

Full Terms & Conditions

Quick Online Claims
www.journeysclaims.co.uk

24/7 Medical Emergency Hotline
+44(0)144 44 54 577

Online Medical Screening
www.journeysmedical.co.uk

FULL TERMS & CONDITIONS

IMPORTANT MEDICAL CONDITIONS - PLEASE READ

We will not cover **EXISTING MEDICAL CONDITION(S)** (as defined below) affecting **YOU** or a non-travelling **CLOSE RELATIVE or BUSINESS ASSOCIATE**, that could affect whether **you** go on or complete the trip, unless **you** tell **us** about them in advance by calling 0870 054 0159, or logging onto www.journeysmedical.co.uk, gaining our acceptance. If **you** answer YES to any of the following questions, **you** must contact **us**, as above. Have **You** or any non-travelling **CLOSE RELATIVE(S) or BUSINESS ASSOCIATE** whose health could affect the trip suffered:

- Any medical condition, illness or physical infirmity, including undiagnosed symptoms that are under investigation, for which consultation, including referral for specialist investigation, treatment or change of medication, occurred **during the 9 months** prior to the issue date of this insurance, or the date the trip was booked, if later?
- Any cardiovascular (e.g. heart), cerebrovascular (e.g. stroke, transient ischemic attack or brain haemorrhage), or cancer, for which investigation or treatment **has ever occurred?**
- Any medical condition, illness or physical infirmity, including undiagnosed symptoms, that has been wait-listed for surgery, inpatient treatment or tests at a hospital, clinic or nursing home, during 9 months prior to the issue date of this insurance, or the date the trip is booked, if later?

IMPORTANT MEDICAL EXCLUSIONS - PLEASE READ

We will not cover:

- Where either **YOU** or a **CLOSE RELATIVE** are awaiting tests or treatment, or awaiting the results of tests or treatment, or have received a terminal prognosis.
- Travelling for the purpose of obtaining treatment abroad or travelling against the advice of a Registered Medical Practitioner in relation to a diagnosis or instability of any medical condition, illness or physical infirmity.
- Any claim relating to any psychological disorder, stress, anxiety or depression.
- Any claim for pregnancy where the expected date of delivery is within 10 weeks of **YOUR** due return date to the UK.
- Anything excluded by the **GENERAL EXCEPTIONS or GENERAL EXCEPTIONS APPLYING TO SECTIONS A, B & C**.

In respect of all cover provided under **SECTIONS A, B & C** (Cancellation or Curtailment, Medical and Other Expenses and Personal Accident) we reserve the right:

1. At our discretion to require any person applying for cover to undergo Journeys Medical Screening
2. To vary the conditions or premium on which cover is offered.

MEDICAL TREATMENT IN ALL COUNTRIES

You must immediately notify **EURO-ALARM** in the event of a Medical Emergency where **You** require Inpatient treatment, or if **Your** Outpatient costs exceed £500, or if **You** require to be repatriated or to Curtail **Your** trip. If **Your** treatment and expenses are not authorised by **EURO-ALARM**, **We** reserve the right not to pay **Your** claim.

CALL EURO-ALARM 24 HOUR MEDICAL SERVICE ON:

TEL NO. UK +44(0)144 44 54 577 FAX NO. UK +44(0)144 44 40 061

Be prepared to give:

- (a) Insurance Certificate number
- (b) Name and address of issuing agent from whom it was purchased
- (c) Dates of outward and return travel
- (d) Details of problem including name and address of patient and nature of illness/accident
- (e) Names, telephone & fax numbers of hospital, attending qualified medical practitioner and usual GP

You must also obtain and keep receipts for all medical treatment

Note - To qualify for the additional benefit, utilising **Your** EHIC, see Page 4.

EURO-ALARM are there to help **You** 24 hours a day 365 days a year.

Do not try to find Your own solution - they will solve Your problem in the most efficient, suitable and practical way.

MEDICAL TREATMENT IN AUSTRALIA AND NEW ZEALAND

Should **You** require medical treatment in Australia please note the reciprocal agreement may apply under the **Medicare** system for UK Nationals. Please ensure that **You have Your passport** with **You** and if treatment is required, this should be produced. Inpatient and outpatient treatment at a Public Hospital is then available either free of charge (Australia) or at minimal costs (New Zealand). Should **You** be admitted to hospital then **immediate contact MUST be made with EURO-ALARM** and their authority obtained in respect of any treatment not available under the reciprocal agreement, before such treatment is provided.

EHIC AND THE RECIPROCAL HEALTH AGREEMENT IN EU COUNTRIES

When travelling to countries within the European Union, wherever possible **you** must use medical facilities which entitle **you** to the benefits of any reciprocal health agreements, such as and its replacement, the European Health Insurance Card (EHIC). To take advantage of this **you** need to complete one application form, obtained from the Post Office. EHIC application forms can be obtained by calling 0845 606 2030, online from <https://www.ehic.org.uk/InternetPROD/home.do> or from **your** local Post Office. Allow at least 3 weeks for it to be issued. When used and accepted, resulting in reduced costs **you** will benefit from having no excess deducted and an increased Hospital Benefit of £50.00 per 24 hours that **you** are an inpatient up to the maximum stated in the Schedule of Cover.

FAST TRACK CLAIMS FACILITY

If **Your** claim is for less than £100 per person, **You** have the option of using the **Fast Track Tele Claims Facility**. Please call **Journeys Claims Department** on **0870 054 0158** quoting the code "**Fast Track Claims**". Please ensure that **You** have the full details regarding the circumstances of **Your** claim and all **Your** travel insurance information immediately available. **Your** claim will be finalised upon receipt of **ALL** the requested information in writing.

CLAIMS GUARANTEE

As an indication of **Our** confidence in the efficiency of **Journeys Claims Department**, We guarantee that if, having received **ALL** requested documentation at **Our** offices necessary to support **Your** claim, **We** do not assess and forward correspondence to **You** within 10 working days, **You** are entitled to a compensation payment of £10 from **Journeys Claims Department**, and a Further payment of £10 for each subsequent 10 working day period that **You** do not receive **Our** response (up to a maximum payment of £50 in total).

WHAT TO DO IF AN INCIDENT HAPPENS AND YOU MIGHT WANT TO MAKE A CLAIM

Please follow the Conditions below, as **We** may not pay **Your** claim if **You** do not. Please complete a Claim Form and forward it together with all supporting claims documents to Journeys Claims Department at the address given on the back page of this Policy wording.

