

**You** should also refer to the general exclusions on page 15.

**Please turn overleaf to see Medical Conditions which do not require screening.**



## Automatically Accepted Minor Conditions List

(covered as standard provided no more than 5 of these conditions are suffered and that you can meet the warranty above):

**A** Abnormal Smear Test, Achilles Tendon Injury, Acne, Acronyx (Ingrowing Toe-nail), Adenoids, Allergic Rhinitis, Alopecia, Anal Fissure/Fistula, Appendectomy, Astigmatism, Athlete's Foot (Tinea Pedis), Attention Deficit Hyperactivity Disorder

**B** Bell's Palsy (Facial Paralysis), Benign Prostatic Enlargement, Bladder Infection (no ongoing treatment, no hospital admissions), Blepharitis, Blindness, Blocked Tear Ducts, Breast Fibroadenoma, Breast Cyst(s), Breast Enlargement/Reduction, Broken Bones (other than head or spine) - (no longer in plaster), Bunion (Hallux Valgus), Bursitis,

**C** Caesarean Section, Candidiasis (oral or vaginal), Carpal Tunnel Syndrome, Cartilage Injury, Cataracts, Cervical Erosion, Cervicitis, Chalazion, Chicken Pox (fully resolved), Cholecystectomy, Chronic fatigue syndrome (if only symptom is fatigue and no hospital admissions), Coeliac Disease, Cold Sore (Herpes Simplex), Common Cold(s), Conjunctivitis, Constipation, Corneal Graft, Cosmetic Surgery, Cyst Breast, Cyst Testicular, Cystitis (no ongoing treatment, no hospital admissions), Cystocele (fully recovered, no hospital admissions),

**D** D & C, Deaf Mutism, Deafness, Dental Surgery, Dermatitis (no hospital admissions or consultations), Deviated Nasal Septum, Diarrhoea and/or Vomiting (resolved), Dilatation and Curettage, Dislocations (no joint replacement or hospital admissions), Dry Eye Syndrome, Dyspepsia,

**E** Ear Infections (resolved must be all clear prior to travel if flying), Eczema (no hospital admissions or consultations), Endocervical Polyp, Endocervicitis, Endometrial Polyp, Epididymitis, Epiphora (Watery Eye), Epispadias, Epistaxis (Nosebleed), Erythema Nodosum, Essential Tremor

**F** Facial Neuritis (Trigeminal Neuralgia), Facial Paralysis (Bell's Palsy), Femoral Hernia, Fibroadenoma, Fibroid Uterine, Fibromyalgia, Fibromyositis, Fibrositis, Frozen Shoulder

**G** Gall Bladder Removal,

Ganglion, Glandular Fever (full recovery made), Glaucoma, Glue Ear (resolved must be all clear prior to travel if flying), Goitre, Gout, Grave's Disease, Grommet(s) inserted (Glue Ear), Gynaecomastia

**H** Haematoma (external), Haemorrhoidectomy, Haemorrhoids (Piles), Hallux Valgus (Bunion), Hammer Toe, Hay Fever, Hernia (not Hiatus), Herpes Simplex (Cold Sore), Herpes Zoster (Shingles), Hip Replacement (no subsequent arthritis and never any dislocation of a joint replacement), Hives (Nettle Rash), Housemaid's Knee (Bursitis), HRT (Hormone Replacement Therapy), Hyperthyroidism (Overactive Thyroid), Hypospadias, Hypothyroidism (Underactive Thyroid), Hysterectomy (provided no malignancy)

**I** Impetigo, Indigestion, Influenza (full recovery made), Ingrowing Toe-nail (Acronyx), Inguinal Hernia, Insomnia, Intercostal Neuralgia (no admissions), Intertrigo, Irritable Bowel Syndrome (IBS) (provided definite diagnosis made and no ongoing investigations)

**K** Keenboeck's Disease, Keratoconus, Knee Injury Collateral/ cruciate ligaments, Knee Replacement (no subsequent arthritis and never any dislocation of a joint replacement), Kohlers Disease

**L** Labyrinthitis, Laryngitis, Learning Difficulties, Leptothrix, Leucoderma, Lichen Planus, Ligaments (injury), Lipoma

**M** Macular Degeneration, Mastitis, Mastoideotomy (resolved must be all clear prior to travel if flying), Menopause, Menorrhagia, Migraine (provided definite diagnosis made and no ongoing investigations), Miscarriage, Mole(s), Molluscum Contagiosum, Myalgic Encephalomyelitis (ME) (if the only symptom is fatigue and no hospital admissions), Myxoedema

**N** Nasal Infection, Nasal Polyp(s), Nettle Rash (Hives), Neuralgia (no hospital admissions), Nosebleed(s), Nystagmus

**O** Osgood-schlatter's Disease, Osteochondritis, Otosclerosis, Overactive Thyroid

**P** Parametritis, Pediculosis, Pelvic Inflammatory Disease, Photodermatitis, Piles, Pityriasis Rosea, Post Viral Fatigue Syndrome (if the only symptom is fatigue and no hospital admissions), Pregnancy (provided no complications), Prickly Heat, Prolapsed Uterus (womb), Pruritis, Psoriasis (no hospital admissions or consultations)

**R** Repetitive Strain Injury, Retinitis Pigmentosa, Rhinitis (Allergic), Rosacea, Ruptured Tendons

**S** Salpingo-oophoritis, Scabies, Scalp Ringworm (Tinea Capitis), Scheuermann's Disease (provided no respiratory issues), Sebaceous Cyst, Shingles (Herpes Zoster), Sinusitis, Skin Ringworm (Tinea Corporis), Sleep Apnoea (no machine used to assist breathing), Sore Throat, Sprains, Stigmatism, Stomach Bug (resolved), Strabismus (Squint), Stress Incontinence (no urinary infections)

**T** Talipes (Club Foot), Tendon Injury, Tennis Elbow, Tenosynovitis, Termination of Pregnancy, Testicles Epididymitis, Testicles Hydrocele, Testicles Varicocele, Testicular Cyst, Testicular Torsion (Twisted Testicle), Throat Infection(s), Thrush, Thyroid Overactive, Thyroid Deficiency, Tinea Capitis (Scalp Ringworm), Tinea Corporis (Skin Ringworm), Tinea Pedis (Athlete's Foot), Tinnitus, Tonsillitis, Tooth Extraction, Toothache, Torn Ligament, Torticollis (Wry Neck), Trichomycosis, Trigeminal Neuralgia, Turner's Syndrome, Twisted Testicle

**U** Umbilical Hernia, Underactive Thyroid, Undescended Testicle, Urethritis (fully recovered, no hospital admissions), URTI (Upper Respiratory Tract infection) (resolved, no further treatment), Urticaria, Uterine Polyp(s), Uterine Prolapse

**V** Varicocele, Varicose Veins - legs only, never any ulcers or cellulitis (if GP has confirmed that client is fit to travel), Vasectomy, Verruca, Vitiligo

**W** Warts (benign, non-genital), Womb Prolapse (uterus), Wry Neck (Torticollis).

**In addition to any Medical Condition on our 'Automatically Accepted Minor conditions list, You may be automatically accepted for cover, provided You do NOT have more than ONE of the following Medical Conditions and You must NOT have ANY other Pre-existing Medical Condition.**

**Arthritis (Juvenile, Osteoarthritis, Rheumatoid or Psoriatic Arthritis, Reiter's Syndrome, Rheumatism):**

- There must have been NO hospital admissions within the last 12 months.
- Must NOT affect the back more than any other area of the body.
- No more than 2 medications.
- No mobility aids (other than walking stick or frame).
- There must have been NO dislocations of any joint replacements.
- Must NOT be awaiting surgery.
- Must have NO lung problems/respiratory disorders.

**Asthma (Wheezing):**

- There must have been NO hospital admissions EVER.
- Must have been diagnosed prior to age 50.
- Must be controlled with no more than 2 medications (NO nebuliser, NO home oxygen).
- Must have been a non-smoker for at least 12 months.
- Must always be able to walk 200 yards on the flat without becoming short of breath.

**Diabetes Mellitus (Sugar Diabetes):**

- Type 2 (Non-Insulin-Dependent Diabetes Mellitus) only.
- Controlled by diet alone or by no more than 1 medication (no Insulin).
- There must have been NO hospital admissions or diabetic complications EVER.
- Must have been a non-smoker for at least 12 months.

**Hypercholesterolaemia (High/Raised Cholesterol):**

- No more than 1 medication.
- Must NOT be the inherited (genetic) form.
- Must have been a non-smoker for at least 12 months.

**Hypertension (High Blood Pressure, White Coat Syndrome):**

- No more than 2 medications.
- There must have been no change in treatment within the last 6 months.
- Must have been a non-smoker for at least 12 months.

**Hypotension (Low Blood Pressure):**

- Must NOT be associated with any underlying condition.

**Osteoporosis (Osteopaenia, Fragile Bones):**

- There must have been no broken bones within the last 5 years.
- There must have been NO vertebral (backbone) fractures.

**RELATING TO THE HEALTH OF NON-TRAVELLERS**

This insurance policy excludes cover for any claims arising directly or indirectly from a **Pre-Existing Medical Condition** (unless shown in the Automatically Accepted Minor Conditions list) of any person on whom travel depends unless the person's doctor can state that, at the date of policy purchase or **Trip** booking (whichever is later) he/she would have seen no substantial likelihood of the patient's condition deteriorating to such a degree to cause a necessary cancellation or **Curtailed** claim. If the doctor will not confirm this, any claim arising from a **Pre-Existing Medical Condition** will be excluded.

All claims arising from a terminal prognosis, any set of symptoms where a diagnosis has not been made and any **Medical Condition** for which a non-traveller is on a waiting list for or has knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home at the time the policy is purchased or the **Trip** is booked (whichever is later) are automatically excluded.

# Emergency and Medical Service

## Contact the Emergency Assistance Service on



+44 1 444 443 222

Quoting Reference: Blue KMT Retail Scheme 2013 – 2014

In the event of **Your Bodily Injury** or Illness which may lead to in-patient hospital treatment or before any arrangements are made for repatriation or in the event of **Curtailment** necessitating **Your** early return to **Your Home** area **You** must contact the Emergency Assistance Service. The service is available to **You** and operates 24 hours a day, 365 days a year for advice, assistance, making arrangements for hospital admission, repatriation and authorisation of medical expenses. If this is not possible because the condition requires immediate emergency treatment **You** must contact the Emergency Assistance Service as soon as possible.

Private medical treatment is not covered unless authorised specifically by the Emergency Assistance Service.

## Medical Assistance Abroad

The Emergency Assistance Service has the medical expertise, contacts and facilities to help should **You** be injured in an accident or fall ill. The Emergency Assistance Service will also arrange transport to **Your Home** area when this is considered to be medically necessary or when **You** have notice of serious illness or death of a **Close Relative** at home.

## Payment for Medical Treatment Abroad

If **You** are admitted to a hospital/clinic while abroad, the Emergency Assistance Service will arrange for medical expenses covered by the policy to be paid direct to the hospital/clinic. To take advantage of this benefit someone must contact the Emergency Assistance Service for **You** as soon as possible.

## Outpatient Treatment

If **You** need outpatient medical treatment, please provide a copy of **Your** validation certificate to the doctor and **Your** treatment will be paid for by HealthWatch S.A in line with **Your** policy. **You** will need to pay any **Excess** at the time of treatment. Note: Some clinics may not wish to settle their bill directly with **Us** and **You** may be asked to pay for **Your** treatment and claim this back upon **Your** return.



### Instructions to Outpatient Clinics

Please send details of the treatment provided, costs after the Excess deduction and a copy of the patients validation certificate to your local Euro Center (refer to [www.euro-center.com](http://www.euro-center.com) for addresses).

## Reciprocal Health Agreements

If **You** are an Irish resident **You** are entitled to health care through the public system in countries of the European union (EU), European Economic Area (EEA) and Switzerland if **You** become ill or injured while on a temporary stay there.

If **You** are travelling to another EU /EEA country or Switzerland, **We** strongly recommend **You** apply for and obtain a European Health Insurance Card for yourself and/or family and make sure that any medical treatment is provided at hospitals or by doctors working within the terms of the reciprocal health care agreement, unless the Emergency Assistance Service agree otherwise. If **You** are admitted to a private clinic **You** may be transferred to a public hospital as soon as the transfer can be arranged safely.

If **You** are travelling to Great Britain or Northern Ireland **You** do not require a European Health Insurance Card to obtain the necessary healthcare but need to provide proof that **You** are ordinarily resident in **Ireland** (in practice this means a driving license, passport or similar document).

If **You** are currently a VHI, Laya Healthcare or Aviva member **You** must notify the relevant private medical insurance assistance company at the time of claiming as per contact details below.

