



# Globelink Travel Insurance Policy

## Single and Annual Multi Trip Cover

### Welcome

Thank **you** for choosing **us** for **your** insurance.

#### About This Policy

This document sets out what is and what is not covered. It is arranged in different sections. Not all sections will apply to **you**. The cover **you** have selected is shown in the **Validation Certificate**.

Certain words shown in **bold** throughout this document and in the **Validation Certificate** have specific meanings and these are explained in the Part 9 - General Definitions.

Please check that the cover explained in this document, and in the **Validation Certificate** meets **your** needs and that **you** understand it. If anything is incorrect or, if **you** have any questions about **your** insurance, please contact **Globelink International** at [globelink@globelink.eu](mailto:globelink@globelink.eu) or call +357 240 30337. Please also contact **Globelink International** if **you** need any documents to be made available in braille and/or large print and/or in Audio format.

Subject to the policy terms and conditions, this insurance lasts for either the duration of a single **trip** or for a year if **you** have chosen annual multi **trip** cover. **Your period of insurance** is shown on the **Validation Certificate**.

Please take time to read Part 1 - Important Information in this document. It tells **you** about things **you** need to check, actions **you** need to take, and things **you** need to tell **us** about once the insurance has started.

To request any extension of the **period of insurance** after the commencement of travel **you** must contact **Globelink International** and advise of any circumstances which at the time of **your** request could reasonably be expected to cause a claim under this insurance. **We** do not guarantee that any extension of cover will be provided.

This insurance is only available to persons who are currently legally resident in the European Union or European Economic Area (EEA) and registered with a **medical practitioner** or entitled to free public healthcare under reciprocal arrangements currently in place in the European Union or EEA.

If **you** are aged under 16 **you** are only insured when travelling with one or both of the insured adults (or accompanied by another responsible adult).

**We** will not provide any cover if any person wanting to be insured does not meet the above requirements.

**You** must observe travel advice provided by an EEA recognised Government body. No cover is provided under any section of this insurance in respect of travel to a destination to which an EEA recognised Government body has advised against all or all but essential travel at the time of booking or travel.

All insurance documents and all communications from **us** about this insurance will be in English.

#### Regulatory Information

This travel insurance has been arranged by Globelink (Cyprus) Insurance Agency & Sub-Agency Ltd ("**Globelink International**"). **Globelink International** has authority from **your** insurer to arrange this insurance and represents **your** insurer when they interact with **you** about this policy. Globelink (Cyprus) Insurance Agency & Sub-Agency Ltd are regulated by the Insurance Companies Control Service (ICCS) in Cyprus.

**Your** insurer for all sections of this insurance, apart from Section S1 – End Supplier Failure Insurance, is HDI Global Specialty SE. Registered Office: HDI-Platz 1, 30659 Hannover, Germany. HDI Global Specialty SE is authorised and regulated by BaFin.

#### Regulatory Information for End Supplier Failure Insurance only

**Your** insurer under this Section is C&C Insurance Company PCC Limited per C&C Financial Lines Cell. C&C is an International Insurer based in Seychelles, Registered Address, Eden Plaza F20, Eden Island, Mahe, Seychelles. It is regulated and licensed by the Financial Services Authority, Seychelles.

#### Who to contact if you need to make a claim

#### What to do in a medical emergency abroad.

For medical emergencies, please contact **us** on:

**HEALTHWATCH ASSISTANCE**  
**24 Hour Emergency Helpline**  
Telephone: +30 (0) 2313 084518  
Telephone: +30 (0) 2311 801618  
Email: [assistance@healthwatch.gr](mailto:assistance@healthwatch.gr)

For claims relating to Section O1 – End Supplier Failure Insurance:

**C&C Insurance Company Ltd**  
Telephone: +44 03333055397  
Email: [claims@cnc.sc](mailto:claims@cnc.sc)  
For all other claims:

**Reporting all other claims:** **You** must report any claim as soon as possible, preferably within 31 days of any incident which may lead to a claim under this insurance. Also, **you** must contact **us** as soon as **you** find out about any condition or circumstances which may cause a **trip** to be cancelled or cut short. If **you** need to make a claim, please contact **us**:

**HEALTHWATCH CLAIMS**  
Telephone: +30 (0) 2313 084518  
Telephone: +30 (0) 2311 801618  
Email: [claims@healthwatch.gr](mailto:claims@healthwatch.gr)  
Opening hours: Monday – Friday, 9am – 5pm

Please see Part 3 – Making a Claim and Section S1 – End Supplier Failure Insurance for more information.

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### Cruise Cover

Cover is provided for cruises as standard on this policy. A cruise is considered a trip involving a sea or river voyage of more than 3 days in total duration, where a transportation and accommodation is primarily on an ocean/river going passenger ship.

## The Contract of Insurance

This document, together with questionnaire, the **Validation Certificate** make up the contract between the **policyholder** and **us**. The contract does not give, or intend to give, rights to anyone else. No-one else has the right to enforce any part of this contract.

The insurance provided by this document covers liability, loss, damage, death or disability that happens during any **period of insurance** for which the **policyholder** has paid, or agreed to pay, the premium. This insurance is provided under the terms and conditions contained in this document or in any amendment made to it.

### PART 1 - IMPORTANT INFORMATION

Globelink International

Tel: +357 240 30337

Email: [globelink@globelink.eu](mailto:globelink@globelink.eu)

Office Hrs: 9am-5pm Mon to Fri (excl. public holidays)

**This is not a private medical insurance. If you need any emergency medical treatment or emergency travel assistance whilst abroad, please contact HEALTHWATCH ASSISTANCE 24 Hour Emergency Helpline**  
Telephone: +30 (0) 2313 084518  
Telephone: +30 (0) 2311 801618  
Email: [assistance@healthwatch.gr](mailto:assistance@healthwatch.gr)  
**Not contacting Healthwatch Assistance, or not following our instructions, could affect your claim. Full details are shown in Part 3 – Making a Claim.**

There are conditions which apply to the whole of this insurance policy and full details of these can be found in Part 2 – General Conditions and Exclusions

There are conditions which relate specifically to making a claim, and these can be found in Part 3 – Making a Claim.3.

There are conditions that only apply to specific sections and these can be found under the Special Conditions Relating To Claims heading in each section.

If **you** do not meet these conditions, **we** may need to reject a claim payment or a claim payment could be reduced. In some circumstances, the policy may be cancelled.

## Declaration of Medical Conditions and Health Changes

This document contains conditions and exclusions in relation to **your** health and of others who might not be travelling with **you** but whose well-being **your trip** may depend upon.

**You** must comply with the following conditions relating to **pre-existing medical conditions** and health changes in order to have the full protection of this insurance. If **you** do not comply with these conditions, **we** may cancel the insurance, or refuse to deal with **your** claim or reduce the amount of any claim payment.

### Pre-existing Medical Conditions

It is a condition of this insurance that **you** will not be covered under Section A – Cancellation or curtailment charges, Section B – Medical, repatriation and other expenses, or Section C - Personal accident of this policy for any claims arising directly or indirectly from any **pre-existing medical condition** that **you** have unless the **pre-existing medical conditions** that **you** have are included in the list of No Screen Conditions shown in this section and the words in brackets apply to **you**.

In relation to this policy, a **pre-existing medical condition** is:

- any respiratory condition (relating to the lungs or breathing), heart condition, stroke, Crohn's disease, epilepsy or cancer for which **you** have ever received treatment (including surgery, tests or investigations by a **medical practitioner** and prescribed drugs or medication);
- any disease, illness or injury for which **you** have received surgery, in-patient treatment or investigations in a hospital or clinic within the last twelve months;
- any disease, illness or injury for which **you** are taking prescribed drugs or medication;
- any disease, illness or injury for which **you** have received a terminal prognosis;
- any disease, illness or injury **you** are aware of but for which **you** have not had a diagnosis;
- any disease, illness or injury for which **you** are on a waiting list or have knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home.

### No Screen Conditions

**You** will be covered for any **pre-existing medical conditions** that **you** have only if they are included in this list and if the words in brackets apply to **you**.

The condition must have been stable and well-controlled for the last 12 months.

'Stable and well-controlled' means the condition has been controlled by medication administered by a **medical practitioner** and **you** have not required a hospital admission or referral to a specialist as a result of a worsening of **your** condition within the last 12 months.

• Acne
• ADHD - Attention Deficit Hyperactivity Disorder
• Any disabilities impairing mobility, vision or mental health (provided <b>you</b> are accompanied by an appropriate carer for when any assistance is required)
• Arthritis - Juvenile, Osteoarthritis, Rheumatoid or Psoriatic Arthritis, Reiter's Syndrome, Rheumatism. (-The arthritis must not affect the back more than any other area of the body; and - <b>You</b> must not be taking more than 2 medications; and - <b>You</b> must not require any mobility aids, other than a walking stick; and -There must have been no dislocations or any joint replacements; and - <b>You</b> must not be awaiting surgery; and

- <b>You</b> must have no lung problems/respiratory disorders.)
• Allergies (limited to Rhinitis, Chronic Sinusitis, Eczema, Food Intolerance & Hay Fever)
• Asthma (-providing it was diagnosed before age 50; and - <b>you</b> are taking/using no more than 2 medications/inhalers)
• Bell's Palsy
• Benign Positional Vertigo
• Bladder Infection
• Breast Cancer/Prostate Cancer (provided <b>you</b> : - were diagnosed more than 12 months ago - have not had any chemotherapy or radiotherapy in the last 12 months and the cancer has not spread outside the breast or prostate at any time - in the case of cancer of the prostate <b>you</b> must have a prostate-specific antigen of 3.0 or less)
• Bunions
• Carpal Tunnel Syndrome
• Cataracts
• Coeliac Disease
• Congenital Blindness
• Corneal Graft
• Cystitis
• Deafness
• Diabetes (providing there have been no complications such as impaired kidney function, heart disease, peripheral vascular disease, leg or foot ulcers, retinal damage, nerve damage, leg or foot amputation, liver damage)
• Dry Eye Syndrome
• Deep Vein Thrombosis (DVT) – (provided <b>you</b> were diagnosed more than 12 months ago; and you are currently stable and well controlled on anti-coagulant (blood thinning) medication (such as Warfarin) taken purely as a DVT preventative and not related to any heart related condition). -If you are being treated as a result of a pulmonary embolism or have been prescribed anti-coagulants as a result of being at high risk of blood clots due to an abnormal heartbeat (atrial fibrillation) or because of a mechanical heart valve or similar cardiac device or having a blood clotting disorder (such as thrombophilia) or as a result of a recent operation then there is no cover under this policy.
• Eczema
• Enlarged Prostate (benign only)
• Essential Tremor
• Folate Deficiency
• Fungal Nail Infection
• Gallbladder Removal (provided there were no complications)
• Gastric Reflux
• Glaucoma
• Goitre
• Gout
• Hiatus Hernia
• High Cholesterol
• Hormone Replacement Therapy – HRT
• Hypertension - High Blood Pressure: (Providing you have not been diagnosed with any heart disease, heart attack, heart failure, peripheral artery/vascular disease, stroke or kidney disease).
• Hypotension - Low Blood Pressure (provided it is not associated with any underlying condition)
• Impetigo
• Insulin Resistance
• Macular Degeneration
• Meniere's Disease
• Migraine
• Osteoporosis - Osteopenia, Fragile Bones (provided there have been no broken bones within the last 5 years)
• Pernicious Anaemia
• Raynaud's Disease
• RSI (Repetitive Strain Injury/Tendinitis)
• Sinusitis
• Tendonitis
• Tinnitus
• Tonsillitis
• Underactive or Overactive Thyroid

### Health Changes

If **your** health changes after the start date of this insurance and the date **your** travel tickets or confirmation of booking

were issued, **you** must contact **Globelink International** to make sure cover is not affected.

Changes to **your** health which **we** need to know about are:

- details of any new **medical conditions** **you** have been diagnosed with; or
- changes in diagnosis of any existing **medical condition**; or
- changes in the treatment (including changes in medication) **you** are receiving for any existing **medical condition**.

#### Exclusions Relating to Health and Medical Conditions

There is no cover under Section A – Cancellation or curtailment charges, Section B – Medical, repatriation and other expenses, or Section C - Personal accident of this policy for any claims arising directly or indirectly from:

- a) Any **medical condition** **you** have with 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;
- b) Any surgery, treatment or investigations for which **you** intend to travel outside of **your home area** to receive (including any expenses incurred due to the discovery of other **medical conditions** during and/or complications arising from these procedures);
- c) Any **medical condition** for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**;
- d) **You** travelling against any health requirements stipulated by:
  - the airline with which **you** are travelling, by the airline's booking company, or by anyone else who provides services on behalf of the airline at the airport, or
  - any other **public transport provider**.

#### Pregnancy

If **you** become pregnant, as confirmed by a **medical practitioner**, and **your** dates of travel fall within the 15 week period prior to the due date, then if **you** decide to cancel **your trip** and provided **you** contact **Globelink International** within 14 days of the confirmation of **your** pregnancy, **we** will provide cover for the **trip** cancellation under the terms and conditions of Section A - Cancellation or curtailment charges. If a claim is paid, **your** policy will terminate, and no further cover will be provided.

If **you** decide not to cancel **your trip**, cover under all sections of this policy will be provided under the standard terms and conditions as contained in this document. In relation to pregnancy, this means there is no cover under this policy in relation to pregnancy and/or childbirth unless during a **trip**:

- a) **you** suffer a **bodily injury**; or
- b) **you** contract an illness or disease; or
- c) complications of any kind with the pregnancy occur.

Cover for the above events will continue until the end of the 25th week of pregnancy with the exception that if **you** are pregnant following a course of in vitro fertilisation (IVF) or are pregnant with twins or other multiple birth, cover for the above events will continue until the end of the 23rd week of pregnancy.

The policy will not cover any costs relating to pregnancy or childbirth beyond the above dates even if **you** are already travelling and are more than 25 weeks pregnant (more than 23 weeks if **you** have had a course of in vitro fertilisation (IVF) or are pregnant with twins or other multiple birth) and have approval to travel from a **medical practitioner**.

