



# Fish Travel Insurance

Policy Wording



## Contents

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Policy summary – travel insurance including Schedule of Benefits and Excesses	3
Schedule of Benefits and Excesses	4
Policy Wording	7
Introduction	7
Definitions	8
General conditions applicable to the whole policy	10
Claims conditions	11
Important conditions relating to health	11
Medical Screening	12
What is not covered - applicable to all sections of the policy	12
Sports and activities covered	14
24 hour worldwide medical & emergency assistance service	17
If you require outpatient treatment	17
Reciprocal health agreements with other countries	17
Section A – Cancellation or curtailment charges	18
Section B – Emergency medical and other expenses	19
Section C – Emergency replacement of prescribed medication	20
Section D – Hospital benefit	20
Section E – Personal accident	20
Section F – Baggage	21
Section G – Personal money, passport and documents	22
Section H – Personal liability	22
Section I – Delayed departure	23
Section J – Missed departure on your outward journey	24
Section K – Catastrophe	25
Section L – Legal expenses	25
Section M – Alternative accommodation	26
Section N1 – Ski equipment	26
Section N2 – Ski equipment hire	27
Section N3 – Ski pack	28
Section N4 – Piste closure	28
Section N5 – Avalanche closure	28
Section O1 – Golf equipment	28
Section O2 Golf equipment hire	29
Section O3 – Non-refundable golf fees	29
Section P1 – Missed port departure	30
Section P2 – Cabin confinement	30
Section P3 – Cruise itinerary changes	31
Section P4 – Unused excursions	31
Section P5 – Cruise interruption	31
Making a complaint	32
Financial Services Compensation Scheme	33

## Fish Travel Insurance – Policy Summary

This policy summary does not contain full details and conditions of your insurance – these are located in your policy wording.

This insurance is underwritten by Zurich Insurance plc.

This insurance is provided by Fish Insurance a trading style of Fish Administration Limited, Financial Services Firm Reference No: 310172. Company House No: 4214119.

Where a heading is underlined in this policy summary full detail can be found in your policy wording under the same heading.

### **Type of insurance and cover**

Travel insurance for single or annual multi trips – Please refer to your policy certificate for your selected cover.

There are two cover options, being Traveller and Traveller Deluxe - Your policy certificate will show which cover option you have selected. Various optional covers may also be included – Your policy certificate will show if you selected these options.

### **Eligibility**

This policy is only available to you if you are permanently resident in the United Kingdom and registered with a medical practitioner in the United Kingdom.

This policy is not available to anyone aged 80 years or over at the date of issue of the policy if annual multi trip cover is selected. If you reach the age of 80 during the period of insurance, cover will continue until the next renewal date but not after that.

If an annual multi trip including winter sports cover is selected, this policy is not available to anyone aged 70 or over at the date of issue of the policy. If you reach the age of 70 during the period of insurance, cover will continue until the next renewal date but not after that.

If single trip cover is selected, this policy is not available to anyone aged 85 or over at the date of issue of the policy.

If a single trip policy including winter sports cover is selected, this policy is not available to anyone aged 70 or over at the date of issue of the policy.

You are not covered for cruising unless cruise cover has been purchased and is shown on the policy certificate.

### **Duration**

If this policy is an annual multi trip policy it lasts for a period of 12 months, after which it automatically expires. If it is a single trip policy – please refer to your policy certificate for your selected cover.

### **Cancellation period**

You are free to cancel this policy at any time. If you wish to cancel within 14 days of receipt of the policy documents, you may do so by email to [travel@fishinsurance.co.uk](mailto:travel@fishinsurance.co.uk) or by writing to Fish Insurance, 12 Sceptre Court, Sceptre Way, Bamber Bridge, Preston PR5 6AW for a full refund, providing you have not travelled and no claim has been made. If you cancel after the first 14 days of receipt of the documents then the following will apply;

If you have purchased a single trip policy no refund of premium will be allowed.

If you have purchased an annual multi trip policy, and cover has not already started we will refund your entire premium. If cover has started, we will refund the premium to you subject to the minimum premium (plus Insurance Premium Tax where applicable), in accordance with the amounts shown below.

No refund will be payable if you have made or intend to make a claim or if any trip has already started.

Refund of premium		
Period within buying your policy (or for renewals, period within your policy renewal date):	Premium returned	Minimum premium
14 days	75%	£15.00
2 months	60%	£35.00
3 months	50%	
4 months	40%	
5 months	30%	
6 months	25%	
No refund will be given after 6 months.		

If your insurance broker charges an administration fee for cancelling your policy, it will be clearly identified by them and will not form part of the premium returned or minimum premium.

See General conditions applicable to the whole policy in the policy wording for full details.

## Significant features and benefits

Schedule of Benefits and Features					
Section of Cover		Traveller Limit Per Insured Person	Excess** Per Person	Traveller Deluxe Limit Per Insured Person	Excess** Per Person
<b>A</b>	<b>Cancellation or curtailment charges</b>	£2,500	£75 (£20 loss of deposit)	£5,000	£50 (£20 loss of deposit)
<b>B</b>	<b>Emergency medical and other expenses</b>	£7,500,000	£75	£10,000,000	£50
	Emergency dental treatment	£200	£75	£350	£50
	Funeral expenses abroad	£1,500	£75	£2,500	£50
	Additional accommodation and travelling costs	£1,000	Nil	£1,000	Nil
	Replacement carer	£3,500	£75	£5,000	£50
<b>C</b>	<b>Emergency replacement of prescribed medication</b>	£500	£75	£750	£50
<b>D</b>	<b>Hospital benefit</b>	£25 per complete 24 hours of inpatient treatment up to a maximum of £1,000	Nil	£25 per complete 24 hours of inpatient treatment up to a maximum of £1,500	Nil
<b>E</b>	<b>Personal accident</b>				
	Permanent total disablement	£20,000	Nil	£20,000	Nil
	Loss of one or more limbs, or total and irrecoverable loss of sight in one or both eyes	£20,000	Nil	£20,000	Nil
	Death benefit Aged 18 – 65 years Aged 17 years or under Aged 66 years or over	£20,000 £15,000 £2,500	Nil	£20,000 £15,000 £2,500	Nil
<b>F</b>	<b>Baggage</b>	£2,000	£75	£2,500	£50
	Single article limit	£350	£75	£350	£50
	Total for all valuables (limited to £100 if insured person is 17 years or under)	£400	£75	£500	£50
	Mobility and disability equipment	£2,000	£75	£2,500	£50
	Emergency replacement of baggage after 12 hours delay	£300	Nil	£500	Nil
	Delayed mobility and disability equipment after 12 hours delay	£300	Nil	£600	Nil
	Hire of mobility and disability equipment for remainder of trip if own equipment lost or stolen during the trip	£1,500	Nil	£2,250	Nil
<b>G</b>	<b>Personal money</b>	£500	£75	£600	£50
	Cash limit	£500	£75	£600	£50
	Cash limit aged 17 years or under	£75	£75	£100	£50
	Passport & travel documents (limited to £100 if insured person is 17 years or under)	£500	Nil	£600	Nil
<b>H</b>	<b>Personal liability</b>	£2,000,000	£150 (property damage only)	£2,000,000	£150 (property damage only)
<b>I</b>	<b>Delayed departure after 12 hours delay</b>	£25 for each 12 hour period up to £200	£75	£25 for each 12 hour period up to £300	£50
	Abandonment of trip after 24 hours delay	£2,500	£75	£5,000	£50
<b>J</b>	<b>Missed departure on your outward journey</b>	£1,000	£75	£1,500	£50
<b>K</b>	<b>Catastrophe</b>	£1,000	£75	£1,000	£50
<b>L</b>	<b>Legal expenses and assistance</b>	£25,000 (£50,000 policy maximum)	Nil	£50,000 (£100,000 policy maximum)	Nil
<b>M</b>	<b>Alternative accommodation</b>	Not Available	N/A	£2,000	£50
<b>Winter sports* Cover (up to 17 days for annual multi trip policies)</b>					
<b>N1</b>	<b>Ski equipment</b>				
	Ski equipment – owned	£1,000	£75	£1,000	£50
	Ski equipment - hired	£500	£75	£500	£50
	Single article limit – owned & hired	£250	£75	£250	£50
<b>N2</b>	<b>Ski equipment hire (after 12 hours delay)</b>	£50 per day up to £500	Nil	£50 per day up to £500	Nil
<b>N3</b>	<b>Ski pack</b>	£50 per day up to £500	Nil	£50 per day up to £500	Nil
<b>N4</b>	<b>Piste closure</b>	£50 per day up to £500	Nil	£50 per day up to £500	Nil
<b>N5</b>	<b>Avalanche closure (after 12 hours delay)</b>	£500	Nil	£500	Nil

## Significant features and benefits

Schedule of Benefits and Features					
Section of Cover		Traveller Limit Per Insured Person	Excess** Per Person	Traveller Deluxe Limit Per Insured Person	Excess** Per Person
<b>Golf Cover*</b>					
O1	Golf equipment	£1,000	£75	£1,000	£50
	Single article limit	£250	£75	£250	£50
O2	Golf equipment hire (after 12 hours delay)	£40 per day up to £200	Nil	£40 per day up to £200	Nil
O3	Non-refundable golf fees	£300	£75	£300	£50
<b>Cruise Cover*</b>					
P1	Missed port departure	£300	£75	£1,000	£50
P2	Cabin confinement	£50 per day up to £500	Nil	£100 per day up to £1,000	Nil
P3	Cruise itinerary changes	£100 per port up to £300	Nil	£100 per port up to £500	Nil
P4	Unused excursions	£750	Nil	£1,000	Nil
P5	Cruise interruption	£750	£75	£1,000	£50

\* Optional Covers – your policy certificate will show if you selected these options.

\*\* The excess is deducted from each claim, per section, for each separate incident payable for each insured person. If you have paid the additional premium for excess waiver, the excess would be reduced to Nil in the event of a claim.

## Significant or unusual limitations or what is not covered

### • Health

- Important conditions relating to health apply at the time of at the time of taking out the policy and these are detailed in the policy.
- If, as a result of you completing medical screening, special terms such as an additional premium are applied, you will be advised immediately and these terms will form part of the policy. If you decide not to pay any additional premium due or do not declare a medical condition to us, you will NOT be covered where a claim arises out of or in connection with that medical condition.
- If there is a change in health of anyone insured under the policy after you have purchased an annual multi trip policy, or at the time of renewing the insurance, or booking a trip but before you travel, or you book a further trip, you must contact the medical screening line.

### • Excesses

- The standard excesses will be shown within your policy wording. Any increased excess you have agreed to pay will be shown on the policy certificate.

### • Sports and activities

- There are a number of sports, activities and winter sports that are not covered - *Please see paragraphs 4, 5 and 6 in What is not covered - applicable to all sections of the policy in the policy wording.*
- Winter sports cover is not available to anyone aged 70 or over at the date of issue of the policy under an annual multi trip or single trip policy.