VHI Assistance: Tel +31 - 71 - 36 41 335

VHI Assistance USA : Tel 1 - 866 - 854 34 79

Laya Healthcare Assistance: Tel +353 - 25 - 3002

Aviva Assistance: Tel + 353 - 1 - 481 - 7840

## Australia

If **You** require medical treatment in Australia **You** must enrol with a local MEDICARE office. **You** do not need to enrol on arrival but **You** must do this after the first occasion **You** receive treatment.

In-patient and out-patient treatment at a public hospital is then available free of charge. Details of how to enrol and the free treatment available can be obtained by the Australian Embassy in **Ireland** by contacting 01 664 5300 or [www.australianembassy.ie](http://www.australianembassy.ie).

If **You** are visiting Australia on a Student Visa **You** are not covered by MEDICARE. Alternatively please call the Emergency Assistance Service for guidance.

If **You** are admitted to hospital contact must be made with the Emergency Assistance Service as soon as possible and their authority obtained in respect of any treatment NOT available under MEDICARE.

# Sports and Activities

## Sports and Activities: Grade 1 – No Additional Charge

**You** are covered under the Section B – Emergency Medical Expenses and Section D – Personal Accident Sections for the following activities automatically, provided that the activity is on an **Incidental** basis **You** do not need to contact **Your** issuing agent.

- Archery
- Badminton
- Baseball
- Basketball
- Beach Games
- Bungee Jump (1)
- Camel/Elephant Riding+
- Canoeing (Grade 1 – 3) – Life jacket and helmet must be worn
- Clay Pigeon Shooting+
- Cricket
- Cycling (excluding Mountain Biking) – wearing a helmet
- Dinghy Sailing+
- Fell Walking
- Fencing
- Fishing
- Flying as a fare paying passenger in a fully licensed passenger carrying aircraft
- Football
- GAA Football
- Golf
- Hiking (under 2,000 metres altitude)
- Hockey
- Horse Riding (up to 7 days, no Polo, Hunting, Jumping) – wearing a helmet
- Ice Skating (Rink)
- Jet Boating +
- Jet Skiing+
- Jogging
- Kayaking (Grades 1 to 3) – Life jacket and helmet must be worn
- Manual Work (bar and restaurant work, amateur musicians and singers, chalet maids, au pair/nanny, retail work, fruit picking and occasional light manual work at ground level but excluding the use of power tools or machinery)\*\*+
- Marathon Running
- Motorcycling up to 125cc (with the appropriate Irish motorcycle licence, wearing a crash helmet, no racing) +
- Netball
- Non manual work (Including professional administrative or clerical duties only)
- Orienteering
- Paintballing +
- Parascending/Parasailing (over water)
- Pony Trekking – wearing a helmet
- Quad biking up to 50cc (wearing a crash helmet, no racing)+
- Racquetball
- Rambling
- River Canoeing (Up to Grade 3) – Life jacket and helmet must be worn
- Roller Skating
- Roller Blading
- Rounders
- Rowing
- Running – sprint/long distance
- Safari (Irl/UK organised)
- Sail Boarding
- Sailing within territorial waters +
- Scuba Diving\* down to 30 metres if qualified and not diving alone or accompanied by a qualified instructor (see notes below)
- Skate Boarding
- Snorkelling
- Squash
- Surfing (under 14 days)
- Tennis
- Tour Operator Safari
- Track Events
- Trekking (under 2,000 metres altitude)
- Volleyball
- War Games + (with eye protection)
- Water Polo
- Water Skiing
- White Water Rafting (Grades 1 to 3)
- Windsurfing
- Yachting (racing/crewing inside territorial waters)+

\* Scuba diving – scuba diving to the following depths. Provided **You** are diving under the direction of an accredited dive marshal, instructor or guide. Alternatively, if qualified, within the guidelines of the relevant diving or training agency or organization and not diving alone:

- PADI Open Water – 18 metres
- PADI Advanced Open Water – 30 metres\*
- BSAC Ocean Diver – 20 metres
- BSAC Sports Diver – 30 metres\*
- BSAC Dive Leader – 30 metres\*

**We** must agree with any equivalent qualification. If **You** do not hold a qualification, **We** will only cover **You** to dive to a depth of 18 metres.

**You** will not be covered under this policy if **You** travel by air within 24 hours after participating in Scuba Diving.

\* For the purposes of diving under Sports and Activities: Grade 1.

\*\* Please see paragraph 7. in the general exclusions applicable to all sections of the policy for details of manual work which cannot be covered under this policy.

+ Cover under Section G - Personal Liability for those sports and activities marked with a + is excluded.

*Continued on the next page*

# Sports and Activities

Sports and Activities: Grade 2 – 50% Loading to cover all activities or €30 per activity

**You** can be covered under Section B – Emergency Medical Expenses and Section D – Personal Accident sections for the following activities provided that the activity is on an **Incidental** basis (unless stated otherwise below) and subject to an additional premium being paid and shown on the validation certificate.

Medical **Excess** increased to €320

Personal Accident Sum insured reduced by 50%

Personal Liability Cover is Excluded

- Boxing Training (no contact)
- Bungee Jump (up to 3 additional)
- Black Water Rafting (Grade 1 to 4) Life jacket and Helmet must be worn
- Camel/Elephant Riding/Trekking (non **Incidental**)
- Cycle Touring
- Go Karting – wearing a helmet
- Horse Riding – wearing a helmet (no Polo, Hunting, Jumping)
- Hot Air Ballooning – organised pleasure rides
- Hurling
- Jet Skiing (non **Incidental**)
- Martial Arts (Training only)
- Mountain Biking – wearing a helmet
- Parascending/Parasailing (over water, non **Incidental**)
- Rambling/Trekking between 2,001m and 4,200m
- Safari (non-Irl/UK organised)
- Scuba Diving\* (non **Incidental**/down to 50m
- if qualified and not diving alone or accompanied by a qualified instructor (see notes below)
- Sea Canoeing – Life jacket and Helmet must be worn
- Sea Fishing (non **Incidental**)
- Surfing
- Tandem Skydive (up to 2 jumps maximum)
- Triathlon
- White Water Rafting (Grade 4) – Life jacket and Helmet must be worn
- Waterskiing/Windsurfing/Snorkelling (non **Incidental**)

\* Scuba diving – scuba diving to the following depths. Provided **You** are diving under the direction of an accredited dive marshal, instructor or guide. Alternatively, if qualified, within the guidelines of the relevant diving or training agency or organization and not diving alone:

- PADI Open Water – 18 metres
- PADI Advanced Open Water – 30 metres
- BSAC Ocean Diver – 20 metres
- BSAC Sports Diver – 35 metres\*
- BSAC Dive Leader – 50 metres\*

**We** must agree with any equivalent qualification. If **You** do not hold a qualification, **We** will only cover **You** to dive to a depth of 18 metres.

**You** will not be covered under this policy if **You** travel by air within 24 hours after participating in Scuba Diving.

\* For the purposes of diving under Sports and Activities: Grade 2.

Sports and Activities: Grade 3 – 100% Loading to cover all activities or €75 per activity

**You** can be covered under Section B – Emergency Medical Expenses and Section D – Personal Accident sections for the following activities provided that the activity is on an **Incidental** basis (unless stated otherwise below) and subject to an additional premium being paid and shown on the validation certificate.

Medical **Excess** increased to €650

Personal Accident Sum insured reduced by 50%

Personal Liability Cover is Excluded

- Abseiling
- American Football
- Canoeing (Grade 4) – Life jacket and Helmet must be worn
- Gliding
- Kayaking (Grade 4) – Life jacket and Helmet must be worn
- Motorcycling over 125cc
- (with the appropriate Irish motorcycle licence, wearing a crash helmet, no racing)
- Paragliding
- Rambling/Trekking between 4,201m and 6,000m (professionally organised **Trips** with experienced operators,
- maximum age 45 years)
- Rugby
- Sand Yachting
- Yachting (racing/crewing) outside territorial waters – Life jacket must be worn
- Zip Lining/Trekking (safety harness must be worn)

Continued on the next page

# Sports and Activities

Sports and Activities: Grade 4 – 200% Loading to cover all activities or €100 per activity

**You** can be covered under Section B – Emergency Medical Expenses and Section D – Personal Accident sections for the following activities provided that the activity is on an **Incidental** basis (unless stated otherwise below) and subject to an additional premium being paid and shown on the validation certificate.

Medical **Excess** increased to €650

Personal Accident Sum insured reduced by 50%

Personal Liability Cover is Excluded

- Canyoning a helmet (no Polo, (over land, non **Incidental**)
- Hang Gliding Hunting)
- High Diving under 5m • Kite Surfing (under 2,000m)
- (excluding cliff diving) • Micro Lighting
- Horse Jumping – wearing • Parasailing/Parascending (under 4,000m)

## General Conditions Applicable to All Sections of the Policy

**You** must comply with the following conditions to have the full protection of **Your** policy.

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

### 1. Dual Insurance

If at the time of any incident which results in a claim under this policy, there is another insurance covering the same loss, damage, expense or liability **We** will not pay more than **Our** proportional share (not applicable to Section D – Personal Accident). Under Section B – Medical Expenses – In the event of a private health insurance **Your** private health insurer must pay the first amount as stated in their policy and **We** will commence cover once that limit has been reached.

### 2. Reasonable Precautions

**You** must take and cause to be taken all reasonable precautions to avoid injury illness, disease, loss, theft or damage and take and cause to be taken all practicable steps to safe guard **Your** property from loss or damage and to recover property lost or stolen.

### 3. Maximum Age Limit

- Premier Cover - Single Trip 85 years old.
- Backpacker - Annual Multi Trip 75 years old.
- Backpacker - 49 years old.
- Winter Sports - 65 years old.

### 4. Statutory Cancellation Rights

**You** may cancel this policy within 14 days of receipt of the policy documents (the **Cancellation Period**) by writing to the issuing agent at the address shown on **Your** validation certificate during the **Cancellation Period**. Any premium already paid will be refunded to **You** providing **You** have not travelled and no claim has been made or is intended to be made and no incident likely to give rise to a claim has occurred. The policy will be cancelled with effect from its date of issue.

#### CANCELLATION OUTSIDE THE STATUTORY PERIOD

**You** may cancel this policy at any time after the **Cancellation Period** by writing to the issuing agent at the address shown on **Your** validation certificate. If **You** cancel after the **Cancellation Period** no premium refund will be made.

**We** reserve the right to cancel the policy by providing 21 days notice by registered post to **Your** last known address. No refund of premium will be made.

#### NON PAYMENT OF PREMIUMS

**We** reserve the right to cancel this policy immediately in the event of non payment of the premium or in the event that the payment is made by fraudulent use of a credit/debit card or other payment method then the policy automatically becomes null and void.

# General Exclusions Applicable to All Sections of the Policy

**We** will not pay for claims arising directly or indirectly from:

1. War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, **Terrorism**, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power but this exclusion shall not apply to losses under Section B – Emergency Medical and Other Expenses and Section D – Personal Accident unless such losses are caused by nuclear, chemical or biological attack, or the disturbances were already taking place at the beginning of any **Trip**.
  2. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste, from combustion of nuclear fuel, the radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly.
  3. Loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.
  4. Any consequences of **Cyber-terrorism** including but not limited to the delay or cancellation of flights due to the failure of critical systems.
  5. **Your** pursuit of **Winter Sports** unless Sections S1 – S5 are shown as operative in **Your** validation certificate and appropriate premium paid.
  6. The following **Winter Sports** activities even if Sections S1 – S5 are shown as operative in the validation certificate: Off piste skiing or snowboarding in areas designated as unsafe by local resort management unless accompanied by a locally qualified guide, skiing against local authoritative warning or advice, ski stunting, free-style skiing, ice hockey, bobbing, tobogganing, heli skiing, ski acrobatics, ski flying, ski jumping, ski mountaineering, snowcat skiing, snow carting or the use of bob sleighs, luges or skeletons.
  7. **Your** engagement in or practice of manual work including:
    - hands-on involvement with the installation, assembly, maintenance or repair of electrical, mechanical or hydraulic plant (other than in a purely managerial/supervisory, sales or administrative capacity).
    - work in connection with a profession, business or trade for example: plumber, electrician, lighting or sound technician, carpenter, painter/decorator or builder.
    - working with wild animals of any kind.
    - work of any other kind except where shown as covered under Sports and Activities: Grade 1.
  8. **Your** engagement in or practice of: flying except as a fare paying passenger in a fully-licensed passenger-carrying aircraft, the use of a motorised vehicle unless a full Republic of **Ireland** or **UK** driving licence is held permitting the use of such vehicles in **Ireland** or the **UK**, professional entertaining, professional sports, racing (other than on foot), motor rallies and motor competitions.
  9. **Your** participation in or practice of any sport or activity unless:
    - a) Shown as covered without charge in the list on page 12 or
    - b) Shown as operative in **Your** validation certificate.
  10. **Your** wilfully, self-inflicted injury or illness, suicide or attempted suicide, sexually transmitted diseases, solvent abuse, alcohol abuse, the use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a **Medical Practitioner**, but not for the treatment of drug addiction), self-exposure to needless peril (except in an attempt to save human life).
  11. Any circumstances **You** are aware of at the time of taking out this policy that could reasonably be expected to give rise to a claim on this policy.
  12. **Your** own unlawful action or any criminal proceedings against **You**.
  13. Any other loss, damage or additional expense following on from the event for which **You** are claiming unless **We** provide cover under this insurance. Examples of such loss, damage or additional expense would be the cost of replacing locks after losing keys, costs incurred in preparing a claim or loss of earnings following **Bodily Injury** or illness.
  14. Operational duties as a member of the Armed Forces (other than claims arising from authorised leave being cancelled due to operational reasons, as provided for under sub section 4. of Section A – Cancellation or curtailment Charges.
  15. Loss of enjoyment.
  16. **Your** travel to a country or specific area or event to which the Travel Advice Section of the Department of Foreign Affairs\* or the World Health Organisation has advised against all or all but essential travel.
- \* **Contact details are:**  
80 St. Stephen's Green, Dublin 2.  
Telephone: (01) 4780822  
or refer to: [www.dfa.ie/services/traveladvice](http://www.dfa.ie/services/traveladvice)