#### Important information you have given us

In deciding to accept this insurance and in setting the terms and premium, **we** have relied on the information **you** have given to **Globelink International**. **You** must take reasonable care to provide complete and accurate answers to the questions asked when the policy is taken out, changed or renewed (if applicable). If the information provided by **you** is not complete and accurate:

- **we** may treat the policy as if it never existed, refuse to pay any claim and not return **your** premium, or;
- if **we** would not have provided the insurance, it will be treated as if it never existed and **we** will refuse any claim made, but **we** will return your premium, or;
- if **we** would have provided the insurance, but on different terms, **we** will treat the policy as if it had been provided on those terms, or;
- if **we** would have provided the insurance, but would have charged a higher premium, **we** may reduce the amount **you** receive on any claim made.

**We** will write to the **policyholder** if **we**:

- intend to cancel the policy; or
- need to amend the terms of the policy; or require the **policyholder** to pay more for this insurance.

If **you** become aware that information **you** have given is incomplete or inaccurate, **you** must inform **Globelink International** immediately. Contact details are on the first page of this document.

## PART 2 GENERAL CONDITIONS AND EXCLUSIONS

### General Conditions

The following conditions apply to the whole of this insurance. You must comply with them to have the full protection of this policy.

1. Other Insurance  
If, at the time of a valid claim under this policy there is another insurance policy in force which covers **you** for the same loss or expense (for example a Home Contents Policy), **we** may seek a recovery of some or all of **our** costs from the other insurer. **You** must give **us** any help or information **we** may need to assist **us** with **our** loss recoveries.
2. Precautions  
At all times **you** must take precautions to avoid injury, illness, disease, loss, theft or damage and take steps to safeguard **your** property from loss or damage and to recover property lost or stolen.

### General Exclusions

The following exclusions apply to the whole of this insurance unless stated otherwise.

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

1. Coronavirus (COVID-19):  
This policy does not cover any claim arising directly, or indirectly, from any coronavirus disease (including but not limited to COVID-19) or any related or mutated form of the virus. This includes the fear or threat of catching coronavirus, and the advice or action of any government not to travel or preventing travel.

However, this exclusion does not apply to losses under:  
(a) Section A – Cancellation or Curtailment charges, Specified Events 1, 6 and 7.

- (b) Section B – Medical, repatriation and other expenses,  
(c) Section B1 – Hospital confinement benefit; or  
(d) Section D1 – Missed Departure, Specified Events 5
2. National and International travel restrictions imposed by Government directive following the outbreak of Pandemic communicable diseases. This exclusion applies to directives enforced by any government that directly causes **Your** trip to be disrupted or cancelled.
  3. Participation in **winter sports**:  
**Your** participation in **winter sports** unless it is shown as being covered in the **Validation Certificate**.
  4. Professional sports or entertaining:  
**Your** participation in or practice of any professional sports or professional entertaining.
  5. Other sports or activities:  
**Your** participation in or practice of any other sport or activity, **manual work**, driving any motorised vehicle in motor rallies or competitions or racing unless:
    - a) the sports and/ or activities are specified in the lists under Appendix A of this policy or
    - b) are shown as covered in the **Validation Certificate**.
  6. Suicide, drug use, alcohol or solvent abuse and **you** putting **yourself** at risk:  
Any wilful, self-inflicted injury or illness, suicide or attempted suicide, sexually transmitted diseases, solvent abuse, alcohol abuse, drug use (other than drugs taken in accordance with treatment prescribed and directed by a **medical practitioner**, but not for the treatment of drug addiction), and **you** putting **yourself** at risk (except in an attempt to save human life).
  7. Unlawful action:  
**Your** own unlawful action in the country in which the **trip** is taking place or any criminal proceedings against **you**.
  8. Any other loss, damage or additional expense following on from the event for which **you** are claiming, unless **we** provide cover under this insurance.
  9. Armed Forces:  
Operational duties of a member of the Armed Forces (other than claims arising from authorised leave being cancelled due to operational reasons, as provided for under Specified Events 4 of Section A – Cancellation or Curtailment Charges).
  10. Travelling against World Health Organisation (WHO) WHO advice or against the advice of a European Union recognised Government body:  
**Your** travel to a country, specific area or event when the World Health Organisation (WHO) or regulatory authority in a country to/from which **you** are travelling has advised against all, or all but essential, travel at the time of booking, or travel. For residents of the **United Kingdom** this regulatory body is the Travel Advice Unit of the Foreign, Commonwealth & Development Office (FCDO).
  11. **Family** and **single parent cover** travel restrictions:  
If **you** are aged under 16 **you** are only insured when travelling with one or both of the insured adults (or accompanied by another responsible adult). If **you** reach the age mentioned above during the **period of insurance**, cover will continue until the next renewal date but not after that.

12. **War** or acts of **terrorism**:  
However, this exclusion shall not apply to losses under:

(a) Section B – Medical, repatriation and other expenses, Section B1 – Hospital confinement benefit and Section C – Personal accident, unless such losses are caused by nuclear, chemical or biological attack, **your** participation in **active war**, or the disturbances were already taking place at the beginning of any **trip**;

(b) Section S2 – Travel Disruption (**force majeure**) if **you** purchased this insurance before the date the **force majeure** happened or commenced.

13. **You** engaging in **active war**.

14. **Nuclear risks**.

15. Sonic bangs:  
Loss, destruction or damage directly caused by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.

## PART 3 – MAKING A CLAIM

### HEALTHWATCH ASSISTANCE

Telephone: +30 (0) 2313 084518

Telephone: +30 (0) 2311 801618

Email: [assistance@healthwatch.gr](mailto:assistance@healthwatch.gr)

Emergency Assistance lines are open 24 hours a day.

For out-patient treatment costing less than €300, it is recommended that **you** pay the hospital/clinic **yourself** and claim back medical expenses from **us** on **your** return to **your home area**.

**You** (or someone acting on **your** behalf) must contact **Healthwatch Assistance** as soon as possible in the case of a serious medical emergency abroad where **you** will or may need to stay in hospital, have hospital treatment or other emergencies, for example the need to change travel arrangements and return **home** because a **close relative** has become seriously ill.

When calling **Healthwatch Assistance** for help, please provide the following information:

- The policy number (shown on the **Validation Certificate**) and the **policyholder's** name.
- **Your** name and the address **you** are staying at.
- The phone number **you** are calling from.
- The nature of the emergency.
- The name and phone number of the doctor and hospital treating **you** (if appropriate).

Not contacting **Healthwatch Assistance**, or not following **our** instructions, could affect **your** claim. **We** must agree, beforehand, any emergency travel expenses involving air travel. If it is not possible for **you** to make contact with **Healthwatch Assistance** before hospital admission or before medical expenses are incurred because emergency treatment is required, contact must be made as soon as possible.

Private medical treatment is not covered in countries where reciprocal health agreements entitle **you** to benefit from public health care arrangements unless authorised specifically by **us**. **We** have the medical expertise, contacts and facilities to help should **you** be injured in an accident or fall ill. **We** will also arrange transport **home** when this is considered to be medically necessary or when **you** are told about the illness or death of a **close relative** or a **close business associate** at **home**.

If **you** are travelling to the United States of America, **you** or someone acting on **your** behalf must contact **us** as soon as **you** are aware **you** require medical treatment. For all other countries of travel, **you** or someone acting on **your** behalf must contact **us** once **you** are aware **you** will be admitted as an inpatient for at least one night's stay. If **you** do not contact **us** as soon as **you** are aware of **your** admittance and this failure causes our costs to increase, **We** will only pay for the costs **we** would have paid if **you** had contacted **us** straight away. No transportation or accommodation costs are covered unless they are pre-authorised by **us**.

**Payment for medical treatment abroad**

If **you** are admitted to a hospital/clinic while abroad, **we** will arrange for medical expenses covered by the insurance to be paid direct to the hospital/clinic. To take advantage of this benefit:

- Someone must contact **Healthwatch Assistance** for **you** as soon as possible;
- Beware of requests for **you** to sign for excessive treatment or charges. If **you** are in doubt, **you** should call **Healthwatch Assistance** for guidance and authorisation of costs.

**Reporting all other claims (apart from under Section S1 – End Supplier Failure Insurance)**

**You** must report any claim as soon as possible, preferably within **31 days** of any incident which may lead to a claim under this insurance. Also, **you** must contact **Healthwatch Claims** as soon as **you** find out about any condition or circumstances which may cause a **trip** to be cancelled or cut short. If **you** need to make a claim, please contact **us**:

<p><b>HEALTHWATCH CLAIMS</b>          Telephone: +30 (0) 2313 084518          Telephone: +30 (0) 2311 801618          Email: <a href="mailto:claims@healthwatch.gr">claims@healthwatch.gr</a>          Opening Hours: Monday – Friday, 9am – 5pm</p>
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**You** must report any claim as soon as possible, preferably within **31 days** of any incident which may lead to a claim under this insurance. Also, **you** must contact **Healthwatch Claims** as soon as **you** find out about any condition or circumstances which may cause a **trip** to be cancelled or cut short.

**Providing information to support your claim**

**You** will need to provide certain information to enable a claim to be fully assessed. This information will vary depending on which section of cover **you** are claiming under. Examples of the types of information **we** will need are given below, but there may be other evidence required from **you**.

Further details are given within each section of cover listed in Part 4 of this policy, and **our** claims handlers will tell **you** exactly what information **you** need to give them in relation to **your** own claim.

**Unless we agree to pay for any information, for example a medical examination (which you must agree to undergo if required), the information will need to be provided at your own expense.**

Medical Certificates	A medical certificate from the treating <b>medical practitioner</b> or a consultant specialising in a relevant field explaining why <b>you</b> required medical attention, were unable to travel, forced to cancel, extend, cut short or forfeit any pre-arranged plans or paid for activities, or rearrange any travel plans.
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Police (or other Authority) Reports	A report from the local police or other relevant authority in the country where the incident occurred confirming dates, circumstances and further details of the loss, theft, attempted theft, mugging, damage, quarantine, lawful or unlawful detention.
Travel Tickets & Baggage Tags	All travel tickets (including any unused travel tickets) and <b>baggage</b> tags.
Receipts, Bills, Valuations & Proof of Ownership	An original receipt, valuation or proof of ownership for items, currency or documents of any kind lost, stolen, damaged, repaired, replaced, purchased or hired as emergency temporary replacements.  Receipts or bills for any costs incurred for in-patient/out-patient treatment, telephone calls, emergency dental treatment, transport, accommodation, hospital or medical costs and any other charges or expenses which are to be considered as part of a claim.
Confirmation Letters, Reports, Invoices & Notices	Confirmation of the loss, delay, failure, cancellation or circumstance leading to the claim in the form of a letter, invoice, report or notice of cancellation from (as appropriate) <b>your</b> tour operator or their representative, airline, baggage handler, service provider, retailer, hotel or accommodation provider, emergency service, commanding officer, event organiser, <b>public transport</b> provider or relevant authority.
Death Certificates	For any claim involving <b>your</b> death or the death of any related party the original death certificate will be required.

**Getting Medical Treatment Abroad**

The European Health Insurance Card (EHIC) is no substitute for travel insurance as **you** will not necessarily be covered for all medical costs or for any emergency flights **home**.

However, a European Health Insurance Card (EHIC) is free and enables access to free or discounted medical care in selected European Countries. The EHIC entitles **you** to the same state-provided healthcare that is generally offered to the locals of the country **you** are visiting.

**Claims Conditions**

1. Claims procedure and notification  
**You** must notify claims using the procedures and contact options detailed in this Making a Claim Section.

The claim notification must be made as soon as possible and preferably within 31 days following any **bodily injury**, illness, disease, incident, event, redundancy or the discovery of any loss, theft or damage which may lead to a claim under this insurance.

**You** must also tell **us** if **you** are aware of any writ, claim, summons or impending prosecution. Every communication relating to a claim must be sent to **Healthwatch Claims** as soon as possible. **You**, or anyone acting on **your** behalf, must not negotiate, admit or repudiate (refuse) any claim without **Healthwatch Claims'** permission in writing.

2. Claims evidence

We will require, at **your** own expense, all evidence needed to fully assess **your** claim. **You** must have any medical examinations **we** decide are necessary. **We** will pay for these. **We** may request and will pay for a post mortem examination if required in the event of accidental death.

3. Property

**You** must retain any property which is damaged, and if requested, send it to **Healthwatch Claims** at **your** own expense. If **we** pay a claim for the full value of the property and it is then recovered it will then become **our** property. **We** may refuse to reimburse **you** for any property for which **you** cannot provide proof of ownership such as an original receipt, a valuation, user manual or bank or credit card statements.

4. Transferring of rights

**We** are entitled to take over any rights in the defence or settlement of any claim and to take proceedings in **your** name for **our** benefit against any other party. **You** must provide **us** with all necessary assistance to do this.

5. Fraudulent claims or misleading information

**We** take a robust approach to fraud prevention in order to keep premium rates down so that **you** do not have to pay for other people's dishonesty. If any claim made by **you**, or anyone acting on **your** behalf is fraudulent, deliberately exaggerated, or is intended to mislead, **we** may:

- not pay that claim; and
- recover (from the insured person involved in the claim) any payments made in respect of that claim; and
- terminate **your** insurance from the time of the fraudulent act; and
- inform the police of the act.

If **your** insurance is terminated from the time of the fraudulent act, **we** will not pay any claim for any incident which happens after that time and may not return any of the premium(s) already paid.

## PART 4 – THE COVER

This document gives details of many sections of cover. Some sections of cover only apply if **you** have chosen a certain level of cover or type of policy, and/or paid an additional premium. The sections of cover which **you** have chosen, and the level of benefit which will be payable in the event of a valid claim under each section of cover, are shown in the **Validation Certificate**.

### Policy Excesses

Please note that under most sections of this insurance, claims will be subject to an **excess**. This means that **you** will need to pay for the first part of each and every claim per incident claimed for, under each section by each insured person, unless an additional premium has been paid so that an **excess** is not payable (as confirmed on the **Validation Certificate**).