### • Trip limits

- Under annual multi trip policies there is no cover for trips over:
  - 31 days (if you are aged 59 years or under at the date of issue of the policy), or
  - 24 days (if you are aged 60 - 74 years inclusive at the date of issue of the policy), or
  - 17 days (if you are aged 75 - 79 years inclusive at the date of issue of the policy), or
- For single trip policies please refer to your policy certificate.

### • Other significant exclusions

- Any trip that has already begun when you purchase this insurance will not be covered, except where an annual multi trip policy is purchased that replaces or renews an existing annual multi trip policy which fell due for renewal during the trip.
- Any trip that involves a cruise, unless cruise cover has been purchased and is shown on the policy certificate.
- Travel to a country, specific area or event which the Travel Advice Unit of the Foreign and Commonwealth Office (FCO) has advised against all travel or all but essential travel.
- Drugs, alcohol, substance or solvent abuse.
- Jumping from buildings, balconies, vehicles etc.

**Please see the policy wording for full details of what is not covered under all sections of the policy and exclusions that apply under each individual section of the policy.**

**Claims conditions.** Your policy contains conditions relating to when you need to make a claim which are detailed in your policy wording. Significant conditions relating to claims are;

- If you are injured or become ill abroad and need hospital treatment you must contact Zurich Assist on +44 1242 218999.
- In the event that you return home before your scheduled return date due to an illness or injury, you must contact Zurich Assist to make the necessary travel arrangements.
- If you have lost or stolen baggage you must report it to the local Police in the country where the incident occurred.

Special conditions apply to each section of your policy - Please refer to the policy wording for full details.

## Claim notification

To make a claim (except section L Legal expenses and assistance) contact:  
308-314 London Road, Essex, SS7 2DD.  
Tel: 0800 923 4213  
Email: [info@csal.co.uk](mailto:info@csal.co.uk)

For section L, Legal expenses and assistance contact:  
Lyons Davidson Limited, Victoria House, 1 Victoria Street, Bristol BS1 6AD  
Tel: 0800 923 4217

## Making a complaint

Any complaint you may have about a claim should in the first instance be addressed to Claims Settlement Agencies Ltd at the contact details above.

If your complaint is about your policy in the first instance please contact The Complaints Officer, Fish Insurance, 12 Sceptre Court, Sceptre Way, Bamber Bridge, Preston, PR5 6AW or email [travel@fishinsurance.co.uk](mailto:travel@fishinsurance.co.uk) or call 0333 331 3900^.

If your complaint is about policy cover or the product itself, please contact Zurich, Customer Liason Department, Zurich Insurance plc, Shurdington Road, Cheltenham, Gloucestershire, GL51 4UE or email [complaints@myzurich.co.uk](mailto:complaints@myzurich.co.uk) or call 0800 408 0979.

If after 8 weeks your complaint is not resolved or you are unsatisfied with our final response, you can approach The Financial Ombudsman Service. Referral to the Financial Ombudsman will not affect your right to take legal action.

Full details of addresses and contact numbers can be found within the *Making a complaint* section of the policy wording.

## Financial Services Compensation Scheme (FSCS)

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

# Policy Wording

## Introduction

This is **your** travel insurance policy. It contains details of what is covered, conditions and what is not covered, for each **insured person** and is the basis on which all claims will be settled. It is validated by the issue of the policy certificate which **we** recommend be attached to the policy.

In return for having accepted **your** premium **we** will in the event of **bodily injury**, death, illness, disease, loss, theft, damage, legal liability or other specified events happening within the **period of insurance** provide insurance in accordance with the operative sections of **your** policy as referred to in **your** policy certificate.

The policy certificate and any endorsements are all part of the policy. **Your** policy is evidence of the contract of insurance.

### United Kingdom residents

This policy is only available to **you** if **you** are permanently resident in the **United Kingdom** and registered with a **medical practitioner** in the **United Kingdom**.

**You** must be in the **United Kingdom** at the time of purchasing this policy and before starting **your** trip.

### The law which applies to this policy

**You** and **we** can choose the law which applies to this **policy**. **We** propose that English Law applies. Unless **we** and **you** agree otherwise English law will apply to this policy.

### Age eligibility - Annual multi trip

This policy is not available to anyone aged 80 or over at the date of issue of the policy if annual multi trip cover is selected. If an annual multi trip including winter sports cover is selected, this policy is not available to anyone aged 70 or over at the date of issue of the policy. If **you** are aged 17 or under at the date of issue of the policy **you** can only travel provided **you** are accompanied by one of the adults insured under this policy.

If **you** reach any of the ages mentioned above during the **period of insurance**, cover will continue until the next renewal date but not after that.

### Age eligibility - Single trip

If single trip cover is selected, this policy is not available to anyone aged 85 or over at the date of issue of the policy. If a single trip policy including winter sports cover is selected, this policy is not available to anyone aged 70 or over at the date of issue of the policy.

### Geographical areas

**You** will not be covered if **you** travel outside the area **you** have selected, as shown in **your** policy certificate.

**Area 1:** **UK** – England, Wales, Scotland, Northern Ireland and the Isle of Man

**Area 2:** **Europe 1** - All countries listed in **UK** above together with, Channel Islands, all countries west of the Ural Mountains, Tunisia, the Azores, Madeira, and Mediterranean islands but excluding Algeria, Canary Islands, Egypt, Greece, Israel, Libya, Lebanon, Spain and Turkey which are covered under Area 3.

**Area 3:** **Europe 2** - All countries listed in Area 2 including Algeria, Canary Islands, Egypt, Greece, Israel, Libya, Lebanon, Spain and Turkey.

**Area 4:** **Australia & New Zealand** (including up to 48 hours stop-over in Area 6)

**Area 5:** **Worldwide** (but excluding Canada, the Caribbean and the USA)

**Area 6:** **Worldwide** (including Canada, Caribbean and the USA)

### Policy excess

Under most sections of the policy, claims will be subject to an **excess**. This means that **you** will be responsible for paying the first part of each and every claim per incident claimed for, under each section by each **insured person**, unless **you** have paid the additional premium to waive the **excess** and this is shown on **your** policy certificate.

### Helplines

Please carry this policy wording with **you** in case of an emergency.

### Policy information or advice

If **you** would like more information or if **you** feel the insurance may not meet **your** needs, email customer services at [travel@fishinsurance.co.uk](mailto:travel@fishinsurance.co.uk) or telephone 0333 331 3900^.

### Insurer

The Insurer for this policy is: Zurich Insurance plc. A public limited company incorporated in Ireland. Registration No. 13460. Registered Office: Zurich House, Ballsbridge Park, Dublin 4, Ireland. UK Branch registered in England and Wales Registration No. BR7985. UK Branch Head Office: The Zurich Centre, 3000 Parkway, Whiteley, Fareham, Hampshire PO15 7JZ. Zurich Insurance plc is authorised by the Central Bank of Ireland and authorised and subject to limited regulation by the Financial Conduct Authority. Details about the extent of **our** authorisation by the Financial Conduct Authority are available from **us** on request.

These details can be checked on the FCA's Financial Services Register via their website [www.fca.org.uk](http://www.fca.org.uk) or by contacting them on 0800 111 6768. **Our** FCA Firm Reference Number is 203093.

### Data Protection Notice

#### Who controls my personal information?

This notice tells **you** how Zurich Insurance plc, as data controller, will deal with **your** personal information. Where Zurich introduces **you** to a company outside the group, that company will tell **you** how **your** personal information will be used.

**You** can ask for further information about **our** use of **your** personal information or complain about its use in the first instance, by contacting **our** Data Protection Officer at: Zurich Insurance Group, Tri-centre 1, Newbridge Square, Swindon, SN1 1HN or by emailing the Data Protection Officer at [GBZ.General.Data.Protection@uk.zurich.com](mailto:GBZ.General.Data.Protection@uk.zurich.com).

If **you** have any concerns regarding **our** processing of **your** personal information, or are not satisfied with **our** handling of any request by **you** in relation to **your** rights, **you** also have the right to make a complaint to the Information Commissioner's Office. Their address is: First Contact Team, Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, SK9 5AF.

#### What personal information will you collect about me?

**We** will collect and process the personal information that **you** give **us** by phone, e-mail and filling in forms. **We** also collect personal information from Fish Insurance in order to provide **you** with the contract of insurance **you** have requested and from other sources, such as other insurance companies, for verification purposes. **We** will also collect information **you** have volunteered to be in the public domain and other industry-wide sources.

**We** will only collect personal information that **we** require to fulfil **our** contractual or legal requirements unless **you** consent to provide additional information. The type of personal information **we** will collect includes; basic personal information (i.e. name, address and date of birth), health information, claims information and where **you** have requested other individuals be included in the arrangement, personal information about those individuals.

If **you** give **us** personal information on other individuals, this will be used to provide **you** with a contract of insurance. **You** agree **you** have their permission to do so. Except where **you** are managing the contract on another's behalf, please ensure that the individual knows how their personal information will be used by Zurich. More information about this can be found in the 'How do you use my personal information' section.

#### How do you use my personal information?

**We** and **our** selected third parties will only collect and use **your** personal information:

- i) where the processing is necessary in connection with providing **you** with a contract of insurance that **you** have requested;
- ii) to meet **our** legal or regulatory obligations; or
- iii) for **our** "legitimate interests".

It is in **our** legitimate interests to collect **your** personal information as it provides **us** with the information that **we** need to provide **our** contract of insurance to **you** more effectively. **We** will always ensure that **we** keep the amount of information collected and the extent of any processing to the

absolute minimum to meet this legitimate interest. Examples of the purposes for which **we** will collect and use **your** personal information are:

1. to provide **you** with a contract of insurance;
2. to identify **you** when **you** contact **us**;
3. to deal with and assess claims;
4. to make payments;
5. to obtain feedback on the service **we** provide to **you**;
6. for fraud prevention and detection purposes.

**We** will contact **you** to obtain consent prior to processing **your** personal information for any other purpose.

#### Who do you share my personal information with?

Where necessary, **we** will share the personal information **you** gave **us** or Fish Insurance, for the purposes of providing **you** with a contract of insurance that **you** requested with the types of organisations described below:

- associated companies including reinsurers and service providers;
- regulatory and legal bodies;
- survey and research organisations;
- healthcare professionals, social and welfare organisations; and
- other insurance companies.

Or, in order to meet **our** legal or regulatory requirements, with the types of organisations described below:

- regulatory and legal bodies;
- law enforcement bodies, including investigators; and
- other insurance companies

#### How do you transfer my personal information to other countries?

Where **we** transfer **your** personal information to countries that are outside of the **UK** and the European Union (EU) **we** will ensure that it is protected and that the transfer is lawful. **We** will do this by ensuring that the personal information is given adequate safeguards by using 'standard contractual clauses' which have been adopted or approved by the **UK** and the EU, or other solutions that are in line with the requirements of European data protection laws.