# Travel Insurance Policy

## Section A: CANCELLATION OR CURTAILMENT CHARGES

### WHAT IS COVERED

We will pay **You**, up to the amount shown in the **Policy Schedule**, for any irrecoverable unused travel and accommodation costs and other pre-paid charges (including sports, concert and entertainment tickets) which **You** have paid or are contracted to pay together with any reasonable additional travel expenses incurred if

- a) cancellation of the **Trip** is necessary and unavoidable or
- b) the **Trip** is **Curtailed** before completion

as a result of any of the following events occurring:

1. The death, **Bodily Injury**, illness or complications arising as a direct result of pregnancy of:
  - a) **You**
  - b) **Your Travelling Companion**
  - c) any person with whom **You** have arranged to reside temporarily
  - d) **Your Close Relative**
  - e) **Your Close Business Associate**
2. Compulsory quarantine, jury service attendance or being called as a witness at a Court of Law of **You** or **Your Travelling Companion**.
3. Redundancy (which qualifies for payment under the current Irish redundancy payment legislation and at the time of booking the **Trip** there was no reason to believe anyone would be made redundant) of **You** or **Your Travelling Companion**.
4. **You** or any person who **You** are travelling or have arranged to travel with are a member of the Armed Forces, Garda, Police, Fire, Nursing or Ambulance Services or employees of a Government Department and have **Your**/their authorised leave cancelled or are called up for operational reasons, provided that such cancellation or **Curtailed** could not reasonably have been expected at the time when **You** purchased this insurance or at the time of booking any **Trip**.
5. In the event of Burglary at **Your Home** within 48 hours of **Your** departure or the police requesting **You** to return to **Your Home** due to serious damage to **Your Home** caused by fire, aircraft, explosion, storm, flood, subsidence, malicious persons or theft.

### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must obtain a medical certificate from a **Medical Practitioner** and prior approval of the Emergency Assistance Service to confirm the necessity to return **Home** prior to **Curtailed** of the **Trip** due to death, **Bodily Injury**, illness or complications arising as a direct result of pregnancy.
2. If **You** fail to notify the travel agent, tour operator or provider of transport/accommodation, at the time it is found necessary to cancel the **Trip**, the amount **We** will pay will be limited to the cancellation charges that would have otherwise applied.
3. If **You** cancel the **Trip** due to:
  - a) stress, anxiety, depression or any other mental or nervous disorder that **You** are suffering from **You** must provide (at **Your** own expense) a medical certificate from a consultant specialising in the relevant field or
  - b) any other **Bodily Injury**, illness, disease or complication arising as a direct result of pregnancy, **You** must provide (at **Your** own expense) a medical certificate from a **Medical Practitioner**

stating that this necessarily and reasonably prevented **You** from travelling.

### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. The cost of recoverable airport charges and levies.
3. Any claims arising directly or indirectly from:
  - a) Redundancy caused by or resulting from misconduct leading to dismissal or from resignation or voluntary redundancy or where a warning or notification of redundancy was given prior to the date this insurance is affected by **You** or the time of booking any **Trip** (whichever is the earlier).
  - b) Circumstances known to **You** prior to the date this insurance is effected by **You** or the time of booking any **Trip** (whichever is the earlier) which could reasonably have been expected to give rise to cancellation or **Curtailed** of the **Trip**.
  - c) Normal pregnancy, without any accompanying **Bodily Injury**, illness, disease or complication. This section is designed to provide cover for unforeseen events, accidents, illnesses and diseases and normal childbirth would not constitute an unforeseen event.
4. Travel tickets paid for using any mileage or supermarket reward scheme, for example Air Miles.
5. Accommodation costs paid for using any Timeshare or Holiday Property Bond or other holiday points scheme.
6. Claims arising directly or indirectly as a result of **Your** failure to comply with the important conditions relating to health shown on pages 8 - 10.
7. **Your** failure to obtain the required passport or visa.
8. Anything mentioned in the general exclusions on page 15.

## Section B: EMERGENCY MEDICAL AND OTHER EXPENSES

### WHAT IS COVERED

We will pay **You**, up to the amount shown in the **Policy Schedule**, for the following expenses which are necessarily incurred as a result of **You** suffering unforeseen **Bodily Injury**, illness, disease, compulsory quarantine or complications as a direct result of pregnancy:



1. Emergency medical, surgical, hospital, ambulance and nursing fees and charges incurred outside **Ireland** and the **UK**.
2. Emergency dental treatment for the immediate relief of pain (to natural teeth only) up to a limit of €250 incurred outside **Ireland** and the **UK**.
3. In the event of **Your** death outside **Ireland** and the **UK** the reasonable additional cost of funeral expenses abroad up to a maximum of €4,000 plus the reasonable cost of conveying **Your** ashes to **Your Home**, or the additional costs of returning **Your** remains to **Your Home**.
4. Reasonable additional transport (economy class) or accommodation expenses incurred, up to the standard of **Your** original booking, if it is medically necessary for **You** to stay beyond **Your** scheduled return date. This includes, with the prior authorisation of the Emergency Assistance Service, reasonable additional transport or accommodation expenses for a friend, **Travelling Companion** or **Close Relative** to remain with **You** or travel to **You** from **Ireland** or the **UK** or escort **You** and additional travel expenses to return **You** to **Your Home** if **You** are unable to use the return ticket.
5. With the prior authorisation of the Emergency Assistance Service, the additional costs incurred in the use of air transport or other suitable means, including qualified attendants, to repatriate **You** to **Your Home** if it is medically necessary. Repatriation expenses will be in respect only of the identical class of travel utilised on the outward journey unless the Emergency Assistance Service agree otherwise.

#### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must give notice immediately to the Emergency Assistance Service of any **Bodily Injury** or illness which necessitates **Your** admittance to hospital as an in-patient or before any arrangements are made for **Your** repatriation.
2. In the event of **Your Bodily Injury** or illness **We** reserve the right to relocate **You** from one hospital to another and arrange for **Your** repatriation to **Ireland** or the **UK** at any time during the **Trip**. **We** will do this if in the opinion of the **Medical Practitioner** in attendance or the Emergency Assistance Service **You** can be moved safely and/or travel safely to **Ireland** or the **UK** to continue treatment.
3. **You** must claim against **Your** private health insurer first for any inpatient medical expenses abroad up to **Your** policy limit.

#### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Any claims arising directly or indirectly in respect of:
  - a) Costs of telephone calls other than:
    - i) Calls to the Emergency Assistance Service notifying and dealing with the problem for which **You** are able to provide receipts or other reasonable evidence to show the cost of the calls and the numbers **You** telephoned
    - ii) Any costs incurred by **You** when **You** receive calls on **Your** mobile telephone from the Emergency Assistance Service for which **You** are able to provide receipts or other reasonable evidence to show the cost of the calls.
  - b) The cost of taxi fares, other than those for travel to or from hospital relating to **Your** admission, discharge, attendance for outpatient treatment or appointments or for collection of medication prescribed by the hospital.
  - c) The cost of treatment or surgery, including exploratory tests, which are not directly related to the **Bodily Injury** or illness which necessitated **Your** admittance into hospital.
  - d) Any expenses which are not usual, reasonable or customary to treat **Your Bodily Injury** or illness.
  - e) Any form of treatment or surgery which in the opinion of the **Medical Practitioner** in attendance and the Emergency Assistance Service can be delayed reasonably until **Your** return to **Ireland** or the **UK**.
  - f) Expenses incurred in obtaining or replacing medication, which at the time of departure is known to be required or to be continued outside **Ireland** or the **UK**.
  - g) Additional costs arising from single or private room accommodation.
  - h) Treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre unless agreed by the Emergency Assistance Service.
  - i) Any expenses incurred after **You** have returned to **Ireland** or the **UK**.
  - j) Expenses incurred as a result of a tropical disease where **You** have not had the recommended inoculations and/or taken the recommended medication.
  - k) Expenses incurred as a result of **Your** decision not to be repatriated after the date when in the opinion of the Emergency Assistance Service it is safe to do so.
  - l) Normal pregnancy, without any accompanying **Bodily Injury**, illness, disease or complication. This section is designed to provide cover for unforeseen events, accidents, illnesses and diseases and normal childbirth would not constitute an unforeseen event.
3. Claims arising directly or indirectly as a result of **Your** failure to comply with the important conditions relating to health shown on pages 8 - 10.
4. The cost of private treatment unless authorised specifically by the Emergency Assistance Service.
5. Anything mentioned in the general exclusions on page 15.

## Section C: HOSPITAL BENEFIT

#### WHAT IS COVERED

**We** will pay **You**, up to the amount shown in the **Policy Schedule**, for every complete 24 hours **You** have to stay in hospital as an in-patient or are confined to **Your** accommodation due to **Your** compulsory quarantine on the order of a **Medical Practitioner** outside **Ireland** and the **UK** as a result of **Bodily Injury** or illness **You** sustain. **We** will pay the amount above in addition to any amount payable under Section B – Emergency Medical and Other Expenses. This payment is meant to help **You** pay for additional expenses such as taxi fares and phone calls

incurred during **Your** stay in hospital.

#### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must give notice as soon as possible to the Emergency Assistance Service or **Us** of any **Bodily Injury** or illness which necessitates **Your** admittance to hospital as an in-patient, compulsory quarantine or confinement to **Your** accommodation on the orders of a **Medical Practitioner**.

#### WHAT IS NOT COVERED

1. Any claims arising directly or indirectly from:
  - a) Any additional period of hospitalisation relating to treatment or surgery, including exploratory tests, which are not directly related to the **Bodily Injury** or illness which necessitated **Your** admittance into hospital.
  - b) Hospitalisation relating to any form of treatment or surgery which in the opinion of the **Medical Practitioner** in attendance and the Emergency Assistance Service can be delayed reasonably until **Your** return to **Ireland** or the **UK**.
  - c) Any additional period of hospitalisation relating to treatment or services provided by a convalescent or nursing home or any rehabilitation centre.
  - d) Hospitalisation, compulsory quarantine or confinement to **Your** accommodation on the orders of a **Medical Practitioner** as a result of a tropical disease where **You** have not had the recommended inoculations and/or taken the recommended medication.
  - e) Any additional period of hospitalisation, compulsory quarantine or confinement to **Your** accommodation on the orders of a **Medical Practitioner** following **Your** decision not to be repatriated after the date when in the opinion of the Emergency Assistance Service it is safe to do so.
2. Claims arising directly or indirectly as a result of **Your** failure to comply with the important conditions relating to health shown in pages 8 - 10.
3. Anything mentioned in the general exclusions on page 15.

### Section D: PERSONAL ACCIDENT

#### SPECIAL DEFINITIONS (which are shown in italics)

*Loss of limb* – means loss by permanent severance of an entire hand or foot or the total and permanent loss of use of an entire hand or foot.

*Loss of sight* – means total and irrecoverable loss of sight which shall be considered as having occurred:

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

#### WHAT IS COVERED

**We** will pay **You** the amount shown in the **Policy Schedule**, if **You** sustain **Bodily Injury** which shall solely and independently of any other cause, result within two years in **Your** death, *loss of limb*, *loss of sight* or permanent total disablement.

#### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **Our Medical Practitioner** may examine **You** as often as they deem necessary in the event of a claim.

#### PROVISIONS

1. Benefit is not payable to **You**:
  - a) Under more than one of the items shown in the **Policy Schedule**.
  - b) Under Permanent Total Disablement, until one year after the date **You** sustain **Bodily Injury**
  - c) Under Permanent Total Disablement, if **You** are able or may be able to carry out any relevant employment or relevant occupation.
2. The death benefit payment will be paid into the deceased's estate.