If **family cover** or **single parent cover** applies then **we** will not apply more than two **excess** charges to any incident claimed for.

## Section A – CANCELLATION OR CURTAILMENT CHARGES

### What is Covered

**We** will pay **you** up to the amount shown in the **Validation Certificate** for any irrecoverable unused travel and accommodation costs, pre-booked excursion costs, and other pre-paid charges which **you** have paid or are contracted to pay, together with any additional travel expenses incurred if cancellation of the **trip** is unavoidable or

the **trip** is **curtailed** before completion as a result of any of the following Specified Events:

### Specified Events

1. The death, **bodily injury**, illness, disease, or complications arising as a direct result of pregnancy of:
  - a) **yourself**
  - b) any person who **you** are travelling or have arranged to travel with
  - c) any person who **you** have arranged to stay with
  - d) **your close relative**
  - e) **your close business associate**.
2. **You** or any person who **you** are travelling with, or have arranged to travel with, are called as a witness at a Court of Law or called for jury service attendance.
3. **Your** redundancy or the redundancy of any person who **you** are travelling with or have arranged to travel with. The redundancy must qualify for payment under current redundancy payment legislation in the **European Union**, and at the time of booking the **trip** there must have been no reason to believe anyone would be made redundant.
4. **You**, or any person who **you** are travelling or have arranged to travel with, are a member of the Armed Forces, Territorial Army, Police, Fire, Nursing or Ambulance Services or an employee of a Government Department and have authorised leave cancelled or are called up for operational reasons, provided that the cancellation or **curtailment** could not reasonably have been expected at the time when the **policyholder** purchased this insurance or at the time of booking any **trip**.
5. The police or other authorities requesting **you** to stay at or return to **your home** due to serious damage to **your home** caused by fire, aircraft, explosion, storm, flood, subsidence, fallen trees, collision by road vehicles, malicious people or theft.
6. **You** are placed in **compulsory quarantine** whilst on **your** trip for a minimum of 24 hours by instruction of a **medical practitioner**. There is no cover if this instruction has been imposed on a community, geographic location or vessel by any government or public authority.
7. **You** attending a hospital outside **your** home area as an in-patient.
8. If during **your** outward journey including connecting **public transport**, **you** are tested and receive a positive result for coronavirus (COVID-19), following which you are not permitted to continue your **trip**.

### Please note:

1. Claims for **curtailment** under Specified Events 1, 2, 3, 4, 5 and 8 will be calculated from the day you returned to **your home area** and based on the number of complete days of **your trip** which **you** have not used.
2. Claims for **curtailment** under Specified Events 6 and 7 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. Cover only applies to ill/injured persons.

### Special Conditions Relating to Claims

1. **You** must get (at **your** own expense) a medical certificate from a **medical practitioner** and our prior approval to confirm the necessity to return **home**, prior to **curtailment** of the **trip** due to death, **bodily injury**,

- illness, disease or complications arising as a direct result of pregnancy.
2. 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 been payable had such notification taken place.
  3. If **you** cancel the **trip** due to **bodily injury**, illness, disease or complications 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.
  4. If **your** claim relates to illness due to coronavirus (COVID-19); for **your** cancellation claim to be valid, **we** require evidence in writing that **you**, or the person causing **you** to cancel the **trip**, received a positive test result within 14 days before the start date of **your trip**. For **curtailment** claims, **we** require evidence in writing that **you**, or the person causing **you** to **curtail** the **trip**, received a positive test result and that it is necessary for **you** to **curtail your trip**. Positive Covid-19 test result can only be considered when certified by an independent authority. Examples of this are: a private Covid testing provider's official certificate, or the medical report of a Doctor's administered Covid-19 test result. The written confirmation must include the name of the person for whom the test relates to, the date of the test and the test result. **We** will not accept photographs of a Lateral Flow test taken at home unless it has been independently verified.

#### What is Not Covered

#### The General Exclusions and the exclusions below apply to Section A – Cancellation or Curtailment Charges

1. The **excess** shown in the **Validation Certificate**.
2. Any claims arising directly or indirectly from:
  - a) Redundancy if **you**, either at the time a holiday was booked, or at the time the policy was purchased, were under notice of redundancy from an employer. Redundancy caused by or resulting from misconduct leading to dismissal or resignation or voluntary redundancy, or where **you** received a warning or notification of redundancy before this insurance was purchased or at the time of booking any **trip**.
  - b) Circumstances known to **you** before this insurance was purchased, or at the time of booking any **trip**, which could reasonably have been expected to lead to cancellation or **curtailment** of the **trip**.
3. Travel tickets paid for using any airline mileage or supermarket reward scheme, for example Air Miles, unless specific evidence of the monetary value of the tickets can be provided.
4. Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme unless specific evidence of the monetary value of the accommodation costs can be provided.
5. Annual maintenance fees/charges for time share holidays or properties.
6. Any claim relating to **you** not wanting to travel or to continue with **your trip**.
7. Any claim resulting from **your** inability to travel due to **your** failure to hold, obtain or produce a valid passport or any required visa in time for **your trip**.
8. Any claim in respect of unused pre-paid **return journey** costs, such as flight, ferry, train or other travel costs when **we** have paid to repatriate **you**.

9. Any claims related directly or indirectly to coronavirus (COVID-19) apart from claims under Specified Events 1, 6 and 8.
10. If you purchase this policy or book a **trip** after receiving a positive coronavirus (COVID-19) test result or while waiting for a coronavirus (COVID-19) test result and your trip starts within 14 days.
11. Claims due to coronavirus (COVID-19) arising from **you** following advice from a government to self-isolate. This includes, but is not limited to, **you** receiving a letter advising self-isolation for **you** or a family member, or **you** are contacted by a track and trace service.
12. The cost of any medical tests.
13. Claims where the same event is paid under Section D1 – Missed Departure.

**You** should also refer to Declaration of Medical Conditions and Health Changes and Exclusions relating to Health and Medical Conditions in Part 1 – Important Information in this policy.

## Section B – MEDICAL, REPATRIATION AND OTHER EXPENSES

### What is Covered

**We** will pay **you** up to the amount shown in the **Validation Certificate** for the following expenses which are necessarily incurred during **your trip** as a result of **you** suffering unforeseen **bodily injury**, illness, disease and/or **compulsory quarantine**:

1. Emergency medical, surgical, hospital, ambulance and nursing fees and charges incurred outside of **your home area**.
2. Emergency dental treatment for the immediate relief of pain (to natural teeth only) up to a limit of €200 incurred outside of **your home area**.
3. Costs of telephone calls:
  - a) to **us** notifying and dealing with the problem for which **you** are able to provide receipts or other evidence to show the cost of the calls and the numbers **you** telephoned
  - b) incurred by **you** when **you** receive calls on **your** mobile phone from **us** for which **you** are able to provide receipts or other evidence to show the cost of the calls.
4. The cost of taxi fares for **your** travel to or from hospital relating to **your** admission, discharge or attendance for outpatient treatment or appointments or for collection of medication prescribed for **you** by the hospital.
5. If **you** die:
  - a) outside **your home area**, either:
    - (i) the additional cost of funeral expenses abroad up to a maximum of €2,500 plus the cost of returning **your** ashes to **your home** or **home country**, or
    - (ii) the costs of returning **your** body to **your home** or **home country** subject to repatriation being authorised by **us**:
      - the cost of funeral director charges for preparing, co-ordinating and transporting **your** body to an airport;
      - the cost of any casket/coffin required for transportation of **your** body;
      - any fees/costs charged by the airline who take **your** body as cargo;
      - transport of **your** body from the airport where the aeroplane lands to a local funeral home where **your** body will pass into the care of the local/desired undertaker.



- b) within **your home area**, the additional cost of returning **your** ashes or body to a chosen funeral director, up to a maximum of €750.
6. Additional transport and/or accommodation expenses incurred, up to the standard of **your** original booking (for example full or half board, bed and breakfast, self-catering or room only), if it is medically necessary for **you** to stay beyond **your** scheduled return date. This includes, with the prior authorisation of **us**, additional transport and/or accommodation expenses for a travelling companion, friend or **close relative** to stay with you or travel to **you** from the **European Union** or escort **you**. Also, additional travel expenses to return **you** to **your home** or a suitable hospital nearby if **you** cannot use the return ticket.
  7. With the prior authorisation of **us**, 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. These expenses will be for the identical class of travel utilised on the **outward journey** unless **we** agree otherwise.

#### Special Conditions Relating to Claims

1. **You** must tell **us** as soon as possible of any **bodily injury**, illness or disease which necessitates **your** admittance to hospital as an in-patient or before any arrangements are made for **your** repatriation.
2. If **you** suffer **bodily injury**, illness or disease **we** reserve the right to move **you** from one hospital to another and/or arrange for **your** repatriation to the **European Union** at any time during the **trip**. **We** will do this, if in the opinion of the **medical practitioner** in attendance, or **us**, **you** can be moved safely and / or travel safely to **your home area** or a suitable hospital nearby to continue treatment.

#### What is Not Covered

#### The General Exclusions and the exclusions below apply to Section B – Medical, Repatriation and Other Expenses

1. The **excess** shown in the **Validation Certificate**.
2. 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 and pregnancy would not constitute an unforeseen event or illness.
3. Any claims arising directly or indirectly for:
  - a) The cost of treatment or surgery, including exploratory tests, which are not related to the **bodily injury** or illness which necessitated **your** admittance into hospital.
  - b) Any expenses which are not medically necessary in the course of treating **your bodily injury**, illness or disease.
  - c) Any form of treatment or surgery which in the opinion of the **medical practitioner** in attendance and **us** can be delayed reasonably until **your** return to **your home area**.
  - d) Expenses incurred in obtaining or replacing medication, which **you** know **you** will need at the time of departure or which will have to be continued outside of **your home area**.
  - e) Additional costs arising from single or private room accommodation.
  - f) Treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre unless agreed by **us**.
  - g) Any costs incurred by **you** to visit another person in hospital.

- h) Any expenses incurred after **you** have returned to **your home area**.
- i) Any expenses incurred in England, Scotland, Wales or Northern Ireland which are for private treatment or funded by, or are recoverable from, the Health Authority in **your home area**.
- 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) Any expenses incurred after the date on which **we** exercise **our** rights under this section to move **you** from one hospital to another and/or arrange for **your** repatriation, but **you** decide not to be moved or repatriated.

**You** should also refer to Declaration of Medical Conditions and Health Changes and Exclusions Relating to Health and Medical Conditions in Part 1 – Important Information in this policy.

## Section B1 – HOSPITAL CONFINEMENT BENEFIT

#### What is Covered

**We** will pay **you** the amount shown in the **Validation Certificate** 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** or on the orders of a **medical practitioner** outside **your home area**, up to the maximum amount shown in the **Validation Certificate** as a result of **bodily injury**, illness or disease **you** sustain.

**We** will pay the amount above in addition to any amount payable under Section B – Medical, repatriation and other expenses. This payment is meant to help **you** to pay for additional expenses such as taxi fares and phone calls incurred by **your** visitors during **your** stay in hospital.

#### Special Conditions Relating to Claims

1. **You** must tell **us** as soon as possible of any **bodily injury**, illness or disease 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

#### The General Exclusions and the exclusions below apply to Section B1 – Hospital Confinement Benefit

1. Any claims arising directly or indirectly from:
  - a) Any additional period of hospitalisation, **compulsory quarantine** or confinement to **your** accommodation:
    - i. relating to treatment or surgery, including exploratory tests, which are not directly related to the **bodily injury**, illness or disease which necessitated **your** admittance into hospital.
    - ii. relating to treatment or services provided by a convalescent or nursing home or any rehabilitation centre.
    - iii. following **your** decision not to be repatriated after the date when, **in our** opinion, it is safe to do so.
  - b) Hospitalisation, **compulsory quarantine** or confinement to **your** accommodation:
    - i. relating to any form of treatment or surgery which in the opinion of the **medical practitioner** in attendance and **us** can be delayed reasonably until **you** return to **your home area**.

- ii. as a result of a tropical disease where **you** have not had the recommended inoculations and/or taken the recommended medication.
- iii. occurring in **your home area** and relating to either private treatment or tests, surgery or other treatment, the costs of which are funded by, or are recoverable from, the Health Authority in **your home area**.

## Section C – PERSONAL ACCIDENT

For the purposes of this Section C the following have the following meanings:

- Item 1 - accidental death
- Item 2 – **loss of limb** or **loss of sight**
- Item 3 – **permanent total disablement**

### What is Covered

**We** will pay one of the benefits shown in the **Validation Certificate** if **you** sustain **bodily injury** which solely and independently of any other cause, results within two years in **your death, loss of limb, loss of sight or permanent total disablement**.

### Please note:

1. Benefit is not payable to **you**:
  - a) Under more than one of items 1, 2 or 3.
  - b) Under item 3. until one year after the date **you** sustain **bodily injury**
2. Item 1 will be paid to **your** estate.

### Special Conditions Relating to Claims

**Our medical practitioner** may examine **you** as often as he/she considers necessary if **you** make a claim.

### What is Not Covered

### The General Exclusions and the exclusions below apply to Section C – Personal Accident

**You** should also refer to Declaration of Medical Conditions and Health Changes and Exclusions Relating to Health and Medical Conditions in Part 1 – Important Information in this policy.

## Section D – TRAVEL DELAY AND ABANDONMENT

### What is Covered

- a) If, due to one of the Specified Events below, the departure of the **public transport** on which **you** are due to travel is delayed at the final departure point from or to the **European Union**, or if any subsequent outbound or return connecting **public transport** is delayed, for at least 12 hours from the scheduled time of departure, then provided **you** still travel **we** will pay the amount shown in the **Validation Certificate**.

### Specified Events

1. An accident involving, or the mechanical breakdown of, or a technical fault occurring in, the vehicle on which **you** are booked to travel.
2. Strike, industrial action or adverse weather conditions.