- You** will advise **Us** of any occurrence which may give rise to a claim under this Policy in writing within 31 days of the date of the incident and shall supply to **Us** all such accounts, documents and items as **We** may reasonably require at **Your** expense.
- You** will give **Us** notice in writing immediately **You** or **Your** legal representatives have knowledge of any impending prosecution, inquest or fatal inquiry in connection with any occurrence for which there may be liability under Section E of this Policy.
- You** must inform the Police of all loss or theft of property within 24 hours of discovery and obtain a copy of the Police report in support of any claim under Section G, H & P of this Policy.
- If personal possessions are lost or damaged whilst in the custody of the carrier (i.e. Airline, Railway, Shipping Company, Bus Company, etc), **You** must notify such carrier immediately and obtain a Property Irregularity Report. **You** must keep all receipts for the essential purchases that **You** make if **Your** property is temporarily lost by the carrier. Damaged items should be kept for inspection should this be required by Underwriters. **You** must obtain confirmation of the extent of the damage to **Your** property on **Your** return to the UK, and an estimate of the repair costs.
- You** must inform **Your** issuing agents in writing immediately **You** become aware of ANY change of circumstances indicating a need to Cancel **Your** trip in accordance with **Your** trip's Booking Conditions.

CLAIMS GUARANTEE

- No admission, offer, promise, payment or indemnity will be made or given by **You** or on **Your** behalf without **Our** written consent.
- We** will be entitled to take over and conduct in **Your** name the defence or settlement of any claim or to prosecute in **Your** name to **Our** own benefit in respect of any claim for indemnity or damages or otherwise, and will have full discretion in the conduct of any proceedings or in the settlement of any claim, and **You** will give all such information and assistance as **We** may require.
- On occasion, in case of illness or injury **We** may approach **Your** regular GP to obtain a medical report, and **We** may at **Our** own expense arrange for **You** to be medically examined as often as required, or in the event of death, arrange a post-mortem examination of **Your** body.
- You** will supply at **Your** own expense a Doctors certificate in the form required by **Us** in support of any claim under Sections A, B, C & P of this Policy, and also written confirmation from a retailer regarding extent of damage to items for claims under Sections G, H & P.
- Any value of unused travel tickets or vouchers shall become the property of Underwriters in the event of a valid claim being made.
- We** retain all rights of salvage and subrogation, which means that **We** will take over **Your** rights of recovery against the person responsible for the claim and seek a contribution from **Your** household or other insurers where dual cover exists, in accordance with the Association of British Insurers Agreement and **Our** legal rights.

TERMS, CONDITIONS AND EXCLUSIONS

Please note that **Your** failure to comply with the Conditions set out below or in any Section of **Cover** may result in **You** not having cover at all or a claim not being paid. **We** are not liable for any claim falling under the General Exclusions, which apply to all Sections of the Policy, or the specific exclusions in any Section of **Cover** or if a Condition is not complied with.

CONDITIONS APPLYING TO THE INSURANCE

You MUST validate this insurance by signing the Validation Procedure on the front cover of this Policy wording and confirming that **You** have read the Policy and especially the Important Medical Conditions on Page 4 that affects this Insurance and agree to abide by all the terms, conditions, exclusions and limitations in the Policy.

- You** are not aware of any circumstances known at the time **You** purchased this Policy which could cause the Cancellation or Curtailment of **Your** trip.
- You** must at all times act in a reasonable manner to prevent or minimise a claim.
- You** will immediately advise **Journeys Medical Screening** on 0870 054 0159 of any change in **Your** state of health or that of any person whose health may affect **Your** travel arrangements which becomes apparent after the Date of Issue of **Your** Insurance and before the scheduled departure date of **Your** trip. **We** reserve the right to alter the terms of the insurance or withdraw ongoing cover, in the light of such changed circumstances which were not in existence at the time that **You** arranged **Your** Insurance. **We** will, subject to the terms, conditions and exclusions of the Policy, cover **You** under Section A in respect of trip deposits or charges which **You** have necessarily incurred up to the date that **You** advise **Us**. Please see the Important Medical Conditions on Page 4 for full details.
- FRAUD:** If **You** or any person on **Your** behalf makes a misrepresentation, tells an untruth or conceals information to obtain this Policy or to make a claim under it, the Policy will be void. In order to combat fraudulent claims, please note that certain aspects of **Your** personal details and the claim will be stored in **Our** computer system and may subsequently be transferred to a centralised system.
- Specific Conditions apply to certain sections of this Policy.
- All claims arising under this Insurance shall be governed by the Law of England whose Courts alone shall have jurisdiction in any dispute arising hereunder.

GENERAL EXCLUSIONS REGARDING ALL SECTIONS OF THE POLICY

We shall not be liable for:

- Any claim by **You** or a Close Relative whilst suffering from any psychological or psychiatric disorder, anxiety, stress or depression.
- Any claim by **You** or against **You** arising from or connected with any criminal or dishonest act committed by you whether in the UK or elsewhere.
- Any costs which **You** would have had to pay even if the event giving rise to a claim had not happened.
- Under Sections A, B, D E, F G, H I, J, K, & P in respect of any claim where the event leading to the claim is insured by any other existing Policy or Policies, except in respect of any amount within the terms of this Policy but beyond that which is payable under such other Policy or Policies.
- Any loss or expense whatsoever nature directly or indirectly arising out of, contributed to, caused by, resulting from, or in connection with war, invasion, acts of foreign enemies, hostilities or war like operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurping power or an Act of Terrorism, but this exclusion shall not apply to losses under section A - Cancellation and Curtailment or section B - Medical and other Expenses and Section G Personal Possessions, Money and Travel Documents unless such losses are caused by a Nuclear, Chemical, Biological Terrorism Act or the disturbances are in areas which are regarded by **Us** as War Risks and Civil Hazards Areas and/or in areas to which you are travelling against the advice of the Foreign and Commonwealth Office (FCO).
- Any claim arising out of or increased by **Your** failure to follow any advice, or recommendations from the Foreign and Commonwealth Office and any advice against all or non-essential travel to a country or part of it.
- Consequential loss of any kind.
- Damage to, or loss or destruction of any property or any loss or expense whatsoever arising from, or any consequential loss or any legal liability of whatsoever nature directly or indirectly caused by or contributed to, by or arising from:
 - Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
 - The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component of such assembly.
- Loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.
- For the purpose of obtaining medical treatment abroad or **Your** intentional self-injury, suicide or attempted suicide or willful exposure to needless risk in any circumstances (except in the attempt to save a human life), or the influence and/or effects of intoxicating liquor or alcohol, drug or drugs (unless prescribed by a Registered Medical Practitioner but not for drug addiction) or substance or solvent abuse, venereal disease or sexually transmitted disease.