#### WHAT IS NOT COVERED

1. Claims arising directly or indirectly as a result of **Your** failure to comply with the important conditions relating to health shown in pages 8 - 10.
2. Anything mentioned in the general exclusions on page 15.

### Section E: BAGGAGE, BAGGAGE DELAY AND PASSPORT

#### WHAT IS COVERED

1. **We** will pay **You** up to the amount shown in the **Policy Schedule** for the accidental loss of, theft of or damage to **Baggage**. The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (or **We** may at **Our** option replace, reinstate or repair the lost or damaged **Baggage**).

The maximum **We** will pay for any **Single Item**, and in total for **Valuables** is as shown in the **Policy Schedule**.

2. **We** will also pay **You** up to the amounts shown in the **Policy Schedule** for:
  - a) Delayed **Baggage** – The emergency replacement of clothing, medication and toiletries if the **Baggage** is temporarily lost in transit during the outward journey and not returned to **You** within 24 hours, provided written confirmation is obtained and sent to **Us** from the carrier, confirming the number of hours the **Baggage** was delayed. If the loss is permanent the amount paid will be deducted from the final amount to be paid under this section.
  - b1) Replacement of Passport – reasonable additional travel and accommodation expenses necessarily incurred outside **Ireland** or the **UK** to obtain a replacement of **Your** lost or stolen passport or visa which has been lost or stolen outside **Ireland** or the **UK**.
  - b2) Emergency Passport Travel – reasonable additional transport costs if **You** are unable to make **Your** pre booked return flight **Home** following the loss or theft of **Your** passport within 48

hours of **Your** pre booked return flight **Home**.

#### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Baggage**. A Holiday Representative Report is not sufficient.
2. If **Baggage** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **You** must report to them, in writing, details of the loss, theft or damage and obtain an official report from an appropriate local authority. If **Baggage** is lost, stolen or damaged whilst in the care of an airline **You** must:
  - a) obtain a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this policy.
3. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help **You** to substantiate **Your** claim.

#### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule** (except claims under subsection 2. a) above).
2. Loss, theft of or damage to **Valuables** or **Your** passport left **Unattended** at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe or safety deposit box.
3. Loss, theft of or damage to **Baggage** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
  - a) overnight between 9pm and 8am (local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a police report.
4. Loss or damage due to delay, confiscation or detention by customs or other authority.
5. Loss, theft of or damage to unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, mobile telephones or telecommunications equipment of any kind, deeds, manuscripts, securities, perishable goods, surfboards/sailboards bicycles, marine equipment or craft or any related equipment or fittings of any kind, **Ski Equipment** and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).
6. Loss or damage due to cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or accident to the aircraft, sea vessel, train or vehicle in which they are being carried.
7. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **Baggage**.
8. Claims arising for **Personal Money**, travel documents and tickets.
9. Loss or damage due to breakage of sports equipment or damage to sports clothing whilst in use.
10. Loss, theft of or damage to business goods, samples, tools of trade, motor accessories and other items used in connection with **Your** business, trade, profession or occupation.
11. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
12. Anything mentioned in the general exclusions on page 15.

## Section F: PERSONAL MONEY AND DOCUMENTS

#### WHAT IS COVERED

We will pay **You**, up to the amount shown in the **Policy Schedule**, for the accidental loss of, theft of or damage to **Personal Money** and travel documents and tickets (including driving licence and entertainment tickets).

#### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Personal Money**, travel documents and tickets. A Holiday Representatives report is not sufficient.
2. Receipts for items lost, stolen or damaged or proof of ownership (including foreign currency exchange receipts showing the amount) should be retained as these will help **You** to substantiate **Your** claim.
3. Please retain all travel tickets and tags for submission if a claim is to be made under this policy.

#### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Loss, theft of or damage to travellers' cheques if **You** have not complied with the issuer's conditions or where the issuer provides a replacement service.
3. Loss or damage due to depreciation in value, variations in exchange rates or shortages due to error or omission.
4. Loss, theft of or damage to **Personal Money**, travel documents and tickets left **Unattended** at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe or safety deposit box.
5. Loss or damage due to delay, confiscation or detention by customs or other authority.
6. Anything mentioned in the general exclusions on page 15.

**You** may claim only under Section F – Personal Money and Documents

## Section G: PERSONAL LIABILITY

### WHAT IS COVERED

**We** will pay up to the amount shown in the **Policy Schedule**, (inclusive of legal costs and expenses) against any amount **You** become legally liable to pay as compensation for any claim or series of claims arising from any one event or source of original cause in respect of accidental:

1. **Bodily Injury** death illness or disease to any person who is not in **Your** employment or who is not a **Close Relative**, or member of **Your** household or **Travelling Companion**.
2. Loss of or damage to property that does not belong to and is neither in the charge of or under the control of **You**, a **Close Relative**, **Travelling Companion**, anyone in **Your** employment or any member of **Your** household other than any temporary holiday accommodation occupied (but not owned) by **You**.

### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must give **Us** written notice as soon as possible of any incident, which may give rise to a claim.
2. **You** must forward every letter, writ, summons and process to **Us** as soon as **You** receive it.
3. **You** must not admit any liability or pay, offer to pay, promise to pay or negotiate any claim without **Our** written consent.
4. **We** will be entitled if **We** so desire to take over and conduct in **Your** name the defence of any claims for indemnity or damages or otherwise against any third party. **We** shall have full discretion in the conduct of any negotiation or proceedings or in the settlement of any claim and **You** shall give **Us** all necessary information and assistance which **We** may require.
5. In the event of **Your** death, **Your** legal representative(s) will have the protection of this cover provided that such representative(s) comply(ies) with the terms and conditions outlined in this policy.

### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Compensation or legal costs arising directly or indirectly from:
  - a) Liability which has been assumed by **You** under agreement unless the liability would have attached in the absence of such agreement.
  - b) Pursuit of any business, trade, profession or occupation or the supply of goods or services.
  - c) Ownership possession or use of vehicles aircraft or watercraft (other than surfboards or manually propelled rowboats, punts and canoes).
  - d) The transmission of any communicable disease or virus.
  - e) Ownership or occupation of land or buildings (other than occupation only of any temporary holiday accommodation where **We** will not pay for the first €300 of each and every claim arising from the same incident).
3. Anything mentioned in the general exclusions on page 15.

## Section H1/H2: DELAYED DEPARTURE/HOLIDAY ABANDONMENT

### WHAT IS COVERED

If departure of the scheduled **Public Transport** on which **You** are booked to travel is delayed at the final departure point from or to **Ireland** or the **United Kingdom** for:

- i) at least 12 hours from the scheduled time of departure in respect of subsection H1 – Delayed Departure (see below) due to: or
- ii) at least 24 hours from the scheduled time of departure in respect of subsection H2 – Holiday Abandonment (see below) due to:
  - a) strike or
  - b) industrial action or
  - c) adverse weather conditions or
  - d) mechanical breakdown of or a technical fault occurring in the scheduled **Public Transport** on which **You** are booked to travel

**We** will pay **You**:

H1. Delayed Departure

The amount shown in the **Policy Schedule** for the first completed 12 hours delay and an additional amount for each full 12 hours delay thereafter up to the maximum amount shown in the **Policy Schedule**.

H2. Holiday Abandonment

Up to the amount shown in the **Policy Schedule** for any irrecoverable unused travel and accommodation costs and other prepaid charges which **You** have paid or are contracted to pay if after a minimum 24 hours has elapsed, **You** choose to cancel **Your Trip** before departing from **Ireland** or the **United Kingdom**.

**You** may claim only under subsection H1. or H2. above for the same event, not both.

**You** may claim only under Section H1 – Delayed Departure or Section J – Missed Departure for the same event, not both.

### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must check in according to the itinerary supplied to **You**.
2. **You** must obtain confirmation from the carriers (or their handling agents) in writing of the number of hours of delay and the reason for the delay.
3. **You** must comply with the terms of contract of the travel agent, tour operator or provider of transport.
4. In the case of a claim under sub section H2 - Holiday Abandonment **You** must provide **Your** booking confirmation together with written details from **Your** travel agent, tour operator or provider of transport/accommodation of the separate costs of transport, accommodation and other pre-paid costs or charges that made up the total cost of the **Trip**.

#### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Claims arising directly or indirectly from:
  - a) Strike or industrial action or air traffic control delay existing or publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip** whichever is the later.
  - b) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Irish Aviation Authority or a Port Authority or any similar body in any country.
3. Anything mentioned in the general exclusions on page 15.

### Section I: HIJACK

#### WHAT IS COVERED

**We** will pay **You**, up to the amount shown in the **Policy Schedule**, for the every completed period of 24 hours in the event of **Hijack** of the transport on which **You** are travelling.

#### WHAT IS NOT COVERED

1. Claims not substantiated by a written police report confirming the length and exact nature of the incident.
2. Anything mentioned in the general exclusions on page 15.

### Section J: MISSED DEPARTURE

#### WHAT IS COVERED

**We** will pay **You** up to the amount shown in the **Policy Schedule** for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **Your** overseas destination or returning to **Ireland** or the **United Kingdom** (including missing onward connecting flights between **Ireland** and the **United Kingdom** only) if **You** fail to arrive at the international departure point in time to board the **Public Transport** on which **You** are booked to travel on **Your** outward journey from **Ireland** or the **United Kingdom** or on the final part of **Your** return journey to **Ireland** or the **United Kingdom**, as a direct result of:

1. the failure of other scheduled **Public Transport** or
2. an accident to or breakdown of the vehicle in which **You** are travelling or
3. an accident or breakdown occurring ahead of **You** on a motorway or dual carriage way which causes an unexpected delay to the vehicle in which **You** are travelling or
4. strike, industrial action or adverse weather conditions.

#### SPECIAL CONDITIONS RELATING TO CLAIMS

1. In the event of a claim arising from any delay occurring on a motorway or dual carriage way **You** must obtain written confirmation from the Police or emergency breakdown services of the location, reason for and duration of the delay.
2. **You** must allow sufficient time for the scheduled **Public Transport** or other transport to arrive on schedule and to deliver **You** to the departure point.

#### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Claims arising directly or indirectly from:
  - a) Strike or industrial action or air traffic control delay existing or publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip** whichever is the later.
  - b) An accident to or breakdown of the vehicle in which **You** are travelling for which a professional repairers report is not provided.
  - c) Breakdown of any vehicle in which **You** are travelling if the vehicle is owned by **You** and has not been serviced properly and maintained in accordance with manufacturers instructions.
  - d) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Irish Aviation Authority or a Port Authority or such regulatory body in a country to/from which **You** are travelling.
3. Additional expenses where the scheduled **Public Transport** operator has offered reasonable alternative travel arrangements.
4. Anything mentioned in the general exclusions on page 15.

### Section K: CATASTROPHE

#### WHAT IS COVERED

**We** will pay **You**, up to the amount shown in the **Policy Schedule**, in the event that the tour company is unable to assist and **You** are forced to move from the pre-booked accommodation as a result of fire, lightning, explosion, earthquake, storm, tempest, hurricane, flood, tsunami, medical epidemic or local Government directive which is confirmed in writing by local or national authority for irrecoverable travel or accommodation costs necessarily incurred to continue with the **Trip** or, if the **Trip** cannot be continued for **Your** return **Home**.

#### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Claims where a report from local or national authority is not obtained stating that it was not acceptable for **You** to remain in **Your** booked accommodation.
3. Claims where the tour operator has made alternative arrangements.
4. Anything mentioned in the general exclusions on page 15.

### Section L: SCHEDULED AIRLINE FAILURE & INSOLVENCY COVER

This cover is provided by International Passenger Protection Limited, IPP House, 22-26 Station Road, West Wickham, Kent BR4 OPR, United Kingdom, authorised and regulated by the Financial

Services Authority (Register number 311958) and is underwritten by a consortium of Association of British Insurers member Companies.

The insurer will pay up to the invoice cost stated in the policy schedule in total for each person insured for:

1. Irrecoverable sums paid in advance in the event of insolvency of the Travel or Accommodation provider not forming part of an inclusive holiday prior to departure Or
2. In the event of insolvency after departure
  - a) additional pro rata costs incurred by the person-insured in replacing that part of the travel arrangements to a similar standard to that originally booked or
  - b) if curtailment of the holiday is unavoidable the cost of return transportation to the United Kingdom, Channel Islands, Isle of Man or Ireland to a similar standard to that originally booked.PROVIDED THAT in the case of (a) and (b) above where practicable the person insured shall have obtained the approval of the insurer prior to incurring the relevant costs.