A copy of **our** security measures for personal information transfers can be obtained from **our** Data Protection Officer at: Zurich Insurance Group, Tri-centre 1, Newbridge Square, Swindon, SN1 1HN, or by emailing the Data Protection Officer at [GBZ.General.Data.Protection@uk.zurich.com](mailto:GBZ.General.Data.Protection@uk.zurich.com).

#### How long do you retain my personal information for?

**We** will retain and process **your** personal information for as long as necessary to meet the purposes for which it was originally collected. These periods of time are subject to legal, tax and regulatory requirements or to enable **us** to manage **our** business.

#### What are my data protection rights?

**You** have a number of rights under the data protection laws, namely:

- to access **your** data (by way of a subject access request);
- to have **your** data rectified if it is inaccurate or incomplete;
- in certain circumstances, to have **your** data deleted or removed;
- in certain circumstances, to restrict the processing of **your** data;
- a right of data portability, namely to obtain and reuse **your** data for **your** own purposes across different services;
- to object to direct marketing;
- not to be subject to automated decision making (including profiling), where it produces a legal effect or a similarly significant effect on **you**;
- to claim compensation for damages caused by a breach of the data protection legislation.
- if **we** are processing **your** personal information with **your** consent, **you** have the right to withdraw **your** consent at any time.

**We** will, for the purposes of providing **you** with a contract of insurance and processing claims, process **your** personal information by means of automated decision making and profiling where **we** have a legitimate interest or **you** have consented to this.

#### What happens if I fail to provide my personal information to you?

If **you** do not provide **us** with **your** personal information, **we** will not be able to provide **you** with a contract or assess future claims for the contract of insurance **you** have requested.

#### How do you use my claims history?

When **you** tell **us** about an incident or claim **we** may pass information relating to it to the relevant database. **We** and other insurers may search these databases when **you** apply for insurance, in the event of any incident or claim, or at time of renewal to validate **your** claims history or that of any other person or property likely to be involved in the policy or claim. This helps to check information provided and prevent fraudulent claims.

#### Fraud prevention and detection

In order to prevent and detect fraud **we** may at any time:

- a) check **your** personal data against counter fraud systems;
- b) use **your** information to search against various publicly available and third party resources; use industry fraud tools including undertaking credit searches and to review **your** claims history;
- c) share information about **you** with other organisations including but not limited to the police, the Insurance Fraud Bureau (IFB), other insurers and other interested parties.

If **you** provide false or inaccurate information and fraud is identified, the matter will be investigated and appropriate action taken. This may result in **your** case being referred to the Insurance Fraud Enforcement Department (IFED) or other police forces and fraud prevention agencies. **You** may face fines or criminal prosecution. In addition, Zurich may register **your** name on the Insurance Fraud Register, an industry-wide fraud database.

#### Information - EU Travel Regulations

Under European Union (EU) travel regulations, **you** are entitled to claim compensation from **your** carrier if any of the following happen:

##### 1. Denied boarding and cancelled flights

If **you** check in on time but **you** are denied boarding because there are not enough seats available or if **your** flight is cancelled, the airline operating the flight must offer **you** financial compensation.

##### 2. Long delays

If **you** are delayed for two hours or more, the airline must offer **you** meals and refreshments, hotel accommodation and communication facilities. If **you** are delayed for more than five hours, the airline must also offer to refund **your** ticket.

##### 3. Luggage

If **your** checked-in luggage is damaged or lost by an EU airline, **you** must claim compensation from the airline within 7 days. If **your** checked-in luggage is delayed, **you** must claim compensation from the airline within 21 days of its return.

##### 4. Death or injury

If **you** are injured in an accident on a flight by an EU airline, **you** may claim damages from the airline. If **you** die as a result of these injuries **your** family may claim damages from the airline.

Full details are available at <http://ec.europa.eu/transport/passenger-rights/en/index.html>.

## Definitions

These definitions apply throughout **your** policy wording. Where **we** explain what a word means that word will appear highlighted in bold print and have the same meaning wherever it is used in the policy wording. **We** have listed the definitions alphabetically.

**Baggage** - means luggage, clothing, personal effects, **valuables** and other articles (but excluding **ski equipment, golf equipment, mobility and disability equipment, personal money** and documents of any kind) which belong to **you** (or for which **you** are legally responsible) which are worn, used or carried by **you** during any **trip**.

**Bodily injury** - means an identifiable physical injury caused by sudden, unexpected, external and visible means including injury as a result of unavoidable exposure to the elements.

**Carer** - means the person travelling in **your** party who is competent to provide care for **you** where **you** are not able to care for **yourself**.

**Close business associate** - means any person whose absence from business for one or more complete days at the same time as **your** absence or the absence of **your carer** prevents the proper continuation of that business.



**Close relative** - means mother, father, sister, brother, wife, husband, civil partner, daughter, son, grandparent, grandchild, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, step parent, step child, step sister, step brother, foster child, legal guardian, domestic partner or fiancé/fiancée.

**Complications of pregnancy or childbirth** – means the following **complications of pregnancy** as certified by a **medical practitioner**: toxæmia; gestational hypertension; pre-eclampsia; ectopic pregnancy; hydatidiform mole (molar pregnancy); hyperemesis gravidarum; ante partum hæmorrhage; placental abruption; placenta prævia; post-partum hæmorrhage; retained placenta membrane; miscarriage; stillbirths; medically necessary emergency caesarean sections/medically necessary termination; and any premature births or threatened early labour more than 8 weeks (or 16 weeks in the case of a multiple pregnancy) prior to the expected delivery date.

**Couple** – means **you** and **your close relative** who lives with **you** in a domestic relationship at the same address as **you**.

**Cruise** - means a **trip** involving a sea voyage of more than five days total duration, where transportation and accommodation is primarily on an ocean going passenger carrying liner, ship or river cruiser.

**Curtailement /Curtailed/Curtailed** - means either:

- a) abandoning or cutting short the **trip** by direct early return to **your home area**, in which case claims will be calculated from the day **you** returned to **your home area** and based on the number of complete days of **your trip you** have not used, or
- b) by attending a hospital outside **your home area** as an in-patient or being confined to **your** accommodation abroad due to compulsory quarantine or on the orders of a treating **medical practitioner**, in either case for a period in excess of 48 hours. Claims will be calculated from the day the ill/injured person was admitted to hospital or confined to **your** accommodation and based on the number of complete days for which **you** were hospitalised, quarantined or confined to **your** accommodation. Cover only applies to ill/injured persons.

**Excess** - means the first amount of each claim, per section, for each separate incident payable for each **insured person**.

**Family cover** - means up to two adults aged 59 or under at the date of issue of the policy and any number of their children, step children or foster children aged 17 or under at the date of issue of the policy. The children are only insured when travelling with one or both of the insured adults, but under annual multi trip cover either adult are insured to travel on their own.

**Golf equipment** – means golf clubs, golf balls, golf bag, non-motorised golf trolley and golf shoes.

**Home** - means **your** or **your carer's** normal place of residence in the **United Kingdom**.

**Home area** – For residents of the **United Kingdom** excluding the Channel Islands and the Isle of Man, **your home area** means the **United Kingdom** excluding the Channel Islands and the Isle of Man. For residents of the Channel Islands and the Isle of Man, **your home area** means either the particular Channel Island on which **you** live or the Isle of Man depending on where **your home** is.

**Insured person** - See definition of **You/Your/Yourself/Insured person**.

**Medical condition** - means any disease, illness or injury (including **complications of pregnancy or childbirth**).

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

**Mobility and disability equipment** – means non-powered wheelchairs, walking frames and sticks, medical aids, supplies and equipment all designed to provide mobility and care for the disabled belonging to **you** (or for which **you** are legally responsible).

**Normal pregnancy or childbirth** – means pregnancy or childbirth without any **complications of pregnancy or childbirth**.

**One-Way trip** – means a **trip** or journey up to maximum duration of 14 days made by **you** within the geographical areas shown in the policy certificate during the **period of insurance**, but with cover under this policy ceasing 12 hours after the time **you** first leave immigration control of the country in which **your** final destination is situated.

**Package** - means the pre-arranged combination of at least two of the following components when sold or offered for sale at an inclusive price and when the

service covers a period of more than 24 hours or includes overnight accommodation:

- a) transport
- b) accommodation
- c) other tourist services not ancillary to transport or accommodation (such as car hire or airport parking) and accounting for a significant proportion of the package as more fully described under The Package Travel, Package Holidays and Package Tour Regulations 1992.

**Period of insurance** – means -

- a) If annual multi trip cover is selected: the period of 12 months for which **we** have accepted the premium as stated in the policy certificate. During this period any **trip** not exceeding 31 days (if **you** are aged 59 years or under at date of issue of the policy), or 24 days (if **you** are aged 60 – 74 years inclusive at the date of issue of the policy), or 17 days (if **you** are aged 75 - 79 years inclusive at the date of issue of the policy) is covered, but limited to 17 days in total in each **period of insurance** for winter sports. Under these policies cancellation cover will be operative from the date stated in the policy certificate or the time of booking any **trip** (whichever is the later date) and terminates on commencement of any **trip**.
- b) if single trip cover is selected: the period of the **trip** and terminating upon its completion, but not in any case exceeding the period shown in the policy certificate. Under these policies, Section A - Cancellation cover will be operative from the time **you** pay the premium.

For all other sections of the policy, whichever cover is selected, the insurance starts when **you** leave **your home** or for a business **trip your** place of business (whichever is the later) to start the **trip**, and ends at the time of **your** return to **your home** or place of business (whichever is earlier) on completion of the **trip**.

However any **trip** that had already begun when **you** purchased this insurance will not be covered, except where this policy replaces or **you** renew an existing annual multi trip policy which fell due for renewal during the **trip**.

The **period of insurance** is automatically extended for the period of the delay (but not exceeding 30 days unless agreed in writing by **us**) in the event that **your** return to **your home area** is unavoidably delayed due to an event insured by this policy.

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

**Pre-existing medical condition** - means

- a) Any respiratory condition (relating to the lungs or breathing), heart condition, stroke, Crohn's disease, epilepsy or cancer for which **you** have ever received treatment (including surgery, tests or investigations by **your** doctor or a consultant/specialist and prescribed drugs or medication).
- b) Any **medical condition** for which **you** have received surgery, in-patient treatment or investigations in a hospital or clinic within the last twelve months.
- c) Any **medical condition** for which **you** are taking prescribed drugs or medication.

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

**Schedule of benefits** - means the details of cover as outlined on pages 4 and 5 of this document.

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

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

**Single parent cover** - means one adult aged 59 or under at the date of issue of the policy and any number of his or her children, step children or foster children aged 17 years or under at the date of issue of the policy. The children are only insured when travelling with the insured adult, but under annual multi trip cover the adult is also insured to travel on their own.