The amount **we** will pay for a) the first full completed 12 hours of delay, and b) each additional full 12 hours of delay is as shown in the **Validation Certificate**. This benefit is intended to help **you** to pay for telephone calls made, and meals and refreshments purchased, during the delay.

- b) If, due to one of the Specified Events above, **your** pre-booked **public transport** is delayed at the final departure point from the **European Union** for 24 hours, or if such

**public transport** is cancelled, and **you** decide to cancel **your trip** before departure from the **European Union**, then in addition to a payment for travel delay, **we** will pay up to the amount shown in the **Validation Certificate** for any irrecoverable unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay.

- c) If **you** decide to continue to travel following a delay of at least 12 hours due to one of the Specified Events above, **we** will also reimburse **you** up to the amount shown in the **Validation Certificate** for the cost of any pre-booked and pre-paid event(s) which **you** were unable to attend due to the travel delay.

### Please note:

- If the same expenses are covered under Section D1 (Missed Departure), **you** can only claim under one section of this insurance for the same event.
- There is no cover under c) above if the sole purpose of **your trip** is to attend a pre-booked and pre-paid event. Cover can be purchased separately for any such **trip(s)**.

### Special Conditions Relating to Claims

1. **You** must check-in according to the itinerary given to **you**.
2. **You** must get written confirmation, at **your** own expense, from the relevant **public transport provider** 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 **transport provider**.

### What is Not Covered

### The General Exclusions and the exclusions below apply to Section D – Travel Delay and Abandonment

1. The **excess** shown in the **Validation Certificate**. The **excess** only applies to abandonment claims.
2. Any claims arising directly or indirectly from strike or industrial action existing or being publicly announced by the date the **policyholder** purchased this insurance or at the time of booking any **trip**.
3. Any claims arising directly or indirectly from an aircraft or sea vessel being withdrawn from service (temporarily 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.
4. Any claim for reimbursement of the cost of pre-booked and pre-paid event(s) where the sole purpose of **your trip** was to attend such event(s).

## Section D1 – MISSED DEPARTURE

### What is Covered

- a) If, due to one of the Specified Events listed below, **you** fail to arrive at the departure point in time to board the **public transport** on which **you** are booked to travel for the international outbound and return legs of **your trip**, **we** will pay **you** up to the maximum amount shown in the **Validation Certificate** for any necessary additional accommodation (room only) and travel expenses incurred in reaching **your** overseas destination or returning to the **European Union**.

### Specified Events

1. The failure of other **public transport**.
2. An accident involving, or the mechanical breakdown of, or a technical fault occurring in, the vehicle in which **you** are travelling.
3. An accident or breakdown happening ahead of **you** on a motorway or dual carriageway which causes an

unexpected delay to the vehicle in which **you** are travelling.

4. Strike, industrial action or adverse weather conditions.
5. **You** arrive at your departure point at the recommended time to complete pre-boarding checks, but miss **your** booked transportation due to:

- a. failing a health screening prior to boarding; or
- b. waiting for the results of unplanned medical tests administered at **your** departure point.

b) If, as a result of missing the departure of the **public transport** on which **you** are booked to travel for the international outbound and return legs of **your trip** due to one of the Specified Events listed above, **you** then miss any subsequent outbound or return connecting **public transport**, **we** will pay **you** up to the maximum amount shown in the **Validation Certificate** for any necessary additional accommodation (room only) and travel expenses incurred in reaching **your** overseas destination or returning to the **European Union**. There must be a minimum of 2 and a half hours between the scheduled arrival time of the **public transport** on which **you** have travelled and the scheduled departure time of the subsequent outbound or return connecting **public transport**.

c) If, as a result of one of the Specified Events listed above, **you** are unable to attend any pre-booked and pre-paid event(s) due to missing the departure of the **public transport** on which **you** are booked to travel for the international outbound and return legs of **your trip**, and/or any subsequent outbound or return connecting **public transport**, **we** will reimburse **you** up to the maximum amount shown in the **Validation Certificate** for the cost of such pre-booked and pre-paid event(s).

Before you make independent arrangements to continue **your trip** at an additional cost, **you** must discuss this with **your** airline or holiday provider as they may be able to provide assistance to continue **your** journey.

**Please note:**

- If the same expenses are covered under Section D (Travel Delay and Abandonment), **you** can only claim under one section of this insurance for the same event.
- There is no cover under c) above if the sole purpose of **your** trip is to attend a pre-booked and pre-paid event. Cover can be purchased separately for any such **trip(s)**.

**Special Conditions Relating to Claims**

1. **You** must be scheduled to arrive at the final departure point for the international outbound and return legs of **your trip** at least 2 and a half hours before the scheduled departure time of the **public transport** on which **you** are booked to travel.
2. There must be a minimum of 2 and a half hours between the scheduled arrival time of the **public transport** on which **you** have travelled and the scheduled departure time of the subsequent outbound or return connecting **public transport**.
3. If **you** make a claim caused by any delay happening on a motorway or dual carriageway, **you** must get, at **your** own expense, confirmation or proof of the incident happening, and of the location, reason for and duration of the delay.

**What is Not Covered**

**The General Exclusions and the exclusions below both apply to Section D1 – Missed Departure**

1. The excess shown in the **Validation Certificate**.
2. Any claims arising directly or indirectly from strike or industrial action existing or being publicly announced by

the date the **policyholder** purchased this insurance or at the time of booking any **trip**.

3. Any claims arising directly or indirectly from an aircraft or sea vessel being withdrawn from service (temporarily 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.
4. Claims arising directly or indirectly from an accident to or breakdown of the vehicle in which **you** are travelling when a repairer's report or other evidence is not provided.
5. Claims arising directly or indirectly from breakdown of any vehicle owned by **you** which has not been serviced and maintained in accordance with the manufacturer's instructions.
6. Additional expenses where the scheduled **public transport** provider has offered alternative travel arrangements within 24 hours of the original departure time and of a comparable standard and duration.
7. Any claim for reimbursement of the cost of pre-booked and pre-paid event(s) where the sole purpose of **your trip** was to attend such event(s).
8. Any claims related directly or indirectly to coronavirus (COVID-19) apart from Specified Event 5.
9. If **you** purchase this policy or book a **trip** after receiving a positive coronavirus (COVID-19) test result or while waiting for a coronavirus (COVID-19) test result and **your trip** starts within 14 days.
10. The cost of any medical tests.
11. Claims where the same event is paid under Section A – Cancellation or Curtailment charges.

**Section E - BAGGAGE**

Please note: the following are covered:

Luggage, clothing, personal belongings, **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**.

The following are not covered:

unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, motor accessories, documents of any kind, bonds, securities, perishable goods (such as food), bicycles, **ski equipment**, **golf equipment**, **business equipment** and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).

**What is Covered**

1. **We** will pay **you** up to the amount shown in the **Validation Certificate** 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 (loss of value).

**Depreciation Table**

\*Winters sports Equipment are subject to payment of the additional premium for the upgrade.

In the event that **you** have paid the additional premium to increase your valuables and electronic equipment limit, then the item listed will be considered under electronic equipment in terms of depreciation.

Age of Property	Clothing and Personal effects	Jewellery	Electronic Equipment	Cosmetics, toiletries & perfumes	*Winter Sports
0-1 month	0	0	0	50%	5%
1-6 months	5%	0	5%	50%	10%
7-12 months	10%	0	10%	50%	15%

1-2 years	15%	5%	20%	60%	35%
2-3 years	20%	10%	30%	70%	55%
3-4 years	25%	15%	40%	80%	70%
4-5 years	30%	20%	50%	90%	80%
6 years +	40%	25%	60%	65%	100%

The maximum **we** will pay **you** for the following items is:

- a) the amount shown in the **Validation Certificate** for any one article, pair or set of articles
  - b) the amount shown in the **Validation Certificate** in total for all **valuables**
  - c) the amount shown in the **Validation Certificate** in total for all spectacles and sunglasses.
2. **We** will also pay **you** up to the amount shown in the **Validation Certificate** for the emergency replacement of clothing, medication and toiletries if **your baggage** is temporarily lost in transit during the **outward journey** and not returned to **you** within 12 hours, as long as **we** receive written confirmation from the **public transport** provider, confirming the number of hours the **baggage** was delayed.

If the loss is permanent, **we** will deduct the amount paid from the final amount to be paid under this section.

#### 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 practicable after that and get (at **your** own expense) 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 **public transport** provider, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
3. If **baggage** is lost, stolen or damaged whilst in the care of an airline **you** must:
  - a) get a Property Irregularity Report from the airline.
  - b) give written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) keep all travel tickets and tags for submission if **you** are going to make a claim under this insurance.
4. **You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to provide evidence to support a claim.

#### What is Not Covered

##### The General Exclusions and the exclusions below apply to Section E – Baggage

1. The **excess** shown in the **Validation Certificate** (except claims under subsection 2 of What is Covered above, where no **excess** applies).
2. Loss, theft of or damage to **valuables** left **unattended** at any time unless left in the custody of a **public transport** provider, deposited in a hotel safe or safety deposit box, or left in **your** locked accommodation.
3. Loss, theft of or damage to **baggage** contained in an **unattended** vehicle unless:
  - i. it is locked out of sight in a **secure baggage area** and
  - ii. forcible and violent means have been used by an unauthorised person to gain entry into the vehicle and evidence of such entry is available.
4. Loss or damage due to delay, confiscation or detention by customs or any 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, motor accessories, documents of any kind, bonds, securities, perishable goods (such as food), bicycles, **ski equipment, golf equipment, business 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, or breakage of 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 an 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 of or damage to **business equipment, business goods, samples, tools of trade** and other items used in connection with **your** business, trade, profession or occupation.
9. Loss or damage caused by wear and tear, depreciation (loss in value), atmospheric or climatic conditions, moth, **vermin**, any process of cleaning repairing or restoring, or mechanical or electrical breakdown.

## Section F – PERSONAL MONEY, PASSPORT AND DOCUMENTS

#### What is Covered

1. **We** will pay **you** up to the amounts shown below for the accidental loss of, theft of or damage to **personal money** and documents (including the unused portion of passports, visas and driving licences). **We** will also cover foreign currency during the 72 hours immediately before **your** departure on the **outward journey**.

The maximum **we** will pay for the following items is:

- a) the amount shown in the **Validation Certificate** for bank notes, currency notes and coins
  - b) the amount shown in the **Validation Certificate** for all other **personal money** and documents (including the cost of the emergency replacement or temporary passport or visa).
2. **We** will pay up to the amount shown in the **Validation Certificate** for additional travel and accommodation expenses necessarily incurred outside **your home area** to obtain a replacement of **your** passport or visa which has been lost or stolen outside **your home area**.

#### 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 practicable after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of all **personal money, passports or documents**.
2. If **personal money, passports or documents** are lost, stolen or damaged while in the care of a hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation. Keep all travel tickets and tags for submission if a claim is to be made under this insurance.
3. If documents are lost, stolen or damaged while in the care of a **public transport** provider or authority, **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
4. If documents are lost, stolen or damaged whilst in the care of an airline **you** must:
  - a) give formal written notice of the claim to the airline within the time limit set out in their conditions of carriage (please keep a copy).

- b) keep all travel tickets and tags for submission to **our** claims handlers if **you** are going to make a claim under this insurance.
5. **You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to provide evidence to support **your** claim.

### What is Not Covered

#### The General Exclusions and exclusions below apply to Section F - Personal Money, Passport and Documents

1. The **excess** shown in the **Validation Certificate**.
2. Loss, theft or damage to **personal money** or **your** passport or visa if left **unattended** at any time unless left in the custody of a **public transport** provider, deposited in a hotel safe or safety deposit box, or left in **your** locked accommodation.
3. Loss, theft or damage to travellers' cheques if **you** have not complied with the issuer's conditions or where the issuer provide a replacement service.
4. Loss or damage due to delay, confiscation or detention by customs or any other authority.  
Loss or damage due to depreciation (loss in value), variations in exchange rates or shortages due error or omission.

## Section G – EXTENDED KENNEL AND/OR CATTERY FEES

### What is Covered

**We** will pay **you** up to the amount shown in the **Validation Certificate** (€150 for **trips** in the **European Union**) for any additional kennel/cattery fees incurred, if **your** domestic dog(s)/cat(s) are in a kennel/cattery during **your trip** and **your** return to **your home** has been delayed due to **your** **bodily injury**, illness or disease.

### What is Not Covered

#### The General Exclusions and the exclusions below apply to Section G – Extended Kennel and/or Cattery Fees

Claims arising from **your** **bodily injury**, illness or disease that is not covered under Section B – Medical, repatriation and other expenses.

## Section H – PERSONAL LIABILITY

### What is Covered

**We** will pay **you** up to the amount shown in the **Validation Certificate** (including 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 for accidental:

1. Accidental **bodily injury**, death, illness or disease to any person who is not in **your** employment, who is not a **close relative**, or who is residing with **you** but not paying for their accommodation.
2. Loss of or damage to property that does not belong to and is neither in the charge of nor under the control of **yourself**, a **close relative** and/or anyone in **your** employment. Cover is provided for any temporary holiday accommodation occupied (but not owned) by **you**.

### Special Conditions Relating to Claims

1. **You** must give **us** written notice of any incident which may result in a claim as soon as possible.
2. **You** must send **us** every writ, summons, letter of claim or other document 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** permission in writing.
4. **We** will be entitled to take over and carry out in **your** name the defence of any claims for compensation or damages or otherwise involving any third party. **We** will have full discretion in the conduct of any negotiation or proceedings or in the settlement of any claim and **you** must give **us** all information and assistance which **we** may require.
5. If **you** die, **your** legal representative(s) will have the protection of this cover as long as they comply with the terms and conditions outlined in this policy.

### What is Not Covered

#### The General Exclusions and the exclusions below apply to Section H – Personal Liability

1. The excess shown in the Validation Certificate. Under this section, the excess is €250.
2. Compensation or legal costs arising directly or indirectly from:
  - a) Liability which **you** were required to assume under the terms of any agreement or contract (such as a hire agreement).
  - b) Pursuit of any business, trade, profession or occupation or the supply of goods or services including any voluntary or unpaid work including babysitting.
  - c) Ownership, possession or use of animals, aircraft, firearms or weapons of any kind.
  - d) Ownership, possession or use of any vehicle, watercraft or leisure equipment that is motorised or mechanically or jet propelled.
  - e) The transmission of any contagious or infectious disease or virus.