11. Claims arising from flying or aerial activity of any kind (other than as a fare paying passenger in a fully licensed passenger carrying aircraft).
12. Claims arising directly or indirectly from **You** willful, malicious or unlawful acts or any failure on **You** part to take reasonable steps to look after and protect **Yourself** or **Your property** against accident, loss or damage as if **You** were not insured.
13. Claims not notified directly in writing to **Us** within 31 days of the expiry of this Insurance.
14. Losses occurring outside the Period of Insurance.
15. Claims arising directly or indirectly from bankruptcy or liquidation, including, but not limited to, that of any tour operator, travel agent, transportation company or accommodation supplier.
16. Any liability, however arising, in respect of goods or services supplied by medical service providers, EURO-ALARM, Underwriters or any person acting on their behalf.
17. Any claims occurring 24 hours after your arrival at the final ticketed destination for one-way trips.
18. Any claims, including any Winter Sports related claims, unless the appropriate premium has been paid.
19. Any claim which is subject to a specific exclusion in any Section of the Policy and/or any claim in respect of which there has been a breach of any condition in the Policy.

EXTENSION OF COVER

If **You** request any extension of the Period of Insurance after the commencement of travel **You** must advise **Us** of any circumstances which, at the time of the request, could reasonably be expected to cause a claim under this Policy.

SECTION A - CANCELLATION OR CURTAILMENT CHARGES

What each insured-person IS covered for:

All irrecoverable deposits and payments for unused travel and accommodation charges which **You** have paid or are contracted to pay before the trip departure date, for which **You** are necessarily required to Cancel or the Curtailment Charges if **You** Curtail (cut **Your** trip short).

We will provide this cover in the following necessary circumstances:

1. **Your** death, accidental bodily injury or illness, that of a Close Relative, or friend with whom **You** have arranged to travel or stay, or a Business Associate, certified by the relevant General Practitioner.
2. **You** or any person with whom **You** have arranged to travel or stay being subject to compulsory quarantine or being summoned for Jury Service or as a witness in a Court of Law during the Period of Insurance.
3. **Your** redundancy provided that **You** have been employed for 2 continuous years with the same employer at the time of being made redundant and at the time of purchasing this Insurance, **You** had no reason to believe that **You** would be made redundant.
4. **You** being unexpectedly required for emergency and unavoidable duty as a member of the armed forces including the Territorial Army and Reservists, police, fire, nursing, ambulance or coast guard services as certified by **Your** Senior Officer or Manager. This cover is subject to General Exclusion 5 and extends to holiday (or other additional cover purchased) cancellation or curtailment only.
5. **Your** private dwelling becoming uninhabitable following fire, storm or flood, or **Your** presence certified as being required by the Police following a burglary during the 48-hour period immediately prior to **Your** departure.
6. **You** becoming pregnant after this insurance policy has been issued and **You** becoming more than 30 weeks pregnant on **Your** due Return Journey date. Or, if **You** become pregnant after this insurance policy has been issued and **Your** doctor advises that **You** are not fit to travel due to complications of **Your** pregnancy.
7. Reasonable additional travelling expenses incurred by **You** in returning to **Your** home address in the UK, where **Your** return is urgently necessitated by the death, serious illness or severe injury of **Your** Close Relative or a Business Associate, and the Curtailment is authorised by EURO-ALARM subject to the Important Medical Conditions requirements on Page 4. If a trip is Curtailed through **Your** accident or illness, a doctor at the resort or nearest town must confirm that such Curtailment is medically necessary and is agreed by EURO ALARM.
8. Timeshare coverage applies on Deluxe Cover only. Provided the property remains unoccupied, **We** will pay the Timeshare Cancellation Charges or the Timeshare Curtailment Costs which are not recoverable from any other source, if it becomes necessary for **You** to Cancel or Curtail **Your** trip to or from the timeshare accommodation.

What each insured-person IS NOT covered for:

1. Any expense due to **You** not wanting to travel or continue with **Your** trip or loss of enjoyment of **Your** trip.
2. Any expenses or losses arising from **You** not having the correct travel documents, passport, visa, inoculation certificate or any other document necessary for **Your** travel.
3. Any personal financial circumstances causing **You** to no longer be able or wish to travel.
4. Any expense arising from circumstances which could reasonably have been anticipated at the time **You** booked **Your** trip on the date the Insurance Policy was issued.
5. Any additional costs incurred as a result of **Your** failure to notify a Tour Operator, Travel Agent or conference organiser or provider of transport or accommodation immediately **You** are aware of the need to Cancel or Curtail the travel arrangements booked.
6. Government regulations (other than in respect of compulsory quarantine) or currency restriction or act, or omission or default of provider of transport or accommodation or of an Agent through whom the travel arrangements were made.
7. Any Excess shown in the Schedule of Cover.
8. Anything excluded by the General Exclusions or any breach of the Conditions.

SECTION B - MEDICAL & OTHER EXPENSES

What each insured-person IS covered for:

This section covers **You** for essential emergency medical treatment if **You** fall ill or are injured in an accident abroad, or, if medically appropriate, for **You** to be brought back to the UK for medical treatment. It is not a private health insurance scheme.

ALL INPATIENT COSTS UNDER THIS SECTION MUST BE AUTHORISED BY EURO-ALARM

What each insured-person IS covered for:

If **You** are injured or suffer illness **We** will pay **You** or the medical provider concerned up to the amount stated in the Schedule of Cover for the following expenses:

1. Emergency Medical expenses including hospital charges, in-patient treatment authorised by EURO-ALARM and ambulance charges for conveyance to hospital.
2. Dental treatment is included only for the alleviation of sudden pain and does not apply to the provision of dentures, artificial teeth or work involving the use of precious material or any permanent fixtures and is limited to £500 in all.
3. Reasonable and necessary additional travelling expenses in returning to **Your** home address in the UK and reasonable and necessary additional accommodation expenses, of similar cost to the pre-booked accommodation, beyond the number of days booked subject to agreement by EURO-ALARM. (Maximum UK Sum Insured - see Schedule of Cover.)
4. The accommodation (room only) and reasonable travel expenses of one relative or friend (not necessarily an insured person) who is required to travel to or remain with or escort the Insured Person, subject to medical necessity and authorised by EURO-ALARM (Maximum UK Sum Insured - see Schedule of Cover.)
5. A Hospital Benefit for the patient per complete 24 hours that **You** are an in-patient in hospital (see Schedule of Cover for benefit amount). However if all **Your** treatment in Europe is at a State Medical Facility and **You** use **Your** EHIC (Page 4) resulting in savings, the Hospital Benefit is increased to £50 per complete 24 hours that **You** are an inpatient.
6. **Your** emergency repatriation in respect of the cost of return to the UK, where such return is certified as medically necessary and authorised and arranged by EURO-ALARM.
7. The cost of returning **Your** body or ashes to **Your** home address in the UK.
8. The cost of **Your** burial abroad in the country where death occurs, up to £2,000.