#### WHAT IS NOT COVERED

1. Travel or Accommodation not booked within the United Kingdom, Channel Islands, Isle of Man or Ireland prior to departure.
2. The Financial Failure of
  - a. any Travel or Accommodation provider in Chapter 11 or any threat of insolvency being known at the date of issue of the policy
  - b. any Travel or Accommodation provider who is bonded or insured elsewhere (even if the bond is insufficient to meet the claim)
  - c. any travel agent, tour organiser, booking agent or consolidator with whom the person-insured has booked travel or accommodation.
3. Any loss for which a third party is liable or which can be recovered by other legal means.
4. We do not cover the booking agent or consolidator.
5. Any losses that are not directly associated with the incident that caused you to claim. For example, loss due to being unable to reach your pre booked hotel, villa, car hire or cruise following the financial failure of an airline.

#### CLAIMS PROCEDURE

Claims should be advised as soon as possible after you become aware of the financial failure.

International Passenger Protection Claims Office,  
IPP House, 22-26 Station Road,  
West Wickham, Kent BR4 0PR  
Tel: + 44 (0)20 8776 3752  
Fax: + 44 (0)20 8776 3751  
Email: info@iplondon.co.uk

IPP will only accept claims submitted up to six months after the failure, any claims submitted after the six month period will NOT be processed.

### Section M: OVERSEAS LEGAL EXPENSES AND ASSISTANCE

This section is underwritten and administered by DAS Legal Expenses Insurance Company Limited.

#### WHAT IS COVERED

In the event of an **Insured Incident** which causes **your** death or bodily injury **we** will pay up to the sum insured shown on **your Policy Schedule** for the **Costs and Expenses** of an **Appointed Representative**, to provide legal advice and where there are **Reasonable Prospects** to take legal action on **your** behalf to:

1. Recover losses or damages against third-parties.
2. Defend **you** against civil actions for losses or damages by third-parties

#### WHAT IS NOT COVERED

**We** will not pay for the following:

1. A claim where at any point, **we** or **your Appointed Representative** assess that there are not **Reasonable Prospects** of success.
2. Any legal proceedings not dealt with by a court of law or by another body agreed by **us**.
3. A claim where **you** have failed to notify **us** of the **Insured Incident** within a reasonable time of it occurring and where this failure adversely affects the **Reasonable Prospects** of a claim or **we** consider that **our** position has been prejudiced.
4. An **Insured Incident** arising before the start, or after the end of an **Insured Journey**.
5. **Costs and Expenses** incurred before **our** written acceptance of a claim.
6. In the event that **you** decide not to use the services of a **Preferred Law Firm**, any **Costs and Expenses** in excess of those which **we** would have incurred had **you** done so under **our Standard Terms of Appointment**.
7. Any claim relating to any illness or bodily injury that happens gradually or is not caused by a specific or sudden accident.
8. Any claim relating to psychological injury or mental illness unless the condition follows a specific or sudden accident that has caused **your** physical bodily injury.
9. Defending **your** legal rights (**We** will however, cover defending a counter-claim.)
10. Any claim relating to clinical negligence.
11. Fines, penalties, compensation or damages that a court or other authority orders **you** to pay.
12. Any legal action which **you** take that which **we** or **your Appointed Representative** have not agreed to, or where **you** do anything that hinders **us** or **your Appointed Representative**.

13. A dispute with **us** which is not otherwise dealt with under section condition 7.
14. **Costs and Expenses** arising from or relating to judicial review, coroner's inquest or fatal accident inquiry.
15. Any **Costs and Expenses** which are incurred where **your Appointed Representative** handles the claim under a contingency fee arrangement.
16. A claim against **us, our** agent, tour operator or travel agent.
17. Any claim where **you** are not represented by a law firm or barrister.

#### Additional conditions applying to this section

1. a) On receiving a claim, if legal representation is necessary, **we** will appoint a **Preferred Law Firm** or in-house lawyer as **your Appointed Representative** to deal with **your** claim. They will try to settle **your** claim by negotiation without having to go to court.
  - b) If the appointed **Preferred Law Firm** or **our** in-house lawyer cannot negotiate settlement of **your** claim and it is necessary to go to court and legal proceedings are issued or there is a conflict of interest, then **you** may choose a law firm to act as **your Appointed Representative**.
  - c) If **you** chooses a law firm as **your Appointed Representative** which is not a **Preferred Law Firm**, **we** will give **you** choice of law firm the opportunity to act on the same terms as a **Preferred Law Firm**. However if they refuse to act on this basis, the most **we** will pay is the amount **we** would have paid if they had agreed to **our Standard Terms of Appointment**.
  - d) **Your Appointed Representative** must co-operate with **us** at all times and must keep **us** up to date with the progress of the claim.
2. a) **You** must co-operate fully with **us** and with **your Appointed Representative**.
  - b) **You** must give **your Appointed Representative** any instructions that **we** ask **you** to.
3. a) **You** must tell **us** if anyone offers to settle a claim. **You** must not negotiate or agree to a settlement without **our** written consent.
  - b) If **you** do not accept a reasonable offer to settle a claim, **we** may refuse to pay any further **Costs and Expenses**.
  - c) **We** may decide to pay **you** the reasonable value of **your** claim, instead of starting or continuing legal action. In these circumstances **you** must allow **us** to take over and pursue or settle any claim on **your** behalf. **You** must also allow **us** to pursue at **our** own expense and for **our** own benefit, any claim for compensation against any other person and **you** must give **us** all the information and help **we** need to do so.
  - d) Where a settlement is made on a without-costs basis **we** will decide what proportion of that settlement will be regarded as **Costs and Expenses** and payable to **us**.
4. a) **You** must instruct **your Appointed Representative** to have costs and expenses taxed, assessed or audited if **we** ask for this.
  - b) **You** must take every step to recover **Costs and Expenses** and court attendance that **we** have to pay and must pay **us** any amounts that are recovered.
5. If **your Appointed Representative** refuses to continue acting for **you** with good reason, or if **you** dismiss **your Appointed Representative** without good reason, the cover **we** provide will end immediately, unless **we** agree to the appointment of another **Appointed Representative**.
6. If **you** settle or withdraw a claim without **our** agreement, or do not give suitable instructions to **your Appointed Representative**, **we** can withdraw cover and will be entitled to reclaim from **you** any **Costs and Expenses** **we** have paid.
7. In respect of an appeal or the defence of an appeal, **you** must tell **us** within the time limits allowed that **you** want to appeal. Before **we** pay the **Costs and Expenses** for appeals, **we** must agree that **reasonable prospects** exist.
8. For an enforcement of judgment to recover money and interest due to **you** after a successful claim under this section, **we** must agree that **Reasonable Prospects** exist, and where an award of damages is the only legal remedy to a dispute and the cost of pursuing legal action is likely to be more than any award of damages, the most **we** will pay in **Costs and Expenses** is the value of the likely award.
9. If there is a disagreement between **you** and **us** about the handling of a claim and it is not resolved through **our** internal complaints procedure, **you** can contact the Financial Ombudsman Service for help. Alternatively there is a separate arbitration process. The arbitrator will be a barrister chosen jointly by **you** and **us**. If there is a disagreement over the choice of arbitrator, **we** will ask the Chartered Institute of Arbitrators to decide.
10. **We** may require **you** to obtain, at **your** expense, an opinion on the merits of the claim or proceedings or on a legal principle from a legal expert. The expert must be approved in advance by **us** and the cost agreed in writing between **you** and **us**. Subject to this, **we** will pay the cost of getting the opinion if the expert's opinion indicates that it is more likely than not that **you** will recover damages (or obtain any other legal remedy that **we** have agreed to) or make a successful defence.
11. **You** must:
  - a) keep to the terms and conditions of this section
  - b) take reasonable steps to avoid and prevent claims
  - c) take reasonable steps to avoid incurring unnecessary costs
  - d) send everything **we** ask for, in writing.
  - e) report to **us** full and factual details of any claim as soon as possible.
  - f) give **us** any information **we** need.
12. **We** will, at **our** discretion, void this section (make it invalid) from its start date or from the date of claim, or alleged claim, or **we** will not pay the claim if:
  - a) a claim **you** have made to obtain benefit under this section is fraudulent or intentionally exaggerated, or
  - b) a false declaration or statement is made in support of a claim.
13. If any claim covered under this section is also covered by another policy, or would have been

covered if this section did not exist, **we** will only pay **our** share of the claim even if the other insurer refuses the claim.

14. In the event of **your** death as a result of an **Insured Incident** the benefits of this cover will attach to **your** personal representative (next of kin).
15. All Acts of Parliament mentioned in this section include equivalent laws in Scotland, Northern Ireland, the Isle of Man and the Channel Islands as appropriate.

#### **Eurolaw Legal Advice**

**We** will give **you** confidential legal advice over the phone on any personal legal problem under the laws of the member countries of the European Union, Isle of Man, the Channel Islands, Switzerland and Norway.

**You** can contact **our** UK-based call centres 24 hours a day, seven days a week. However, **we** may need to call **you** back depending on the enquiry. Advice about the law in England and Wales is available 24 hours a day, seven days a week. Legal advice for the other countries is available 9am-5pm, Monday to Friday, excluding public and bank holidays. If **you** call outside these times, a message will be taken and **we** will call you back within operating hours.

To help check and improve service standards, **we** record all inbound and outbound calls.

To contact the above service, phone **us** on +44 (0) 117 934 0548. When phoning, please quote your policy number.

**We** will not accept responsibility if the Helpline Service fails for reasons which **we** cannot control.

## Section N: GOVERNMENT TRAVEL ADVICE

### **WHAT IS COVERED**

**We** will pay **You** up to the amount shown in the **Policy Schedule** for any cancellation fees incurred in respect of:

1. Pre-paid travel and accommodation costs and/or
2. School or University fees paid to colleges abroad which **You** have paid,

if **You** have to cancel **Your Trip** after **Your** policy has been issued due to a government travel notice being issued for **Your** destination within 14 days of the original travel date and **You** are advised not to travel to **Your** original destination.

### **SPECIAL CONDITIONS RELATING TO CLAIMS**

1. **You** must provide evidence of the government notice and issue date of this notice by the government.

### **WHAT IS NOT COVERED:**

1. The **Excess** as shown in the **Policy Schedule**.
2. Fees incurred by **You** if the airline or other carrier makes alternative arrangements to accommodate **You** or re-arrange flights.
3. Fees incurred by **You** if the country listed by the government notice is a transit stopover for less than 30 days.
4. The cost of recoverable airport charges and levies.
5. Travel tickets paid for using any airline mileage reward scheme, for example Air Miles.
6. Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
7. Claims arising directly or indirectly from a government notice existing or being publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip**.
8. Any costs incurred by **You** which are recoverable from the providers of the accommodation (or their administrators) or for which **You** receive or are expected to receive compensation or reimbursement.
9. Any costs incurred by **You** which are recoverable from the **Public Transport** operator or for which **You** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
10. Any accommodation costs, charges and expenses where the **Public Transport** operator has offered reasonable alternative travel arrangements.
11. Anything mentioned in the general exclusions on page 15.

## Section O: PET CARE COVER

### **WHAT IS COVERED:**

In the event of a delay of more than 12 hours to the **Insured's** final planned inbound flight, rail or sea trip to the Republic of Ireland or United Kingdom, **We** will pay **You** up to the amount shown in the **Policy Schedule** in respect of additional kennel and/or cattery fees necessarily incurred as a direct result of the delay.

### **WHAT IS NOT COVERED:**

1. Claims not substantiated by a written report from the carrier stating the length and exact nature of the delay;
2. Claims arising from delay caused by strike or industrial action if already notified at the time the insurance was purchased.
3. Anything mentioned in the general exclusions on page 15.

## Section P: STRIKE

### **WHAT IS COVERED:**

**We** will pay **You** up to the amount shown in the **Policy Schedule** for any irrecoverable overseas accommodation costs at **Your Trip** destination which **You** have paid or are contracted to pay as



a result of the cancellation of **Your** flight due to strike or industrial action taken by the airline on which **You** are due to travel.

#### SPECIAL CONDITIONS RELATING TO CLAIMS

1. In the event of strike or industrial action **You** must:
  - a) obtain written confirmation from the airline of the date and duration on which this occurred.
  - b) provide **Your** unused travel tickets.
  - c) provide receipts or bills for any accommodation cost claimed for.
2. **You** may claim only under Section H1 - Delayed Departure or Section P - Strike for the same event, not both.

#### WHAT IS NOT COVERED:

1. In the event of strike or industrial action any additional accommodation costs incurred by **You**:
  - a) where the airline has offered reasonable alternative travel arrangements.
  - b) which are recoverable from the airline or for which **You** receive or are expecting to receive compensation.
2. Claims arising directly or indirectly from strike or industrial action existing or being publicly announced prior to the date this insurance is effected by **You** or the time of booking any **Trip** whichever is the later.
3. Anything mentioned in the general exclusions on page 15.

### Section Q: TROPICAL DISEASES SCREENING & TREATMENT

Cover under this Section does not apply to a **Trip** in **Ireland**.