**Ski equipment** - means skis (including bindings), ski boots, ski poles and snowboards.

**Sports equipment** - means specialist equipment belonging to **you** used specifically for a particular sport of leisure pursuit.

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

**Trip** - means any holiday, business or pleasure trip or journey made by you within the geographical areas shown in the policy certificate that begins and ends in your home area or place of business during the period of insurance and including one-way trips.

However, any trip that had already begun when you purchased this insurance will not be covered, except where this policy replaces or you renew an existing annual multi trip policy which fell due for renewal during the trip.

If annual multi trip cover is selected any trip not exceeding 31 days (if you are aged 59 years or under at date of issue of the policy), or 24 days (if you are aged 60 – 74 years inclusive at the date of issue of the policy), or 17 days (if you are aged 75 - 79 years inclusive at the date of issue of the policy) is covered, but limited to 17 days in total in each period of insurance for winter sports. If any trip exceeds 31 days (if you are aged 59 years or under at date of issue of the policy), or 24 days (if you are aged 60 – 74 years inclusive at the date of issue of the policy), or 17 days (if you are aged 75 - 79 years inclusive at the date of issue of the policy) there is absolutely no cover under this policy for that trip (not even for the first 31 days (if you are aged 59 years or under at date of issue of the policy), or 24 days (if you are aged 60 – 74 years inclusive at the date of issue of the policy), or 17 days (if you are aged 75 - 79 years inclusive at the date of issue of the policy), unless you have contacted us and we have agreed in writing to provide cover.

In addition, any trip solely within your home area is only covered where you have pre-booked at least two nights' accommodation in a hotel, motel, holiday camp, bed and breakfast, holiday cottage or similar accommodation rented for a fee. Each trip under annual multi trip cover is considered to be a separate insurance, with the terms, definitions, What is not covered and conditions contained in this policy applying to each trip.

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

**United Kingdom/UK**- means England, Scotland, Wales, Northern Ireland, the Isle of Man and the Channel Islands.

**Usual, reasonable and customary** - means the most common charge for similar services, medicines or supplies within the area in which the charge is incurred, so long as those charges are reasonable. We will determine what usual, reasonable and customary charges are, and in doing so may consider one or more of the following factors:

- the level of skill, extent of training, and experience required to perform the procedure or service;
- the length of time required to perform the procedure or services as compared to the length of time required to perform other similar services;
- the severity or nature of the illness or bodily injury being treated;
- the amount charged for the same or comparable services, medicines or supplies in the locality;
- the amount charged for the same or comparable services, medicines or supplies in other parts of the country;
- the cost to the medical provider of providing the service, medicine or supply;
- such other factors as we, in the reasonable exercise of discretion, determine are appropriate.

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

**We/Us/Our** - means Zurich Insurance plc.

**You/Your/Yourself/Insured person** - means each person travelling on a trip whose name appears in the policy certificate.

## General conditions applicable to the whole policy

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

If you do not comply we may cancel the policy or refuse to deal with your claim or reduce the amount of any claim payment.

### 1. Dual insurance

If at the time of any incident which results in a claim under this policy, there is another insurance covering the same loss, damage, expense or liability we will not pay more than our proportional share (not applicable to Section E – Personal accident).

### 2. Duty to take reasonable care not to make a misrepresentation

Please take reasonable care to answer all our questions honestly and to the best of your knowledge. If you don't answer our questions correctly, your policy may be cancelled, you may be required to pay an additional premium, or your claims rejected or not fully paid.

### 3. Reasonable precautions

At all times you must take all reasonable precautions to avoid injury, illness, disease, loss, theft or damage and take all reasonable steps to safeguard your property from loss or damage and to recover property lost or stolen.

### 4. Cancellation by you

#### a) Statutory cancellation rights

You can cancel this policy within 14 days of receiving it. This is called the 'cooling off' period.

If you have not travelled and no claim has been made and no incident likely to result in a claim has occurred, we will refund the premium you paid.

#### b) You may cancel this policy at any time, after the 14 day 'cooling off' period.

If you have purchased a single trip policy no refund of premium will be allowed.

If you have purchased an annual multi trip policy, and cover has not already started we will refund your entire premium. If cover has started, we will refund the premium to you subject to the minimum premium (plus Insurance Premium Tax where applicable), in accordance with the amounts shown below.

No refund will be payable if you have made or intend to make a claim or if any trip has already started.

Refund of premium		
Period within buying your policy (or for renewals, period within your policy renewal date):	Premium returned	Minimum premium
14 days	75%	£15.00
2 months	60%	£35.00
3 months	50%	
4 months	40%	
5 months	30%	
6 months	25%	
No refund will be given after 6 months.		

If your insurance broker charges an administration fee for cancelling your policy, it will be clearly identified by them and will not form part of the premium returned or minimum premium.

If you decide that you want to cancel the policy (or any future renewal of the policy offered by us) tell us

- by emailing [travel@fishinsurance.co.uk](mailto:travel@fishinsurance.co.uk); or
- by writing to Fish Insurance, 12 Sceptre Court, Sceptre Way, Bamber Bridge, Preston PR5 6AW; or
- by telephoning 0333 331 3900^

## 5. Cancellation by us

We may cancel your policy where there is a valid reason for doing so by giving you seven days' notice in writing to your last known address or by email to the address you have given us. We will give you a refund in proportion to the time left until your current period of insurance is due to run out. Valid reasons may include but are not limited to:

- If you advise us of a change of risk under your policy which we are unable to insure;
- Where you fail to respond to requests from us for further information or documentation;
- Where you have given incorrect information and fail to provide clarification when requested;
- Where you breach any of the terms and conditions which apply to your policy; and/or
- The use of threatening or abusive behaviour or language, or intimidation or bullying of our staff or suppliers, by you or any person acting on your behalf.

No refund will be payable if you have made or intend to make a claim or if your trip has already started.

## 6. Fraudulent acts

If you or anyone acting on your behalf have intentionally concealed or misrepresented any information or circumstance that you had a responsibility to tell us about, or engaged in any fraudulent conduct, or made any false statement relating to this insurance, we will:

- void the policy, which means we will treat the policy as if it had never existed;
- not return to you the premium paid;
- not pay claims;
- seek to recover any money from you for any claims we have already paid, including the amount of any costs or expenses we have incurred;
- inform the police, other financial services organisations and anti-fraud databases, as set out under the Important Notes section headed 'Fraud prevention and detection'.

## 7. Sanctions clause

We will not be held liable to provide cover or make any payments or provide any service or benefit to any insured person or other party to the extent that such cover, payment, service, benefit and/or business or activity of the insured person would violate any applicable trade or economic sanctions law or regulation.

## Claims conditions

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

### 1. Making a claim

You must tell us about any incidents of loss, damage, injury, illness, redundancy or liability as soon as possible, whether or not they give rise to a claim. You must give us all the information and help we may need. We will decide how to settle or defend a claim and may carry out proceedings in the name of any person covered by your policy, including proceedings for recovering any claim payments.

#### a) Medical Emergencies, hospital treatment, tests and repatriation

If you are injured or become ill abroad and need hospital treatment, specialist medical treatment, medical tests, scans or to be brought back to the United Kingdom you must contact:

Zurich Assist on +44 1242 218999

If you are unable to do this yourself, a personal representative must do this for you as soon as possible.

If Zurich Assist are not contacted, we may reject your claim or reduce payments.

#### b) All other claims except claims under Section L Legal Expenses -

You must contact within 30 days of your trip ending:

Claims Settlement Agencies,  
308-314 London Road,  
Hadleigh, Benfleet, Essex, SS7 2DD.  
Email: info@csal.co.uk  
Website: www.csal.co.uk  
Tel: 0800 923 4213 (calling from abroad + 44 1242 218 163)

#### c) Claims under Section L Legal Expenses

You must contact within 30 days of your trip ending:

Lyons Davidson Limited, Victoria House  
1 Victoria Street, Bristol BS1 6AD  
Tel: 0800 923 4217

You (or your legal representative) must give us all the information and documents that we may need at your (or their) own expense. If you make a medical claim you may be asked to supply your medical practitioner's name to enable us to access your medical records. This will help us and the medical practitioner treating you, to provide the most appropriate assistance and assess whether cover applies. If you do not agree to provide this when requested we will not deal with your claim.

When there is a claim for injury or illness we may ask for (and will pay the costs of) an insured person to be medically examined on our behalf, or in the event of death, request a post-mortem examination.

### 2. Repaying claims not covered

If we make a payment before cover is confirmed and our claim investigation reveals that no cover exists under the terms of your policy, you must pay us back any amount we have paid.

### 3. Lost or damaged property

You must retain any property which is damaged, and if requested, send it to us at your own expense. If we pay a claim for the full value of the property and it is then recovered it will then become our property.

We may refuse to reimburse you for any property which you cannot provide proof of ownership such as an original receipt, a valuation, original user manual or bank or credit card statements.

### 4. Transferring of rights

We are entitled to take over any rights in the defence or settlement of any claim and to take proceedings in your name for our benefit against any other party.

## Important conditions relating to health

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

If you do not comply we may cancel the policy or refuse to deal with your claim or reduce the amount of any claim payment.

Please note: If you are answering the medical questions on behalf of someone else, you must make sure that you have all of the required information to answer the medical questions fully and accurately. If you are not sure of any of the information you are giving us or do not know, the answers must be checked with the treating G.P.

It is a condition of this policy that you will not be covered under Section A – Cancellation or curtailment charges, Section B – Emergency medical and other expenses, Section C – Emergency replacement of prescribed medication, Section D – Hospital benefit and Section E – Personal accident for any claims arising directly or indirectly from:

#### 1. At the time of taking out or renewing this policy:

- a) Any pre-existing medical condition you have unless you have declared to Fish Insurance when you purchased the policy and we have agreed in writing to cover you
- b) Any medical condition for which you have received a terminal prognosis
- c) Any medical condition you are aware of but for which you have not had a diagnosis
- d) Any medical condition for which you are on a waiting list or have knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home
- e) Any medical condition affecting you, a close relative, carer or a close business associate that you are aware of that could reasonably be expected to result in a claim on this policy.

2. At any time:

- a) Any **medical condition you** have which a **medical practitioner** has advised **you** not to travel (or would have done so had **you** sought his/her advice), but despite this **you** still travel
- b) Any surgery, treatment or investigations for which **you** intend to travel outside of **your home area** to receive (including any expenses incurred due to the discovery of other **medical conditions** during and/or complications arising from these procedures)
- c) Any **medical condition you** have which necessitates the need for **you** to have specialist residential care (away from **your home**)
- d) Any **medical condition** for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**
- e) **Your** travel against any health requirement stipulated by the carrier, their handling agents or any other **public transport** provider.