What each insured-person IS NOT covered for:

1. Any expenses which **You** incur in **Your** normal country of residence (other than 3 and 4 above for UK trips only).
2. Any in-patient or additional travelling expenses or single/private room accommodation or for the services of a chiropractor, chiropodist or osteopath or for non-medical costs, not specifically authorised by EURO-ALARM.
3. Any expense which **You** incur more than 12 months after the occurrence of the injury or illness to which the claim refers.
4. Any form of cosmetic surgery or any expense which is not usual, reasonable or medically necessary for the medical services and/or the supply thereof.
5. Any expense for non-essential or ongoing treatment, or regular continuous treatment or costs, or where treatment can be reasonably delayed until **Your** return to the UK.
6. Any form of cardiac or organ transplant surgery unless authorised by EURO-ALARM in advance of being performed.
7. Treatment for tropical diseases if **You** have not had the recommended or compulsory inoculations.
8. Any costs incurred after both the EURO-ALARM doctor and the treating doctor consider **You** to be medically fit to return to the UK.
9. Provision of false limbs, wheelchairs, hearing aids, dentures or dental fixtures.
10. The cost of any elective treatment or surgery including exploratory tests, which are not directly related to the illness or injury which necessitated **Your** admittance to hospital.
11. Any expense which is covered by any reciprocal agreement, whether utilised or not.
12. Any excess shown in the Schedule of Cover.
13. Anything excluded by the General Exclusions or any breach of the Conditions.

SECTION C - PERSONAL ACCIDENT

Please note that ALL benefits detailed below in relation to Your age, are based on Your age at the date of departure of Your Outward Journey.

What each insured-person IS covered for:

If **You** sustain bodily injury caused solely by accidental violent external and visible means and such bodily injury solely and directly results within 12 months in **Your** death or disablement, **We** will pay the amounts detailed in the Schedule of Cover relevant to the type of cover purchased, to **You** or **Your** legal representative in accordance with the following items:

1. Death.
2. Permanent Loss by physical severance of hand or foot at or above the wrist or ankle or the total and permanent loss of use of an entire hand or arm or of an entire foot or leg or total and irrecoverable loss of all sight in one or both eyes.
3. Permanent Total Disablement - **Your** permanent and absolute inability to work in any gainful capacity that lasts 12 months and at the end of that period is without hope of improvement as certified by a medical specialist appointed by **Us**.

Please note that:

1. If **You** are under 18 years of age the benefit under 1. above is limited to £2,500.
2. If **You** are aged 65 years*, 1. above is limited to £2,500 and no benefit will be payable under 2 or 3 above.

What each insured-person IS NOT covered for:

1. Benefit payable under more than one of the items 1, 2 or 3 and on payment of a claim under any one of these items, all liability under this Section will cease insofar as **You** are concerned.
2. Anything excluded by the General Exclusions or any breach of the Conditions.

* or over

GENERAL EXCEPTIONS APPLYING TO SECTIONS A, B & C

What each insured-person IS NOT covered for:

Any claims arising from:

1. Any claim where the Insured person(s) do not comply exactly with the Important Medical Conditions that is applicable to this Policy, as stated on Page 4 of this Policy wording.
2. Trip arrangements made or undertaken where the Insured Person or Close Relative:
 - (a) is awaiting tests or treatment or awaiting the results of tests or treatment, or
 - (b) has received a terminal prognosis, or
 - (c) is travelling for the purpose of obtaining medical treatment abroad or whilst travelling against advice of a Registered Medical Practitioner in relation to the diagnosis or instability of any medical condition
3. Claims arising from pregnancy where the period of the trip terminates within 10 weeks of the date of delivery as estimated by a Hospital or Registered Medical Practitioner or any claim relating directly or indirectly to In Vitro Fertilisation (I.V.F.), or any form of fertility treatment.

4. Driving or being a passenger of a motorcycle, motor scooter or mechanically assisted cycle exceeding 125cc in engine capacity during the period of the trip.
5. **You** engaging in Manual Work during the period of the trip, or any Hazardous Pursuit not listed on Page 2 and 3, unless agreed and endorsed by **Us**.
6. Failure of a provider to supply any part of a booked trip.
7. Anything excluded by the General Exclusions or any breach of the Conditions.

SECTION D - (A) TRAVEL DELAY & (B) MISSED DEPARTURE

What each insured-person IS covered for:

(A). Travel Delay

If as a direct result of a strike, adverse weather conditions or the mechanical breakdown of the Public Transport, which has been the subject of Advance Booking by **You**, occurring after the date of commencement of cover and resulting in the international arrival time of the Outward/Return Journey taking place more than a set number of hours (See Schedule of Cover) after the arrival time appearing on **Your** ticket or booking invoice, then **We** will pay **You** as shown below:

1. Delay Benefit (A) set payment dependent on the number of hours delayed - See Schedule of Cover.
2. Cancellation If **You** elect to Cancel the trip prior to the commencement of the Outward Journey after a delay exceeding 24 hours **We** will pay **You** in respect of irrecoverable travel or accommodation deposits or charges paid or contracted to be paid under Section A.

(B). Missed Departure:

If **You** miss **Your** booked departure due to the vehicle in which **You** are travelling having an accident or breaking down, or being delayed by exceptional and unforeseeable traffic conditions or if the public transport **You** use does not run to its timetable whilst **You** are on **Your direct Journey** to the point of international departure immediately prior to commencement of the Outward Journey from the UK, or commencement of the Return Journey to the UK, **We** will pay **You** up to the limit stated in the Schedule of Cover for reasonable additional travel charges which **You** have to pay to get to **Your** journey destination or back to the UK.

Provided that:

1. Any payment **We** make in respect of D(A)1. above will be deducted from any subsequent payment made under D(A)2.
2. In respect of D(A) above **You** must check in according to the itinerary provided by the Tour Operator or carrier, and obtain written confirmation of the delay from such Tour Operator or carrier.
3. **You** must produce independent evidence from a relevant official authority in writing to support any claim.
4. Our limit of liability under D(A)2 will not exceed the amount stated in the Schedule of Cover for Section A.
5. In respect of D(B) above **You** must take all reasonable steps to arrive at the departure point at or before the recommended time and take reasonable account of traffic conditions to ensure **You** arrive on time.
6. Any car being used has been maintained to a satisfactory standard.