## Section I – LEGAL EXPENSES AND ASSISTANCE

### What is Covered

**We** will pay up to the amount shown in the **Validation Certificate** for legal costs to pursue a civil action for compensation, against someone else who causes **your** **bodily injury**, illness or death.

Where there are two or more persons insured by this insurance, then the maximum amount **we** will pay for all such claims shall not exceed the amount shown in the **Validation Certificate**.

### Special Conditions Relating to Claims

1. **We** shall have complete control over the legal case through agents **we** nominate, by appointing agents of **our** choice on **your** behalf with the expertise to pursue **your** claim.
2. **You** must follow **our** agent's advice and provide any information and assistance required within the requested timescale.
3. **You** must advise **us** of any offers of settlement made by the negligent third party and **you** must not accept any such offer without **our** permission.
4. **We** may include a claim for **our** legal costs and other related expenses.
5. **We** may, at **our** own expense, take proceedings in **your** name to recover compensation from any third party for any legal costs incurred under this insurance. **You** must give **us** any assistance **we** require from **you** and any amount recovered shall belong to **us**.

## What is Not Covered

### The General Exclusions and the exclusions below apply to Section I – Legal Expenses and Assistance

We shall not be liable for:

1. The **excess** shown in the **Validation Certificate**.
2. Any claim where in **our** opinion there is insufficient prospect of success in obtaining compensation. 'Insufficient prospect of success' means **you** do not have a 50% chance of winning the case as assessed by a lawyer.
3. Legal costs and expenses incurred in pursuit of any claim against a travel agent, tour operator, **public transport** provider, **us** (including any agents **we** use), or any service supplier detailed on the **Validation Certificate**, someone **you** were travelling with, a person related to **you**, or another person insured under this policy.
4. Legal costs and expenses incurred prior to **our** written acceptance of the case.
5. Any claim where the legal costs and expenses are likely to be greater than the anticipated amount of compensation.
6. Any claim where legal costs and expenses are variable depending on the outcome of the claim.
7. Legal costs and expenses incurred if an action is brought in more than one country.
8. Any claim where in **our** opinion the estimated amount of compensation payment is less than €1,000 for each person insured under this policy.
9. Travel, accommodation and incidental costs incurred to pursue a civil action for compensation.
10. The costs of any appeal or judicial review.
11. Claims by **you** other than in **your** private capacity.

## **Section J – MUGGING BENEFIT**

### What is Covered

We will pay **you** the amount shown in the **Validation Certificate** for each complete 24-hour period which **you** spend as an in-patient in hospital outside **your home area** as a direct result of injuries sustained whilst being mugged.

### Special Conditions Relating to Claims

1. **You** must tell **us** as soon as practicable of any **bodily injury** caused by mugging which necessitates **your** admittance to hospital as an in-patient.
2. **You** must report to the local police in the country where the mugging occurred within 24 hours of the incident, or as soon as practicable after that and get (at **your** own expense) a written report of the circumstances of the mugging.

## **Section K – HIJACK COVER**

### What is Covered

If **you** are prevented from reaching **your** scheduled destination as a result of hijack of the aircraft or ship in which **you** are travelling, **we** will pay **you** the amount shown in the **Validation Certificate** for each full 24 hours of delay. This benefit is only payable if no claim is made under Section A (Cancellation or curtailment charges) or Section D (Travel Delay and Abandonment).

### Special Conditions Relating to Claims

1. **You** must not have engaged in any political or other activity which would prejudice this insurance.
2. **You** have no family or business connections that could be expected to prejudice this insurance or increase **our** risk.
3. All **your** visas and documents are in order.
4. **You** must report the matter to the police as soon as practicable upon **your** release and provide **us** within 30

days of returning from the **trip** with a police report confirming that **you** were unlawfully detained and the dates of such detention.

## What is Not Covered

### The General Exclusion and the exclusions below apply to Section K – Hijack Cover

1. Any claim relating to payment of ransom monies.
2. Any claim arising out of any act(s) by **you** which would be considered an offence by a court of the **European Union** if they had been committed in the **European Union**.
3. Any claim where **your** detention, internment, hijack or kidnap has not been reported to or investigated by the police or local authority.

## **Section L – WITHDRAWAL OF SERVICES**

### What is Covered

We will pay **you** the amount stated in the **Validation Certificate** if **you** suffer **withdrawal of services** continuously for at least 24 hours during **your trip**.

### What is Not Covered

### The General Exclusions and the exclusions below apply to Section L – Withdrawal of Services

We will not pay any claims:

1. If **you** are aware, or made aware, of **withdrawal of services** at the time of booking **your trip**, whether the **withdrawal of services** is due to or arising from a strike or industrial action or for any other reason.
2. For services which were not part of **your** pre-paid package deal unless they are accompanied by written confirmation from the tour operator or hotel to support **your** claim.

## **Section M – CATASTROPHE**

### What is Covered

We will pay **you** up to the limit shown in the **Validation Certificate** should **you** be forced to move from **your** pre-booked and pre-paid accommodation outside of **your home area** as a result of fire, lightning, explosion, earthquake, storm, tempest, hurricane, flood, medical epidemic or local Government directive occurring while **you** are abroad and which is confirmed in writing by a local or national authority, for the additional irrecoverable travel or accommodation costs necessarily incurred to continue with **your** pre-paid **trip** or, if the **trip** cannot be continued, for **your** return to **your home area**.

### What is Not Covered

### The General Exclusions and the exclusions below apply to Section M – Catastrophe

No compensation will be payable for:

1. Any expense following **your** disinclination to travel or to continue with **your trip** when official directives from the local or national authority state it is acceptable to do so.
2. Any cost or expense payable by or recoverable from the tour operator, airline, hotel or other provider of services. Any cost or expense resulting from circumstances existing prior to **your** arrival at **your** pre-paid and pre-booked accommodation.

## Section N – WINTER SPORTS EXTENSION

This cover is included only if **you** are under 71 years of age and it is shown on the **Validation Certificate**. Below are the details of **winter sports** cover provided by this extension for a period of no more than 17 days in total in each **period of insurance** under annual multi **trip** policies and for the period of the **trip** under single **trip** policies.

**This extension does not include cover for Winter Sports in the United States of America.**

### What is covered

- You** will be covered under all sections of this extension for the **winter sports** as shown in Appendix B.
- All skiing and snowboarding activities are covered provided **you** remain within the boundaries of a recognised resort area designed for public use and are not skiing or snowboarding in areas marked out of bounds or hazardous by the Piste authorities.
- All **winter sports** shown in Appendix B are covered under this extension but Section C (Personal Accident Insurance) and Section H (Personal Liability Insurance) of this travel insurance policy will not apply to the activities where either or both Section C and Section H are shown in Appendix B as being excluded from cover.
- We** will not cover any claims under any other section of this travel insurance resulting from any **bodily injury** or damage to property that may arise from **your** use of sledges, skidoos, tracked or powered vehicles of any kind.
- No cover is provided for any activities that involve any form of racing, jumping or competition.
- You** are not covered for **ski equipment** under Section E (Baggage) of this travel insurance. Please see below for details of **ski equipment** cover.
- Ski lift passes are included in the cover provided by Section F (Personal Money, Passport and Documents) of this travel insurance.

Under the **winter sports** extension cover, is provided under the following Sections: - Section N1 (Ski Equipment), Section N2 (Ski Equipment Hire), Section N3 (Ski Pack), Section N4 (Piste Closure) and Section N5 (Avalanche or Landslide Cover).

### What is Not Covered

#### The General Exclusions and the exclusion below applies to Section N – Winter Sports Extension.

- There is no cover for 66 to 70 year olds outside of Europe.

## Section N1 – SKI EQUIPMENT

### This section only applies if winter sports extension cover is shown on the Validation Certificate.

#### What is Covered

- We** will pay **you** up to the amount shown in the **Validation Certificate** for the accidental loss of, theft of or damage to **your** own **ski equipment**, as long as the **ski equipment** is not over 5 years old. The amount payable in relation to **your** own **ski equipment** will be the value at today's prices less a deduction for wear tear and depreciation (loss of value - calculated from the table below).

\*Winters sports Equipment are subject to payment of the additional premium for the upgrade.

In the event that **you** have paid the additional premium to increase your valuables and equipment limit, then the item

listed will be considered under ski equipment in terms of depreciation.

Age of Property	Ski Equipment
0-1 month	5%
1-6 months	10%
7-12 months	15%
1-2 years	35%
2-3 years	55%
3-4 years	70%
4-5 years	80%
6 years +	100%

The maximum **we** will pay for any one article, pair or set of articles is the amount payable calculated from the table above or the amount shown in the **Validation Certificate** whichever is the lesser amount.

- We** will pay **you** up to the amount shown in the **Validation Certificate** for the accidental loss of, theft of or damage to **your** hired **ski equipment**. The amount payable in relation **your** hired **ski equipment** will be the retail replacement cost of identical **ski equipment** or **ski equipment** of an equivalent specification.

### 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 practicable after that and get a written report (at **your** own expense) of the loss, theft or attempted theft of all **ski equipment**.
- If **ski equipment** is lost, stolen or damaged while in the care of a **public transport** provider, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
- If **ski equipment** is lost, stolen or damaged whilst in the care of an airline **you** must:
  - get a Property Irregularity Report from the airline;
  - give formal written notice of the claim to the airline, within the time limit set out in their conditions of carriage (please keep a copy);
  - keep all travel tickets and tags for submission if **you** are going to make a claim under this insurance.
- You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to provide evidence to support **your** claim.

### What is Not Covered

#### The General Exclusions and the exclusions below apply to Section N1 – Ski Equipment.

- The **excess** shown in the **Validation Certificate**.
- Loss, theft of or damage to **ski equipment** contained in or stolen from an **unattended** vehicle unless:
  - it is locked out of sight in a **secure baggage area** and;
  - forcible and violent means have been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.
- Loss or damage due to delay, confiscation or detention by customs or any other authority.
- Loss damage caused by wear and tear, depreciation (loss in value), atmospheric or climatic conditions, moth, **vermin**, any process of cleaning repairing or restoring, mechanical or electrical breakdown

## Section N2 – SKI EQUIPMENT HIRE

This section only applies if winter sports extension cover is shown on the Validation Certificate.

### What is Covered

We will pay **you** up to the amount shown in the **Validation Certificate** for the 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 24 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 practicable after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of **your own ski equipment**.
2. If **ski equipment** is lost, stolen or damaged while in the care of a **public transport** provider, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
3. If **ski equipment** is lost, stolen or damaged whilst in the care of an airline **you** must:
  - a) get a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit set out in their conditions of carriage (please keep a copy).
  - c) keep all travel tickets and tags for submission if **you** are going to make a claim under this insurance.
4. **You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to provide evidence to support **your** claim.

### What is Not Covered

The General Exclusions and the exclusions below both apply to Section N2 – Ski Equipment Hire

1. Loss, theft of or damage to **ski equipment** contained in an **unattended** vehicle unless:
  - a) it is locked out of sight in a **secure baggage area** and
  - b) forcible and violent means have been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.
2. Loss or damage due to delay, confiscation or detention by customs or any other authority.

Loss or damage caused by wear and tear, depreciation (loss of value), atmospheric or climatic conditions, moth, **vermin**, any process of cleaning repairing or restoring, mechanical or electrical breakdown.

## Section N3 – SKI PACK

This section only applies if winter sports extension cover is shown on the Validation Certificate.

### What is Covered

We will pay **you**:

1. Up to the amount shown in the **Validation Certificate** for the unused portion of **your** ski pack (ski school fees, lift passes and hired **ski equipment**) following **your bodily injury**, illness or disease.
2. Up to the amount shown in the **Validation Certificate** for the unused portion of **your** lift pass if **you** lose it.

### Special Conditions Relating to Claims

1. **You** must provide (at **your** own expense) written confirmation to **us** from a **medical practitioner** that the

**bodily injury**, illness or disease prevented **you** from using **your** ski pack.

### What is Not Covered

The General Exclusions apply to Section O3 – Ski Pack.

## Section N4 – PISTE CLOSURE

This section only applies if winter sports extension cover is shown on the Validation Certificate.

### What is Covered

We will pay **you**, up to the amount shown in the **Validation Certificate**, for transport costs necessarily incurred by **you** to travel to and from an alternative site or ski area if either lack of or excess of snow, or an avalanche results in the skiing facilities (excluding cross-country skiing) in **your** ski area or resort being fully closed and it is not possible to ski. The cover only applies:

1. To the ski area containing the resort or town which **you** have pre-booked for a period more than 12 hours and for as long as these conditions continue at the ski area or resort, but not more than the pre-booked period of **your trip** and
2. To **trips** taken outside **Your Home Area** during the published ski season for **your** ski area containing the resort or town where **you** are staying.

If no alternative sites are available, **we** will pay **you** compensation of the amount shown in the **Validation Certificate**.

### Special Conditions Relating to Claims

**You** must get (at **your** own expense) written confirmation from the relevant authority, ski lift operator or **your** tour operator's representative of the number of days skiing facilities were closed in **your** resort and the reason for the closure.

### What is Not Covered

The General Exclusions and the exclusions below apply to Section N4 – Piste Closure

Any circumstances where transport costs, compensation or alternative skiing facilities are provided to **you**.

## Section N5 – AVALANCHE OR LANDSLIDE COVER

This section only applies if winter sports extension cover is shown on the Validation Certificate.

### What is Covered

We will pay **you** up to the amount shown in the **Validation Certificate** for additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** booked resort or returning **home** if **you** are delayed for more than 12 hours by avalanche or landslide. The cover only applies to **trips** taken outside **Your Home Area** during the published ski season for **your** resort.

### Special Conditions Relating to Claims

**You** must get (at **your** own expense) written confirmation from the relevant authority or **your** tour operator's representative confirming the event.

