

**American Express®  
Travel Insurance**

# **Annual Essential Cover**

**Terms & Conditions  
Europe**

**Remember to take this  
Policy booklet with you  
when you travel**



®

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# Policy Summary

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The Policy **you** have bought is Annual Essential Cover. This Policy Summary tells **you** how much **you** can claim under each section of cover, but does not contain the full terms and conditions relating to **your** Policy. These can be found within this Policy booklet.

Section	Significant Features and Benefits	Annual Essential Cover
	<i>Description of Cover</i>	<i>Benefit</i>
1	<b>Personal Assistance Services</b> <i>including:</i> Transfer of emergency funds	to £200
2	<b>Medical Emergency &amp; Repatriation Service</b> <i>including:</i> Search & rescue costs Burial or cremation abroad or repatriation of body to the UK Emergency dental treatment UK medical transfer to hospital Person to join/stay with you	<b>to £10 million<sup>+</sup></b>  to £150,000  to £2,500 to £1,000 to £500 to £500
3	<b>Personal Accident</b> <i>including:</i> Death (18-65) Death (under 18 or over 65) Loss of/loss of use of/ one or more limbs Loss of sight in one/both eyes Permanent total disablement	<b>to £10,000</b> £10,000 £1,000  £10,000 £10,000 £10,000
4	<b>Cancellation &amp; Curtailment</b> <i>including:</i> If £1,500 loss to home When a deposit is lost <sup>‡</sup> Excursion cover	<b>to £3,000<sup>‡</sup></b>
5	<b>Missed Departure</b>	<b>to £250</b>
<p>*An excess of £50 applies unless the Excess Waiver Option premium has been paid.  <sup>‡</sup>A £10 excess applies.</p>		

keyfacts

Section	Significant Features and Benefits	Annual Essential Cover
	<i>Description of Cover</i>	<i>Benefit</i>
6	<b>Travel Delay</b> <i>including:</i> If delayed more than 12 hrs For each additional 12 hr delay	<b>to £100</b>  £20 £20
7	<b>Personal Baggage</b> (see page 5) <i>including:</i> For any one item/pair/set For valuables in total	<b>to £1,500*</b>  to £150 to £150
8	<b>Personal Baggage Delay</b> (outward trip) <i>including:</i> If delayed more than 12 hrs	<b>to £100</b>  to £100
9	<b>Money</b> <i>including:</i> under 16 Loss of cash Loss of passport (travel/accommodation)	<b>to £200</b> to £50 to £100  to £100
10	<b>Personal Liability</b>	<b>to £1 million</b>
11	<b>Legal Advice</b> <i>including:</i> Telephone guidance and assistance on any legal problem arising in connection with your trip or in connection with your home	Available from the start of your trip and up to seven days after you complete your trip
	<b>Excess Waiver Option</b> (Medical, Cancellation, Baggage and Money)	<b>only covered if Option premium paid</b>
12	<b>Winter Sports Option</b> <i>including:</i>  Piste Closure  Avalanche Benefit  Winter Sports Equipment For any one item/pair/set Delay of Equipment over 12 hours  Unused ski pack charges	<b>only covered if Option premium paid</b> to £200/ £20 per day to £150/ £30 per day to £500* to £300  to £300/ £20 per day to £350
* A £50 excess applies unless the Excess Waiver Option premium has been paid.		

Section	Significant Features and Benefits	Annual Essential Cover
	<i>Description of Cover</i>	<i>Benefit</i>
13	<p><b>Golf Option</b> <i>including:</i></p> <p>Golf Equipment <i>including:</i> For any one item For purchase of Golf Equipment, if delayed more than 12 hours For hire of Golf Equipment, if delayed more than 12 hours</p> <p>Green Fees Tournament Entry Fees Hole-In-One</p>	<p><b>only covered if Option premium paid to £2,500*</b></p> <p>to £250</p> <p>to £300</p> <p>to £250/ £35 per 24hrs</p> <p>to £1,000*</p> <p>to £250</p> <p>to £300</p>
14	<p><b>Stranded Traveller Assistance</b></p> <p>Travel Expenses Emergency Expenses</p> <p>Return home of your children</p>	<p><b>only covered if Option premium paid to £2,500</b></p> <p>to £200 per night</p> <p>to £2,500 travel costs</p>
<p>* A £50 excess applies unless the Excess Waiver Option premium has been paid.</p>		

#### IMPORTANT INFORMATION

**You** are only covered for these Options if the appropriate premium has been paid.

If **you** wish to add either of these Options to **your** existing cover, please call American Express Insurance Services on **0800 700 707**.

Please note that if **you** exclude Personal Baggage cover from **your** Policy, no cover under Section 7 will apply.

## Introduction

Thank **you** for choosing American Express Insurance Services to provide **your** Travel Insurance. This booklet provides useful information about the protection offered by this insurance, and the way in which the Policy will operate.

## The Intermediary

**Your** Policy has been arranged by American Express Insurance Services Europe Ltd<sup>1</sup>, a UK based insurance intermediary authorised and regulated by the Financial Services Authority. They will administer **your** Policy, and organise the renewal of annual policies, subject to the terms and conditions set out by the insurer.

American Express Insurance Services Europe Ltd will provide **you** with renewal terms offered by their travel insurance provider at the time of renewal. A renewal notice will be sent to **you** before the end of the **period of insurance**, explaining how this will work. If **you** do not wish to renew **your** policy **you** will need to contact American Express Insurance Services by calling 0800 700 707, at least 30 days prior to the expiry of **your** Policy. If American Express Insurance Services does not hear from **you**, **your** Policy will be renewed automatically.

## The Insurers

This Policy is underwritten by Forsakringsaktiebolaget Viator (part of the American Express group of companies), and ACE European Group Limited who will provide the insurance benefits described in this booklet.

Sections 2 to 9 and 11 to 14 are underwritten by Viator, of 3rd Floor, Lanchester House, Trafalgar Place, Brighton BN88 1ZA, the UK branch of Forsakringsaktiebolaget Viator, an American Express company (corporate identity No. 516401-8235. Registered address: 106 82 Stockholm, Sweden). Viator is authorised and regulated in Sweden by the Swedish Financial Supervisory Authority and regulated by the Financial Services Authority for the conduct of UK business. Branch Registration Number: BR005456. Registered in England and Wales.

Section 10 is underwritten by ACE European Group Limited. Registered in England. Registered Number: 1112892. UK Head Office: ACE Building, 100 Leadenhall Street, London EC3A 3BP, authorised and regulated by the Financial Services Authority. Registered Number: FRN202803.

<sup>1</sup>American Express Insurance Services Europe Limited (AEISEL), Registered Office: 76 Buckingham Palace Road, London SW1W 9AX, UK. Registered in England and Wales. Company Number: 05048826, is authorised and regulated by the Financial Services Authority, Registered Number: 311684. Full details can be found on the FSA's Register by visiting [www.fsa.gov.uk/register](http://www.fsa.gov.uk/register) or by contacting the FSA on 0845 606 1234.

## Your Policy and Certificate of Insurance

The Policy is a contract between **you** and **us** and is made up of two parts: **your** Certificate of Insurance and **your** Policy booklet which includes the Policy Summary. These must be read and kept together.

**Your** Certificate of Insurance includes the information **you** gave **us**. It shows **you** who is insured, the level of cover **you** have chosen, the **period of insurance**, **geographical limits** of travel, age restrictions, **your** premium and any changes to the normal cover (called endorsements).

## Exclusions applying to **your** Policy

### Age Restrictions:

Please refer to **your** Certificate of Insurance for the age restrictions that apply to **your** Policy.

### Exclusions:

Please refer to the following sections of this Policy booklet for the specific exclusions relating to each Policy section:

Section 1 Personal Assistance Services

Section 2 **Medical Emergency** and Repatriation Service

Section 3 **Personal Accident**

Section 4 Cancellation and **Curtailement**

Section 5 Missed Departure

Section 6 Travel Delay

Section 7 **Personal Baggage**

Section 8 **Personal Baggage** Delay

Section 9 **Money**

Section 10 Personal Liability

Section 11 Legal Advice

Section 12 **Winter Sports** (Optional Cover)

Section 13 Golf (Optional Cover)

Section 14 Stranded Traveller Assistance (Optional Cover)

Please refer to page 48 for the list of General Exclusions applying to all the sections of **your** Policy.

## Duration of **your** Policy

The Policy duration is one year and it allows **you** to travel for up to 31 consecutive days per **trip** throughout Europe as defined in 'Definition of Words'. **You** will have a total of 93 days cover in each **period of insurance**.

Please refer to **your** Certificate of Insurance for confirmation of the premium **you** have paid, age restrictions and **geographical limits**.

## Cancellation of **your** Policy

If this insurance does not meet **your** needs, **we** will cancel **your** Policy providing **you** return it to **us** within 15 days of issue and **you** have not already taken **your trip** or intend to make a claim. **We** will refund **your** premium in full, but **we** will not refund it, or any part of **your** premium, after the 15 days have passed.

If **you** subsequently give notice in writing or by telephone to American Express Insurance Services to cancel this insurance, such cancellation shall take effect on the next renewal date following such notice. No refund of premium will be made.

## What to do if **you** need to make a claim

1. First check **you** are covered by **your** Policy.

Please read the appropriate section in this Policy booklet to see exactly what is, and is not covered, noting particularly any conditions, limitations and exclusions.

2. Making a claim

a) In the event of an emergency **you** should first call the Emergency Helpline listed after each appropriate section of this Policy booklet (any minor illness or injury costs must be paid for by **you** and reclaimed).

b) For all other claims, telephone **our** Claims Helpline on 0845 408 2969 (during office hours) to obtain a claim form. **You** will need to give:

- **your** name,
- **your** Policy Number found at the top of **your** Certificate of Insurance,
- brief details of **your** claim.

Alternatively **you** can e-mail **our** Claims Helpline on [amex.retail@axa-assistance-claims.com](mailto:amex.retail@axa-assistance-claims.com) **You** will need to provide:

- **your** name,
- **your** Policy Number found at the top of **your** Certificate of Insurance,
- **your** address including the postcode,
- the section under which **you** wish to make a claim.