#### WHAT IS COVERED

**We** will pay **You** up to the amount shown in the **Policy Schedule** for medical expenses necessarily incurred in undergoing tropical medical screening and treatment at a Tropical Medical Bureau centre, or other registered centre specialising in screening for Tropical Diseases approved by **Us**, upon the **Your** return home to **Ireland** following:

1. **You** undergoing in-patient or out-patient medical treatment abroad for a suspected Tropical Disease; or
2. receipt of a referral of a **Medical Practitioner** in **Ireland** as a direct result of suspecting that the **Insured** has contracted a **Tropical Disease** occurring outside **Ireland** during the **Period of Insurance**.

#### SPECIAL CONDITIONS RELATING TO CLAIMS

The **Insured** must have obtained the necessary vaccinations prior to travel in line with standard internationally accepted recommendations such as those provided by the Centre for Disease Control (CDC) and British and Scottish Advisory panels.

#### WHAT IS NOT COVERED

1. for medical expenses incurred for treatment or surgery for which **Our** medical advisers and/or the appropriate **Medical Practitioner** at the Tropical Medical Bureau or other registered centre approved by **Us** believe is not essential.
2. any costs incurred once **You** have returned home, other than the cost of the agreed treatment with the Tropical Medical Bureau or other registered centre approved by **Us**.

### Section R: PERSONAL TRAVEL ASSISTANCE

**In the event that You need to contact the Emergency Assistance Service in connection with the below please call +44 1444 443 222.**

#### Transfer of Emergency Funds

In the event of an emergency the Emergency Assistance Service will assist in contacting a friend or **Close Relative** in **Your Home** country to make arrangements for the transfer of funds to **You** in **Your** overseas destination. The Emergency Assistance Service will not advance or supply the funds.

#### Message Relay

The Emergency Assistance Service will assist in the transmission of urgent messages to a **Close Relative** or **Close Business Associate** if medical or travel problems disrupt a **Trip**.

#### Drug Replacement

The Emergency Assistance Service will assist with the following:

- a) replacement of lost drugs or other essential medication, or lost or broken prescription glasses, or contact lenses, which are unobtainable abroad.
  - b) sourcing and delivery of compatible blood supplies.
- The Emergency Assistance Service will not pay for the replacement costs of any item or the costs of sourcing and delivering blood supplies.

#### Tracing Personal Property

The Emergency Assistance Service will assist in tracing and redelivery of personal property that has been lost or misdirected in transit if the carrier has failed to resolve the problem.

To be able to provide this service the **Insured Person** must have his/her personal property tag number available.

#### Replacement Travel

The Emergency Assistance Service will assist with the replacement of lost or stolen tickets and travel documents, and provide a referral to suitable travel agencies.

The Emergency Assistance Service will not pay for any item.

### Lost Credit Cards

The Emergency Assistance Service will provide advice of how to contact the appropriate card issuers if credit or charge cards are lost or stolen.

### Emergency Translation Facility

The Emergency Assistance Service will provide a translation service in the event of an emergency if the local provider of an assistance service does not speak English.

### Legal Help

The Emergency Assistance Service will provide a referral to a local English-speaking lawyer, embassy or consulate if legal advice is needed.

### Medical Referral

In a medical emergency the Emergency Assistance Service will provide the following:

- provision of the names and addresses of local doctors, hospitals, clinics and dentists when consultation or treatment is required
- if possible arrange for a doctor to call and if necessary, for the **Insured Person** to be admitted to hospital.

**In the event that You need to contact the Emergency Assistance Service in connection with the above please call +44 1444 443 222.**

## Sections S1-S5: WINTER SPORTS

*(Only operative if indicated in the validation certificate and additional premium paid).*

**COVER IN RESPECT OF SECTIONS S1 – S5 ONLY OPERATES IF THE APPROPRIATE WINTER SPORTS EXTENSION HAS BEEN CHOSEN AND THE APPROPRIATE ADDITIONAL PREMIUM HAS BEEN PAID. PARTICIPATING IN WINTER SPORTS IS LIMITED TO 21 DAYS IN TOTAL DURING THE PERIOD OF INSURANCE.**

## Section S1: SKI EQUIPMENT

*(Only operative if indicated in the validation certificate and additional premium paid).*

### WHAT IS COVERED

**We** will pay **You**, up to the amount shown in the **Policy Schedule**, for the accidental loss of, theft of or damage to **Your** own **Ski Equipment**, or for hired **Ski Equipment**. The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (calculated from the table below) or **We** may at **Our** option replace, re-instate or repair the lost or damaged **Ski Equipment**.

### Age of Item      Amount Payable

- Up to 1 year old – 90% of purchase price
- Up to 2 years old – 70% of purchase price
- Up to 3 years old – 50% of purchase price
- Up to 4 years old – 30% of purchase price
- Up to 5 years old – 20% of purchase price
- Over 5 years old – No payment

The maximum amount **We** will pay for any **Single Item** will be calculated from the table above or shown in the **Policy Schedule**, whichever is the less.

### SPECIAL CONDITIONS RELATING TO CLAIMS

- You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Ski Equipment**.
- For items damaged whilst on **Your Trip**, **You** must obtain an official report from a retailer confirming the item is damaged and beyond repair.
- If **Ski Equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **You** must report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If **Ski Equipment** is lost, stolen or damaged whilst in the care of an airline **You** must:
  - obtain a Property Irregularity Report from the airline.
  - give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - retain all travel tickets and tags for submission if a claim is to be made under this policy.
- Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help **You** to substantiate **Your** claim.

**Our** liability for **Ski Equipment** hired by **You** shall be further limited to the **Insured Persons** liability for such loss or damage.

### WHAT IS NOT COVERED

- The **Excess** as shown in the **Policy Schedule**.
- Loss, theft of or damage to **Ski Equipment** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
  - overnight between 9pm and 8am (local time) or
  - at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a police report.
- Loss or damage due to delay, confiscation or detention by customs or other authority.
- Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.

5. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **Ski Equipment**.
6. Claims arising from loss or theft from **Your** accommodation unless there is evidence of forced entry which is confirmed by a police report.
7. Claims arising from loss or theft or damage of **Ski Equipment** carried on vehicle a roof rack unless secured by a lockable ski rack.
8. Anything mentioned in the general exclusions on page 15.

## Section S2: HIRE OF SKI EQUIPMENT

*(Only operative if indicated in the validation certificate and additional premium paid).*

### WHAT IS COVERED

We will pay **You**, up to the amount shown in the **Policy Schedule**, for the reasonable cost of hiring replacement **Ski Equipment** as a result of the accidental loss of, theft of or damage to or temporary loss in transit for more than 12 hours of **Your** own **Ski Equipment**.

### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Ski Equipment**.
2. For items damaged whilst on **Your Trip**, **You** must obtain an official report from a retailer confirming the item is damaged and beyond repair.
3. If **Ski Equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **You** must report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If **Ski Equipment** is lost, stolen or damaged whilst in the care of an airline **You** must:
  - a) obtain a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this policy.
4. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help **You** to substantiate **Your** claim.

### WHAT IS NOT COVERED

1. Loss, theft of or damage to **Ski Equipment** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
  - a) overnight between 9pm and 8am (local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a police report.
2. Loss or damage due to delay, confiscation or detention by customs or other authority.
3. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
4. Anything mentioned in the general exclusions on page 15.

## Section S3: SKI PACK

*(Only operative if indicated in the validation certificate and additional premium paid).*

### WHAT IS COVERED

We will pay **You**, up to the amount shown in the **Policy Schedule**:

- a) For the unused portion of **Your** ski pack (ski school fees, lift passes and hired **Ski Equipment**) following **Your Bodily Injury** or illness.
- b) For the unused portion of **Your** lift pass if **You** lose it.

### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must provide written confirmation from a **Medical Practitioner** that such **Bodily Injury** or illness prevented **You** from using **Your** ski pack.
2. **You** must report to an appropriate authority within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss or theft of **Your** ski pass.

### WHAT IS NOT COVERED

1. Anything mentioned in the general exclusions on page 15.

## Section S4: PISTE CLOSURE

*(Only operative if indicated in the validation certificate and additional premium paid).*

### WHAT IS COVERED

We will pay **You**, up to the amount shown in the **Policy Schedule**, for the cost of transport organised by the tour operator to an alternative site if due to lack of snow conditions results in the closure of skiing facilities (excluding cross-country skiing) in **Your** resort and it is not possible to ski. The cover only applies:

- a) To the resort which **You** have pre-booked for a period exceeding 12 hours and for so long as such conditions prevail at the resort, but not exceeding the pre-booked period of **Your Trip** and
- b) To **Trips** taken outside **Ireland** and the **United Kingdom** during the published ski season for **Your** resort.

### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must obtain written confirmation from the resort management of the piste conditions, confirming the closure of facilities and the dates applicable.

#### WHAT IS NOT COVERED

1. Any circumstances where transport costs, compensation or alternative skiing facilities are provided to **You**.
2. Anything mentioned in the general exclusions on page 15.

### Section S5: AVALANCHE CLOSURE

*(Only operative if indicated in the validation certificate and additional premium paid).*

#### WHAT IS COVERED

We will pay **You** up to the amount shown in the **Policy Schedule** for the cost of transport organised by the tour operator to an alternative site if an avalanche results in the closure of skiing facilities (excluding cross-country skiing) in **Your** resort and it is not possible to ski. The cover only applies:

- a) To the resort which **You** have pre-booked for a period exceeding 12 hours and for so long as such conditions prevail at the resort, but not exceeding the pre-booked period of **Your Trip** and
- b) To **Trips** taken outside **Ireland** and the **United Kingdom** during the published ski season for **Your** resort.

#### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must obtain written confirmation from the resort management of the piste conditions, confirming the closure of facilities and the dates applicable.

#### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Anything mentioned in the general exclusions on page 15.

### Section T1-T5: TRAVEL DISRUPTION

*(only operative if indicated in the validation certificate and appropriate premium paid)*

This extension to the policy provides the following amendments to the insurance, specifically for costs and expenses that are not recoverable from any other source.

### Section T1: EXTENDED CANCELLATION OR CURTAILMENT CHARGES COVER

#### WHAT IS COVERED

Section **A** – Cancellation or curtailment charges is extended to include the following cover. We will pay **You** up to **€1,000** for any irrecoverable unused travel and accommodation costs (and other pre-paid charges) which **You** have paid or are contracted to pay, together with any reasonable additional travel expenses incurred if:

- a) **You** were not able to travel and use **Your** booked accommodation or
- b) the **Trip** was **Curtailed** before completion as a result of the Travel Advice Unit of the Foreign & Commonwealth Office (FCO) or the World Health Organisation (WHO) or regulatory authority in a country to/from which **You** are travelling issuing a directive:
  1. prohibiting all travel or all but essential travel to or
  2. recommending evacuation from the country or specific area or event to which **You** were travelling, providing the directive came into force after **You** purchased this insurance or booked the **Trip** (whichever is the later), or in the case of **Curtailment** after **You** had left **Ireland** or the **United Kingdom** to commence the **Trip**.

### Section T2/T3: EXTENDED DELAYED DEPARTURE / EXTENDED HOLIDAY ABANDONMENT

#### WHAT IS COVERED

Section H1 / H2 –Delayed Departure / Holiday Abandonment is extended to include the following cover. We will pay **You** one of the following amounts:

1. If the scheduled **Public Transport** on which **You** are booked to travel is cancelled or delayed, leading to **Your** departure being delayed for more than 12 hours at the departure point of any connecting **Public transport** in **Ireland** or the **United Kingdom** or to **Your** overseas destination or on the return journey to **Your Home** we will pay **You**
  - a) **€20** for the first completed 12 hours delay and **€10** for each full 12 hours delay after that, up to a maximum of **€100** (which is meant to help you pay for telephone calls made and meals and refreshments purchased during the delay) provided **You** eventually continue the **Trip**.
2. We will pay **you** up to **€1,000** for either:
  - a) any irrecoverable unused accommodation and travel costs (and other pre-paid charges) which **You** have paid or are contracted to pay because **You** were not able to travel and use **Your** booked accommodation as a result of:
    - i) the scheduled **Public transport** on which **You** were booked to travel from **Ireland** or the **United Kingdom** being cancelled or delayed for more than 12 hours or
    - ii) **You** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 12 hours and **You** choose to cancel **Your Trip** because the alternative transport to **Your** overseas destination offered by the **Public Transport** operator was not reasonable or
  - b) suitable additional accommodation (room only) and travel expenses necessarily incurred in reaching **Your** overseas destination and/or in returning to **Ireland** or the **United**

**Kingdom** as a result of:

- i) the **Public Transport** on which **You** were booked to travel being cancelled, delayed for more than 12 hours, diverted or re-directed after take-off or
- ii) **You** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 12 hours and **You** choose to make other travel arrangements for **Your Trip** because the alternative transport offered by the scheduled **Public Transport** operator was not reasonable. The amount payable will be calculated after deduction of the amount of the refund on **Your** ticket(s) together with any compensation from the **Public Transport** operator. **You** can only claim under subsections 1. or 2. for the same event, not both. If the same costs, charges or expenses are also covered under any other section of this policy **You** can only claim for these under one section for the same event.