What each insured-person IS NOT covered for:

1. Any claim caused by a strike or other circumstances if it had started or been announced before **You** purchased this Insurance.
2. Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Civil Aviation Authority or a Port Authority or any similar body in any country.
3. Any Excess detailed in the Schedule of Cover for D(A)2 & D(B) alone.
4. Anything excluded by the General Exclusions or any breach of the Conditions.

SECTION E - PERSONAL LIABILITY

What each insured-person IS covered for:

All sums up to the amount stated in the Schedule of Cover for which **You** are legally liable in a personal capacity to pay in respect of accidents happening during the Period of Insurance resulting in:

1. The death or bodily injury to any person not being a member of **Your** family or travelling party.
2. Damage to property:
 - (a) Not belonging to **You**, or
 - (b) In the charge of or under the control of **You** or a member of **Your** family or travelling party.

The cover provided by this Section extends to cover costs and expenses recoverable by any claimant, provided they were incurred before the date (if any) on which **We** paid or offered to pay either the full amount of the claim or the total amount recoverable, in respect of any one occurrence, and also the costs and expenses incurred by **You** with Our written consent. In the event of **Your** death **Your** personal representative will receive the benefit of the cover granted by this Section.

Condition: **You** must immediately send **Us** any form of writ, summons, letter of claim or other legal document **You** receive in respect of any claim against **You**.

What each insured-person IS NOT covered for:

Claims arising:

1. Directly or indirectly out of the ownership, possession or use of any motor vehicle or any mechanically or electrically propelled aircrafts, vehicles, caravans, trailers, watercraft other than manually propelled craft.
Please note: that if **You** hire a car or motorcycle whilst on **Your** trip **You** must ensure **You** obtain proper cover through the hire company, as this is not covered under this Policy.
2. From damage or injury caused by an animal(s) belonging to or in **Your** care or **Your** custody or control.
3. Directly or indirectly out of or incidental to **Your** Business, trade or profession.
4. Out of actions between persons on the same Policy or a direct travelling companion.
5. Directly or indirectly out of **Your** ownership or use of any land or buildings.
6. Out of any liability assumed under a contract unless such liability would have attached in any event in the absence of such contract.
7. From any willful, malicious or unlawful act or the possession or use of any firearms or other offensive weapon.
8. Any incident where liability is admitted by **You** without Our prior consent.
9. Any Excess shown in the Schedule of Cover for 2 above (Damage to Property).
10. Anything excluded by the General Exclusions or any breach of the Conditions.

SECTION F - LEGAL EXPENSES

(See Schedule of Cover – Subject to correct premium paid)

This part of the Policy sets out the cover **we** provide in total, per Insured Journey to an Insured Person in relation to Costs and Expenses. DAS Legal Expenses Insurance Company Limited manages and controls all claims under this section.

Definitions applicable to this section

Representative the lawyer or other suitably qualified person, who has been appointed by **us** to act for the insured person in accordance with the terms of this section.

Costs and Expenses

- a) Legal Costs – all reasonable and necessary costs chargeable by the representative on a standard basis.
- b) Opponents' costs – **we** will also pay the costs incurred by opponents in civil cases if an insured person has been ordered to pay them, or pays them with our agreement.

Date of occurrence – the date of the event which may lead to a claim. If there is more than one event arising at different times from the same cause, the date of occurrence is the date of the first of these events.

WHAT IS COVERED

(See Schedule of Cover – Subject to correct premium paid)

This part of the Policy sets out the cover **we** provide in total, per Insured Journey to an Insured Person in relation to Costs and Expenses. DAS Legal Expenses Insurance Company Limited manages and controls all claims under this section.

Definitions applicable to this section

Representative the lawyer or other suitably qualified person, who has been appointed by **us** to act for the insured person in accordance with the terms of this section.

Costs and Expenses

- a) Legal Costs – all reasonable and necessary costs chargeable by the representative on a standard basis.
- b) Opponents' costs – **we** will also pay the costs incurred by opponents in civil cases if an insured person has been ordered to pay them, or pays them with our agreement.

Date of occurrence – the date of the event which may lead to a claim. If there is more than one event arising at different times from the same cause, the date of occurrence is the date of the first of these events.

WHAT IS COVERED

We agree to provide the insurance in this section, as long as:

- 1) a) the date of occurrence of the insured incident is during the period of insurance; and b) Any legal proceedings will be dealt with by a court, or other body which **we** agree to; and c) For civil claims, it is always more likely than not that an insured person will recover damages (or obtain any other legal remedy which **we** have agreed to) or make a successful defence.
- 2) For all insured incidents, **we** will help in appealing or defending an appeal as long as the insured person tells **us** within the time limits allowed that they want **us** to appeal. Before **we** pay the costs and expenses for appeals, **we** must agree that it is always more likely than not that the appeal will be successful.
- 3) **We** will only pay the legal costs charged by a representative appointed by **us**.
- 4) The most **we** will pay for all claims resulting from one or more event arising at the same time or from the same originating cause is £25,000. If the aggregate limit is reached this amount will be allocated in proportion to our liability to each insured person.

INSURED INCIDENT

BODILY INJURY

We will pay reasonable costs and expenses to pursue an insured person's legal rights in a claim against a party who causes the death of, or bodily injury to, the insured person occurring outside the United Kingdom and the Channel Islands, to recover damages or compensation.

WHAT IS NOT COVERED UNDER BODILY INJURY

A claim relating to:

- 1) Any illness or bodily injury which happens gradually or is not caused by a specific or sudden accident; or
- 2) Defending an insured person's legal rights, but defending a counterclaim is covered.

WHAT IS NOT COVERED BY THIS SECTION

- 1) A claim reported to **us** more than 180 days after the insured person should have known about the insured incident;
- 2) An incident or matter arising before the start of this section;
- 3) Costs and expenses incurred before our written acceptance of a claim;
- 4) Fines, penalties, compensation or damages which an insured person is ordered to pay by a court or other authority;
- 5) A legal action that an insured person takes which **we** or the representative have not agreed to, or where an insured person does anything that hinders **us** or the representative;
- 6) A claim relating to written or verbal remarks which damage an insured person's reputation;
- 7) A dispute with **us** or Oval Group or Firebond not otherwise dealt with under Condition 6;
- 8) An application for judicial review;
- 9) Any costs and expenses that are incurred where **we** agree a contingency fee arrangement with the representative;
- 10) Any claim against **us**, our agent, tour operator or travel agent.