**You** must return **your** completed claim form and any additional information **we** ask for within 28 days of the end of **your trip**.

3. Additional Information

**You** must supply all of **your** original invoices, receipts and reports etc. **You** should check the section under which **you** are



claiming for any specific conditions and details of any supporting evidence that **you** must give **us**.

It is always advisable to keep copies of all the documents that **you** send to **us**.

#### 4. Claims Handling Agents

To help **us** agree a quick and fair settlement of a claim, it may sometimes be necessary for **us** to appoint a claims handling agent.

## Complaints Procedure

**We** aim to provide a first class service at all times. However, if **you** have a complaint regarding any aspect of the travel insurance product **you** have purchased or the standard of service **you** have received, please write with details of **your** complaint, to: American Express Insurance Executive Office, at 3rd Floor, Lanchester House, Trafalgar Place, Brighton BN88 1ZA.

If **you** are not satisfied with the way **your** complaint has been dealt with **you** have the right to ask the Financial Ombudsman Service to review **your** case. Telephone: 0845 080 1800 or write to: Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London, E14 9SR.

## Compensation Scheme

**We** are covered by the Financial Services Compensation Scheme. **You** may be entitled to compensation from the scheme if **we** cannot meet **our** obligations. This depends on the type of business and the circumstances of the claim. Insurance advising and arranging is covered for 100% of the first £2,000 and 90% of the remainder of the claim, without any upper limit.

# Use of Your Personal Data

Please read the paragraphs below, which define how American Express Insurance Services Europe Ltd (the intermediary) and Viator (the underwriter) uses information about **you** for the purpose of providing **you** with insurance services and additional products and services.

The American Express Group has long been a leader in the protection, confidentiality and security of information entrusted to us.

## Personal Information

If **your** insurance application is accepted by Viator (the underwriter) and **you** are issued a Certificate of Insurance and Policy wording, **you** also agree that American Express Insurance Services Europe Ltd and Viator may:

- a) disclose and use information about **you** and **your** insurance cover including information relating to **your** medical status and health to companies within the American Express group of companies worldwide, **our** partners, service providers and agents in order to administer and service **your** account/insurance cover (and arrange the renewal thereof), process and collect relevant payments on it, for fraud prevention and to manage the benefits or insurance programmes in which **you** are enrolled;
- b) use information about **you** and **your** insurance cover – excluding information relating to **your** medical status and health – to develop lists for use within the American Express group of companies worldwide and other select companies in order that **we** or these companies may develop or make offers to **you** (by mail, email or telephone) of products and services in which **you** may be interested. The information used to develop these lists may be obtained from **your** application, from information on where and how **you** use **your** Card if **you** are an American Express Cardmember and from surveys and research (which may involve contacting **you** by mail or telephone) and information obtained from other external sources such as merchants or marketing organisations; and
- c) undertake all of the above within and outside the United Kingdom and the European Union. This includes processing **your** information in the USA in which data protection laws are not as comprehensive as in the

European Union. However, American Express Insurance Services has taken appropriate steps to ensure the same (or equivalent) level of protection for **your** information in the USA and other countries as there is in the European Union;

- d) monitor and/or record **your** telephone calls in relation to cover to ensure consistent servicing levels and account operation.

If **you** wish to have **your** name removed from any marketing programmes or if **you** require any further information please contact American Express Insurance Services Europe Ltd on telephone **+44 1273 668300**.

Please provide **your** full name, postal address, travel insurance Policy Number and if **you** are an American Express Cardmember **your** Card Number. Please allow 40 days if **you** wish to have **your** name removed from marketing programmes for **your** request to become effective.

The American Express Group uses advanced technology and well defined employee practices to help ensure that **your** information is processed promptly, accurately and completely and in accordance with applicable data protection law.

If **you** want to know what information **we** hold about **you**, please write to:-

American Express Services Europe Limited,  
Data Protection Office,  
Dept 2007,  
Amex House,  
Edward Street,  
Brighton BN88 1AH.

There may be a charge for this service, as permitted by law.

Any information which is found to be incorrect will be corrected promptly.

The American Express Group reserve the right to contact **you** by mail or telephone in connection with the operation of **your** account and related services.

Information about **you** is only held for so long as it is appropriate for the above.

# Policy Information

1. Please take this Policy booklet and Certificate of Insurance with **you** whenever **you** travel. These are proof of **your** insurance and will be needed if **you** have to make a claim.
2. Please make sure **you** understand what this Policy covers. **Your** Certificate of Insurance draws **your** attention to important parts of the Policy. The Policy Summary included in this booklet confirms how much **you** can claim under each section of cover. Only this Policy booklet gives full details of what is, and is not covered, all terms and conditions, and how **your** claim will be handled.
3. Please see '**Emergency Assistance**', for details of what **you** should do in an emergency.
4. Premium refund within 15 days of issue. If this insurance does not meet **your** needs, **we** will cancel **your** Policy (if **you** return it to **us** within 15 days of issue) and refund **your** premium in full, providing **you** have not already taken **your** trip or intend to make a claim. **We** will not refund **your** premium, or any part of it, after the 15 days have passed.

If **you** subsequently give notice in writing or by telephone to American Express Insurance Services to cancel this insurance, such cancellation shall take effect on the next renewal date following such notice. No refund of premium will be made.

5. Any changes to the normal cover are shown on **your** Certificate of Insurance and must be read in conjunction with this Policy booklet. It is particularly important that **you** read **your** Certificate of Insurance and if any details are incorrect, or **your** needs change in any way, **you** must contact American Express Insurance Services as soon as possible.
6. **You** will have a total of 93 days cover in each **period of insurance**, with each individual **trip** limited to 31 days consecutively within the **geographical limits**.

Cover is applicable to leisure **trips** only. Business **trips** are not covered.

Please note if **you** take a **trip** outside these limits this insurance will not apply to any part of that **trip**. If the **trip** **you** are planning is likely to exceed these limits **you** will need to buy alternative cover for that **trip**. Please contact American Express Insurance Services for more information.

7. Please refer to **your** Certificate of Insurance for age restrictions which apply to the renewal of **your** Policy.

Please contact American Express Insurance Services for more information on:

**0800 700 707**

8. This Policy covers **you** for **trips** within the **United Kingdom area** provided **you** have pre-booked at least one night's accommodation.
9. If **you** have purchased **family** cover, **your family**, as named on the Certificate of Insurance will only be covered when travelling with the insured person named first on the Certificate of Insurance.
10. The most **we** will pay **you** in any **period of insurance** is shown under each Policy section and on the Policy Summary. All benefits and **excesses** are per person, per applicable section, per **trip**, unless this is qualified specifically.
11. **Valuables** should be insured separately under the All Risks/Extended Cover section of **your** Home Contents Insurance Policy, which will usually provide settlement on a new for old basis.
12. The premium for this Policy must be paid in full at the time of purchase.
13. This Policy is effected in England and is governed by the laws of England and Wales.
14. This contract may only be completed in English.

## Medical Warranty & Exclusion of Pre-existing Medical Condition(s)

It is **your** promise to **us** that, at the time of purchasing or renewing this travel insurance or booking **your trip**:

1. **You:**

- a) have not attended a hospital as an in-patient during the last 12 months;
- b) are not on a waiting list for an operation, consultation or investigation;
- c) have not commenced or changed prescribed medication or treatment within the last three months;
- d) do not require a medical, surgical or psychiatric check-up every 12 months or more frequently.

2. **You** are not travelling or planning to travel against medical advice, or where a terminal prognosis has been given.

3. **You** know of no reason whatsoever why **your trip** could be cancelled or curtailed. Travel Insurance covers emergency and unforeseen circumstances only. **You** are covered for cancellation or **curtailment** during **your period of insurance** if, after **you** have booked **your trip**, a **close relative**, a travelling companion or anyone on whom **your trip** depends, suffers unforeseen (not pre-existing) serious illness or injury, death or imminent demise.

If **you** are unable to meet **your** promise, **you** must contact American Express Insurance Services immediately on 0800 700 707 to confirm whether **your** cover can be commenced or continued. Certain medical conditions may be excluded from cover.

For the avoidance of any doubt – failure to contact American Express Insurance Services and obtain confirmation that **your** cover can be commenced or continued may result in **our** declining to pay **your** claim(s).

## Reciprocal Health Agreement – European Health Insurance Card (EHIC)

If **you** are travelling to a European Union country, **we** advise **you** to apply for a European Health Insurance Card (EHIC). This card entitles **you** to certain free or reduced cost health cover arrangements in European Union countries, and if **you** use it to reduce the cost of a medical claim under Section 2 – **Medical Emergency** and Repatriation Service, **you** will not have to pay the **excess** in respect of that claim.

### **Emergency Assistance, 24 hours a day, 365 days a year**

In an emergency, please first check that the circumstances are covered by **your** Policy. Having done this **you** should contact the appropriate number shown after each section of this Policy booklet, giving **your** name, Policy Number, and as much information as possible. **You** will need to give **us** a telephone or fax number where **we** can contact **you** or leave messages at any time of the day or night.

**To comply with the terms and conditions of the insurance, you must contact us if you are hospitalised as an in-patient, or before incurring any expenses whatsoever over £500, in order to obtain our prior authorisation, immediately you are physically able to do so. A claim form will need to be completed by you within 28 days of your returning home to your country of departure.**

## Introduction

Thank **you** for choosing American Express Insurance Services to provide **your** Travel Insurance. This booklet provides useful information about the protection offered by this insurance, and the way in which the Policy will operate.

## The Intermediary

**Your** Policy has been arranged by American Express Insurance Services Europe Ltd<sup>1</sup>, a UK based insurance intermediary authorised and regulated by the Financial Services Authority. They will administer **your** Policy, and organise the renewal of annual policies, subject to the terms and conditions set out by the insurer.

American Express Insurance Services Europe Ltd will provide **you** with renewal terms offered by their travel insurance provider at the time of renewal. A renewal notice will be sent to **you** before the end of the **period of insurance**, explaining how this will work. If **you** do not wish to renew **your** policy **you** will need to contact American Express Insurance Services by calling 0800 700 707, at least 30 days prior to the expiry of **your** Policy. If American Express Insurance Services does not hear from **you**, **your** Policy will be renewed automatically.