### What is Not Covered

The General Exclusions and the exclusions below apply to Section N5 – Avalanche or Landslide Cover.



## Section S1 - END SUPPLIER FAILURE INSURANCE

Under this section only:

**We/ us/ our** means C&C Insurance Company PCC Limited per C&C Financial Lines Cell.

**Financial Failure** means the **End Supplier** becoming Insolvent or has an administrator appointed and being unable to provide agreed services.

**End Supplier** means the company that owns and operates the services listed in point 1 above.

### What is Covered

The Insurer will pay up to €3,000 in total for each Insured Person named on the Invoice for:

1. Irrecoverable sums paid prior to **Financial Failure** of the scheduled airline, hotel, train operator including Eurostar, car ferries; villas abroad & cottages in the EU or EEA; coach operator, car or camper hire company, caravan sites, campsites, mobile home, safaris; excursions; Eurotunnel; theme parks or attractions all known as the **End Supplier** of the travel arrangements not forming part of an inclusive holiday prior to departure; or
2. In the event of **Financial Failure** after departure
  - a. additional pro rata costs incurred by the Insured Person(s) in replacing that part of the travel arrangements to a similar standard of transportation as enjoyed prior to the curtailment of the travel arrangements; or
  - a. if curtailment of the holiday is unavoidable - the cost of return transportation to the **European Union (EU)** or the **European Economic Area (EEA)** (whichever is your home area) to a similar standard of transportation as enjoyed prior to the curtailment of the travel arrangements.

### What is Not Covered

The Insurer will not pay for:

1. Travel or Accommodation not booked within the **European Union (EU)** or the **European Economic Area (EEA)** (whichever is your home area) prior to departure.
2. Any **End Supplier** which is, or which any prospect of **Financial Failure** is known by the Insured or widely known publicly at the date of the Insured's application under this policy
3. Any loss or part of a loss which at the time of the happening of the loss is insured or guaranteed by any other existing Policy, Policies, bond or is capable of recovery from under Section 75 of the Consumer Credit Act or from any bank or card issuer or any other legal means
4. The **Financial Failure** of any travel agent, tour organiser, booking agent or consolidator with whom the Insured has booked travel or accommodation
5. Any losses which are not directly associated with the incident that caused the Insured to claim. For example, loss due to being unable to reach your pre-booked hotel following the financial failure of an airline.

## END SUPPLIER FAILURE INSURANCE CLAIMS PROCEDURE

### Section S1 End Supplier Failure Insurance ONLY

C&C Insurance Company PCC Ltd, re C&C Financial Lines Cell claims: Any occurrence which may give rise to a claim should be advised as soon as reasonably practicable to the following by quoting your Policy Number on your Validation Certificate, Travel Insurance Policy name.

Telephone: +44 03333055397  
Email: [claims@cnc.sc](mailto:claims@cnc.sc)  
Website: [www.cnc.sc](http://www.cnc.sc)

## HOW TO MAKE A COMPLAINT REGARDING Section S1 End Supplier Failure Insurance ONLY

If you have a complaint, we really want to hear from **you**. **We** welcome your comments as they give **us** the opportunity to put things right and improve **our** service to **you**.

Please telephone us on: +44 03333055397

Or write to:

Compliance Officer

C&C Insurance Company Ltd, re C&C Financial Lines Cell.

Eden Plaza F20, Eden Island, Mahe, Seychelles.

Email: [complaints@cnc.sc](mailto:complaints@cnc.sc)

Please make sure that **you** quote the Certificate number which can be found on your **Validation Certificate** and/or claim number.

C&C Insurance Company PCC Ltd.'s **re C&C Financial Lines Cell** Compliance Officer will acknowledge the complaint. **We** will confirm to **You** in writing that **we** have received **Your** complaint within five **Working Days** and **we** will advise **You** of the Person who will be dealing with the complaint, and when **You** can expect to receive a detailed response. The Person dealing with the complaint will be a senior member of staff who was not directly involved in the matter which is the subject of the complaint. **They** will have the authority and experience to adequately address the complaint and explain the results of the investigation.

**Your** complaint will be thoroughly investigated, and **we** will respond to it as soon as possible. Within eight weeks **we** will provide a final response to **Your** complaint in writing or, if it is not possible to respond within that time, **we** will inform **You** and explain why **we** need more time to do so and when **You** can expect to receive **our** final response.

If **You** are dissatisfied with the response **You** receive in relation to **Your** complaint or **Your** complaint is not resolved within 8 Weeks, **You** have the right to refer **Your** complaint to the Financial Services Authority Seychelles.

Financial Services Authority, Seychelles.  
Bois De Rose Avenue, P.O.Box 991, Victoria Mahè, Republic of Seychelles  
Telephone: +248 4380800  
Email: [enquiries@fsaseychelles.sc](mailto:enquiries@fsaseychelles.sc)  
Website: [www.fsaseychelles.sc](http://www.fsaseychelles.sc)

### Data Protection

If **You** have any concerns about how **Your Personal** data is being collected and processed, or wish to exercise any of **Your** rights detailed in our Privacy Notice, please contact C & C Insurance Company Data Protection Officer at: -

Email: [complaints@cnc.sc](mailto:complaints@cnc.sc)

Phone: +248 4303798

C&C Insurance Company PCC Ltd **re C&C Financial Lines Cell** are the data controller (as defined by the UK Data Protection Act 2018 and all applicable laws which replace or amend it, including the General Data Protection Regulation) in respect of this contract of insurance. C&C Insurance Company PCC Ltd **re C&C Financial Lines Cell** may obtain, collect and process **Your Personal** information for the purposes of entering into and to perform our insurance contract with **You**.

For full details of what data C&C Insurance Company PCC Ltd **re C&C Financial Lines Cell** collect about **You**, how C&C Insurance Company PCC Ltd **re C&C Financial Lines Cell** Use it, who they share it with, how long they keep it and **Your** rights relating to **Your Personal** data, please refer to

C&C Insurance Company PCC Ltd Privacy Notice which is available on the following Website at:  
Website: [www.cnc.sc](http://www.cnc.sc)

If **You** do not have access to the Internet, please write to the C&C Insurance Company PCC Ltd re **C&C Financial Lines Cell** Data Protection Officer (at the address shown below) with **Your** name and address and a copy will be sent to **You** in the post.

In summary, C&C Insurance Company PCC Ltd re **C&C Financial Lines Cell** may, as part of agreement with **You** under this contract, collect Personal information about **You** including: -

- Name, address, contact details, date of birth and cover required.
- Financial information such as previous credit history, bank details.
- Details of any previous insurance claims.

C&C Insurance Company PCC Ltd re **C&C Financial Lines Cell** may also collect sensitive Personal information about **You**, and any additional people who **You** wish to be **Insured** under the **Policy**, including detailed medical records about the illness and treatment rendered for curing the same to validate the claim.

C&C Insurance Company PCC Ltd re **C&C Financial Lines Cell** collect and process **Your** Personal information for the purpose of insurance and claims administration.

Telephone calls may be monitored and recorded, and the recordings used for fraud prevention and detection, training and quality control purposes.

**Your** Personal information may be shared with third parties which supply services to **us** or which process information on **our** behalf (for example, **Premium** collection and claims validation, or for communication purposes related to **Your** cover). C&C Insurance Company PCC Ltd re C&C Financial Lines Cell will ensure that they keep **Your** information secure and do not use it for purposes other than those that they have specified in their Privacy Notice.

Some third parties that process **Your** data on our behalf may do so outside of the European Economic Area ("EEA"). Where such transfers occur, **we** ensure that they do not occur without our prior written authority and that an appropriate transfer agreement is put in place to protect **Your** Personal information to an equivalent standard to that found in the EEA. C&C International will keep **Your** Personal information only for as long as they believe is necessary to fulfil the purposes for which the Personal information was collected (including for the purpose of meeting any legal obligations).

C&C Insurance Company PCC Ltd re **C&C Financial Lines Cell** will share **Your** information if we are required to by law. C&C Insurance Company PCC Ltd re **C&C Financial Lines Cell** may share **Your** information with enforcement authorities if they ask **us** to, or with a third party in the context of actual or threatened legal proceedings, provided **we** can do so without breaching data protection laws.

### Sanctions

We will not provide any benefit under this insurance to the extent of providing cover, payment of any claim or the provision of any benefit where doing so would breach any sanction, prohibition or restriction imposed by law or regulation.

### Non-Assignment

No title, right or interest under this policy may be assigned, transferred, conveyed or otherwise disposed of without the consent in writing of the Insurer hereon. Any attempt to

assign rights or interests without the **Insurer's** written consent is null and void.

## Section S2 – TRAVEL DISRUPTION (FORCE MAJEURE)

### What is Covered

**We** will pay, in relation to each person insured under this policy and named on the relevant invoice and/or airline ticket, up to the amount shown on the **Validation Certificate** for:

#### A. Cancellation – Pre-Departure

Irrecoverable unused travel and accommodation costs paid by **you** in advance before the departure date of **your trip** if **you** have to cancel **your trip** because **your outward journey** is delayed by more than 24 hours as a result of **force majeure**.

#### Special Conditions Relating to Claims

1. In case of an incident **you** must in the first instance contact **your** airline or travel provider/arranger and follow their instructions.
2. **We** will only pay costs which are not refundable from any other source.
3. **You** must provide **our** claims handlers with all receipts, bills, invoices or tickets, or other evidence dependent on **your** circumstances, which they may request from **you** in relation to a claim under this insurance.
4. If requested, **you** must provide written confirmation from a relevant authority or transport supplier of the reason and length of the delay or cancellation.

#### B. Additional expenses – Disruption Whilst Trip in Progress

Reasonable (meaning of a standard similar in class and rating to that originally paid for by **you**) additional accommodation and travel expenses if **your return journey** is delayed by more than 24 hours due to **force majeure**.

The maximum **we** will pay per person insured under this policy for accommodation expenses on a bed and breakfast basis is €100 per day for up to 3 days and an allowance for food and drink of up to €20 per day. There is no cover for alcoholic drinks or the cost of telephone calls or other miscellaneous charges incurred.

#### Special Conditions Relating to Claims

1. **We** will only pay costs which are not refundable from any other source.
2. **You** must provide **our** claims handlers with all receipts, bills, invoices or tickets, or other evidence dependent on **your** circumstances, which they may request from **you** in relation to a claim under this insurance.
3. If requested, **you** must provide written confirmation from a relevant authority or transport supplier of the reason and length of the delay.

### What is Not Covered

#### The General Exclusions and the exclusions below apply to Section S2 – Travel Disruption (Force Majeure)

#### These exclusions apply to cover for both A. Cancellation – Pre-Departure and B. Additional Expenses – Disruption Whilst Trip in Progress.

1. Any **excess** shown in the **Validation Certificate**.
2. Any expense following **your** disinclination to travel or to continue with **your trip**.
3. Any costs incurred by **you** for which **you** receive or are expected to receive compensation. If **you** expect to receive compensation but are unsuccessful, **we** will consider **your**

specific circumstances but do not guarantee that any payment will be made under this policy.

4. Any loss sustained by **you** if this insurance was purchased after the date the **force majeure** happened or commenced.

## PART 5 – CANCELLATION OF THE POLICY

### The policyholder's right to cancel this policy:

The **policyholder** has a right to cancel up to 14 days from the date he/she receives the policy document at the start of the insurance provided that no person insured under the policy has travelled, (or in the case of Single Trip policies, cover has not already commenced), and no claim under this policy has been made.

Please tell **us** as soon as **you** are aware that **your** policy does not meet **your** needs. If **you** cancel within 14 days of the receipt of **your** documentation. If **you** have not started a **trip**, made a claim, or intend to make a claim, **we** will give **you** a full refund. (If **you** have selected the "already travelled" option when **you** purchase this policy, then the 14 day cooling off period does not apply). If **you** cancel outside of the 14 day cooling-off period, no premium will be refunded.

However, discretion may be exercised in exceptional circumstances to provide a refund for unused cover, those exceptional circumstances being bereavement or an unexpected change to **your** policy resulting in **us** being unable to continue to cover **you**. Any refund is subject to an administration fee. The unused premium will be calculated on a sliding scale basis as follows:

Refund scale outside the 14-day cooling off period for exceptional circumstances only

1. **Single Trip Policies Before Travel:** 75% refund. No refund can be given once a **trip** has started.
2. **Annual Multi Trip Policies:**

Number of months policy was live before cancellation	% Refund	Number of months policy was live before cancellation	% Refund
1 month	75%	2 months	60%
3 months	50%	4 months	40%
5 months	30%	6 months	25%
7 months	20%	8 months	15%
9 months	10%	10 months	5%
11 months	0%	12 months	0%

**Administration fee** - if **you** amend or cancel **your** policy during **your** policy period, **we** will be unable to refund any amounts of €5 or less. Similarly, if **you** make any changes to **your** policy during the policy period, **we** will only request any charges from **you** if the amount is over €5.

Once **your** policy has been cancelled **your** cover will end and **you** will not be able to make a claim.

Should the **policyholder** decide to exercise his/her cancellation right, he/she will be entitled to a full refund of premium provided that no person insured under the policy has travelled, (or in the case of Single Trip policies, cover has not already commenced), and no claim under this policy has been made or is intended to be made.

To cancel the policy, the **policyholder** should contact **Globelink International** on [globelink@globelink.eu](mailto:globelink@globelink.eu) or at, Rafael Sandi, 1<sup>st</sup> floor, 6052, Larnaca, Cyprus. Tel: +357 240 30337.

### Our right to cancel this policy:

**We** will not cancel any policy during its lifetime as long as:

- the **policyholder** pays the premium;
- neither the **policyholder** nor any other person insured under the policy commits fraud.

**We** will not cancel an annual multi trip policy during the **period of insurance** unless one or more of the following happens:

- the **policyholder**, or any other person insured under this policy, commit fraud; or
- the risk **we** agreed to insure changes significantly (for example because activities **you** intend to be involved in during any **trip** change, or because **you** develop new **medical conditions** after the insurance starts). If **we** cancel the policy for this reason, the **policyholder** will be given at least 60 days' notice in writing and will be entitled to a refund of premium which will be calculated according to the number of days remaining in the **period of insurance**.