If **your** health changes after the start date of **your** policy and the date **your** travel tickets or confirmation of booking were issued, **you** should telephone Fish Travel Insurance on 0333 331 3900^ to make sure **your** cover is not affected.

**We** will tell **you** if **your** change in health will affect **your** insurance and if cover can continue. If **we** cannot cover **your medical conditions** or **you** do not want to pay the additional premium quoted, **we** will give **you** the choice of either:

- Cancelling **your** policy and **we** will arrange a proportionate/partial refund providing **you** have not/will not make a claim; or
- Making a cancellation claim for any pre-booked **trips**.

**You** should also refer to 'What is not covered – applicable to all sections of the policy' on pages 12 and 13.

## Medical screening

**You** will need to complete the straightforward online process with simple questions about **your medical conditions**, medication, trips to **your medical practitioner** and other related matters.

Please note: If **you** are answering the medical questions on behalf of someone else, **you** must make sure that **you** have all of the required information to answer the medical questions fully and accurately. If **you** are not sure of any of the information **you** are giving **us** or do not know the answer, **you** must check with the treating G.P.

If, as a result of **your** answers, **our** criteria of assessment may impose special terms, such as an additional premium, this will be advised to **you** immediately in the quote and will form part of the policy and conditions will be shown. The policy will be emailed to **you** with confirmation of purchase if **you** purchase the policy online. If **you** purchase the policy over the telephone, the policy will be sent to **you** in the post.

**You** are under a legal duty to ensure that **you** have not made a misrepresentation to **us**. Depending on the type of misrepresentation made, this could result in **your** policy being cancelled, **you** may be required to pay an additional premium or **your** claim could be rejected or not fully paid.

Should **you** decide not to pay the additional premium all **medical conditions** will not be covered.

Any additional **medical conditions** not declared to **us** will not be covered.

**You** should also refer to What is not covered – applicable to all sections of the policy.

## What is not covered - applicable to all sections of the policy

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

1. **War risks, civil commotion.**  
War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power.
2. **Terrorism**  
This exclusion shall not apply to losses under Section B – Emergency medical and other expenses, Section D – Hospital benefit and Section E – Personal accident unless such losses are caused by nuclear, chemical or biological attack, or the disturbances were already taking place at the beginning of any **trip**.
3. **Radioactive contamination**  
Ionising radiation or radioactive contamination caused by nuclear fuel or waste, or the radioactive, toxic explosive or other dangerous properties of any explosive nuclear equipment.
4. **Sonic bangs**  
Pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.
5. **Winter sports**  
**Your** participation in winter sports unless the appropriate winter sports premium has been paid, then cover will apply under those sections shown as covered for winter sports in **your** policy certificate for:
  - a) the winter sports specified in the list on page 16 and
  - b) any other winter sports shown as covered in **your** policy certificatefor a period of no more than 17 days in total in each **period of insurance** under annual multi trip policies and for the period of the **trip** under single trip policies.
6. **Professional sports or entertaining**  
**Your** participation in or practice of professional sports or professional entertaining.
7. **Other sports or activities**  
**Your** participation in or practice of any other sport or activity, manual work, driving any motorised vehicle or racing unless:
  - i) specified in the lists on pages 15 and 16
  - or
  - ii) shown as covered in **your** policy certificate.
8. Any **trip** that involves a **cruise**, unless the appropriate **cruise** premium has been paid, then cover will also apply under those sections shown as covered for **cruise** in **your** policy certificate.
9. **Suicide, self-inflicted injury or illness, and unnecessary danger**  
**Your** suicide or attempted suicide, wilful or self-inflicted injury or illness, or **your** deliberate exposure to unnecessary danger (except in an attempt to save human life).
10. **Drug and substance abuse**  
**Your** substance abuse, drug abuse (whether over the counter, prescription or otherwise) and/or ingestion of any illegal drugs or substances.
11. **Alcohol consumption**  
**You** drinking too much alcohol which is evidenced by:
  - a) a **medical practitioner** stating that **your** alcohol consumption has caused or actively contributed to **your** injury or illness.
  - b) the results of a blood test which shows that **your** blood alcohol level exceeds 0.19% which is approximately four pints beer or four 175ml glasses of wine.
  - c) the witness report of a 3rd party which has advised that **you** have notably impaired **your** faculties and/or judgement.
  - d) **your** own admission and/or by the description of events **you** have described on the claim form.

12. **Alcohol abuse or dependency**

Your alcohol abuse or alcohol dependency which is evidenced by:

- a) your medical records or the opinion of your medical practitioner and/or
- b) the opinion of an independent medical practitioner.

This exclusion does not apply where you claim relates directly to a **medical condition** you have declared to us (and where you have paid the appropriate additional premium and we have accepted those conditions in writing) if you have not been consuming alcohol against the advice of your general practitioner. We may refuse to accept your claim in these circumstances.

13. **Jumping from buildings, balconies, vehicles etc,**

Your (unless in an attempt to save human life or your life is in danger):

- a) climbing, jumping, moving from one balcony to another; or
- b) climbing, jumping or moving from any external part of a building to another (unless during the normal course of using the stairs, lifts or usual access points
- c) jumping or diving from piers, walls or rocks, including tombstoning and shore jumping, or climbing on top of or jumping from a vehicle.

14. **Unlawful action**

Your own unlawful action or any criminal proceedings against you under the authority of the customs and/or government of any country.

15. **Additional loss or expense**

Any other loss, damage or additional expense following on from the event for which you are claiming, unless we provide cover under this insurance.

Examples of such loss, damage or additional expense would be the cost of replacing locks after losing keys, costs incurred in preparing a claim or loss of earnings following **bodily injury**, illness or disease.

16. **Armed Forces**

Operational duties of a member of the Armed Forces (other than claims arising from authorised leave being cancelled due to operational reasons, as provided for under sub section 4. of Section A – Cancellation or curtailment charges).

17. **Travelling against FCO /WHO advice**

You travelling to a country or area or event against the advice of the Foreign Commonwealth Office or equivalent government or national authority, or the World Health Organisation.

Websites: [www.fco.gov.uk](http://www.fco.gov.uk)  
[www.who.int/en/](http://www.who.int/en/)

18. **Flying other than as a passenger**

You travelling in an aircraft other than as a fare paying passenger in a fully licensed passenger carrying aircraft.

19. **Driving without a licence**

Driving any car or motorcycle, moped or scooter unless you have a full **United Kingdom** licence which permits you to drive the equivalent category of vehicle. In any event there is no cover for your use of a quad bike.

20. **Not taking medication or treatment**

A **medical condition** for which an **insured person** chose not to take medication or other recommended treatment as prescribed or directed by a **medical practitioner**.

21. **Tropical disease where not vaccinated**

A tropical disease where you have not had the vaccinations or taken the medication recommended by the **United Kingdom** Department of Health or required by the authorities in the country being visited, unless they have written confirmation from a Doctor that they should not be vaccinated or take the medication, on medical grounds.

22. **Reward Scheme Points**

Any costs paid for using reward scheme points or similar, timeshare, holiday property bond or similar points scheme (including any exchange fees, property maintenance expenses or fees).

23. **Insolvency**

Any tour operator, travel agent, accommodation provider, **public transport** carrier or other service provider becoming insolvent and being unable or unwilling to carry out their duty to you.

24. **Normal pregnancy or childbirth**

Pregnancy or childbirth, without any accompanying injury, illness, disease or **complications of pregnancy or childbirth**.

25. **Other Insurance**

Loss, damage, liability or expense more specifically insured by another policy.

26. **Costs recoverable elsewhere/refusal of reasonable alternative**

Any costs incurred by you,

- a) which you can recover from your accommodation provider, **public transport** carrier or other service provider; and/or
- b) because you have refused a reasonable alternative from your accommodation provider, **public transport** carrier or other service provider.

27. **Currency exchange**

Any loss caused by currency exchanges or fluctuations.

## Sports and activities covered

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The following lists detail the sports and activities that this policy will cover when **you** are participating on a recreational, incidental and amateur basis during any **trip**, provided that **you**:

1. comply with local laws and the relevant safety procedures rules and regulations
2. use appropriate safety equipment (such as helmet, harness, knee and/or elbow pads)
3. have not been advised by a **medical practitioner** against participating in such sport or activity (or would not have been advised against it if it would have been reasonable for **you** to seek their advice and **you** chose not to).

Please refer to General Exclusions and the relevant exclusions under each section of this policy, which continue to apply.

Please also note the specific exclusions under Section H – Personal liability relating to **your** owning, handling or looking after any animal; **your** owning or using a firearm, a horse drawn or motorised vehicle, a waterborne, motorised, mechanical or towed vehicle (except manually propelled watercraft) or an aircraft of any description, including unpowered flight; **your** owning or occupying any land or building; and **your** job or **your** involvement in paid or unpaid **manual work** or physical labour of any kind.

If **you** are participating in any other sports or activities not mentioned, please email Fish Insurance at [travel@fishinsurance.co.uk](mailto:travel@fishinsurance.co.uk) or call **us** on 0333 331 3900^ as **we** may be able to offer cover for an additional premium. Details of those sports and activities which **you** have purchased cover for will be added to **your** policy certificate.