## The Insurers

This Policy is underwritten by Forsakringsaktiebolaget Viator (part of the American Express group of companies), and ACE European Group Limited who will provide the insurance benefits described in this booklet.

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Section 10 is underwritten by ACE European Group Limited. Registered in England. Registered Number: 1112892. UK Head Office: ACE Building, 100 Leadenhall Street, London EC3A 3BP, authorised and regulated by the Financial Services Authority. Registered Number: FRN202803.

<sup>1</sup>American Express Insurance Services Europe Limited (AEISEL), Registered Office: 76 Buckingham Palace Road, London SW1W 9AX, UK. Registered in England and Wales. Company Number: 05048826, is authorised and regulated by the Financial Services Authority, Registered Number: 311684. Full details can be found on the FSA's Register by visiting [www.fsa.gov.uk/register](http://www.fsa.gov.uk/register) or by contacting the FSA on 0845 606 1234.



## Your Policy and Certificate of Insurance

The Policy is a contract between **you** and **us** and is made up of two parts: **your** Certificate of Insurance and **your** Policy booklet which includes the Policy Summary. These must be read and kept together.

**Your** Certificate of Insurance includes the information **you** gave **us**. It shows **you** who is insured, the level of cover **you** have chosen, the **period of insurance**, **geographical limits** of travel, age restrictions, **your** premium and any changes to the normal cover (called endorsements).

## What to do if **you** need to make a claim

1. First check **you** are covered by **your** Policy.

Please read the appropriate section in this Policy booklet to see exactly what is, and is not covered, noting particularly any conditions, limitations and exclusions.

2. Making a claim

a) In the event of an emergency **you** should first call the Emergency Helpline listed after each appropriate section of this Policy booklet (any minor illness or injury costs must be paid for by **you** and reclaimed).

b) For all other claims telephone **our** Claims Helpline on 0845 408 2969 (during office hours) to obtain a claim form. **You** will need to give:

- **your** name,
- **your** Policy Number found at the top of **your** Certificate of Insurance,
- brief details of **your** claim.

Alternatively **you** can e-mail **our** Claims Helpline on [amex.retail@axa-assistance-claims.com](mailto:amex.retail@axa-assistance-claims.com) **You** will need to provide:

- **your** name,
- **your** Policy Number found at the top of **your** Certificate of Insurance,
- **your** address including the postcode,
- the section under which **you** wish to make a claim.

**You** must return **your** completed claim form and any additional information **we** ask for within 28 days of the end of **your** trip.

3. Additional Information

**You** must supply all of **your** original invoices, receipts and reports etc. **You** should check the section under which **you** are claiming for any specific conditions and details of any supporting evidence that **you** must give **us**.

It is always advisable to keep copies of all the documents that **you** send to **us**.

#### 4. Claims Handling Agents

To help **us** agree a quick and fair settlement of a claim, it may sometimes be necessary for **us** to appoint a claims handling agent.

### Complaints Procedure

**We** aim to provide a first class service at all times. However, if **you** have a complaint regarding any aspect of the travel insurance **you** have purchased or the standard of service **you** have received, please write with details of **your** complaint, to: American Express Insurance Executive Office, at 3rd Floor, Lanchester House, Trafalgar Place, Brighton BN88 1ZA.

If **you** are not satisfied with the way **your** complaint has been dealt with, **you** have the right to ask the Financial Ombudsman Service to review **your** case. Telephone: 0845 080 1800 or write to: Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London, E14 9SR.

### Compensation Scheme

**We** are covered by the Financial Services Compensation Scheme. **You** may be entitled to compensation from the scheme if **we** cannot meet **our** obligations. This depends on the type of business and the circumstances of the claim. Insurance advising and arranging is covered for 100% of the first £2,000 and 90% of the remainder of the claim, without any upper limit.

### Definition of Words

This part of the Policy booklet explains any words which have a special meaning. Each word is listed with its meaning explained immediately afterwards. Whenever a word with special meaning appears in this Policy booklet it will be printed in **bold** type.

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#### **Adventure Sports and Activities**

Includes the following sports and activities:

Abseiling; American football; baseball; boxing; bungee jumping; canoeing; canyoning; cave diving; clay pigeon shooting; deep sea fishing; fell running; flying (other than as a fare-paying passenger in a licensed passenger-carrying aircraft); go-karting; hang-gliding; hockey; horse jumping; horse riding; hot air ballooning; hunting; hunting on horseback; jetskiing; jet biking; martial arts; microlighting; any form of motor racing, speed, performance and endurance tests; mountain biking off tarmac; mountaineering; motor rallies; parachuting; paragliding; parascending; polo; pony trekking; potholing; professional sports; quad biking; rock climbing; rugby; scuba diving deeper than 30 metres; solo mountain climbing; solo caving; solo diving; steeplechasing; Tour Operator safari (where **you** or any other tourist will be carrying guns); trekking; white-water canoeing; yachting more than 20 nautical miles from the nearest coastline;

war games/paintball; white-water rafting; any organised team sports or organised competitions of the sports listed above.

Please note the following:

There is no cover under this Policy for any **Adventure Sports and Activities** but if the sport or activity **you** want to do on holiday is not listed, please call American Express Insurance Services on the following number for advice:

**0800 700 707**

### **Bodily injury**

An injury which:

- a) is caused by an accident;
- b) is caused solely and directly by visible, violent, external means;

In respect of **Personal Accident** as above and

- c) results in a **loss of**, or **loss of the use of**, **one or more limbs** or **loss of all sight in one or both eyes**, or death, directly and independently of all other causes. This does not include any sickness, disease or naturally occurring conditions or gradually operating or degenerative process.

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### **Carrier**

The aircraft, coach, ship or train operator and their employees and agents.

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### **Close relative**

**Your** spouse, or partner (with whom **you** have been living for at least six months and with whom **you** are still living), grandmother, grandfather, granddaughter, grandson, mother, stepmother, mother-in-law, father, stepfather, father-in-law, sister, sister-in-law, stepsister, brother, brother-in-law, stepbrother, daughter, stepdaughter, daughter-in-law, son, stepson, son-in-law, legal guardian or the fiancé(e) of any person insured under this Policy.

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### **Consequential Loss**

**You** are not covered for any other costs that are indirectly caused by the event which led to **your** claim, unless specifically stated in this Policy.

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### **Country of departure**

Great Britain, the Isle of Man, Northern Ireland, and the Channel Islands.

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### **Couple**

**You, your** spouse or partner with whom **you** have been living for at least six months and with whom **you** are still living.

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### **Curtailed**

**Curtailed** is cutting short **your trip** outside **your country of departure** by returning **home** due to an emergency authorised by **us**.

## Excess(es)

The first £50 for each insured person under **your** Policy, for every incident of loss applying to each section of cover under which a claim is made. This means that if **you** claim for something under a section of the Policy for which **excess** is to be deducted, **you** will personally be financially responsible for the first £50 for each insured person's claim.

**You** may choose to pay an additional premium to purchase the **Excess Waiver Option**. Having purchased the **Excess Waiver Option** **you** will no longer be personally financially responsible for the **excess** when submitting a claim. **You** cannot opt to purchase the **Excess Waiver Option** when **you** are actually aware of a potential claim, or in a claims situation.

Please also note the following:

1. If **you** have obtained a European Health Insurance Card (EHIC) and use it to reduce the cost of a medical claim under Section 2 – **Medical Emergency** and Repatriation, **you** will not have to pay the **excess** in respect of that claim.

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## Family

**You, your** spouse or partner (with whom **you** have been living for at least six months and with whom **you** are still living) and **your**, or their, children who are under 18 years old and in full-time education on the first day of the **period of insurance**.

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## Geographical Limits

The following countries are included within the definition of Europe: Albania; Andorra; Austria; Azores; Balearics; Belarus; Belgium; Bulgaria; Canary Islands; Channel Islands; Corsica; Croatia; Cyprus; Czech Republic; Denmark; Egypt; Estonia; Finland; France; Germany; Gibraltar; Greece; Hungary; Iceland; Israel; Italy; Latvia; Liechtenstein; Lithuania; Luxembourg; Madeira; Malta; Moldova; Monaco; Morocco; Netherlands; Norway; Poland; Portugal; Republic of Ireland; Romania; Russia west of the Ural Mountains; San Marino; Sardinia; Sicily; Slovak Republic; Slovenia; Spain; Sweden; Switzerland; Tunisia; Turkey; Ukraine and the **United Kingdom area**.

\*Please refer to – Policy Information – for limitations which apply to **trips** solely within the **United Kingdom area**.

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## Golf Equipment

The following items owned, entrusted to, or hired by **you**: golf clubs, golf bags, golf umbrellas, non-motorised trolleys, golf shoes and golf clothing.

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## Green Fees

Club membership or subscription fees.

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## Home

The place where **you** normally live in the **United Kingdom area** and use for domestic purposes.

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## Limits of cover

The most **we** will pay **you** in any **period of insurance** is the amount shown under each section of this Policy booklet.

### **Loss of all sight in one or both eyes**

Being totally blind in one eye or partly losing the sight in one eye, so that objects which should be clear from 60 feet away can only be seen at three feet away or less using that eye, or being totally blind and added to the Register of Blind Persons by a fully qualified eye specialist.

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### **Loss of, or loss of the use of, one or more limbs**

Complete and permanent loss of use of, or physical severance of a limb at or above the wrist or ankle.

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### **Medical emergency**

A **bodily injury** or sudden and unforeseen illness suffered by **you** while **you** are on a **trip** outside **your country of departure** and a registered medical practitioner tells **you** that **you** need immediate medical **treatment** or medical attention.

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### **Money**

Sterling and foreign currency, cheques, postal and money orders, gift vouchers, travel tickets, hotel and other holiday vouchers, petrol coupons, Green Card, passports, ski lift passes, together with the wallet, purse or similar article in which these items are carried, whilst:

- carried by **you** about **your** person (in an item of clothing **you** are wearing or in a container which **you** are holding or which is attached to **you**); or
  - left in a locked safety deposit box.
- 

### **Pair or set**

Items of **Personal Baggage** forming part of a set or which are normally used together.

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### **Period of insurance**

The period to which the insurance applies and for which **you** have paid, or have agreed to pay the appropriate premium. This period is shown on **your** Certificate of Insurance.