## PART 6 – RENEWAL OF AN ANNUAL MULTI TRIP POLICY

**IMPORTANT:** Please note that the policy does not automatically renew from year to year. **Globelink International** will contact the **policyholder** approximately one month before the renewal date and the **policyholder** will be advised of any changes to the premium or the policy terms and conditions. The **policyholder** will also be told if **we** are unable to renew the policy. If the **policyholder** wishes to renew, he/she will need to confirm his/her requirements and purchase a new policy using the **Existing Customer link** on the **Globelink International** homepage at [www.globelink.eu](http://www.globelink.eu).

If the **policyholder's** personal details change before the policy renews, he/she should tell **us** by contacting **Globelink International** on [globelink@globelink.eu](mailto:globelink@globelink.eu) or calling: +357 240 30337.

When the **policyholder** receives his/her renewal notice, he/she must provide **us** with details of any changes to the health of any persons insured under this policy, to persons to be covered or change in optional extensions required since the policy started or since the policy last renewed if the policy has been held for more than one year.

Changes to the health of any person insured under this policy which **we** need to know about are:

- details of any new **medical conditions** a person has been diagnosed with; or
- changes in diagnosis of any existing **medical condition**; or
- changes in the treatment (including changes in medication) a person is receiving for any existing **medical condition**.

## PART 7 – HOW TO MAKE A COMPLAINT

**Our** aim is to provide **you** with a high-quality service at all times, although **we** do appreciate that there may be instances where **you** feel it is necessary to lodge a complaint.

If **you** wish to complain, please note the 3 steps below, along with the relevant contact details for each step.

### **Step 1:**

In the first instance, if the complaint **does not** relate to a claim please direct it to:

Globelink (Cyprus) Insurance Agency and Sub-Agency Limited.

Address: Rafael Sandi, 1<sup>st</sup> floor, 6052, Larnaca, Cyprus.  
Phone: +357 240 30337  
Email: [globlink@globlink.eu](mailto:globlink@globlink.eu)  
Office hrs: 9am to 5pm GMT Mon-Fri (excludes public holidays).

If **your** complaint relates to a claim, or assistance **you** received whilst travelling, please contact:

HDI Global Specialty SE.  
HDI-Platz 1, 30659 Hannover, Germany.  
Email: [complaints@hdi-specialty.com](mailto:complaints@hdi-specialty.com)

#### **Step 2:**

If You remain dissatisfied after receiving **our** response **You** may also have the right to pass **your** complaint to an Ombudsman in **your** country of residence.

## **PART 8 – DATA PROTECTION AND OTHER LEGAL INFORMATION**

### **Data Protection Notice**

Our information notice with the correct office contact details can be found here:

<https://www.hdi-specialty.com/int/en/legals/privacy>.

### **Several Liability Notice**

The subscribing insurers' obligations under contracts of insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing insurers are not responsible for the subscription of any co-subscribing insurer who for any reason does not satisfy all or part of its obligations.

### **Sanctions**

No (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that (re)insurer to any sanctions, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, Germany or United States of America to the extent such compliance is not prohibited by applicable law.

### **Safeguarding Your Premium and Claim Payments**

All premium payments from **you** and due to **us** for this policy will be held by **Globlink International** on **our** behalf. **Globlink International** will also hold any premium refund that is due to **you** from **us**.

Any claim payments that are due to **you** from **us** will be paid to **you** by **our** claims handlers.

In these capacities, **Globlink International** and **our** claims handlers are acting as **our** agents. This means that once a premium is paid to **Globlink International** it is deemed to have been received by **us** and that all claim payments and premium refunds are not deemed to have been paid until **you** have actually received them.

### **Applicable Law and Jurisdiction**

The construction of the terms and conditions of this Policy, and any dispute arising from it, shall be determined by the laws and the courts of Germany. The **Insured Person** may alternatively choose the law and the courts of the country in which the **Insured Person** is habitually domiciled.

## **PART 9 – GENERAL DEFINITIONS**

Certain words in this policy have a specific meaning. They have this specific meaning wherever they appear in this policy, in the **Validation Certificate**, or in endorsements, and are shown in bold print.

**Active war** means: **your** active participation in a **war** where **you** are deemed under English Law to be under instruction from or employed by the armed forces of any country.

**Baggage** means: luggage, clothing, personal belongings, **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**.

However, certain equipment and specific items are not covered. Please see exclusion 5 in Section E – Baggage for a full list of equipment and specific items which are not covered.

**Bodily injury** means: an identifiable physical injury, occurring during a **trip** undertaken during the **period of insurance**, caused by sudden, unexpected, external and visible means including injury as a result of unavoidable exposure to severe weather conditions.

**Business equipment** means: equipment which either belongs to **your** employer or which is owned by **you** and used as part of **your** trade, profession or occupation.

**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, step parent, step child, step sister, step brother, foster child, legal guardian, domestic partner or fiancé/fiancée.

**Compulsory quarantine** means **you**, receiving an instruction from a **medical practitioner** that requires **you** to confine **yourself**, provided the place of confinement is not **your** home address in the European Union (EU) or any private residential address.

**Curtailement / Curtail / Curtailed** means either: abandoning or cutting short the **trip** by direct early return to **your home area**.

**Excess** means: the amount **you** will have to pay towards the cost of each claim under the insurance as stated on the **Validation Certificate**.

**Family cover** means: up to two adults and any number of their children, stepchildren or foster children aged under 18, accompanying the parents or legal guardian insured on the same **Validation Certificate**, travelling on any **trip** to the same destination. Children under 16 are only insured when travelling with one or both of the insured adults, (or accompanied by another responsible adult) but under annual multi trip cover either adult is also insured to travel on their own.

**Force majeure** means: either of the following, first arising during the **period of insurance**:

- (a) **war**; and/or
- (b) the following climatic conditions/forces of nature: fire, flood, earthquake, explosion, tsunami, volcanic eruption, landslide, avalanche, hurricane, cyclone, storm, snow or extreme heatwave.

**Globlink International** means: Globlink (Cyprus) Insurance Agency & Sub Agency Limited.

**Golf equipment** means: golf clubs, golf balls, golf bag, golf trolley and golf shoes.

**Home** means: **your** normal place of residence in **your home country**.

**Home area** means: **your** country of residence in the European Union or European Economic Area country in which **you** are legally resident.

**Home country** means: The European Union or European Economic Area country in which **you** are legally resident.

**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 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.

**Manual work** means: work that is physical, including, but not limited to construction, installation, assembly and building work. This does not include bar and restaurant staff, musicians and singers and fruit pickers (who do not use machinery).

**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.

**Nuclear risks** means: ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.

**Outward journey** means: the journey by motor transport, train, aircraft or watercraft undertaken in conjunction with the **trip** from **your home** address in the **European Union**.

**Period of insurance** means:

- a) **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 31 days (or as otherwise shown in the **Validation Certificate**) is covered but limited to 17 days in total in each **period of insurance** for **winter sports** (provided **you** have paid the appropriate **winter sports** premium to include this cover where required). Under these policies Section A - Cancellation cover will be operative from the date stated in the **Validation Certificate** or the time of booking any **trip** (whichever is the later date) and terminates on commencement of any **trip**.
- b) **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 will be operative from the time **you** pay the premium.
- c) **in respect of one-way trips:** all insurance cover shall cease 72 hours after the time **you** first leave the immigration control of **your** final destination country or at the expiry date of this insurance whichever is the sooner. The final destination country will be treated as **your home area** and cover under this insurance will be applied accordingly.

**Permanent total disablement** means: loss of physical and/or mental ability through **bodily injury** to the extent that **you** will be unable to do the material and substantial duties of any occupation to which **you** are suited by means of training, education or experience ever again. The material and substantial duties are those that are normally required for, and form a significant and integral part of, the performance of any occupation that cannot reasonably be omitted or modified. Occupation means any trade, profession or type of work undertaken for profit or pay. It is not a specific job with any particular employer and is irrespective of location and availability. A **medical practitioner** must reasonably expect that the disability will last throughout life with no prospect of improvement, irrespective of when cover under this policy ends or **you** are expected to retire.

**Personal money** means: bank notes, currency notes and coins in current use, travellers' and other cheques, postal or money orders, pre-paid coupons or vouchers, travel tickets, event and entertainment tickets, phonecards, money cards and credit/debit or pre-pay charge cards all held for private purposes.

**Policyholder** means: the individual who has paid the appropriate premium to **us** for this insurance as stated on the **Validation Certificate**.

**Pre-existing medical condition** means:

- a) any respiratory condition (relating to the lungs or breathing), heart condition, stroke, Crohn's disease, epilepsy or cancer for which **you** have ever received treatment (including surgery, tests or investigations by a **medical practitioner** and prescribed drugs or medication).
- b) any **medical condition** for which **you** have received surgery, in-patient treatment or investigations in a hospital or clinic within the last twelve months.
- c) any **medical condition** for which **you** are taking prescribed drugs or medication.
- d) any **medical condition** for which **you** have received a terminal prognosis.
- e) any **medical condition** you are aware of but for which **you** have not had a diagnosis.
- f) any **medical condition** for which **you** are on a waiting list or have knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home.

**Public transport** means: any publicly licensed aircraft, sea vessel, train, coach or bus on which **you** are booked or had planned to travel.

**Return journey** means: the journey by motor transport, train, aircraft or watercraft undertaken in conjunction with the **trip** to **your home** address in the **European Union**.

**Secure baggage area** means: any of the following, as and where appropriate:

- a) the locked dashboard, boot or luggage compartment of a motor vehicle
- b) the locked luggage compartment of a hatchback vehicle fitted with a lid closing off the luggage area, or of an estate car with a fitted and engaged tray or roller blind cover behind the rear seats
- c) the fixed storage units of a locked motorised or towed caravan
- d) a locked luggage box, locked to a roof rack which is itself locked to the vehicle roof.

**Single parent cover** means: one adult and any number of his or her children, stepchildren or foster children aged under 18 accompanying the adult insured on the same **Validation Certificate**, travelling on any **trip** to the same destination.

Children under 16 are only insured when travelling with the insured adult, but under annual multi trip cover the adult is also insured to travel on their own.

**Ski equipment** means: skis (including bindings), ski boots, ski poles and snowboards (including bindings) and any other items deemed as specific and required for the participation in **winter sports** activities.

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

**Transport provider** means: airline companies, rail operators, coach operators, ferry and cruise operators.

**Trip** means: any holiday, business or pleasure trip or journey including a cruise made by **you** within the area of travel shown in the **Validation Certificate** which begins and ends in **your home area** during the **period of insurance**.

If annual multi trip cover is selected any **trip** not exceeding 31 days is covered (unless otherwise shown in the **Validation Certificate**) but limited to 17 days in total in each **period of insurance** for **winter sports** (provided **you** have paid the appropriate **winter sports** premium to include this cover where required). Each **trip** under annual multi trip cover is considered to be a separate insurance, with the terms, definitions, exclusions and conditions contained in this policy applying to each **trip**. Any **trip** solely within **your home area** is only covered 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, whether single trip or annual multi trip cover is selected. Where **we** have agreed to cover **your medical condition**, this applies to each **trip** during the **period of insurance**.

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

**Validation Certificate** means: the document showing details of **your** cover.

**Valuables** means: jewellery, gold, silver, precious metal or precious or semiprecious stone articles, watches, furs, cameras, camcorders, portable satellite navigation systems, photographic, audio, video, computer, television and telecommunications equipment (including MP3/4 players, CDs, DVDs, tapes, films, cassettes, cartridges and headphones), computer games and associated equipment, telescopes and binoculars.

**Vermin** means: rats, mice, squirrels, owls, pigeons, foxes, bees, wasps or hornets.

**War** means:

- a) war, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, mutiny, rebellion, revolution, insurrection, riot or civil commotion assuming the proportions of or amounting to an uprising, military or usurped power; or
- b) any act of **terrorism**, or
- c) any act of war or **terrorism** involving the use of, or release of a threat to use, any nuclear weapon or device or chemical or biological agent.

**We/us/our** means: **HDI Global Specialty SE** and where appropriate **Globelink International**, **Healthwatch Assistance** or **Healthwatch Claims** acting on behalf of **HDI Global Specialty SE**.

**Winter sports** means: any activity as listed in Appendix B and for which the **policyholder** has paid the additional premium where required as confirmed on the **Validation Certificate**.

**Withdrawal of services** means: the withdrawal of:

- a) all water or electrical facilities in **your** hotel or **trip** accommodation, or
- b) waiter/waitress services at meals, or
- c) kitchen services of such nature that no food is served, or room cleaning services.

**You/Your/Yourself** means: the **policyholder** and any other person(s) to whom cover is provided under the policy, as stated on the **Validation Certificate**.

## APPENDIX A – INCLUDED SPORTS & ACTIVITIES

The following lists detail the sports and activities that this policy will cover. The sports and activities in Activity Categories 2, 3 and 4 will only be covered if shown on the **Validation Certificate**. All sports and activities are subject to the terms, conditions and exclusions in this policy. **You** must also ensure that **you** are adequately supervised while undertaking the sport and/ or activity and that **you** are wearing the appropriate safety equipment at all times. If **you** do not do this, then **we** may not pay **your** claim. Certain restrictions apply to some sports and activities as set out below.

Cover for activities as listed under the various Categories below are covered when participated in on a recreational and amateur basis only and not for competitions or any professional activity unless specifically agreed with **Globelink International** in writing.

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

1. Professional sports or entertaining: **Your** participation in or practice of any professional sports or professional entertaining.
2. Other sports or activities: **Your** participation in or practice of any other sport or activity, manual work, driving any motorised vehicle in motor rallies or competitions or racing unless:
  - a) specified in the lists under this Appendix A below or
  - b) shown as covered in the **Validation Certificate** when the additional premium is paid to extend policy cover for specified activities.