## Section T4: EXTENDED MISSED DEPARTURE COVER

### WHAT IS COVERED

Section J – Missed departure cover is extended to include the following cover.

- a) **We** will pay **You** up to **€500** for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **Your** overseas destination or returning to **Ireland** or the **United Kingdom** if **You** fail to arrive at the departure point in time to board any onward connecting **Public Transport** on which **You** are booked to travel, following completion of the initial international journey, including connections within **Ireland** or the **United Kingdom** on the return journey to **Your Home** as a result of:
  1. the failure of other scheduled **Public Transport** or
  2. strike, industrial action or adverse weather conditions or
3. **You** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 12 hours. If the same expenses are also covered under any other section of this policy **You** can only claim for these under one section for the same event.

## Section T5: ACCOMMODATION COVER

### WHAT IS COVERED

**We** will pay **You** up to **€1,000** for either:

1. any irrecoverable unused accommodation costs (and other pre-paid charges which **You** have paid or are contracted to pay because **You** were not able to travel and use **Your** booked accommodation or
2. reasonable additional accommodation and transport costs incurred:
  - a) up to the standard of **Your** original booking, if **You** need to move to other accommodation on arrival or at any other time during the **Trip** because **You** cannot use **Your** booked accommodation or
  - b) with the prior authorisation of the Emergency Assistance Service to repatriate **You** to **Your Home** if it becomes necessary to **Curtail** the **Trip** as a result of, fire, flood, earthquake, explosion, tsunami, landslide, avalanche, volcanic eruption, hurricane, storm or an outbreak of food poisoning or an infectious disease affecting **Your** accommodation or resort. **You** can only claim under one of subsections 1. or 2. of What is covered for the same event, not both. If the same costs and charges are also covered under any other section of this policy **You** can only claim for these under one section for the same event.

**Special conditions relating to claims** (applicable to all extended sections of cover)

1. If **You** fail to notify the travel agent, tour operator or provider of transport or accommodation as soon as **You** find out it is necessary to cancel the **Trip**, the amount **We** will pay will be limited to the cancellation charges that would have otherwise applied.
2. **You** must get (at **Your** own expense) written confirmation from the provider of the accommodation (or their administrators), the local Police or relevant authority that **You** could not use **Your** accommodation and the reason for this.
3. **For Curtailment claims only:** **You** must tell the Emergency Assistance Service as soon as possible of any circumstances making it necessary for **You** to return **Home** and before any arrangements are made for **Your** repatriation.
4. **You** must check in, according to the itinerary supplied to **You** unless **Your** tour operator or airline has requested **You** not to travel to the airport.
5. **You** must get (at **Your** own expense) written confirmation from the scheduled **Public Transport** operator (or their handling agents) of the cancellation, number of hours of delay or involuntarily denied boarding and the reason for these together with details of any alternative transport offered.
6. **You** must comply with the terms of contract of the scheduled **Public Transport** operator and seek financial compensation, assistance or a refund of **Your** ticket from them, in accordance with the terms and/or (where applicable) **Your** rights under EU Air Passengers Rights legislation in the event of denied boarding, cancellation or long delay of flights.
7. **You** must get (at **Your** own expense) written confirmation from the scheduled **Public Transport** operator/ accommodation provider that reimbursement will not be provided.

### WHAT IS NOT COVERED (APPLICABLE TO ALL SECTION T EXTENDED SECTIONS OF COVER)

1. The first €50 of each and every claim, per incident claimed for, under this section by each **Insured Person** (except claims under subsection 1. a) of What is covered under the Extended delayed departure cover above)

2. The cost of Airport Departure Duty/Tax (whether irrecoverable or not).
3. Travel tickets paid for using any airline mileage reward scheme, for example Air Miles.
4. Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
5. Claims arising directly or indirectly from:
  - a) Strike, industrial action, cancellation of **Public Transport** or a directive prohibiting all travel or all but essential travel, to the country or specific area or event to which **You** were travelling, existing or being publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip**.
  - b) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **You** are travelling.
  - c) Denied boarding due to **Your** drug use, alcohol or solvent abuse or **Your** inability to provide a valid passport, visa or other documentation required by the **Public Transport** operator or their handling agents.
6. Any costs incurred by **You** which are recoverable from the providers of the accommodation (or their administrators) or for which **You** receive or are expected to receive compensation or reimbursement.
7. Any costs incurred by **You** which are recoverable from the **Public Transport** operator or for which **You** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
8. Any accommodation costs, charges and expenses where the **Public Transport** operator has offered reasonable alternative travel arrangements.
9. Any costs for normal day to day living such as food and drink which **You** would have expected to pay during **Your Trip**.
10. Claims arising within 7 days of the date **You** purchased this insurance or the time of booking any **Trip**, whichever is the later.
11. Anything mentioned in the general exclusions applicable to all sections of the policy.

## CLAIMS EVIDENCE (APPLICABLE TO ALL SECTION T EXTENDED SECTIONS OF COVER)

**We** will require (at **Your** own expense) the following evidence where relevant:

- A copy of the advice against all travel or all but essential travel issued by the Foreign & Commonwealth Office (FCO) or the World Health Organisation (WHO) or the regulatory authority in a country to/from which **You** are travelling.
- Booking confirmation together with a cancellation invoice from **Your** travel agent, tour operator or provider of transport/accommodation.
- In the case of **Curtailment** claims, written details from **Your** travel agent, tour operator or provider of transport/accommodation of the separate costs of transport, accommodation and other pre-paid costs or charges that made up the total cost of the **Trip**.
- **Your** unused travel tickets.
- A letter from the carriers (or their handling agents) confirming the number of hours delay, the reason for the delay and confirmation of **Your** check in times.
- Written confirmation from the scheduled **Public Transport** operator (or their handling agents) of the cancellation, number of hours of delay or involuntarily denied boarding and the reason for these together with details of any alternative transport offered.
- Written confirmation from the company providing the accommodation (or their administrators), the local Police or relevant authority that **You** could not use **Your** accommodation and the reason for this.
- Receipts or bills for any transport, accommodation or other costs, charges or expenses claimed for.
- Any other relevant information relating to **Your** claim under this section that **We** may ask **You** for.

## OPTIONAL COVERS

### COVER IN RESPECT OF SECTIONS U, V, W, X, Y and Z ONLY OPERATES:

If the appropriate optional cover extension has been chosen and the appropriate additional premium has been paid.

## Section U: FLIGHT DISRUPTION

*(Only operative if indicated in the validation certificate and additional premium paid).*

### WHAT IS COVERED

**We** will pay **You**, up to the amount shown in the **Policy Schedule** for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **Your** overseas destination and/or in returning to **Ireland** or the **United Kingdom** as a result of the flight on which **You** were booked to travel being cancelled, or delayed for more than 24 hours and **You** choose to make other travel arrangements for **Your Trip** because the alternative transport offered by the airline was not within 24 hours of **Your** original scheduled departure time. The amount payable will be calculated after deduction of the amount of the refund on **Your** ticket(s) together with any compensation from the airline. **You** may claim only under Section U - Flight Disruption or Section H1 - Delayed Departure for the same event not both.

### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must check in according to the itinerary supplied to **You**.
2. **You** must get written confirmation from the airline (or their handling agents) of the cancellation or number of hours delay and the reason for these together with details of any alternative transport offered.
3. **You** must comply with the terms of contract of the airline and seek financial compensation, assistance or a refund of **Your** ticket(s) from them in accordance with such terms and/or (where applicable) **Your** rights under EU Air Passenger Rights legislation in the event of cancellation or long delay of flights. Details of **Your** rights can be downloaded from: [http://europa.eu.int/comm/transport/air/rights/index\\_en.htm](http://europa.eu.int/comm/transport/air/rights/index_en.htm)

## WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. The cost of recoverable airport charges and levies.
3. Claims arising directly or indirectly from:
  - a) Strike, industrial action or air traffic control existing or being publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip** whichever is the later.
  - b) An aircraft being withdrawn from service (temporary or otherwise) on the recommendation of the Irish Aviation Authority or any similar body in any country.
  - c) Denied boarding due to **Your** drug use, alcohol or solvent abuse or **Your** inability to provide a valid passport, visa or other documentation required by the airline operator or their handling agents.
4. Any costs incurred by **You** which are recoverable from the airline or for which **You** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
5. Any accommodation costs, charges and expenses where the airline has offered alternative travel arrangements within 24 hours of **Your** original scheduled departure time.
6. Any costs which **You** would have expected to pay during **Your Trip**.
7. Anything mentioned in the general exclusions on page 15.

## Section V: CRUISE CONNECTION

*(Only operative if indicated in the validation certificate and additional premium paid).*

### WHAT IS COVERED

**We** will pay **You** up to the amount shown in the **Policy Schedule** for reasonable additional onward travel expenses and accommodation (room only) necessarily incurred in reaching the next available embarkation point of **Your** cruise itinerary if **You** fail to arrive at the original embarkation point in time to board **Your Cruise Ship** on which **You** are booked to travel, or **Your** failure to disembark at the original disembarkation place and time to reach **Your** international flight departure point, as a direct result of:

1. the failure of any scheduled **Public Transport**
2. the failure of **Your** booked **Cruise Ship**
3. strike, industrial action or adverse weather conditions.

### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must allow sufficient time for the scheduled **Public Transport, Cruise Ship** or other transport to arrive on schedule and to deliver **You** to **Your** embarkation point or International Departure point.

### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Claims arising directly or indirectly from:
  - a) Strike or industrial action or air traffic control delay existing or publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip** whichever is the later.
  - b) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Irish Aviation Authority or a Port Authority or any similar body in any country.
3. Additional expenses where the scheduled **Public Transport** operator has offered reasonable alternative travel arrangements.
4. Any delay caused by quarantine on the **Cruise Ship** due to contagious disease.
5. Anything mentioned in the general exclusions on page 15.

## Section W: WEDDING/CIVIL PARTNERSHIP

*(Only operative if indicated in the validation certificate and additional premium paid).*

### SPECIAL DEFINITIONS *(which are shown in italics)*

*You/Your/Insured Person/Insured Couple* – means the couple travelling abroad to be married/entered into a civil partnership whose names appear in the validation certificate.

*Wedding/civil partnership attire* – means dress, suits, shoes and other accessories bought specially for the wedding/civil partnership and make-up, hair styling and flowers paid for or purchased for the wedding/civil partnership forming part of **Your Baggage**.

### WHAT IS COVERED

1. **We** will pay up to the amounts shown in the **Policy Schedule** for the accidental loss of, theft of or damage to the items shown below forming part of **Your Baggage**:
  - a) for each wedding/civil partnership ring taken or purchased on the **Trip** for each **Insured Person**.
  - b) for wedding/civil partnership gifts taken or purchased on the **Trip** for the **Insured Couple**.
  - c) for **Your wedding/civil partnership attire** which is specifically to be worn by **You** on **Your** wedding/civil partnership day.

The maximum payment for any **Single Item** is shown in the **Policy Schedule**.

The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (or **We** may at **Our** option replace, reinstate or repair the lost or damaged **Baggage**).

2. **We** will pay the **Insured Couple** up to €300 for the reasonable additional costs incurred to reprint/make a copy of or retake the photographs/video recordings either at a later date during the **Trip** or at a venue in **Ireland** or the **United Kingdom** if:
  - a) the professional photographer who was booked to take the photographs/video recordings on **Your** wedding/civil partnership day is unable to fulfil such obligations due to **Bodily Injury**, illness or unavoidable and unforeseen transport problems, or
  - b) the photographs/video recordings of the wedding/civil partnership day taken by a professional photographer are lost, stolen or damaged within 14 days after the wedding/civil partnership day and whilst **You** are still at the holiday/honeymoon location.

**You** may claim only under one of either Section W - Wedding/Civil Partnership or Section E - **Baggage**,

**Baggage** Delay and Passport for the same event, not both.

#### SPECIAL CONDITIONS RELATING TO CLAIMS

1. You must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Baggage**.
2. If **Baggage** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel You must report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If **Baggage** is lost, stolen or damaged whilst in the care of an airline You must:
  - a) obtain a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this policy.
3. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help You to substantiate Your claim.

#### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Loss, theft or of damage to **Valuables** left **Unattended** at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe or safety deposit box.
3. Loss, theft or of damage to **Baggage** left **Unattended** at any time or contained in an **Unattended** vehicle:
  - a) overnight between 9pm and 8am (local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a police report.
4. Loss or damage due to delay, confiscation or detention by customs or other authority.
5. Loss, theft or of damage to unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, mobile telephones or telecommunications equipment of any kind, deeds, manuscripts, securities, perishable goods, surfboards/sailboards, bicycles, marine equipment or craft or any related equipment or fittings of any kind, **Ski Equipment** and damage to suit cases (unless the suitcases are entirely unusable as a result of one single incidence of damage).
6. Loss or damage due to cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or accident to the aircraft, sea vessel, train or vehicle in which they are being carried.
7. Loss or damage due to breakage of sports equipment or damage to sports clothing whilst in use.
8. Loss, theft or of damage to business goods, samples, tools of trade, motor accessories and other Items used in connection with Your employment or occupation.
9. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown or liquid damage.
10. Anything mentioned in the general exclusions on page 15.

## Section X: BUSINESS EQUIPMENT

*(Only operative if indicated in the validation certificate and additional premium paid).*

#### WHAT IS COVERED

1. In addition to the cover provided under Section E – **Baggage** and Passport We will pay You up to the amount shown in the **Policy Schedule** for the accidental loss of, theft or of damage to **Business Equipment** occurring during the **Period of Insurance**. The amount payable will be the current market value, which takes into account a deduction for **Wear** tear and depreciation, (or We may at Our option replace, reinstate or repair the lost or damaged **Business Equipment**).
2. We will also pay reasonable additional accommodation and travelling expenses incurred in arranging for a colleague or business associate to take Your place on a pre-arranged **Business Trip** in the event that:
  - a) You die.
  - b) You are unable to make the **Business Trip** due to You being hospitalised or totally disabled as confirmed in writing by a **Medical Practitioner**.
  - c) Your **Close Relative** or **Close Business Associate** in **Ireland** or the **UK** dies, is seriously injured or falls seriously ill.

#### SPECIAL CONDITIONS RELATING TO CLAIMS

1. You must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Business Equipment**.
2. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help You to substantiate Your claim.

#### WHAT IS NOT COVERED

1. In respect of Cover 1 above:
  - a) The **Excess** as shown in the **Policy Schedule**.
  - b) Loss, theft or damage to **Business Equipment** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
    - i) overnight between 9pm and 8am (local time) or
    - ii) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle is confirmed by a police report.
  - c) Loss or damage due to delay, confiscation or detention by customs or other authority
  - d) Wear and tear, depreciation, deterioration or loss or damage by atmospheric or climatic conditions by moth vermin by any process of cleaning, repairing or restoring mechanical or electrical breakdown.
  - e) Loss of, theft or of damage to films, tapes, cassettes, cartridges or discs other than for their value as unused materials unless purchased pre-recorded when We will pay up to the makers latest list price.
2. In respect of Cover 2 above:



- a) Additional costs under 2.
  - b) above if **You** were totally disabled, hospitalised or **You** were on a waiting list to go into hospital at the time of arranging the **Business Trip**.
  - c) Additional costs under 2. b) and c) above if **You** were aware of circumstances at the time of arranging the **Business Trip** which could reasonable have been expected to give rise to cancellation of the **Business Trip**.
3. In respect of Cover 1 and 2 above:
- a) Any loss or damage arising out of **You** engaging in manual work.
  - b) Any financial loss, costs or expenses incurred arising from the interruption of **Your** business.
  - c) Anything mentioned in the general exclusions on page 15.

## Section Y: GOLF EQUIPMENT

*(Only operative if indicated in the validation certificate and additional premium paid).*

### WHAT IS COVERED

**We** will pay **You** up to the amount as shown in the **Policy Schedule** for loss, theft, or damage to **Your Golf Equipment**. The amount payable will be at today's prices less a deduction for wear tear and depreciation (calculated from the table below), or **We** may at **Our** option replace, reinstate or repair the lost or damaged **Golf Equipment**. The maximum **We** will pay for any **Single Item** is shown in the **Policy Schedule**.

Age of Item	Amount Payable
Up to 1 year old	– 90% of purchase price
Up to 2 years old	– 70% of purchase price
Up to 3 years old	– 50% of purchase price
Up to 4 years old	– 30% of purchase price
Up to 5 years old	– 20% of purchase price
Over 5 years old	– No payment

### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must report to the police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss or theft of all **Golf Equipment**. A Holiday Representatives Report is not sufficient.
2. If **Golf Equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **You** must report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If **Golf Equipment** is lost, stolen or damaged whilst in the care of an airline **You** must:
  - a) obtain a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this policy.
3. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help **You** to substantiate **Your** claim.

### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Loss, theft or damage to **Golf Equipment** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
  - a) overnight between 9pm and 8am (local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot, locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a police report.
3. Loss or damage due to delay, confiscation or detention by customs or other authority.
4. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
5. Claims arising for loss, theft or damage of **Golf Equipment** carried on a vehicle roof rack.
6. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **Baggage**.
7. Anything mentioned in the general exclusions on page 15.

## Section Z: EXAM FAILURE BACKPACKER COVER ONLY

*(Only operative if indicated in the validation certificate and additional premium paid).*

### WHAT IS COVERED

**We** will pay **You** up to the amount shown in the **Policy Schedule** for additional travel and accommodation expenses incurred by **You** as a result of returning to **Ireland** or the **UK** to retake public or university exams and then return to **Your** destination, provided cover was issued before **You** sat **Your** initial exam.

### SPECIAL CONDITIONS RELATING TO CLAIMS

1. **You** must get an official exam report to substantiate **Your** claims.

### WHAT IS NOT COVERED

1. The **Excess** as shown in the **Policy Schedule**.
2. Expenses incurred if the results of **Your** examination are known or are available to **You** prior to **Your** original departure date or **Your** results are known prior to booking **Your Trip**.
3. Expenses incurred if they are more than the cost of the flight arranged by **Us** or the actual costs incurred by **You** (whichever is the lesser) if **You** chose not to accept the flight arranged by **Us**.
4. The cost of **Your** flight **Home** should **Your** original flight ticket allow **You** to return to **Ireland** or the **UK** at the required time.
5. Expenses incurred if **You** return to **Ireland** or the **UK** is in respect of project work which forms part of **Your** exam result.
6. Anything mentioned in the general exclusions on page 15.

# Claims Procedure

**You** must comply with the following conditions to have the full protection of **Your** policy.

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

When contacting the claims department, please have the following information to hand:

Ref: Blue KMT Retail Scheme 2013-2014.

- Name of **Your** policy and where it was purchased
- Policy number
- Date insurance purchased
- Resort and country visited
- Value of claim
- Brief circumstances
- Travel dates
- Incident date

Failure to have the above information to hand may result in **Your** claim being delayed.

## 1. Claims

Obtain a claim form online at [www.osgtravelclaims.ie](http://www.osgtravelclaims.ie)

**You** must notify **Us** at the address given below, depending on the type of claim:

### **OSG Travel Claims**

Merrion Hall, Strand Road, Sandymount, Dublin 4 Tel: 01 2611550 Email: [travel@osg.ie](mailto:travel@osg.ie)

### Overseas Legal Expenses Claims

Contact DAS Claims Service

Tel. No. +44 (0) 117 934 0548, Fax. NO. +44 (0) 117 934 2109

### Exam Failure Claims

As soon as **You** receive **Your** results **You** should contact OSG Travel Claims

(+) 353 1 261 1550 or register **Your** claim at [www.osgtravelclaims.ie](http://www.osgtravelclaims.ie)

Please also submit **Your** exam results at this stage.

**You** must choose the most cost effective flight possible to meet **Your** needs.

When **You** receive **Your** invoice for **Your** new flights then please submit this to OSG Travel Claims immediately.

The notification must be made within 31 days or as soon as possible thereafter following any **Bodily Injury**, illness, disease, incident, event, redundancy or the discovery of any loss, theft or damage which may give rise to a claim under this policy.

**You** must also inform **Us** if **You** are aware of any writ, summons or impending prosecution. Every communication relating to a claim must be sent to **Us** without delay.

**You** or anyone acting on **Your** behalf must not negotiate admit or repudiate any claim without **Our** written consent.

**We** may also pursue any claim to recover any amount due from a third party in the name of anyone claiming cover under this policy.

**You** or **Your** legal representatives must supply at **Your** own expense all information, evidence, details of household insurance and medical certificates as required by **Us**. **We** reserve the right to require **You** to undergo an independent medical examination at **Our** expense. **We** may also request and will pay for a postmortem examination.

**You** must retain any property which is damaged, and, if requested, send it to **Us** at **Your** own expense. If **We** pay a claim for the full value of the property and it is subsequently recovered or there is any salvage then it will become **Our** property. **We** may refuse to reimburse **You** for any expenses for which **You** cannot provide receipts or bills.

## 2. Subrogation

**We** are entitled to take over and conduct in **Your** name the defence and settlement of any legal action. **We** may also take proceedings at **Our** own expense and for **Our** own benefit, but in **Your** name, to recover any payment **We** have made under this policy to anyone else.

## 3. Fraud

**You** must not act in a fraudulent manner.

If **You** or anyone acting for **You**:

- a) Make a claim under the policy knowing the claim to be false or fraudulently exaggerated in any respect or
- b) Make a statement in support of a claim knowing the statement to be false in any respect or
- c) Submit a document in support of a claim knowing the document to be forged or false in any respect or
- d) Make a claim in respect of any loss or damage caused by **Your** wilful act or with **Your** connivance

Then

- a) **We** shall not pay the claim
- b) **We** shall not pay any other claim which has been or will be made under the policy
- c) **We** may at **Our** option declare the policy void
- d) **We** shall be entitled to recover from **You** the amount of any claim already paid under the policy
- e) **We** shall not make any return of premium
- f) **We** may inform the police of the circumstances.

# Complaints Procedure

## Making Yourself Heard

If **You** have cause for complaint, it is important that **You** know that **We** are committed to providing **You** with an exceptional level of service and customer care. **We** realise that things can go wrong and there may be occasions when **You** feel that **We** have not provided the service **You** expected. When this happens, **We** want to hear about it so that **We** can try to put things right.

## Who to Contact?

The most important factors in getting **Your** complaint dealt with as quickly and efficiently as possible are:

- to be sure **You** are talking to the right person, and;
- that **You** are giving them the right information.

## When **You** Contact **Us**:

- Please give **Us** **Your** name and contact telephone number.
- Please quote **Your** policy and/or claim number and the type of policy **You** hold.
- Please explain clearly and concisely the reason for **Your** complaint.

So **We** begin by establishing **Your** first point of contact:

## Step One – Initiating **Your** Complaint

Does **Your** complaint relate to:

- A. Customer service or policy sales?
- B. **Your** policy or a claim on **Your** policy?

If A, **You** need to contact the agent who sold **You** **Your** policy. If B, **You** need to contact the Claims Manager, OSG Travel Claims, Merrion Hall, Sandymount, Dublin 4, Tel: 01-2611550.

**We** expect the majority of complaints will be quickly and satisfactorily resolved at this stage, but if **You** are not satisfied, **You** can take the issue further.

## Step Two – Financial Ombudsman

If **We** have given **You** **Our** final response and **You** are still dissatisfied **You** may refer **Your** case to an Ombudsman Service. The Ombudsman Service is an independent body that arbitrate on complaints about general insurance products. It will only consider complaints after **We** have provided **You** with written confirmation that **Our** internal complaints procedure has been exhausted.

For claims related complaints, the UK Financial Ombudsman Service (FOS) address is :  
The Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London E14 9SR  
Tel: +44 845 1800 Fax: +44 207 964 1001. Email: [complaint.info@financial-ombudsman.org.uk](mailto:complaint.info@financial-ombudsman.org.uk)

For other complaints, the Irish Financial Services Ombudsman (FSO) address is :  
The Financial Services Ombudsman, 9SR 3rd Floor, Lincoln House, Lincoln Place, Dublin 2  
Telephone: 1890 88 20 90 or +353 1 6620899 Email: [enquiries@financialombudsman.ie](mailto:enquiries@financialombudsman.ie)  
Following this complaint procedure does not affect **Your** right to take legal action.

## Our Promise to **You**

Calls are recorded and monitored.

**We** will provide **You** with the name of one or more individuals appointed by **Us** to be **Your** point of contact in relation to **Your** complaint until the complaint is resolved or cannot be processed any further;

**We** will provide **You** with a regular written update on the progress of the investigation of **Your** complaint at intervals of not greater of 20 business days;

**We** will attempt to investigate and resolve **Your** complaint within 40 business days of having received **Your** complaint; where the 40 business days have elapsed and the complaint is not resolved, **We** will inform **You** of the anticipated time frame within which **We** hope to resolve **Your** complaint.

Within 5 business days of the completion of the investigation of **Your** complaint, **We** will advise **You** in writing of the outcome of the investigation and, where applicable, explain the terms of any offer or settlement being made. Step three above outlines **Your** right to contact the Financial Ombudsman Service, should **You** be dissatisfied with the outcome of **Our** investigation.

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