Please note that cover for cancellation under Section 4 –

Cancellation and **Curtailment** will start from when **you** take out this Policy, and cease when **you** have started **your trip**.

Cover under all the other sections applies for the length of **your trip** unless it is further qualified under a specific section.

### **Extension to the period of insurance.**

If **your** return journey to **your country of departure** is unavoidably delayed because of something which is covered under **your** Policy, **we** will automatically extend **your** cover for the period of the delay at no additional cost.

If **you** book a **trip** during the current **period of insurance** and have paid or agreed to pay for it, where the departure date is after the renewal date of **your** Policy, cancellation cover will continue in force on condition that **you** renew the Policy, if eligible, when renewal falls due and **your** premium is paid.

N.B. Please refer to **your** Certificate of Insurance for age restrictions applying to **your** Policy.

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#### **Permanent total disablement**

Disability which completely prevents **you** from doing work of any kind and after 12 months there is no hope of any improvement.

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#### **Personal Accident**

Accidental **bodily injury** caused solely and directly by outward and violent visible means.

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#### **Personal Baggage**

Items usually carried or worn by travellers (including **valuables** but excluding **Money**) taken on, or purchased on, a **trip** by **you** for **your** individual use during **your trip**.

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#### **Pre-existing medical condition(s)**

Any condition for which **you**:

- a) have attended a hospital as an in-patient in the last 12 months;
- b) are on a waiting list for an operation, consultation or investigation;
- c) within the last three months, have commenced or changed prescribed medication or treatment;
- d) require a medical, surgical or psychiatric check-up every 12 months or more frequently;
- e) have been given a terminal prognosis;
- f) know of any reason whatsoever, which may necessitate any **trip** to be cancelled or curtailed.

If **you** are aware of any **pre-existing medical condition(s)** these must be declared to American Express Insurance Services and accepted for cover. Certain medical conditions may be excluded from cover.

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#### **Public Transport**

Includes the following forms of transport: aircraft, bus, coach, pre-booked taxi, sea vessel and train.

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#### **Strike or industrial action**

Any form of industrial action which is carried out with the intention of stopping, restricting or interfering with the production of goods or provision of services.

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#### **Treatment**

Any type of surgical or medical procedure which is carried out solely to cure or relieve an unforeseen illness or injury.

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#### **Trip(s)**

A journey within the **geographical limits** shown on **your** Certificate of Insurance, which starts and ends in **your country of departure** during the **period of insurance** and which does not exceed 31 consecutive days. If **your** planned journey

exceeds 31 consecutive days then no cover whatsoever will apply in respect of that journey and **you** will need to buy alternative insurance for the whole of that journey. Please contact American Express Insurance Services for more information.

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### **United Kingdom area**

England, Scotland, Wales, Northern Ireland, the Channel Islands, and the Isle of Man.

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### **Valuables**

Jewellery, precious metals or precious stones or items made from precious metals or precious stones, watches, furs, leather articles, personal mobile phones, binoculars, telescopes, electronic, audio, video or photographic equipment, MP3 players and games consoles.

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### **We, us, our**

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### **Winter Sports**

On- and off-piste skiing, on- and off-piste snowboarding, snowblading, tobogganing, monoskiing, glacier skiing, and outdoor ice skating on a recognised public ice rink. Skidoo is also covered but is subject to an increased **excess** of £200 and no **Personal Accident** or Personal Liability cover is available.

Available only as an Option when the appropriate premium has been paid. **You** will be covered for the defined activities within the **geographical limits** for up to 17 days during the **period of insurance**.

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### **Winter Sports Equipment**

Skis, snowboards, ski boots, and ski equipment (not clothing).

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### **You, your, yourself**

The person(s) named on **your** Certificate of Insurance who live(s) in the **United Kingdom area**, and at the start of the **period of insurance** has complied with **our** medical assessment procedure for the initial annual **period of insurance**, and for whom the appropriate premium has been paid.

Where the **Family** premium has been paid, children must be under 18 years old on the first day of cover, in full-time education, and be travelling with the insured person named first on the Certificate of Insurance.

# Policy Sections

## Section 1 – Personal Assistance Services

### Assistance and Information about your Destination

This section provides details of the services **we** provide before **you** travel.

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

- current visa and entry permit requirements. If **your** passport was not issued in the **United Kingdom area**, **we** may refer **you** to the United Kingdom Embassy or Consulate of the country where **your** passport was issued;
- current inoculation/vaccination requirements and World Health Organisation warnings. **We** can also help **you** arrange inoculations or vaccinations in the **United Kingdom area** but **we** will not pay for the actual costs of inoculations or vaccinations;
- climatic conditions;
- languages;
- time differences;
- information and advice on the availability of various currencies and specification of the prime currency of **your** country of destination;
- main bank opening hours;
- national or bank holidays;
- motoring regulations and restrictions including whether **you** will need a Green Card;
- other motoring insurance issues.

**For Assistance and Information about your Destination before you travel call  
0845 456 6355**

### Personal Assistance

This part of the Policy explains the administrative and delivery costs **we** will pay for services **we** provide outside the **United Kingdom area**.

#### i) Transfer of Emergency Funds

If **you** need **funds** and access to **your** normal financial or banking arrangements is not available locally, **we** will transfer funds intended to cover **your** immediate emergency needs to **you** if **you** allow **us** to debit a credit, debit or charge card, or arrange for funds to be deposited with **us** in **your country of departure**. The most **we** will transfer to **you** per **trip** is £200.



ii) Message Relay

**We** will send urgent messages to **your home**, if **you** suffer an illness, accident or have unforeseen travel delay problems.

iii) Drug Replacement

**We** will help **you**:

- replace essential drugs, other medication, prescription glasses or contact lenses which have been lost, stolen or broken which **you** cannot get outside **your country of departure**;
- trace and deliver blood supplies which **you** cannot obtain outside **your country of departure**.

iv) Medical Referral

**We** will provide access to the names and addresses of local doctors, hospitals, clinics or dentists when **you** want a consultation or if minor **treatment** is needed. If any **treatment** other than for minor ailments is needed, **you** must advise **us** as soon as possible.

v) Medical Referral for Children

If any of **your** children under 18 years of age, who **you** leave in **your country of departure** when **you** travel become ill or suffer injury **we** will, if **you** ask **us** to, provide medical advice and monitor the situation until **you** return **home**.

vi) Tracing lost **Personal Baggage**

**We** will help trace **your Personal Baggage** and deliver it to **you** if it has been lost and the **carrier** has not found it for **you**. **We** will need **your Personal Baggage** tag number.

vii) Replacement Travel Documents

**We** will help **you** to replace these and refer **you** to a suitable travel office if **your** tickets and travel documents, including **your** passport, have been lost or stolen.

viii) Lost Credit, Debit and /or Charge Cards

**We** will tell **your** credit, debit or charge card company in **your country of departure** if **your** credit, debit or charge cards are lost or stolen.

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## **Section 2 – Medical Emergency and Repatriation Service**

This section provides details of the cover **we** provide for a **medical emergency** and other expenses relating to such an emergency, including search and rescue services.

To comply with the terms and conditions of the insurance **you** must contact **us** if **you** are hospitalised as an in-patient, or before

incurring any expenses whatsoever over £500, in order to obtain **our** prior authorisation, immediately **you** are physically able to do so. For the avoidance of any doubt – failure to contact **us** as required may result in **our** declining to pay **your** claim. A claim form will need to be completed by **you** within 28 days of **your** returning **home** to **your country of departure**.

What **you** are covered for:

If **you** suffer **bodily injury**, illness or die while on **your trip** **outside the United Kingdom area** we will pay the cost of:

i) all reasonable and necessary expenses which arise as a result of a **medical emergency** (excluding search and rescue) involving **you**. This includes doctors' fees, hospital expenses, medical **treatment** and all the costs of transporting **you** to the nearest suitable hospital.

The most **we** will pay **you** under this section per **trip**, for any one claim in total is £10,000,000.

ii) search and rescue costs including emergency transfer to a hospital effected by local organisations, are covered for up to £150,000 where such costs are not met by local authorities. This does not apply to **United Kingdom area trips**.

iii) in the event of death:

- the cost of burial or cremation outside the **United Kingdom area**; or
- transport of **your** body or ashes to **your home**.

The most **we** will pay **you** per **trip** under Section 2 iii) is £2,500.

iv) additional travelling costs when **our** Senior Medical Officer recommends that **you** must return to **your country of departure** including the cost of a medical escort if necessary.

v) reasonable additional travelling and accommodation costs for returning **home** insured members of **your family** travelling with **you**, where a valid claim is made under this section, including the cost of a competent adult of **our** choice to accompany any insured children under 18 years old, if **your bodily injury**, illness or death means there is no one else to look after them. Any travel (flight tickets will be for economy class, or at the same class as that originally purchased) and/or accommodation arrangement (on a half-board basis) must be made by **us**, or with **our** prior approval.

vi) reasonable additional accommodation and meal expenses incurred, up to the standard of **your** original booking, if it is recommended by the treating registered medical practitioner, and agreed by **our** Senior Medical Officer, that it is medically necessary for **you** to stay beyond **your** original return date.

vii) emergency dental **treatment** for the immediate relief of pain and/or emergency repairs to dentures or artificial teeth solely to relieve distress in eating.

The most **we** will pay **you** per **trip** under Section 2 vii) is £1,000.

- viii) in the event of **you** having a valid claim under Section 2 – **Medical Emergency & Repatriation Service**, and **you** are travelling unaccompanied by another adult(s), if it is recommended by the treating registered medical practitioner, and agreed by **our** Senior Medical Officer that a person should stay with **you** outside the **United Kingdom area**, and/or accompany **you home**, then **we** will arrange and pay for one person's necessary travelling and accommodation costs. Accommodation will be on a half-board basis. **We** will not pay for travel (flight tickets will be for economy class) and/or accommodation that has not been arranged through **us**, or incurred without **our** prior approval. If **you** are travelling with another adult(s) this benefit in Section 2 viii) will not apply, however, Section 2 ix) will apply if appropriate.

The most **we** will pay **you** per **trip** under Section 2 viii) is £500.