If **you** are going to take part in any activity which may be considered dangerous that is not detailed below please contact: **Globelink International** at [globelink@globelink.eu](mailto:globelink@globelink.eu) or call +357 240 30337 as **we** may be able to offer cover for an additional premium. Details of the sports and activities which **you** have purchased for cover will be shown in the **Validation Certificate**.

### ACTIVITY CATEGORY 1

The following sports and activities are covered under all sections except for those noted below.

**Please note:**

- All sports and activities marked with (\*) in this category are not covered under Section H – Personal Liability.
- All sports and activities marked with two asterisks in this category (\*\*) are not covered under H – Personal Liability, nor Section C – Personal Accident.

ACTIVITY CATEGORY 1		
Aerobics	Amateur Athletics (track and field)	Archery
Assault Course	Badminton	* Banana Boating / Water Sled (Only as a passenger with no right of control)
Baseball / Basketball	Beach games (Volley Ball, beach mini golf, Frisbee, boules, petanque)	Billiards/Snooker/Pool
* Black water rafting / Cave Tubing Only as a passenger with no solo right of control. (up to max Grade 3 Waters only)	Blade Skating	Body Boarding / Boogie Boarding
Bowls	** Bungee Jumping (Only as short duration incidental day excursion with licensed public hirer).	Canoeing / Kayaking (Inland & coastal waters only. Up to grade 2 waters)
** Clay Pigeon Shooting (must be adequately supervised and as part of organised activity instructed by professional organisers & within organisers guidelines)	Cricket	Croquet
Curling	Cycling (on road / no racing)	Deep Sea Fishing
* Dinghy Sailing (small non-motorised hand/foot/sail propelled watercraft with a max 4 person capacity. Inland & coastal waters only. Max grade 2 waters only.)	** Falconry	Fell Walking/Running
Fencing	Fishing (course fishing / Angling)	Fives
Flying as a fare paying passenger in a fully licensed passenger carrying aircraft.	Football/soccer (amateur only)	Golf
* Glass Bottom Boats/Bubbles (Only as a passenger with no right of control).	* Go Karting (Excludes Super-Karts. Only as a short duration incidental day activity with a licensed public hirer, instructed by professional organisers and within organisers guidelines).	Handball
Hiking/Walking up to 2,500 metres (recognised trails and man-made roads).	Hurling (amateur only and not main purpose of trip)	Jogging

Korfball	Lacrosse	Lapland Activates (Husky/Reindeer Ride, * Snowmobile, * Sledging, Short 3 Days Trips) Excludes Bobsleighs.
Marathon Running	Netball	Octopush
Orienteering (no climbing)	Racket Ball	Rambling
Refereeing (amateur only)	Ringo	Roller Skating/Blading/In Line Skating
Rounders	* Rowing / * River Canoeing	Running (non-competitive recreational)
* Sail Boarding (inland & coastal waters only)	Skateboarding	Sledging (not on snow)
Snorkelling	Softball	Spear Fishing (without tanks)
Squash	* Surfing No Competitions. Inland and Coastal waters only.	Swimming
Swimming with Dolphins	Swimming/Bathing with Elephants	Sydney Harbour Bridge
Table Tennis	Ten Pin Bowling	Tennis
Trampolining	Track Events	Tree Canopy Walking
Trekking up to 4,000 metres above sea level on organised tours and recognised routes, <b>not</b> involving any technical climbing. Search & Rescue for medical reasons only. For Trekking above 4,000 meters contact <b>Globelink International</b> . Additional premiums and conditions will apply.	Triathlon	Tug of War
Volleyball	Wake Boarding	*Water Parks. Subject to being a licensed waterpark with qualified lifeguards.
Water Polo	Whale Watching	
White Water Rafting only inland and coastal waters and only as a passenger with no solo right of control Up to Grade 3 water only.	* Wind Tunnel Flying (pads and helmets to be worn)	** Wind Surfing/Sailboarding only inland and coastal waters only. Up to Grade 3 water only.
Zip Lining (Safety Harness must be worn)	** Zorbing/Hydro Zorbing/Sphering	

#### ACTIVITY CATEGORY 2 (Subject to a €150 excess)

Below is the list of Activities in Category 2 that will be covered as standard within all policies subject to the terms, conditions and exclusions within this policy and an excess of €150 applies.

#### Please note:

- All sports and activities in this category are not covered under Section C – Personal Accident or under Section H – Personal Liability.

ACTIVITY CATEGORY 2 No Cover under Section C – Personal Accident or Section H – Personal Liability.		
Abseiling (within organisers guidelines)	Administrative or Clerical Occupations	Archaeological Digging
BMX Riding (up to Grade 2 slopes)	Camel Riding	Catamaran Sailing (Territorial waters only)
Clerical work	Elephant Riding/Trekking	Gymnastics
Cycle Touring. Must be on recognised roads, not in competition or racing, wearing a safety helmet at all times	Heptathlon	Hot air Ballooning (organised one day excursion pleasure rides only as fare paying passenger. Not as a pilot or ballooning safaris.)
Horse Riding (excluding competitions, racing, jumping and hunting)	Hovercraft Passenger	Jet Boating (no racing. Only as a short duration incidental day excursion with a licensed public hirer. Inland & coastal waters only).
Jet Skiing (No racing. Only as a short duration incidental day excursion with a licensed public hirer. Inland & coastal waters only).	Judo (Training only & no contact).	Kung Fu (Training only & no contact).
Karate (training only & no contact)	Manual Occupations including Voluntary Work (only at ground level and involving no more than hand tools)	Martial Arts (Training only & no contact).



Motor Cycling up to a Maximum engine capacity of 250cc. <b>You</b> must hold full driving license in <b>Your own Home Country</b> for cc rating being ridden. A safety helmet must be worn at all times and must be on recognised roads. No cover for off-road, racing or competitions. For cc rating over 250cc please email <a href="mailto:globelink@globelink.eu">globelink@globelink.eu</a>	Paintballing/War Games (wearing eye protection)	Parascending (must be licensed operator with professional guide and only in EU, EEA, USA, Canada, Australia & New Zealand).
Pony Trekking wearing protective gear	Power Boating (no racing and non-competitive)	Safari Trekking (must be organised tour)
Sailing/Yachting (includes amateur racing competitions, inland and territorial waters only)	Sand Boarding	Sand Dune Surfing / Sand skiing
Sand Yachting (no racing)	Scuba Diving to maximum depth of 30 metres (Providing a current valid PADI/BSAC Certificate of Proficiency held, or with a qualified instructor where diving up to 9 metres only). Subject to endorsement in Appendix C.	Street Hockey
Students working as counsellors or university exchanges for practical course work (manual work at ground level using no more than hand tools)	Tall Ship Crewing (no racing)	Volunteer Work (includes manual work at ground level using no more than hand tools)
War Games / Paintballing (wearing eye protection)	Water Skiing/Water Ski Jumping	Working Abroad (Includes Volunteer work / manual work at ground level using no more than hand tools)

### ACTIVITY CATEGORY 3 (subject to a €300 excess)

Below is the list of Activities in Category 3 that will be covered under this insurance policy if the policyholder has paid the appropriate additional premium and this has been noted on the Validation Certificate, subject to the terms, conditions and exclusions within this policy.

#### Please note:

- Individual sports and activities in this category are subject to certain restrictions as highlighted in bold and in brackets below.
- All sports and activities in this category are not covered under Section C – Personal Accident or Section H – Personal Liability.

<b>ACTIVITY CATEGORY 3</b>		
<b>No Cover under Section C – Personal Accident or Section H – Personal Liability.</b>		
Black Water Rafting (Grade 4. Only as a passenger with no solo right of control.)	Boxing / Kick Boxing	Canoeing / Kayaking (inland & coastal waters only. Up to grade 3 waters)
Dry Skiing	Heli skiing/Boarding (with licensed operator in EU, EEA, USA, Canada, Australia and New Zealand. Within organisers guidelines and only as part of a pre-paid excursion led by professional guides/organisers.)	Hockey (Protective head gear to be worn)
Kite Surfing (with licensed operator in EU, EEA, USA, Canada, Australia and New Zealand. Within organisers guidelines and only as part of a pre-paid excursion led by professional guides/organisers.)	Mountain Biking / Cycling off road (wearing a helmet and no racing)	Paragliding (with licensed operator in EU, EEA, USA, Canada, Australia and New Zealand. Within organisers guidelines and only as part of a pre-paid excursion led by professional guides/organisers.)
Quad Biking (wearing a helmet and no racing)	Rock Climbing (not Mountain Climbing)	Rugby Amateur (Union/League)
Small Bore Target/Rifle Range Shooting (within organisers guidelines)	White Water Rafting Grades 4 & 5. Only as a passenger with no solo right of control.	Weight Lifting (with licensed operator in EU, EEA, USA, Canada, Australia and New Zealand. Within organisers guidelines and only as part of a pre-paid excursion led by professional guides/organisers.)

### ACTIVITY CATEGORY 4 (subject to a €500 excess)

Below is the list of Activities in Category 4 that will be covered under this insurance policy if the policyholder has paid the appropriate additional premium and this has been noted on the Validation Certificate, subject to the terms, conditions and exclusions within this policy.

#### Please note:

- Individual sports and activities in this category are subject to certain restrictions as highlighted in bold and in brackets below.

- All sports and activities in this category must be carried out within organisers guidelines and will only be covered as part of a pre-arranged/organised activity led or instructed by professional guides or organisers.
- All sports and activities in this category are not covered under Section C – Personal Accident or Section H – Personal Liability.

<b>ACTIVITY CATEGORY 4</b>		
<b>No Cover under Section C – Personal Accident or Section H – Personal Liability.</b>		
Canyoning	Cave Diving	Flying - recreational flying as a pilot (if current appropriate licence held)
Gliding (with licensed operator in EU, EEA, USA, Canada, Australia and New Zealand)	Hang Gliding (with licensed operator in EU, EEA, USA, Canada, Australia and New Zealand)	High Diving
Ice Hockey	Luging/tobogganing (with licensed operator in EU, EEA, USA, Canada, Australia and New Zealand)	Parachuting (with licensed operator in EU, EEA, USA, Canada, Australia and New Zealand)
Polo	Pot Holing (with licensed operator in EU, EEA, USA, Canada, Australia and New Zealand)	Scuba diving up to max 50 metres. (Providing PADI/BSAC Certificate of Proficiency held otherwise no cover. Subject to endorsement in Appendix C).
Shooting/Hunting (with licensed operator in EU, EEA, USA, Canada, Australia and New Zealand)	Sky Diving: Tandem Jumps only with a qualified instructor and with a licensed operator in EU, EEA, USA, Canada, Australia and New Zealand. For solo Sky Diving please contact us by email at <a href="mailto:globelink@globelink.eu">globelink@globelink.eu</a>	

#### **APPENDIX B – WINTER SPORTS COVER Extension (included activities)**

This **Winter Sports** Cover extension is included if it is shown on the **Validation Certificate**.

If shown as selected on the **Validation Certificate** it will apply for a period of no more than 17 days in total in each **period of insurance** under annual multi trip policies and for the period of the **trip** under single trip policies.

The following lists detail the activities that the **Winter Sports** Cover Extension covers. All activities are subject to the terms, conditions and exclusions in this policy. Certain restrictions apply to some activities as set out below.

If the activity **you** wish to undertake during a trip is not listed below, please contact: **Globelink International** at [globelink@globelink.eu](mailto:globelink@globelink.eu) or call +357 240 30337, as **we** may be able to offer cover for an additional premium. Details of the sports and activities which **you** have purchased for cover will be shown in the **Validation Certificate**.

The following activities are covered under all sections.

<b>ACTIVITY - WINTER SPORTS COVER EXTENSION</b>		
Air-Boarding	Big Foot Skiing	Blade Skating
Curling	Cross Country Skiing (recognised paths)	Downhill Skiing/Snowboarding
Dry Slope Skiing/Walking	Glacier Walking	Ice Cricket
Ice Skating	Ice Windsurfing	Kick Sledging
Langlauf	Mono Ski	Nordic Skiing (recognised paths)
Ski Blading	Ski Boarding	Ski Randonnee
Ski Run Walking	Ski Swimming	Ski Touring
Snow Blading	Snowshoe Walking	Snow Zorbing
Winter Walking (using crampons and ice picks only)		

**Please note restrictions apply to the activities listed below.**

**The following activities:**

- Are not covered under Section H – Personal Liability; and
- Must be carried out within organisers guidelines and will only be covered as part of a pre-arranged/ organised activity led or instructed by professional guides or organisers.

<b>ACTIVITY - WINTER SPORTS COVER EXTENSION</b>		
Ice Go Carting	Sledging/Sleigh-riding as a passenger pulled by any animal	Snowcat Skiing
Snowmobiling / Skidooring	Snow Tubing	

**Please note restrictions apply to the activities listed below.**

**The following activities:**

- Are not covered under Section C – Personal Accident or Section H – Personal Liability; and

- Must be carried out within organisers guidelines and will only be covered as part of a pre-arranged/ organised activity led or instructed by professional guides or organisers.

## ACTIVITY - WINTER SPORTS COVER EXTENSION

Husky Dog

### APPENDIX C - SCUBA DIVING ENDORSEMENT

This insurance is extended to cover **you** whilst engaging in underwater activities requiring the use of artificial breathing apparatus (scuba) subject to **you** being approved as medically fit to dive by the person or company who/which has organised the diving, and subject otherwise to all terms, conditions, exclusions and limitations of this insurance.

#### **What is not covered:**

**This insurance does not cover claims directly or indirectly arising from, happening through or as a result of:**

1. Diving by persons not holding a recognised certificate for the type of diving being undertaken, or not under professional instruction.
2. Diving without proper equipment and/or contrary to codes of good practice according to bona fide organisations such as PADI or BSAC.
3. Diving to depths greater than 30 metres (or 50 metres if additional premium paid).
4. Solo diving or night diving or specifically organised cave diving or diving for hire or reward.
5. Flying within 24 hours of last dive or diving whilst suffering from a cold, influenza, infection or obstruction of the sinuses or ears.
6. Diving by persons aged under 12 years of age or over 65.