**Covered as standard without charge**

<p>Abseiling (within organisers guidelines)  Aerobics  Amateur athletics (track and field)  Angling  Archaeological digging  Archery  Athletics  Badminton  Banana boating  Bar work  Baseball  Basketball  Beach games  Billiards/snooker/pool  Bird watching  Body boarding (boogie boarding, no competitions)  Bowling  Bowls  Bungee jumping (maximum of 2 jumps)  Camel riding  Canoeing/kayaking (excluding white water)  Carer  Caring for children (au pair/nanny)  Catamaran sailing (in-shore)  Charity or conservation work (voluntary) for and organised by registered charity or conservation organisation.  Clay pigeon shooting  Climbing (on climbing wall only)  Coaching only (no playing or involvement in sport or activity)  Cricket  Croquet  Curling  Cycling (excluding BMX, mountain biking, touring or racing)  Dancing (including instruction)  Darts  Deep sea fishing  Diving (indoor, up to 5 metres)  Driving any car or motorcycle, moped or scooter on public roads for which <b>you</b> have a full <b>United Kingdom</b> licence which permits <b>you</b> to drive the equivalent category of vehicle and wearing a helmet if driving a motorbike, moped or scooter (no cover for quad biking, no off road, no racing, no motor rallies or competitions)  Elephant riding/trekking  Falconry  Fell walking/running (up to 2,500 metres above sea level)  Fencing  Flag football  Football  Fresh water / sea fishing  Flying as a fare paying passenger in a fully licensed passenger carrying aircraft  Frisbee/ultimate frisbee including competitions  Fruit or vegetable picking  Glass bottom boats/bubbles  Go ape  Go karting (within organisers guidelines)  Golf  Gymnastics  Handball  Highland games  Horse riding/pony trekking (excluding competitions, racing, jumping, hunting, polo)  Hot air ballooning  Hurling  Jet boating (no racing, no competitions)  Jet skiing  Jogging  Kayaking (up to grade 2 rivers)  Keepfit  Kiting  Korfbal  Low ropes  Marathon (within Europe only)  Model flying  Model sports</p>	<p>Mountain biking (excluding racing)  Netball  Octopush  Orienteering  Paint balling/war games (wearing eye protection)  Pedalos  Petanque  Pony trekking  Quoits  Rackets  Racket ball  Rambling  Refereeing  Restaurant work  Rifle range  Ringos  River walking  Roller skating/blading/inline skating/skate boarding (no cover for racing or competitions)  Rounders  Rowing (excluding racing, no competitions)  Running sprint/long distance (no competitions, or iron man of any type)  Safari (Organised tours only, pre booked within the <b>United Kingdom</b> prior to departure)  Safari tracking in the bush (organised tour)  Safari trekking  Sail boarding  Sailing/yachting within territorial waters (if qualified or accompanied by a qualified person and no racing)  Sailing /Yachtnig (inshore)  Sand boarding/surfing/skiing  Sand dune surfing/skiing  Sand yachting (excluding racing)  Scuba diving up to depth of 18 metres (if qualified or accompanied by qualified instructor and not diving alone), excluding diving less than 24hours before flying and cave diving)  Sea fishing  Shooting/small bore target/rifle range shooting (range only within organisers guidelines)  Skateboarding  Snorkelling  Softball  Spear fishing (without tanks)  Squash  Students working as counsellors or university exchanges for practical course work (excluding <b>manual work</b>)  Surfing (excluding competitions)  Swim trekking  Swimming  Swimming with dolphins  Sydney harbour bridge (organised and walking across clipped onto a safety line)  Table tennis  Ten pin bowling  Tennis  Trampolining  Tree canopy walking  Trekking/hiking/walking up to 2,000 metres above sea level  Tug of war  Volleyball  Wake boarding  Water polo  Water skiing/water ski jumping  Whale watching  White water rafting (grades 1 to 3 inclusive)  Wind surfing/sailboarding  Wind tunnel flying  Yachting (inland and coastal waters)  Yoga  Zip lining/trekking (within organisers guidelines, safety harness must be worn)  Zorbing/hydro zorbing/sphereing</p>
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Please note that whilst participating in sports and activities listed below, the following will apply:

- a) no cover will be provided under section E - Personal Accident
- b) no cover will be provided under section H - Personal Liability
- c) the policy **excess** under section B - Emergency Medical & Other Expenses will be increased to £150 per person per claim.

**Covered if the appropriate additional premium has been paid and the sport and/or activity is shown on your policy certificate**

<ul style="list-style-type: none"> <li>Adventure racing (up to 6 hours)</li> <li>Airsoft</li> <li>American football</li> <li>Animal sanctuary/refuge work</li> <li>Bamboo rafting</li> <li>Biathlon</li> <li>Black water rafting (grades 1 to 3 inclusive)</li> <li>Black water rafting (grades 4 to 5) (must have experience of lower grades)</li> <li>Blade skating</li> <li>Blowcarting</li> <li>Boxing (training only)</li> <li>Breathing observation bubble (BOB)</li> <li>Canoeing/Kayaking (White Water up to Grade 3 rivers only)</li> <li>Canyoning</li> <li>Cross country running</li> <li>Cycle touring</li> <li>Cyclo cross</li> <li>Devil karting</li> <li>Dinghy sailing</li> <li>Dirt boarding</li> <li>Dragon boat racing</li> <li>Dry slope skiing</li> <li>Fives</li> <li>Gaelic football</li> <li>Gliding (EU only)</li> <li>Gorge walking (no ropes)</li> <li>Gorilla trekking</li> <li>Hockey</li> <li>Horse jumping (no Polo, Hunting)</li> <li>Horse riding (eventing)</li> <li>Husky dog sledding (as a driver)</li> <li>Ice hockey (with full body protection)</li> <li>Judo (training only)</li> <li>Karate (training only)</li> <li>Karting</li> <li>Kendo (training only)</li> <li>Kick sledging</li> </ul>	<ul style="list-style-type: none"> <li>Lacrosse</li> <li>Land yachting</li> <li>Martial arts (training Only)</li> <li>Modern pentathlon</li> <li>Mountain walking up to 1,500 metres above sea level</li> <li>Parasailing (Over water)</li> <li>Parascending (over land)</li> <li>Parascending (Over water)</li> <li>Power boating</li> <li>Power lifting</li> <li>River tubing</li> <li>Rock climbing outside on rock walls up to 20 metres in height</li> <li>Roller hockey</li> <li>Rugby (amateur game)</li> <li>Rugby (training)</li> <li>Safari (non <b>UK</b> organised)</li> <li>Sailing (outside territorial waters, but no ocean crossing or racing)</li> <li>Scuba diving 19m to 30m (if qualified or accompanied by qualified instructor with recognised school and not diving alone, and excluding diving less than 24hours before flying)</li> <li>Shark cage diving</li> <li>Shinty</li> <li>Speed sailing</li> <li>Speed skating</li> <li>Street hockey</li> <li>Summer tobogganing</li> <li>Tae kwon do (training only)</li> <li>Tandem Paragliding (Europe only)</li> <li>Telemarking</li> <li>Triathlon</li> <li>Via ferratta</li> <li>Weight lifting</li> <li>White water rafting (grades 4 to 5) (must have experience of lower grades)</li> </ul>
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**Covered if the appropriate winter sports premium has been paid and is shown on your policy certificate**

<ul style="list-style-type: none"> <li>Dry slope skiing</li> <li>Glacier skiing/walking</li> <li>Husky dog sledding as a passenger (organised, non-competitive and with experienced local driver)</li> <li>Ice skating</li> <li>Ski boarding</li> <li>Ski run walking</li> <li>Skiing on <b>piste</b></li> <li>Skiing alpine</li> <li>Skiing – mono</li> </ul>	<ul style="list-style-type: none"> <li>Skiing - off <b>piste</b> with a guide and in areas that local resort management consider to be safe</li> <li>Sledging/tobogganing on snow</li> <li>Sledging/sleigh riding as a passenger when pulled by horse or reindeer (organised, non-competitive and with experienced local driver)</li> <li>Snow boarding on <b>piste</b></li> <li>Snow boarding - off <b>piste</b> with a guide and in areas that local resort management consider to be safe</li> <li>Snow shoe walking</li> <li>Winter walking (using crampons and ice picks only)</li> </ul>
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## 24 hour worldwide medical & emergency assistance service

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Zurich Assist offer 24-hour worldwide assistance service in relation to the cover provided under **your** policy.

**You** must contact Zurich Assist if **you** are injured or become ill abroad and need hospital treatment, specialist medical treatment, medical tests, scans or to be brought back to the **United Kingdom**. If **you** are unable to do this **yourself**, a personal representative must do this for **you** as soon as possible. If Zurich Assist are not contacted, **we** may reject **your** claim or reduce payment.

### Zurich Assist +44 1242 218999

#### Medical assistance abroad

Zurich Assist has the expertise to help should **you** be injured or become ill and can arrange transport **home** when this is considered to be medically necessary or when **you** are told about the illness or death of a **close relative** or a **close business associate** at **home**.

#### Payment for medical treatment abroad

If **you** are admitted to a hospital/clinic while abroad, Zurich Assist can arrange for medical expenses, covered by the policy to be paid direct to the hospital/clinic.

To take advantage of this, someone must contact Zurich Assist for **you** as soon as possible. Please note that Private medical treatment is not covered unless authorised specifically by Zurich Assist.

#### Cash transfer advice.

If **you** need money to pay for travel or accommodation because of theft, loss, illness or injury, Zurich Assist will advise **you** on the process **you** must follow to get money.

#### Consular and embassy referral.

Where possible, Zurich Assist will give **you** the details of the representative of the relevant consulate or embassy. For example, if **you** have lost **your** passport, driving licence or travel documents.

#### Emergency travel and accommodation arrangements.

Where possible, Zurich Assist will help **you** to arrange emergency alternative transportation and accommodation.

#### Sending urgent messages.

Zurich Assist will help **you** to send urgent personal messages or get messages to **you** if **you** experience travel delay or suffer from **bodily injury** or illness.

## If you require outpatient treatment

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If **you** require outpatient treatment **you** must provide a copy of **your** policy certificate to the treating doctor / clinic at the time of treatment so that they can contact the Zurich Assist to obtain authorisation for **your** treatment, in line with **your** policy wording. **You** are responsible for any **excess** and this should be paid by **you** at the time of treatment.

#### Instructions to Doctors/Clinics:

In order to have **your** invoices paid quickly, please send **your** invoice for **usual, reasonable and customary** expenses together with a copy of the policy certificate (clearly showing the policy number and names) and any supporting documentation related to the outpatient treatment (Medical report, cost breakdown) by email to **travelclaims@wtp.ca**

Please include **your** bank account details, IBAN no's and / or Swift code for payment to be processed electronically.

E-mail: **travelclaims@wtp.ca**

Tel: +44 (0) 1242 218 999

## Reciprocal health agreements with other countries

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#### EU, EEA or Switzerland

If **you** are travelling to countries within the European Union (EU), the European Economic Area (EEA) or Switzerland **you** are strongly advised to obtain a European Health Insurance Card (EHIC). **You** can apply for an EHIC either online at [www.ehic.org.uk](http://www.ehic.org.uk) or by telephoning 0300 330 1350. This will entitle **you** to benefit from the health care arrangements which exist between countries within the EU/EEA or Switzerland.

If **we** agree to pay for a medical expense which has been reduced because **you** have used either a European Health Insurance Card or private health insurance, **we** will not deduct the **excess** under Section B - Emergency medical and other expenses.

#### Australia or New Zealand

If **you** need medical treatment in Australia or New Zealand **you** must enrol with a local MEDICARE office. **You** do not need to enrol when **you** arrive, but **you** must do this after the first occasion **you** receive treatment. In-patient and out-patient treatment at a public hospital will then be available free of charge. Details of how to enrol and the free treatment available can be found by visiting the MEDICARE website on [www.medicareaustralia.gov.au](http://www.medicareaustralia.gov.au) or [www.health.govt.nz](http://www.health.govt.nz), or by emailing [medicare@medicareaustralia.gov.au](mailto:medicare@medicareaustralia.gov.au) or [info@health.govt.nz](mailto:info@health.govt.nz). Alternatively please call Zurich Assist for guidance.

If **you** are admitted to hospital **you** must contact Zurich Assist as soon as possible and get their authorisation for any treatment not available under MEDICARE.