- ix) in the event of **you** having a valid claim under Section 2 – **Medical Emergency & Repatriation Service**, and **you** are travelling accompanied by another adult(s), if it is recommended by the treating registered medical practitioner, and agreed by **our** Senior Medical Officer that a person should stay with **you** outside the **United Kingdom area**, and/or accompany **you home**, then **we** will arrange and pay for one person's necessary additional travelling and accommodation costs. Accommodation will be on a half-board basis. **We** will not pay for travel (flight tickets will be for economy class) and/or accommodation that has not been arranged through **us**, or incurred without **our** prior approval. If **you** are travelling unaccompanied by another adult(s) this benefit in Section 2 ix) will not apply, however, Section 2 viii) will apply if appropriate.

The most **we** will pay **you** per **trip** under Section 2 ix) is £500.

- x) If **you** suffer **bodily injury** or sudden illness while on a **trip** in the **United Kingdom area**, **we** will pay the cost of transferring **you** to a suitable hospital near **your home** or to **your home** if **you** are hospitalised more than 50 miles from **your home**.

The most **we** will pay **you** per **trip** under Section 2 (x) is £500.

What **you** are not covered for:

- a) the **excess** of £50 except where **you** have paid the **Excess Waiver Option Premium**;
- b) costs of more than £500 not agreed or authorised by **us** in advance;
- c) any new or **pre-existing medical condition(s)** which existed before booking **your trip** unless **you** told **us** about the medical conditions and **we** agreed to accept it (them);
- d) any **treatment** or diagnostic testing that was pre-planned or pre-known by **you**;

- e) **treatment** costs for cosmetic reasons unless **our** Senior Medical Officer agrees such **treatment** is necessary as a result of an accident covered by this Policy;
- f) any costs relating to pregnancy within eight weeks of the estimated date of delivery;
- g) the cost of any **treatment** where a registered medical practitioner states that the **treatment** can safely be delayed until **your** return **home**;
- h) any costs **you** incur outside **your** country of departure after the date **our** Senior Medical Officer tells **you**, **you** should return **home**;
- i) costs incurred in the **United Kingdom** area other than the cost of transporting **you** or **your** body or ashes to **your** home;
- j) any costs not covered by the local National Health Service in the Channel Islands;
- k) the cost of flight tickets exceeding economy class for an accompanying non-medical escort in the event of medical repatriation (any increase in cost due to requested upgraded flight tickets must be at the personal expense of the person(s) travelling);
- l) costs for accommodation exceeding half-board;
- m) incidental expenses (for example telephone costs, newspapers, laundry costs);
- n) any costs for transportation and/or accommodation not arranged by **us**, or incurred without **our** prior approval;
- o) the cost of dental **treatment** involving the provision of dentures, artificial teeth or the use of precious metals;
- p) the cost of replacing medication **you** were using when **you** began **your** trip;
- q) any medical costs **you** incur when **you** are engaging in **Winter Sports** activities where **you** have not paid the Winter Sports Option Premium;
- r) any medical costs **you** incur when **you** are engaging in any **Adventure Sports and Activities**;
- s) anything mentioned in the General Exclusions.

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## **Section 3 – Personal Accident**

This section provides details of the cover **we** provide if **you** have an accident during **your** trip.

### What **you** are covered for:

If **you** die or suffer disablement or **permanent total disablement** as a result of an accidental **bodily injury** during **your** trip which, within 12 months, is the sole cause of either death or

disablement, **we** will pay **you** or **your** legal representative(s):

- £10,000 for death; or £1,000 if **you** are under 18 years old or more than 65 years old
- £10,000 for **the loss, or loss of use of, one or more limbs, or the total and irrecoverable loss of all sight in one or both eyes;**
- £10,000 for **permanent total disablement.**

The most **we** will pay **you** in total under this section per **trip** is £10,000.

What **you** are not covered for:

- a) any claim related directly or indirectly to any disease, physical defect, infirmity or illness which existed before the start of **your trip;**
- b) any claim resulting either directly or indirectly from **you** engaging in any **Adventure Sports and Activities;**
- c) anything mentioned in the General Exclusions.

## Section 4 – Cancellation and Curtailment

This section provides details of the cover **we** provide if **you** need to cancel **your trip** before **you** leave, or curtail **your trip** having already departed.

What **you** are covered for:

If **you** have booked a **trip** within the **period of insurance**, but **you** are forced to cancel **your** travel plans or curtail a **trip** **you** have already commenced, because of any one of the following:

- unforeseen illness, injury or death of **you** or any person with whom **you** are going to travel or stay with during **your trip**, or on whom **your trip** depends (please refer to Medical Warranty and Exclusion of **Pre-existing Medical Condition(s)**);
- unforeseen illness, injury or death of a **close relative** (please refer to Medical Warranty and Exclusion of **Pre-existing Medical Condition(s)**);
- **you** or any person with whom **you** plan to travel being called up for Jury Service or being subpoenaed as a witness in a Court of Law other than in a professional or advisory capacity;
- **you** are made redundant and **you** qualify for redundancy payment under current legislation;
- accidental damage, burglary, flooding or fire affecting **your home**, when a loss exceeding £1,500 is involved and **your** presence is required by the Police;

Then **we** will reimburse **you** up to a maximum of £3,000 in total for financial loss **you** suffer for travel (including pre-paid excursions and/or conferences) and accommodation **you** do not use because of **your** inability to start or complete **your trip**.

If **you** are forced to cancel **your trip for medical reasons**:

- **relating to you** – **you** will be required to have the relevant section of **your** claim form completed by **your** usual registered medical practitioner within the **United Kingdom area**, explaining why it is deemed medically necessary for **you** to cancel **your trip**;
- relating to a **close relative**, any person with whom **you** are going to travel or stay with during **your trip** or on whom **your trip** depends – **you** will be required to have the relevant section of **your** claim form completed by their usual registered medical practitioner, explaining why it is deemed necessary for **you** to cancel **your trip**.

**You** must notify **your carrier** or travel agent immediately **you** know **your trip** is to be cancelled to minimise **your** loss as far as possible.

If **you** are forced to curtail **your trip** for medical reasons:

- relating to **you** – **you** must get a medical certificate from the treating registered medical practitioner at the resort or place of incident, explaining why it is deemed medically necessary for **you** to curtail **your trip**.

**You** may also be required to have the relevant section of **your** claim form completed by **your** usual registered medical practitioner within the **United Kingdom area** with regard to pre-existing medical history.

- relating to a **close relative** within the **United Kingdom area** – **you** will be required to have the relevant section of **your** claim form completed by their usual registered medical practitioner, with regard to pre-existing medical history if appropriate and explaining why it was deemed necessary for **you** to curtail **your trip**.
- relating to any person with whom **you** are travelling or staying with during **your trip** or on whom **your trip** depends – **you** will need to obtain a copy of a medical certificate from their treating registered medical practitioner at the resort or place of incident, explaining why it is deemed necessary for the **trip** to be curtailed.

**You** may also be required to have the relevant section of **your** claim form completed by the patient's usual registered medical practitioner with regard to pre-existing medical history if appropriate.

**You** must contact **us** to make necessary travel arrangements for **you**.

In the event of a claim for **Curtailed**, indemnity will be calculated strictly from the date **you** return to **your home** in the **United Kingdom area**.

What **you** are not covered for:

- a) the **excess** (for claims involving loss of deposit the **excess** will be £10 only) except where **you** have paid the **Excess Waiver Option Premium**;

- b) cancelling or curtailing **your trip** for any reason other than specified under 'What **you** are covered for';
- c) claims for financial loss in respect of travel and/or accommodation booked and paid for by **you** on behalf of anyone who is not an insured person under **your** Policy;
- d) any delay caused by **strike or industrial action** which had started or for which the start date had been announced before **you** made travel arrangements for **your trip**, and/or arranged **your** insurance;
- e) a **pre-existing medical condition** for **you** that could result in a claim under this section unless **you** have notified American Express Insurance Services on 0800 700 707, and they have accepted it under the Medical Warranty and Exclusion of **Pre-existing Medical Condition(s)**;
- f) a **pre-existing medical condition** for any **close relative**, travelling companion or anyone on whom **your trip** depends;
- g) any costs incurred because **you** did not tell **your carrier** or travel agent immediately **you** knew that **your trip** was to be cancelled;
- h) any costs incurred because **you** did not contact the emergency service provider to make the necessary travel arrangements immediately **you** knew that **your trip** was to be curtailed;
- i) any costs incurred when **you** do not get a medical certificate from the treating medical practitioner at **your** resort or place of incident, explaining why it is deemed medically necessary to return **home** early to the **United Kingdom area**;
- j) any claim resulting from the withdrawal from service of any **public transport** on the orders or recommendation of the regulatory authority in any country;  
N.B. **You** should refer any claim in this case to the transport operator involved.
- k) any claim resulting from the failure of the provider of any service forming part of **your** booked **trip** to provide any part of **your** booked **trip** including error, insolvency, omission or default;
- l) any claim resulting from **your** financial circumstances;
- m) any claim due to **your** failure to obtain a valid passport or visa for the country **you** are visiting;
- n) any claim resulting from cancellation or **curtailment** caused by work commitments or amendment of **your** holiday entitlement by **your** employer;
- o) any claim resulting from the delay or amendment of **your** booked **trip** because of Government action or restrictive regulations;
- p) compensation for frequent flyer points or similar schemes;
- q) any claim resulting from the death or illness of pets or animals;
- r) anything mentioned in the General Exclusions.

## Section 5 – Missed Departure

This section provides details of the services and benefits we provide to **you** during **your trip** if **you** are delayed when travelling to **your** point of international departure and **you** miss a travel departure on **your** outward journey.

### What **you** are covered for:

Additional costs **you** have to pay when **you** travel to **your** international departure point and **you** have taken every reasonable step to ensure **you** get there on time but **you** are still delayed on **your** way because of:

- cancellation, failure or disruption of **public transport**;
- the immobilisation of the vehicle in which **you** are travelling due to accident or breakdown.

**We** will help **you** to get to **your** international departure point by:

- liaising with **your carrier** and/or tour operator to advise them of **your** late arrival;
- arranging emergency local help including towing **your** vehicle to the nearest garage;
- arranging alternative transport;
- arranging for overnight hotel accommodation and alternative international travel to **your** pre-booked destination by the most direct alternative route.