Conditions which apply to Section F

- 1) a) **We** can take over and conduct in the name of an insured person, any claim or legal proceeding at any time. **We** can negotiate any claim on behalf of an insured person.
- b) The insured person is free to choose a representative (by sending **us** a suitably qualified person's name and address) if:
 - i) **We** agree to start court proceedings and it becomes necessary for a lawyer to represent the interests of an insured person in those proceedings; or
 - ii) There is a conflict of interest. **We** may choose not to accept the insured person's choice, but only in exceptional circumstances. If there is a disagreement over the choice of representative in these circumstances, the insured person may choose another suitably qualified person.
- c) In all circumstance except those in 1 b) previously, **we** are free to choose a representative.
- d) Any representative will be appointed by **us** to represent an insured person according to our standard terms of appointment. The representative must co-operate fully with **us** at all times.
- e) **We** will have direct contact with the representative.
- f) An insured person must co-operate fully with **us** and the representative and must keep **us** up to date with the progress of the claim.
- g) An insured person must give the representative any instructions that **we** require.
- 2) a) An insured person must tell **us** if anyone offers to settle a claim.
- b) If an insured person does not accept a reasonable offer to settle a claim, **we** may refuse to pay further costs and expenses.
- c) **We** may decide to pay the insured person the amount of damages that the insured person is claiming, or which is being claimed against them, instead of starting or continuing legal proceedings.
- 3) a) An insured person must tell the representative to have costs and expenses taxed, assessed or audited, if **we** ask for this.
- b) An insured person must take every step to recover costs and expenses that **we** have to pay, and must pay **us** any costs and expenses that are recovered.
- 4) If the representative refuses to continue acting for an insured person or if an insured person dismisses the representative, the cover **we** provide will end at once, unless **we** agree to appoint another representative.
- 5) If an insured person settles a claim or withdraws it without our agreement, or does not give suitable instructions to a representative, the cover **we** provide will end at once and **we** will be entitled to reclaim any costs and expenses **we** have paid.
- 6) If **we** and an insured person disagree about the choice of representative, or about the handling of a claim, **we** and the insured person can choose another suitable qualified person to decide the matter. **We** and the insured person must both agree to the choice of this person in writing. Failing this, **we** will ask the president of a relevant national law society to choose a suitably qualified person. All costs of resolving the disagreement must be paid by the party whose argument is rejected.

- 7) **We** may, at our discretion, require the insured person to obtain, at their expense, an opinion from a lawyer, accountant or other suitably qualified person chosen by the insured person and **us**, as to the merits of a claim or proceedings. If the chosen person's opinion indicates that it is more likely than not that an insured person will recover damages (or obtain any other legal remedy that **we** have agreed to) or make a successful defence, **we** will pay the cost of obtaining the opinion.
- 8) **We** will not pay any claim covered under any other policy, or any claim that would have been covered by any other policy if this policy did not exist.

SECTION G - PERSONAL POSSESSIONS, MONEY & TRAVEL DOCUMENTS

Note - This is NOT a "New for Old" replacement Policy. We will pay up to the limit shown on the Schedule of Cover based on the intrinsic value of the goods at the time of the loss for the following:
What each insured person IS covered for:

1. After making a deduction for wear, tear and loss of value, **We** will pay for the loss, theft or damage to property owned by **You**.
2. If **Your** baggage is delayed or lost in the Outward Journey for more than 12 hours, **We** will pay up to the limit stated in the Schedule of Cover for **You** to buy essential items. **You** must get written confirmation of the length of the delay and keep all receipts for items purchased. **We** will deduct any payment **We** make for delayed baggage from the amount of any claim if the baggage is permanently lost.
3. If **your** Valuables are lost, stolen or damaged whilst in the custody of the carrier, providing they have been placed in your checked-in baggage at the insistence of the carrier as a security measure and this is confirmed in writing by them, **We** will pay up to the amount stated in the Schedule of Cover for Valuables.
4. Loss or theft of cash, travellers cheques, if **You** can give **Us** evidence that **You** owned them, and evidence of their value (for persons under 18 years the limit on the loss of cash is reduced see Schedule of Cover).
5. Replacement of passport, visa(s), travel coupons, travel tickets or green cards if lost or stolen.
6. Golf Equipment (subject to appropriate premium paid) is covered up to £700 in total (single item limit still applies). If **You** are temporarily deprived of **Your** Golf Equipment on the **Outward Journey** for more than 24 hours from the time of arrival due to the delay or misdirection of delivery **We** will pay £20 for each complete 24 hours delay up to a maximum of £200 towards the hire of alternative Golf Equipment.

What each insured-person IS NOT covered for:

1. Any claim where **We** believe that **You** have not acted as if uninsured and not exercised proper and reasonable diligence in ensuring the safety and security of **Your** Personal Belongings, Baggage and Money.
2. Any item loaned or hired to **You** or given to **You** for custody or safe keeping.
3. More than the amount stated in the Schedule of Cover for Valuables, whether jointly owned or not or any single article, pair or set of any kind, whether jointly owned or not.
4. More than £150 for prescription spectacles and contact lenses, corneal lenses and £100 for sunglasses, subject to Single Article Limits stated in the Schedule of Cover.
5. More than the Single Item Limit stated in the Schedule of Cover for any quantity of cigarettes, alcohol and/or tobacco or any combination of them.
6. Claims for damaged items where **You** do not keep the items, thus preventing **Us** from inspecting the items if so required.
7. Loss or theft or damage to dentures, hearing aids, mobile telephones, and equipment samples or merchandise or property used in connection with **Your** Business or trade, entrance or admission tickets or documents of any kind, vehicles or accessories, pedal cycles, sculptures or antiques. Musical instruments whilst in the custody of any person other than **You**, pictures or paintings, Sports Equipment whilst in use, boats and/or ancillary equipment including windsurfing equipment and sailboards, surf boards, caravan awnings.
8. Damage to or breakage of glass or bottles and the consequences thereof or to china, perishable goods or other articles of a brittle or fragile nature.
9. The electrical or mechanical breakdown of any insured item.
10. Loss or damage arising from wear and tear, depreciation or deterioration, any process of cleaning, repairing or restoring, atmospheric or climatic conditions, moth or vermin, electrical or mechanical breakdown or derangement, or by leakage of powder or fluid from containers carried in **Your** baggage.
11. Loss or damage to property shipped as freight or sent by post.
12. Loss or damage to loaned or rented property or items, except when covered under Section P - Business Extension applies.
13. Loss due to delay, detention, confiscation, requisition or damage by Customs or other Officials or Authorities.
14. Loss or theft unless **You** have reported the loss or theft to the nearest Police authority within 24 hours of discovery and have obtained a written Police report.