The most **we** will pay **you** per **trip** under this section is £250.

### What **you** are not covered for:

- a) any delay caused by **strike or industrial action** which had started or for which the start date had been announced before **you** made travel arrangements for **your trip** and/or arranged **your** insurance;
- b) any claim resulting from the withdrawal from service of **public transport** on the orders or recommendation of the regulatory authority in any country;  
N.B. **You** should direct any claim in this case to the transport operator involved.
- c) additional costs where the **public transport** operator has offered reasonable alternative travel arrangements;
- d) any claim for additional mechanical wear and tear or loss of value or for additional mileage charges other than for additional fuel and oil;
- e) any claim under this section where **you** are also claiming under Section 4 – Cancellation and **Curtailement**, or Section 6 – Travel Delay;
- f) additional costs which are not directly related to **you** travelling to **your** international departure point on **your** outward journey;
- g) any claim where **you** have not provided written evidence of the breakdown or accident involving the car **you** were travelling in;



- h) any claim where **you** have not obtained written confirmation from the **carrier** stating the period and the reason for delay;
- i) any claim where **you** have not allowed **yourself** sufficient time to arrive at the international departure point in time to check-in;
- j) any claim where **you** did not contact **us** to make the necessary travel arrangements;
- k) anything mentioned in the General Exclusions.

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## Section 6 – Travel Delay

This section provides details of the benefits **we** provide if **your** travel is delayed.

### What **you** are covered for:

If the pre-booked flight, sea crossing or international train journey from or to **your country of departure** is delayed for more than 12 hours beyond the intended departure time as a direct result of:

- **strike or industrial action**; or
- adverse weather conditions; or
- mechanical breakdown of **public transport**,

**we** will pay **you**:

- £20 for the first 12 hours that **your** departure is delayed; and
- £20 for each additional full 12 hour period of delay; or
- **you** may choose to submit a cancellation claim under Section 4 – Cancellation and **Curtailment** after 12 hours delay on **your** outward journey.

The most **we** will pay **you** per **trip** under this section is £100.

### What **you** are not covered for:

- a) delays caused by **strike or industrial action** which had started, or for which the start date had been announced, before **you** made travel arrangements for **your trip** and/or arranged **your** insurance;
- b) delays caused by the withdrawal from service of any **public transport** on the orders or recommendation of the regulatory authority in any country;  
N.B. **You** should direct any claim in this case to the transport operator involved.
- c) the failure of the provider of any service forming part of **your** booked **trip** to provide any part of **your** booked **trip** including error, insolvency, omission or default;
- d) any claim where **you** are already claiming under Section 5 – Missed Departure;
- e) any claim where **you** have not obtained written confirmation from the **carrier** giving the period and reason for delay;

- f) any claim for a delay that **you** are aware of at the time of booking **your trip** or taking out this Policy;
- g) if **you** do not check-in for the flight, sea crossing, coach or train departure before the advised time;
- h) anything mentioned in the General Exclusions.

## Section 7 – Personal Baggage

This section provides details of the cover **we** provide for **your Personal Baggage** as long as **you** have paid the appropriate premium and it is shown on **your** Certificate of Insurance.

### What **you** are covered for:

**Your Personal Baggage** is covered if it is:

- damaged or destroyed (in this instance please retain any damaged or destroyed items for inspection if required);
- lost or stolen and not recovered within 28 days of **you** arriving back in **your country of departure**.

The most **we** will pay **you** under this section per **trip** is £1,500 in total and:

- the most **we** will pay for any one item or any one **pair or set** per **trip** is £150;
- the most **we** will pay **you** for **valuables** in total per **trip** is £150.

### What **you** are not covered for:

- a) the **excess** except where **you** have paid the **Excess Waiver Option Premium**;
- b) any item loaned, hired or entrusted to **you** except **Winter Sports Equipment**, when **you** have purchased the **Winter Sports Option**.
- c) theft of **Personal Baggage**, but not **valuables** (see d below) from an unattended motor vehicle unless:
  - i) the items were locked out of sight in a locked dashboard or locked boot; and
  - ii) evidence that force and violence were used to get into the motor vehicle is provided by **you**.
- d) damage to, loss or theft of **valuables** from an unattended motor vehicle or **Personal Baggage** in transit;
- e) contact or corneal lenses, dentures, bonds, securities, stamps or documents of any kind including driving licence; keys and necessary changes to locks, musical instruments, glass, china, antiques, pictures, pedal cycles, hearing aids, coupons, computer hardware peripherals and software (including laptop computers), PDAs, televisions, vehicles (including boats or any parts or accessories for any of them), business goods, stock or samples and any specialised equipment relating to **your** business, trade or profession;
- f) loss, damage or destruction by wear and tear, moths, vermin, denting, scratching, dyeing or cleaning;

- g) electrical or mechanical breakdown of any insured article;
- h) confiscation or detention by customs or other official bodies;
- i) in the event of a claim for a **pair or set** those parts that remain in **your** possession which are undamaged;
- j) damage to any brittle or fragile items unless they are damaged by fire or damaged because of an accident which happens to a sea going vessel, aircraft or motor vehicle;
- k) theft or losses from a roof or boot luggage rack other than the theft or loss of camping equipment;
- l) sports equipment damaged while in use;
- m) **Golf Equipment**, unless **you** have paid the appropriate Option premium and it is shown on **your** certificate of insurance;
- n) **Personal Baggage** when **you** have left it unsecured or unattended or outside **your** reach at any time in a place to which the public have access;
- o) theft or loss of **Personal Baggage** which has not been reported to the local Police, **your** accommodation management, **your carrier** or tour operator within 24 hours of the incident or within 24 hours of **you** becoming aware that the incident has taken place. The incident report must be sent to **us** with **your** claim;
- p) damage to **Personal Baggage** in transit which has not been reported to the **carrier** within 24 hours of the incident. The incident report must be sent to **us** with **your** claim – in the case of checked-in luggage a property irregularity report is required. **You** will be required to send **us** the retained portion of **your** flight ticket and checked-in luggage tag;
- q) anything mentioned in the General Exclusions.

#### How we settle **Personal Baggage** claims

**We** will pay the cost of replacing lost, stolen, damaged or destroyed items subject to a deduction for wear and tear. If the item can be repaired economically **we** will pay the cost of the repair only.

**We** will request original receipts for goods where **you** are claiming for stolen or lost goods.

## **Section 8 – Personal Baggage Delay**

This section provides details of the cover **we** provide if **your Personal Baggage** is delayed on **your** outward journey.

#### What **you** are covered for:

**We** will pay **you**:

- up to £100 towards the cost of buying essential items if **your Personal Baggage** has been misplaced by the **carrier** for more than 12 hours on **the** outward journey of **your trip**.

The most **we** will pay **you** in total per **trip** under this section is £100.

### What **you** are not covered for:

- a) if **your Personal Baggage** is misplaced whilst in the custody of the **carrier**, if **you** do not:
  - i) notify the **carrier** immediately and obtain a written **carrier's** report (or a property irregularity report in the case of an airline); or
  - ii) follow up in writing within seven days to obtain a written **carrier's** report (or a property irregularity report in the case of an airline), if **you** are unable to get one immediately. **You** will be required to send **us** the retained portion of **your** flight ticket and check-in luggage tag;
- b) anything mentioned in the General Exclusions.

### How **we** settle **Personal Baggage** delay claims

**You** must keep all **your** receipts and send them with **your** claim.

**You** must provide written confirmation from the **carrier**, confirming the period of the delay of **your Personal Baggage**.

## Section 9 – Money

This section provides details of the cover **we** provide for **your Money**.

### What **you** are covered for:

**Your Money** is covered while **you** are carrying it on **your** person (in an item of clothing **you** are wearing or in a container which **you** are holding or which is attached to **you**) or if **you** have left it in a locked safety deposit box during **your trip** if it is:

- damaged or destroyed;
- lost or stolen.

The most **we** will pay **you in total per trip under this section** is £200, of which;

- the most **we** will pay **you** for cash is £100 or the amount allowed in the current United Kingdom currency regulations, whichever is less;
- the most **we** will pay **you** for cash if **you** are under 16 years old is £50 per **trip**, but please note that the **excess** will not apply in this case.

## Loss of Passport

### What **you** are covered for:

**Your** passport is covered while **you** are carrying it on **your** person (in an item of clothing **you** are wearing or in a container which **you** are holding or which is attached to **you**) or if **you** have left it in a locked safety deposit box during **your trip**. The cost of reasonable additional travel and accommodation expenses **you**

incur outside **your country of departure** while obtaining a replacement passport if **your** passport is lost or stolen during **your trip**.

The most **we** will pay **you** in respect of loss of passport is £100 per **trip**.

What **you** are not covered for:

- a) the **excess** except where **you** have paid **Excess Waiver Option** premium;
- b) the theft or loss of **Money** which has not been reported to the local Police, **your carrier**, accommodation management or tour operator within 24 hours of the incident or as soon as **you** become aware that the incident has taken place. The incident report must be sent to **us** with **your** claim;
- c) loss of value or loss due to errors in receipts, payments, accountancy or depreciation;
- d) theft of **Money** from an unattended road vehicle;
- e) loss due to confiscation or detention by customs or other lawful officials and authorities;
- f) the cost of **your** replacement passport;
- g) anything mentioned in the General Exclusions.

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## Section 10 – Personal Liability

This section provides details of the cover provided for certain personal legal responsibilities **you** may have.

What **you** are covered for:

**Your** legal responsibility to pay compensation and legal costs to others where **you** accidentally cause:

- physical injury, or death of anyone during **your trip** and/or
- loss of, or damage to, property during **your trip**.

The total maximum payable for any single event occurring during the **period of insurance**, for all claimants, in connection with all occurrences within one original cause is £1,000,000.

What **you** are not covered for:

- a) death of or physical injury to **you**, any members of **your family** or anyone in **your** service;
- b) anything belonging to **you**, or anything which is the responsibility of **you** or any of **your family** or anyone employed by **you**;
- c) any responsibility **you** undertake within a contract or agreement which would not have existed in law had that agreement not existed;

- d) any responsibility resulting from **you** or any member of **your family** owning or using: aircraft, horse-drawn vehicles, motorised or mechanically propelled, or towed vehicles, boats (other than rowing boats, punts and canoes), jet skis, jet bikes, skidoo, animals (other than horses, domestic dogs or cats) or firearms;
- e) any responsibility resulting from **you** or any member of **your family's** trade, profession, occupation or supply of goods or services;
- f) any responsibility resulting from wilful or malicious acts by **you**;
- g) any claim which is covered by any other insurance held by **you**;
- h) the occupation, except temporarily for the purposes of **your trip**, or ownership of any land or building;
- i) accidental injury or loss which has not been caused by **your** negligence;
- j) any responsibility **you** have as an employer to anyone employed by **you** or any member of **your family** in any trade, business or profession;
- k) any claim resulting either directly or indirectly from **you** engaging in any **Adventure Sports and Activities**;
- l) anything mentioned in the General Exclusions.

## Section 11 – Legal Advice

This section provides details of the cover we provide for Legal Advice **you** may require following an incident occurring during **your trip**.

### What **you** are covered for:

Telephone guidance and assistance on any legal problem arising in connection with **your trip** or in connection with **your home**. This service is available from the start of **your trip** and up to seven days after **you** complete **your trip**.

### What **you** are not covered for:

- a) anything mentioned in the General Exclusions.

## Section 12 – Winter Sports (Optional Cover)

Cover will apply when **you** have paid or agreed to pay the **Winter Sports** Option premium and it is shown on **your** Certificate of Insurance.

**You** will be covered for the defined activities within the **geographical limits** for up to 17 days during the **period of insurance**.

The following additional benefits are available under this Policy in relation to **your Winter Sports trip**.

## Piste Closure

### What you are covered for:

If **you** cannot ski at **your** pre-booked resort for more than 24 consecutive hours, because of a lack of snow causing a total closure of the lift system, **we** will pay **you** a cash benefit if no alternative skiing is available. If alternative skiing is available **we** will pay for reasonable transportation costs and lift pass charges which **you** have to pay to travel to and from a similar ski resort or area to ski.

The most **we** will pay **you** for Piste Closure is £20 per day and up to a maximum of £200 in total per **trip**.

### What you are not covered for:

- a) any claim which involves the closure of the resort lift system because of avalanches or dangerous high winds;
- b) any claim which involves the closure of baby drags and lifts used for transport within the resort by non-skiers;
- c) any claim which occurs in the Northern Hemisphere before 1st November and after 31st March;
- d) any claim which occurs in the Southern Hemisphere before 1st May and after 30th September;
- e) anything mentioned in the General Exclusions.

## Avalanche Benefit

### What you are covered for:

Additional accommodation and travel expenses reasonably incurred following cancellation of scheduled **public transport** caused by avalanches or landslides.

The most **we** will pay **you** for Avalanche Benefit is £30 per day and up to £150 in total per **trip**.

### What you are not covered for:

- a) anything mentioned in the exclusions to Section 4 – Cancellation and **Curtailement**;
- b) anything mentioned in the General Exclusions.

## Winter Sports Equipment

### What you are covered for:

**We** will cover **your Winter Sports Equipment** against loss, theft or damage occurring during **your trip**. The most **we** will pay **you** for **your Winter Sports Equipment** is £500 in total

per **trip**. The maximum **we** will pay **you** for any one article, or for any one **pair or set** under this section is £300.

What **you** are not covered for:

- a) anything mentioned in the exclusions to Section 7 – **Personal Baggage**;
- b) anything mentioned in the General Exclusions.

## Delayed Winter Sports Equipment

What **you** are covered for:

If **your Winter Sports Equipment** is certified by the carrier as misplaced in transit during **your trip**, for a period of more than 12 hours, **we** will pay **you** £20 per day for the necessary hire or replacement of **Winter Sports Equipment**. The most **we** will pay during any one **trip** under this section is £300.

**You** must provide written confirmation from the **carrier** confirming the period of the loss of **your** delayed **Winter Sports Equipment**. Please retain **your** flight tickets, checked-in luggage tags and all receipts and send them to **us** with **your** claim.

What **you** are not covered for:

- a) any claim where **you** do not provide a valid receipt for the hired items;
- b) anything mentioned in the General Exclusions.

## Unused ski pack

If during **your trip**, **you** are certified by a registered medical practitioner at the ski resort as being unable to ski as a direct result of injury or illness, **we** will pay **you** up to a maximum of £350 in total per **trip** in respect of charges for unused ski pack.

## Special Conditions applying to off-piste skiing and off-piste snowboarding

Off-piste is defined as any skiing or snowboarding which does not take place on any normally marked public open pistes.

For **your** protection and to ensure continuity of cover under this Policy, **you** must adhere to the following conditions when **you** are intending to ski or snowboard off-piste:

1. **You** must observe the rules of **your** resort or **Winter Sports** area. If in any doubt **you** should follow specialist local advice.
2. If **you** are an inexperienced skier or snowboarder **you** must not under any circumstances attempt off-piste skiing or off-piste snowboarding unless **you** are under the supervision of a guide.
3. **Your** guide's advice and instructions must be strictly followed at all times.
4. As a general rule **you** should exercise common sense and follow sensible local practices.



## Section 13 – Golf (Optional Cover)

Cover will apply when **you** have paid or agreed to pay the Golf Option premium and it is shown on **your** Certificate of Insurance.

The following benefits are available under this Policy in relation to **your** Golf trip.

### Golf Equipment

What **you** are covered for:

**We** will pay **you** up to the limits specified on **your** Certificate of Insurance:

- i) for loss, theft or damage to **Golf Equipment** during **your** trip. **Golf Equipment** will be replaced on a new for old basis (if the item is no longer available **we** will cover the replacement cost of a reasonable alternative);
- ii) or the purchase of essential items if **Golf Equipment** is delayed or lost during **your** outward journey for more than 12 hours. **You** must get written confirmation of the length of the delay and receipts for any items that **you** buy. **We** will take any payment **we** make from the amount of any claim if **your** **Golf Equipment** is permanently lost;
- iii) for each 24-hour period, for the hire of alternative **Golf Equipment** if:
  - **Golf Equipment** is delayed during **your** outward journey for more than 12 hours (**you** must get written confirmation of the length of the delay); or
  - **Golf Equipment** is lost or damaged during **your** trip.

What **you** are not covered for:

- i) the **excess** except where **you** have paid the **Excess Waiver Option** premium;
- ii) any item, where **you** are not able to provide reasonable proof of value (for example, original receipts);
- iii) any loss, theft of or damage to **Golf Equipment** shipped as freight or under a bill of lading;
- iv) anything mentioned in the exclusions to Section 7 – Personal Baggage;
- v) anything mentioned in the General Exclusions.

**You** must keep all receipts for hire costs and send them in with **your** claim form. **We** take any payment under Section 1 ii) from any claim paid under Section 1 i) if the **Golf Equipment** is permanently lost. All receipts must be provided as proof of purchase.

## Green Fees

### What **you** are covered for:

We will pay up to £1,000 per **trip** to reimburse **your** prepaid, irrecoverable **Green Fees** if:

- i) **you** are ill or injured during **your trip** and **you** are medically certified (by the treating registered medical practitioner at the resort or place of incident), as being unable to play golf for the remainder of **your trip**; or
- ii) **you** have to cancel or curtail **your trip** for any of the valid reasons listed under Section 4 – Cancellation and **Curtailement**.

### What **you** are not covered for:

- i) the **excess** except where **you** have paid the **Excess Waiver Option** premium;
- ii) anything mentioned in the exclusions to Section 4 – Cancellation and **Curtailement**;
- iii) Anything mentioned in the General Exclusions.

## Tournament Entry Fees

### What **you** are covered for:

We will pay up to £250 per **trip** to reimburse any prepaid, irrecoverable golf tournament entry fees if:

- i) **you** are ill or injured during **your trip** and **you** are medically certified (by the treating registered medical practitioner at the resort or place of incident) as being unable to participate in the tournament; or
- ii) **you** have to cancel or curtail **your trip** for any of the valid reasons listed under Section 4 – Cancellation and **Curtailement**.

### What **you** are not covered for:

- i) anything mentioned in the exclusions to Section 4 – Cancellation and **Curtailement**;
- ii) anything mentioned in the General Exclusions.

## Hole-In-One

### What **you** are covered for:

We will pay up to £300 per **trip** to reimburse the cost of a round of drinks at the golfing venue immediately following a game of golf in a recognised competition when a hole-in-one has been achieved and verified by the Club Secretary. All receipts must be provided as proof of purchase.

## Section 14 – Stranded Traveller Assistance Option

This section provides details of the services and benefits **we** provide to **you** during **your trip** if **your** transport provider should cease to trade.

### Travel Expenses

What **you** are covered for:

If the tour operator or transport provider does not provide reasonable alternative transport back to the UK within a reasonable time frame **we** will pay:

- i) up to £2,500 per person for additional or alternative travel home;
- ii) necessary costs for transferring **you** to an alternative airport or transport terminus;
- iii) necessary costs for transporting **you** to alternative accommodation.

### Emergency Expenses

What **you** are covered for:

**We** will pay **you** up to £200 per person per night towards meals and accommodation costs incurred after **your** original published departure time until **your** new departure date.

### Return Home of **Your** Children

What **you** are covered for:

- i) **We** will pay up to £2,500 for travel costs and £200 per night towards meals and accommodation for **you** or a relative to collect and bring **home your** children if they are stranded due to a transport provider ceasing to trade.

### For the purposes of this Section

What **you** are not covered for:

- i) the **excess** except where **you** have paid the **Excess Waiver Option Premium**;
- ii) Anything mentioned within the General Exclusions;
- iii) Any additional costs incurred after refusal of reasonable alternative travel arranged within a reasonable time frame.

All costs must be approved in advance by **us** and all receipts retained as proof of purchase.

Reasonable alternative transport means transport which departs within 72 hours of **your** original published departure time back to the UK.

Reasonable time frame means:

- a) where **you** have more than 48 hours left of **your trip**, within 48 hours of the transport operator ceasing to trade  
OR
- b) where **you** have less than 48 hours left of **your trip**, within 24 hours of **your** original departure time.