15. Loss or damage of property whilst in the custody of the carrier such as an airline unless **You** report matter to them and obtain a Property Irregularity Report.
16. Loss or theft of property or money from an unattended motor vehicle, unless the items are Non Valuable and are stored in a locked boot or glove compartment and the loss or theft is confirmed by a police report, hire car company or motor insurers report, where relevant and the loss or theft occurs between the hours of 9.00am and 9.00pm only.
17. Theft of or damage to property left unattended other than as stated in above or unless in **Your** securely locked trip accommodation AND there is evidence of forced entry verified by a Police report.
18. Loss or theft or damage to Valuables whilst in a suitcase, holdall, bag or similar receptacle outside **Your** immediate control unless it is held in a safety deposit box or safe, or is at the insistence of the carrier and confirmed in writing by them.
19. Loss or theft of Cash which is not carried on **Your** person (unless it is held in a safety deposit box or safe).
20. Loss or theft of travellers cheques if **You** have failed to comply with any conditions or requirements imposed by the issuer or where the issuer provides a replacement service.
21. Claims for property more specifically insured elsewhere.
22. Claims for loss of or damage to jewellery whilst at or in a water activity area (considered to be the sea, beach, swimming pool or waterpark) other than wedding rings.
23. Shortages on Money due to error or omission or fluctuation in exchange rates.
24. Telephone calls and/or travelling costs other than those necessarily incurred in obtaining a replacement passport.
25. Any losses for item(s) exceeding the value of £75 the purchase price of which cannot be substantiated.
26. Any claim for household goods or home contents, not considered by **Us** to be a Personal belonging (see Page 2 Policy Definitions).
27. Any excess as stated in the Schedule of Cover.
28. Anything excluded by the General Exclusions or any breach of the Conditions.
29. Samples, merchandise or property used in connection with your business or trade, entrance or admission tickets or documents of any kind, except when cover under Section P - Business Extension applies.

WINTER SPORTS COVER

SECTION H - SKI EQUIPMENT

(Optional Extra Cover - Subject to correct premium paid)

What each insured-person IS covered for:

1. Loss or theft of or damage to Ski Equipment belonging to **You** up to the amount stated in the Schedule of Cover, (no single article or set of articles being insured for more than £150), subject to **You** keeping **Your** damaged equipment for Our inspection following **Your** return to the UK.
2. If **You** are temporarily deprived of **Your** Ski Equipment on the **Outward Journey** for a period for more than 12 hours from the time of arrival at the trip destination due to delay or misdirection in delivery, **We** will pay £10 for each complete 12 hours delay up to a maximum of £100 for the hire of alternative equipment. **You** must keep all hire receipts, tags and baggage labels and in the event of delay or misdirection in delivery of **Your** Ski Equipment and **You** must obtain a Property Irregularity Report from **Your** airline or other carrier confirming the length of delay.
3. If **You** are deprived of **Your** own Ski Equipment following loss or theft of or damage, **We** will pay for the necessary hire of replacement Ski Equipment up to the amount stated in the Schedule of Cover. Please note that **We** calculate how much **We** pay **You** for **Your** own Ski Equipment based on a depreciation-in-value rate of 20% per year.

SECTION I - SKI PACK

(Optional Extra Cover - Subject to correct premium paid)

What each insured-person IS covered for:

1. **We** will pay **You** up to the amount stated in the Schedule of Cover for the proportional amounts of irrecoverable pre-paid charges **You** have paid or contracted to pay before the trip departure date for Ski Equipment hire, lift passes and ski school costs, and cannot recover, if during the period of **Your** trip **You** are prevented from skiing for more than 48 hours following **Your** bodily injury or illness sustained during the period of **Your** trip. **You** must submit to Us a medical certificate from a qualified Medical Practitioner in the resort area in support of **Your** claim.

EXCLUSIONS APPLYING TO SECTIONS H & I

What each insured-person IS NOT covered for:

1. Any Claim where **We** feel that **You** have not acted as if uninsured and exercised proper and reasonable diligence in ensuring the safety and security of **Your** Ski Equipment or hired Ski Equipment.
2. Claims for damaged Ski Equipment where **You** do not keep the items, so that they can be sent to Us at **Your** expense.
3. Loss or theft unless **You** have reported the loss or theft to the nearest Police authority within 24 hours of discovery and have obtained a written Police report.
4. Loss or damage to Ski Equipment whilst in the custody of the carrier such as an airline unless **You** report the matter to them and obtain a Property Irregularity Report.
5. Loss or theft of Ski Equipment from an unattended motor vehicle unless from a locked boot or Ski storage holder or glove compartment and occurs between the hours of 9 a.m. and 9 p.m.
6. Theft of property left unattended other than whilst in **Your** securely locked trip accommodation AND there is evidence of forced entry verified by a Police report or from a secure area designated for the storage of Ski Equipment.
7. Any excess as stated in the Schedule of Cover.
8. Anything excluded by the General Exclusions or any breach of the Conditions.

SECTION J - PISTE CLOSURE

(Optional Extra Cover - Subject to correct premium paid)

What each insured-person IS covered for:

1. In the event of adverse snow conditions which result in total closure of all skiing facilities in **Your** resort **We** will pay **You** up to £20 per day to pay for transportation costs to the nearest available resort where there are adequate snow conditions OR compensation of £20 per day in the event there is no suitable alternative resort, up to the maximum shown in the Schedule of Cover. **You MUST obtain a written report confirming the piste closure from the resort authorities.**

What each insured-person IS NOT covered for:

1. No benefit is payable if **You** are able to obtain compensation from any other source.
2. Any payment for Piste Closure outside the period 14 December to 14 April in any Period of Insurance.
3. Compensation if the resort area booked by **You** does not have any skiing facilities above 1600 metres.
4. Anything excluded by the General Exclusions or any breach of the Conditions.

SECTION K - AVALANCHE COVER

(Optional Extra Cover - subject to correct premium paid)

What each insured-person IS covered for:

Up to £150 for reasonable additional travel and accommodation expenses (room only) if **Your Outward or Return Journey** is delayed beyond the scheduled arrival time, as a direct result of an avalanche and this causes **You** to miss **Your** booked flight, train or sea crossing.

What each insured person IS NOT covered for:

1. Compensation which **You** can get from the company providing accommodation, **Your** tour operator or anywhere else.
2. Compensation unless **You** get a letter from the relevant authority or **Your** tour operator confirming the event.
3. Anything excluded by the General Exclusions or any breach of the Conditions.

SECTION L - DISASTER RECOVERY

(See Schedule of Cover - Subject to correct premium paid)

What each insured-person IS covered for:

Up to the limit stated in the Schedule of Cover should **You** be forced to move from **Your** pre-booked and pre-paid accommodation as a result of fire, lightning, explosion, earthquake, storm, tempest, hurricane, flood, medical epidemic which is confirmed in writing by local or national authority, for irrecoverable travel or accommodation costs necessarily incurred to continue with **Your** trip, or if the trip cannot be continued, for **Your** return to the UK.