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## General Conditions of **your** Policy

We will only pay **your** claim if the following conditions are met:

1. **You** must comply with **our** medical assessment procedure, if **you** have a **pre-existing medical condition**. We will then send **you** confirmation of applicable cover.

Any medical information **you** give **us** will be treated as strictly confidential. **We** will not pass **your** medical information to anyone without **your** specific authority. **We** will use it to decide whether or not **we** can cover **you** and **we** will refer to it in the event of any claim.

2. **You** must write and tell **us** before booking any **trip** if any of the following change after **you** pay for **your** Policy:
  - if there is any change in **your** health, medication or **treatment**;
  - if **you** wish to add or remove anyone from **your** Policy;
  - if **you** change **your** address.

If **you** do not tell **us** about changes, claims may not be accepted and **your** Policy may be invalid. All changes must be declared to American Express Insurance Services, and accepted before cover can continue. Certain medical conditions may be excluded from cover.

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3. **Your** Policy will be automatically renewed each year, subject to **your** age, **your** medical conditions and the Policy terms and conditions and limitations unless **you** notify **us** otherwise within 30 days of **your** renewal date. **You** will receive a written reminder before the end of the **period of insurance**.

Please refer to **your** Certificate of Insurance for age restrictions which apply to the renewal of **your** Policy.

If **you** book a **trip** during the current **period of insurance** for which **you** have paid or agreed to pay, to travel after the expiry of this **period of insurance**, cover for cancellation in respect of that **trip** will continue in force provided **you** renew **your** Policy and subject to the terms, conditions and limitations in place at the time of renewal.

In the event that the renewal of **your** Policy is no longer offered by **us**, American Express Insurance Services Europe Limited (the Intermediary) will then provide **you** with details of the renewal terms offered by their new travel insurance provider.

4. **You** must take reasonable care to protect **yourself** and **your** property against loss or damage, accident or injury. **You** must act as if **you** are not insured and take steps to minimise **your** loss as much as possible.

5. **We** will make every effort to apply the full range of services in all circumstances as shown in **your** Policy booklet. Remote geographical locations or unforeseeable adverse local conditions may prevent the normal standard of service being provided.

6. **We** may:

- deny **your** application for insurance coverage; and/or
- deny renewal of **your** Policy; and/or
- cancel **your** Policy by giving seven days notice by recorded delivery to **you** at **your** last known address.

In such an event the premium shall be adjusted appropriately for the unexpired part of the **period of insurance**.

7. **You** must not settle, reject or negotiate any claim without **our** permission.

8. **We** have the right, if **we** choose, in **your** name but at **our** expense to:

- take over the defence or settlement of any claim;
- take legal action in **your** name to get compensation from anyone else for **our** own benefit or to get back from anyone else any payments that have already been made;
- take any action to get back any lost property or property believed to be lost.

9. **We** may at any time pay to **you** **our** full liability under the Policy after which no further payments will be made in any respect.

10. **You** must take all reasonable steps to get back any article which has been lost or stolen, and to identify the person **you** believe to be responsible for the loss and assist in any legal action.

11. If **we** settle **your** claim and as a result **you** have unused travel ticket(s) **you** must surrender those tickets to **us** if **we** ask **you** to do so.

12. **You** must tell **us** as soon as possible if **you** are hospitalised as an in-patient, or of any emergencies or claims whatsoever that are likely to exceed £500. If anything happened on **your** **trip** which might lead to a claim under **your** Policy **you** must send **us** a completed claim form within 28 days of **your** returning **home** to **your** **country of departure**.

13. In the event of a claim and if **we** require it, **you** must agree to be examined by a medical practitioner of **our** choice, at **our** expense. In the event of **your** death **we** may need to carry out a post-mortem examination for which **we** would seek agreement from **your** legal executor.

14. **You** must give **us**, at **your** expense, all the information, documents and medical certificates **we** ask for including details of other insurance policies that may cover the loss.

15. If **you** or anyone acting for **you**, uses fraudulent or dishonest means, or makes a false statement to:
- obtain cover;
  - make a false claim; or
  - attempt to claim for more than is actually lost then all benefits under **your** Policy will be lost. Any fraudulently obtained benefits must be repaid to **us**.
16. If **we** pay any expense for which **you** are not covered, **you** must pay this back within one month of **our** asking.
17. If something **you** make a claim for is covered by another insurance policy or service contract (for example by a Household Contents All Risks Policy), **we** will only pay **our** share of any claim. The exception to this is for any claim under Section 10 – Personal Liability where **we** will make no payment if **you** hold another insurance policy providing this cover.
18. The Policy **excess**, as and when applicable, will be deducted in respect of each insured person, and each and every separately identified occurrence of loss whether notified to **us** as one claim or otherwise.
19. Although **we** are prepared to cover **you** when undertaking certain sports and activities, the availability of insurance cover does not mean that American Express Insurance Services or the underwriters consider these sports and activities as safe. At all times **you** must satisfy **yourself** that **you** are capable of safely undertaking the planned sport or activity and **you** must take all due care to avoid injury, accident or loss to **yourself** and to others.
- You** must accept and follow the supervision and tuition of experts qualified in the pursuit or activity in question and **you** must use all appropriate precautions, equipment and eye protection. Disregarding such advice and precautions may invalidate any claim **you** make.

## General Exclusions of **your** Policy

These exclusions apply to all the sections of **your** Policy.

1. Any claim where **you** have not paid the appropriate premium as shown on **your** Certificate of Insurance.
2. Please refer to **your** Certificate of Insurance for age restrictions which apply to the renewal of **your** Policy.
3. Any claim where **you** have not complied with **our** medical assessment procedure at the inception of the Policy, at any subsequent renewal or prior to booking a **trip** (please see page 14 Medical Warranty & Exclusion of **Pre-existing Medical Condition(s)**).
4. Any claim resulting from something **you** knew about at the time of paying for the insurance, before the start of the **period of insurance** or before booking any **trip** and which **you** did not declare to American Express Insurance Services, before the start of the **period of insurance** or before booking any **trip** (please see page 14 Medical Warranty & Exclusion of **Pre-existing Medical Condition(s)** for changes relating to medical information).
5. Any claim resulting from a medical condition for which **you** are on a waiting list or have knowledge of the need for surgery in-patient treatment at a hospital, clinic or nursing home at the time of purchasing the Policy or booking **your trip**. This includes symptoms under investigation and any consultations forthcoming treatments or test results inclusive of treatment recovery.
6. Any loss or damage where **you** have put **yourself** in danger except where **you** were trying to save another human life.
7. Any costs **you** would have been required or been expected to pay, if the event resulting in the claim had not happened.
8. Any claim resulting from **you**:
  - attempting or committing suicide;
  - having a psychiatric, mental, or nervous condition(s);
  - deliberately injuring **yourself**;
  - using any drug not prescribed by a registered medical practitioner, being addicted to any drugs, or abusing solvents, drugs, or alcohol, or being under the influence of drugs, solvents, or alcohol.
9. Any other loss resulting directly or indirectly from the cause of **your** claim.
10. Any loss or damage deliberately carried out or caused by **you**.
11. Any claim where **you** are entitled to indemnity under any other insurance policy including any amounts recoverable from any other source, except in respect of any amount



exceeding that for which **you** are covered under such other policy, or any amount recoverable from any other source, had this insurance not been effected.

12. Any claim resulting from **you** taking part in manual work during **your trip**.
13. Any claim if **you** have been taking part in, or practising for, any **Adventure Sports and Activities**.
14. Any claim if **you** have been taking part in or practising for **Winter Sports** unless the appropriate premium has been paid as shown on **your** Certificate of Insurance.
15. Any loss relating to services which **we** have provided to **you** or any loss which happens following any delay on **our** part, in providing services to **you** unless negligence on **our** part can be proved.
16. Loss, damage, death, injury, illness, disablement, or expense caused by: war; invasion; act of a foreign enemy; hostilities (whether war be declared or not); terrorist activity (except when travelling on **public transport**); civil war; rebellion; revolution; insurrection; military or usurped power; **you** taking part in civil commotion or riot of any kind.
17. The actual, alleged or threatened discharge, dispersal, seepage, migration, escape, release of or exposure to any hazardous biological, chemical, nuclear or radioactive material, gas, matter, or contamination.
18. Any claim directly or indirectly caused by:
  - a) ionising radiation or radioactive contamination from any nuclear fuel, nuclear waste or any risk from nuclear equipment;
  - b) pressure waves from aircraft and other flying objects travelling at or faster than the speed of sound.
19. Any claim resulting from **your** involvement in a fight except in self-defence.
20. Any claim involving, or involving the fear of: delay; loss; damage; injury or **consequential loss** which is caused, either directly or indirectly, by the actual or potential inability of any computer, data processing equipment or media, microchip, integrated circuit or similar device or any computer software or stored programme, to correctly recognise any date as the true calendar date or to continue to function correctly in respect of or beyond that date.
22. Any claim occurring during a **trip** which exceeds, or is planned to exceed, 31 consecutive days. Please note that this exclusion operates regardless of when the claim actually occurred during **your trip**.

# Notes

# Helplines

**For 24 hour worldwide emergency assistance, operated by AXA Assistance GmbH, the service provider, call on the following number:**

**+44 (0) 845 456 6355**

Assistance and Information  
about **your** Destination before  
**you** travel.....

**0845 456 6355**

Claims (office hours).....

**0845 408 2969**

When dialling from outside the UK add 44 then omit the 0.  
When dialling within the UK omit 44.

## **Emergency Assistance 24 hours a day, 365 days a year.**

In an emergency, please first check that the circumstances are covered by **your** Policy. Having done this **you** should contact the appropriate number shown after each section of the Policy, giving **your** name, Policy Number, and as much information as possible.

Please give us a telephone or fax number where we can contact **you** or leave messages at any time of the day or night.

**To comply with the terms and conditions of the insurance, you must contact us if you are hospitalised as an in-patient, or before incurring any expenses whatsoever over £500, in order to obtain our prior authorisation, immediately you are physically able to do so. A claim form will need to be completed by you within 28 days of your returning home to your country of departure.**



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