What each insured-person IS NOT covered for:

1. Any expenses following **Your** disinclination to travel or continue with **Your** trip when official directives from local or national authority state it is acceptable to do so.
2. Any costs or expenses payable by or recoverable from the Tour Operator, airline, hotel or other providers of services.
3. Anything excluded by the General Exclusions or any breach of the Conditions.

SECTION M - MUGGING BENEFIT

(See Schedule of Cover - Subject to correct premium paid)

What each insured-person IS covered for:

1. If **You** sustain actual bodily injury as a result of a Mugging attack during the Period of Insurance resulting in medical treatment necessitating inpatient admission to an overseas hospital, **We** will pay **You** a benefit of £50 per complete 24 hours **You** are hospitalised up to a maximum stated in the Schedule of Cover, subject to the incident being reported to the Police within 24 hours and a Police report being obtained.

What each insured-person IS NOT covered for:

1. This benefit if a claim has been made under Section B.5.
2. Any claim arising from **You** being under the influence of intoxicating liquor or of a drug or drugs (unless prescribed by a Registered Medical Practitioner) or substance or solvent abuse.
3. **Your** intentional self-injury or **Your** willful exposure or **Your** deliberate or negligent acts.
4. Anything excluded by the General Exclusions or any breach of the Conditions.

SECTION N - HIJACK

(See Schedule of Cover - Subject to correct premium paid)

What each insured-person IS covered for:

If **You** are prevented from reaching **Your** scheduled destination(s) as a result of Hijack of the aircraft or ship in which **You** are travelling, **We** will pay **You** £50 for the first full 24 hours of delay and £50 for each subsequent full 24 hours up to the maximum stated in the Schedule of Cover.

Provided that:

1. Compensation is payable only if no claim is made under Section A.
2. **You** must produce a report from the relevant official authority.
3. Subject to General Exclusion 6 Page 5 regarding War and Terrorism.
4. None of the General Exclusions or any breach of the Conditions excludes or invalidates the claim.

SECTION O - WITHDRAWAL OF SERVICE

(See Schedule of Cover - Subject to correct premium paid)

What each insured-person IS covered for:

A payment of £15 per complete 24 hours if **You** suffer Withdrawal of Service continuously for at least 60 hours during **Your** trip up to the maximum stated in the Schedule of Cover.

What each insured-person IS NOT covered for:

No benefit is payable:

1. Where cover is effective within 4 weeks of the departure date of **Your** trip.
2. For a strike or industrial action existing on the date of the Insurance was purchased.
3. For withdrawn services which were not part of **Your** pre-paid package deal.
4. Unless supported by written confirmation from the Tour Operator or hotel to substantiate **Your** claim.
5. If anything in the claim is excluded by the General Exclusions or any breach of the Conditions.

SECTION P - BUSINESS EXTENSION

(Annual Cover Only)

What each insured-person IS covered for:

1. Personnel Replacement

Reasonable and necessary return travel and accommodation expenses, up to the limit shown on the Schedule of Cover, incurred for a Business Associate to travel to **Your** place of Business overseas to attend to **Your** planned, essential and unavoidable Business duties, if in the event of **Your** injury or illness, a doctor certifies that **You** are unable to attend.

2. Business Documents and Records

To indemnify **You** up to £200 in all in respect of the cost of replacing or restoring Business documents, records and samples, being the property or responsibility of the Insured Person following loss or damage during the Period of Travel.

What each insured-person IS NOT covered for:

1. Any exclusion as detailed on Page 9 that is also applicable to Section G Personal Possessions, Money & Travel Documents, except when cover under Section P - Business Extension applies.
2. Any excess as stated in the Schedule of Cover.
3. Anything excluded by the General Exclusions or any breach of the Conditions.

DATA PROTECTION

We take **Our** obligations under data protection seriously and seek to maintain **Your** privacy whilst handling **Your** insurance as quickly and effectively as possible.

Your information will be held by **Insuremore Travel Insurance** and the insurer. The information will be used to obtain cover, manage **Your** policy and handle any claim. To do this **We** may have to disclose it to other insurers, regulatory authorities, legal representatives and other agents **We** may use to provide services to **Us**. Some of these may be outside the European Economic Area. **We** may also collect sensitive information about **You** and **Your** party, which we need in order to provide and manage **Your** cover and claims. By purchasing cover **You** agree to **Our** use of this information for the purpose of this insurance. In order to prevent fraud, we may from time to time share **Your** information with other members of **Our** group of companies, other insurers, fraud prevention agencies and credit reference agencies. **We** will not hold data for longer than necessary for proper legal and commercial purposes. All calls to Us may be monitored/recorded for training.

GENERAL ENQUIRIES

For general enquiries regarding this Policy please telephone or write to:
INSUREMORE TRAVEL INSURANCE
Axiom House - 4th Floor, The Centre, Feltham, Middlesex, TW13 4AU
Telephone 0870 054 0162 • Fax 0870 054 0156
www.insuremore.co.uk

MEDICAL SCREENING

Journeys Medical Screening 0870 054 0159
(Mon - Fri 09:00 - 17:30 and Sat 09:30 - 16:30)
Journeys Online Medical Screening
www.journeysmedical.co.uk

CLAIMS ENQUIRIES

All claim enquiries:
JOURNEYS CLAIMS
Axiom House - 4th Floor, The Centre, Feltham, Middlesex, TW13 4AU
Telephone 0870 054 0158 • Fax 0870 054 0157
Journeys Online Claims
www.journeysclaims.co.uk

HOW TO COMPLAIN

Our aim is at all times to provide a first class service. However, there may be occasions when **You** feel that this objective has not been achieved. Should **You** have any complaint regarding this Insurance, please write to the Managing Director of Insuremore Travel Insurance, who arranged the Policy for **You**. If after taking this action **You** are still dissatisfied **You** may write to either:

**The Manager,
ETI International Travel Protection (ETI), Albany House, 1st Floor
14 The Bishopric, Horsham, West Sussex, RH12 1QN**

**(For complaints regarding Section F Legal Expenses:
Managing Director, DAS Legal Expenses Insurance Company Limited, DAS House
Quayside, Temple Back, Bristol, BS1 6NH)**

**The Financial Ombudsman Service,
South Quay Plaza, 183 Marsh Wall, London E14 9SR.**

Please note that the Financial Ombudsman will not consider **Your** complaint until **You** have first written to the Insurer and received their final decision.