## Section A – Cancellation or curtailment charges

### What is covered

We will pay **you** up to the amount shown in the **schedule of benefits** for **your** proportion only of any irrecoverable unused travel and accommodation costs and other pre-paid charges (including excursions up to £250) which **you** have paid or are contracted to pay, together with **your** proportion only of any reasonable additional travel expenses incurred if

- a) cancellation of the **trip** is necessary and unavoidable or
- b) the **trip** is **curtailed** before completion

as a result of any of the following events:

1. The death, **bodily injury**, illness, disease, or **complications of pregnancy or childbirth** of:
  - a) **You**
  - b) **Your carer**
  - c) any person who **you** are travelling or have arranged to travel with
  - d) any person who **you** have arranged to stay with
  - e) **your close relative** or **close relative of your carer**
  - f) **your close business associate** or the **close business associate of your carer**.
2. **You, your carer** or any person who **you** are travelling or have arranged to travel with being quarantined, called as a witness at a Court of Law or for jury service attendance.
3. Redundancy of **you** or any person who **you** are travelling or have arranged to travel with (which qualifies for payment under current **United Kingdom** redundancy payment legislation and at the time of booking the **trip** there was no reason to believe anyone would be made redundant).
4. **You** or any person who **you** are travelling or have arranged to travel with, are a member of the Armed Forces, Territorial Army, Police, Fire, Nursing or Ambulance Services or employees of a Government Department and have **your/their** authorised leave cancelled or are called up for operational reasons, provided that the cancellation or **curtailment** could not reasonably have been expected at the time when **you** purchased this insurance or at the time of booking any **trip**.
5. The Police or other authorities requesting **you** or **your carer** to stay at or return to **your home** or the **home of your carer** due to serious damage to **your home** or the **home of your carer** caused by fire, aircraft, explosion, storm, flood, subsidence, fallen trees, collision by road vehicles, malicious people or theft.

### Special conditions relating to claims

1. **You** must get (at **your** own expense) a medical certificate from a **medical practitioner** and the prior approval of Zurich Assist to confirm the necessity to return **home**, prior to **curtailment** of the **trip** due to death, **bodily injury**, illness, disease or **complications of pregnancy or childbirth**.
2. If **you** fail to notify the travel agent, tour operator or provider of transport or accommodation as soon as **you** find out it is necessary to cancel the **trip**, the amount **we** will pay will be limited to the cancellation charges that would have otherwise applied.
3. If **you** cancel the **trip** due to:
  - a. stress, anxiety, depression or any other mental or nervous disorder that **you** are suffering from **you** must provide (at **your** own expense) a medical certificate from either a registered mental health professional if **you** are under the care of a Community Mental Health Team or if not, a consultant specialising in the relevant field or
  - b. any other **bodily injury**, illness, disease or **complications of pregnancy or childbirth**, **you** must provide (at **your** own expense) a medical certificate from a **medical practitioner** stating that this necessarily and reasonably prevented **you** from travelling.

We need the medical certificate completed as soon as **you** find out it is necessary to cancel the **trip**, as any delay in seeing a **medical practitioner** could mean that **your** symptoms are no longer present. If **you** cannot get an immediate appointment, please make one for as early as possible and keep all details of this to help substantiate **your** claim.

### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate
2. The cost of **your** unused original tickets where Zurich Assist or **we** have arranged and paid for **you** to come **home** following **curtailment** of the **trip**. If however **you** have not purchased a return ticket, **we** reserve the right to deduct the cost of an economy flight from any additional costs **we** have incurred which are medically necessary to repatriate **you** to **your home**.
3. The cost of Air Passenger Duty (APD) whether irrecoverable or not.
4. Any claims arising directly or indirectly from:
  - a) **Your** misconduct or misconduct by any person who **you** are travelling with or have arranged to travel with leading to dismissal, **your/their** resignation, voluntary redundancy, **you/their** entering into a compromise agreement, or where **you/they** had received a warning or notification of redundancy before **you** purchased this insurance or at the time of booking any **trip**.
  - b) Circumstances known to **you** before **you** purchased this insurance or at the time of booking any **trip** which could reasonably have been expected to lead to cancellation or **curtailment** of the **trip**.
5. Travel tickets paid for using any airline mileage or supermarket reward scheme (for example Avios), unless evidence of specific monetary value can be provided.
6. Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme. In addition any property maintenance costs, fees or charges incurred by **you**, as part of **your** involvement in such schemes is not covered.
7. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

**You** should also refer to the Important conditions relating to health on pages 11 and 12.

### Claims evidence

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

- A medical certificate from the treating **medical practitioner** (or in the case of stress, anxiety, depression or any other mental or nervous disorder, either a registered mental health professional if **you** are under the care of a Community Mental Health Team or if not, a consultant specialising in the relevant field) explaining why it was necessary for **you** to cancel or **curtail** the **trip**.
- In the case of death causing cancellation or **curtailment** of the **trip**, the original death certificate.
- Booking confirmation together with a cancellation invoice from **your** travel agent, tour operator or provider of transport/accommodation.
- In the case of **curtailment** claims, written details from **your** travel agent, tour operator or provider of transport/accommodation of the separate costs of transport, accommodation and other pre-paid costs or charges that made up the total cost of the **trip**.
- **Your** unused travel tickets.
- Receipts or bills for any costs, charges or expenses claimed for.
- In the case of compulsory quarantine, a letter from the treating **medical practitioner**.
- In the case of jury service or witness attendance, the court summons.
- The letter of redundancy for redundancy claims.
- A letter from the commanding officer concerned, confirming cancellation of authorised leave or call up for operational reasons.
- In the case of serious damage to **your home** or **your carer's home** a report from the Police or relevant authority.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

**To make a claim under this section call:**  
**0800 923 4213 (Cancellation claims)**  
**+44 1242 218999 (Curtailment claims)**

## Section B – Emergency medical and other expenses

### What is covered

We will pay **you** up to the limit shown in the **schedule of benefits** for the following expenses which are necessarily incurred during a **trip** as a result of **you** suffering unforeseen **bodily injury**, illness, disease, or **complications of pregnancy or childbirth** and/or compulsory quarantine:

1. **Usual, reasonable and customary** emergency medical, surgical, hospital, ambulance and nursing fees and charges incurred outside of **your home area**.
2. **Usual, reasonable and customary** emergency dental treatment for the immediate relief of pain (to natural teeth only) incurred outside of **your home area**.
3. Costs of telephone calls:
  - a) to Zurich Assist notifying and dealing with the problem for which **you** are able to provide receipts or other reasonable evidence to show the cost of the calls and the numbers **you** telephoned
  - b) incurred by **you** when **you** receive calls on **your** mobile phone from Zurich Assist for which **you** are able to provide receipts or other reasonable evidence to show the cost of the calls.
4. The cost of taxi fares for **you** travel to or from hospital relating to **your** admission, discharge or attendance for outpatient treatment or appointments and/or for collection of medication prescribed for **you** by the hospital.
5. If **you** die:
  - a) outside **your home area** the reasonable additional cost of funeral expenses abroad plus the reasonable cost of returning **your** ashes to **your home**, or the additional costs of returning **your** body to **your home**
  - b) within **your home area** the reasonable additional cost of returning **your** ashes or body to **your home**.
6. Reasonable additional transport and/or accommodation expenses incurred, up to the standard of **your** original booking (for example full or half board, all inclusive, bed and breakfast, self-catering or room only), if it is medically necessary for **you** to stay beyond **your** scheduled return date.

This includes, with the prior authorisation of Zurich Assist, reasonable additional transport and/or accommodation expenses for **your carer**, a travelling companion, friend or **close relative** to stay with **you** or travel to **you** from the **United Kingdom** to escort **you**. Also additional travel expenses to return **you** and **your carer** to **your home** or a suitable hospital nearby if **you** and **your carer** cannot use the return ticket.
7. With the prior authorisation of Zurich Assist, the additional costs incurred in the use of air transport or other suitable means, including qualified attendants, to repatriate **you** to **your home** if it is medically necessary. These expenses will be for the identical class of travel utilised on the outward journey unless Zurich Assist agree otherwise.
8. With the prior authorisation of Zurich Assist, the additional costs incurred in providing an alternative carer for **you** for the remainder of **your trip**, if **your carer** suffers **bodily injury** or illness and is no longer able to care for **you** and no other person with whom **you** are travelling or staying with is able or competent to become **your carer**.

### Special conditions relating to claims

1. **You** must tell Zurich Assist as soon as possible of any **bodily injury**, illness or disease which necessitates **your** admittance to hospital as an in-patient or before any arrangements are made for **your** repatriation.
2. If **you** suffer **bodily injury**, illness or disease **we** reserve the right to move **you** from one hospital to another and/or arrange for **your** repatriation to the **United Kingdom** at any time during the **trip**. **We** will do this, if in the opinion of Zurich Assist or **us** (based on information provided by the **medical practitioner** in attendance), **you** can be moved safely and / or

travel safely to **your home area** or a suitable hospital nearby to continue treatment.

3. The intention of this section is to pay for emergency medical/surgical/dental treatment only and not for treatment or surgery that can be reasonably delayed until **your** return to **your home area**. **Our** decisions regarding the treatment or surgery that **we** will pay for (including repatriation to **your home area**) will be based on this. If **you** do not accept **our** decisions and do not want to be repatriated, then **we** will cancel all cover under **your** policy and refuse to deal with claims for any further treatment and/or **your** repatriation to **your home area**.

### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate (except claims under subsection 6 of What is covered).
2. Normal pregnancy, without any accompanying **bodily injury**, illness, disease or **complications of pregnancy or childbirth**. This section is designed to provide cover for unforeseen events, accidents, illnesses and diseases and normal childbirth would not constitute an unforeseen event.
3. The cost of **your** unused original tickets where Zurich Assist or **we** have arranged and paid for **you** to return to **your home**, if **you** cannot use the return ticket. If however **you** have not purchased a return ticket, **we** reserve the right to deduct the cost of an economy flight from any additional costs **we** have incurred which are medically necessary to repatriate **you** to **your home**.
4. Any claims arising directly or indirectly for:
  - a) The cost of treatment or surgery, including exploratory tests, which are not related to the **bodily injury** or illness which necessitated **your** admittance into hospital.
  - b) Any expenses which are not **usual, reasonable or customary** to treat **your bodily injury**, illness or disease.
  - c) Any form of treatment or surgery which in the opinion Zurich Assist or **us** (based on information provided by the **medical practitioner** in attendance), can be delayed reasonably until **your** return to **your home area**.
  - d) Expenses incurred in obtaining or replacing medication, which **you** know **you** will need at the time of departure or which will have to be continued outside of **your home area**. Where possible and with the agreement of **your medical practitioner**, **you** should always travel with plenty of extra medication in case of travel delays.
  - e) Additional costs arising from single or private room accommodation.
  - f) Treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre unless agreed by Zurich Assist.
  - g) Any costs incurred by **you** to visit another person in hospital.
  - h) Any expenses incurred after **you** have returned to **your home area**.
  - i) Any expenses incurred in England, Scotland, Wales, Northern Ireland or the Isle of Man which are:
    - i) for private treatment, or
    - ii) funded by, or are recoverable from the Health Authority in **your home area**, or
    - iii) funded by a reciprocal health agreement (RHA) between these countries and/or island.
  - j) Any expenses incurred after the date on which **we** exercise **our** rights under this section to move **you** from one hospital to another and/or arrange for **your** repatriation but **you** decide not to be moved or repatriated.
5. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

**You** should also refer to the Important conditions relating to health on pages 11 and 12.

### Claims evidence

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

- Receipts or bills for all in-patient/out-patient treatment or emergency dental treatment received.
- In the event of death, the original death certificate and receipts or bills for funeral, cremation or repatriation expenses.
- Receipts or bills for taxi fares to or from hospital claimed for, stating details of the date, name and location of the hospital concerned.
- Receipts or bills or proof of purchase for any other transport, accommodation or other costs, charges or expenses claimed for, including calls to Zurich Assist.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call:

For medical assistance and/or repatriation claims +44 1242 218 999  
or other claims Tel: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section C – Emergency replacement of prescribed medication

### What is covered

We will pay **you** up to the amount shown in the **schedule of benefits** for the emergency replacement of prescribed medication, including transporting the emergency replacement medication to **you** (where medically necessary), in the event of accidental loss or theft **your** medication which **you** took with **you** on **your trip** outside **your home area**.

### Special conditions relating to claims

1. **You** must have complied with the 'Important conditions relating to health' section and purchased the additional cover for the **medical condition** and the prescription costs relating to that **medical condition** for which **you** are now claiming.

### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. The cost of replacing **your** prescribed medication if **you** forgot to take this with **you** on **your trip**.
3. Loss or theft of **your** prescribed medication if it is left **unattended** at any time (including in a vehicle, in checked in luggage or while in the custody of a carrier, tour operator or **public transport** operator).
4. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

**You** should also refer to the Important conditions relating to health on pages 11 and 12.

To make a claim under this section call +44 1242 218 999

## Section D – Hospital benefit

### What is covered

We will pay **you** up to the limit shown in the **schedule of benefits** for every complete 24 hours **you** have to stay in hospital as an in-patient or are confined to **your** accommodation on the orders of a treating **medical practitioner** outside **your home area** as a result of **bodily injury**, illness or disease **you** sustain.

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

### Special conditions relating to claims

1. **You** must tell Zurich Assist as soon as possible of any **bodily injury**, illness or disease which necessitates **your** admittance to hospital as an in-patient, compulsory quarantine or confinement to **your** accommodation on the orders of a **medical practitioner**.

### What is not covered

1. Any claims arising directly or indirectly from:
  - a) Any additional period of hospitalisation, compulsory quarantine or confinement to **your** accommodation:
    - i) relating to treatment or surgery, including exploratory tests, which are not directly related to the **bodily injury**, illness or disease which necessitated **your** admittance into hospital.
    - ii) relating to treatment or services provided by a convalescent or nursing home or any rehabilitation centre.
    - iii) following **your** decision not to be repatriated after the date, when in the opinion of Zurich Assist it is safe to do so.
  - b) Hospitalisation, compulsory quarantine or confinement to **your** accommodation:
    - i) relating to any form of treatment or surgery which in the opinion of Zurich Assist or **us** (based on information provided by the **medical practitioner** in attendance), can be delayed reasonably until **your** return to **your home area**.
    - ii) occurring in England, Scotland, Wales, Northern Ireland or the Isle of Man and relating to either private treatment or tests, surgery or other treatment, the costs of which are funded by a reciprocal health agreement (RHA) between these countries and/or island, or are funded by or recoverable from the Health Authority in **your home area**.
2. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

**You** should also refer to the Important conditions relating to health on pages 11 and 12.

### Claims evidence

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

- Confirmation in writing from the hospital, relevant authority or the treating **medical practitioner** of the dates when **you** were admitted and subsequently discharged from hospital, or confinement to **your** accommodation.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section E – Personal accident

### Special definitions relating to this section (which are shown in *italics*)

#### *Loss of limb*

- means loss by permanent severance of an entire hand or foot or the total and permanent loss of use of an entire hand or foot.

#### *Loss of sight*

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

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

### What is covered

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

### Special conditions relating to claims

1. **Our medical practitioner** may examine **you** as often as they consider necessary if **you** make a claim.

## Provisions

- Benefit is not payable to **you**:
  - Under more than one of the items shown in the **schedule of benefits** under this section.
  - Under permanent total disablement until 24 continuous calendar months after the date **you** sustain **bodily injury**.
  - If **you** were already disabled before the **bodily injury** occurred or already have a condition which is gradually getting worse, **we** may reduce **our** payment. Any reduced payment will be based on **our** medical assessment of the difference between:
    - the disability after the **bodily injury**; and
    - the extent to which the disability is affected by the disability or condition before the **bodily injury** occurred.
- The death benefit will be paid to the deceased **insured person's** estate.

## What is not covered

- Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

## Claims evidence

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

- In the event of death, the original death certificate.
- A medical certificate or report in relation to claims for *loss of limb*, *loss of sight* or permanent total disablement.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: **0800 923 4213 (calling from abroad + 44 1242 218 163)**

## Section F – Baggage

### What is covered

- We** will pay **you** up to the amount as shown in the **schedule of benefits** for the accidental loss of, theft of or damage to **baggage** and **mobility and disability** equipment. The amount payable in the event of a total loss, will be the value at today's prices less a deduction for wear, tear and depreciation (loss of value), or **we** may replace, reinstate or repair the lost or damaged **baggage** or **mobility and disability** equipment.

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

- for any one article, pair or set of articles is as shown in the **schedule of benefits** (not applicable to **mobility and disability equipment**).
  - for the total for all **valuables** is as shown in the **schedule of benefits**
- We** will also pay **you** up to the amount as shown in the **schedule of benefits** for the emergency replacement of clothing, medication and toiletries if **your baggage** is temporarily lost in transit during the outward journey and not returned to **you** within 12 hours, as long as **we** receive written confirmation from the carrier, confirming the number of hours the **baggage** was delayed.

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

- We** will also pay **you** up to the amount shown in the **schedule of benefits** for the hire of alternative **mobility and disability equipment** if **your own mobility and disability equipment** is temporarily lost in transit during the outward journey and not returned to **you** within 12 hours, as long as **we** receive written confirmation from the carrier, confirming the number of hours the **mobility and disability equipment** was delayed.

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

- If there is a valid claim under section F (1.) - Baggage, as a result of the loss or theft of **your own mobility and disability equipment** sustained abroad during the period of **your trip**, in addition to the cover provided

under Section F (1.) – baggage, **we** will pay for the hire of alternative **mobility and disability equipment** for the remainder of **your trip** up to the amount shown in the **schedule of benefits**.

**We** will deduct the amount paid from the final amount to be paid under this section.

### Special conditions relating to claims

- You** must report to the local Police in the country where the incident occurred within 24 hours of discovery, or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of all **baggage** or **mobility and disability equipment**.
- If **baggage** or **mobility and disability equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
- If **baggage** or **mobility and disability equipment** is lost, stolen or damaged whilst in the care of an airline **you** must:
  - get a Property Irregularity Report from the airline.
  - give written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - keep all travel tickets and tags for submission if **you** are going to make a claim under this policy.
- You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your** claim.

### What is not covered

- The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate (except claims under subsection 2 or subsection 3 of What is covered).
- Loss, theft of or damage to **valuables** left **unattended** at any time (including in a vehicle, in checked in luggage or while in the custody of a carrier, tour operator or **public transport** operator) unless deposited in a hotel safe, safety deposit box or left in **your** locked accommodation.
- Loss, theft of or damage to **baggage** or **mobility and disability equipment** contained in an **unattended** vehicle:
  - overnight between 9 pm and 9 am (local time) or
  - at any time between 9 am and 9 pm (local time) unless:
    - it is locked out of sight in a **secure baggage area** and
    - forcible and violent means have been used by an unauthorised person to gain entry into the vehicle and evidence of such entry is available.
- Loss or damage due to delay, confiscation or detention by customs or any other authority.
- Loss, theft of or damage to unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, motor accessories, documents of any kind, bonds, securities, perishable goods (such as foodstuffs), bicycles, **ski equipment**, **golf equipment** and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).
- Loss or damage due to cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or an accident to the aircraft, sea vessel, train or vehicle in which they are being carried.
- Loss or damage due to breakage of **sports equipment** or damage to sports clothing whilst in use.
- Loss of, theft of or damage to business equipment, business goods, samples, tools of trade and other items used in connection with **your** business, trade, profession or occupation..
- Loss or damage caused by wear and tear, depreciation (loss in value), atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.



10. Any claims under section F (4.) if **you** do not have a valid claim section F (1.) – Baggage.
11. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

#### Claims evidence

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

- A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- All travel tickets and tags for submission.
- An original receipt, proof of ownership or valuations for items lost, stolen or damaged and for all items of clothing, medication and toiletries replaced and for the hire of **mobility and disability equipment** if **your baggage** or **mobility and disability equipment** is temporarily lost in transit for more than 12 hours.
- A letter from the carrier confirming the number of hours **your baggage** or **mobility and disability equipment** was delayed for.
- Repair report where applicable.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: **0800 923 4213 (calling from abroad + 44 1242 218 163)**

## Section G – Personal money, passport and documents

#### What is covered

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

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

- a) for bank notes, currency notes and coins is as shown under the cash limit in the **schedule of benefits**.
- b) for bank notes, currency notes and coins, if **you** are under the age of 18 is as shown under the cash limit in the **schedule of benefits**.
- c) for all other **personal money** and travel documents (including the cost of the emergency replacement or temporary passport or visa) is as shown under the **schedule of benefits**.

#### Special conditions relating to claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of all **personal money**, passports or documents.
2. If **personal money** or passports are lost, stolen or damaged while in the care of a hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation. Keep all travel tickets and tags for submission if a claim is to be made under this policy.
3. If documents are lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
4. If documents are lost, stolen or damaged whilst in the care of an airline **you** must:
  - a) give formal written notice of the claim to the airline within the time limit set out in their conditions of carriage (please keep a copy).

- b) keep all travel tickets and tags for submission to **us** if **you** are going to make a claim under this policy.

5. **You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your** claim.

#### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. Loss, theft of or damage to **personal money** or **your** passport or visa if left **unattended** at any time (including in a vehicle, in checked in luggage or while in the custody of a carrier, tour operator or **public transport** operator) unless deposited in a hotel safe, safety deposit box or left in **your** locked accommodation.
3. Loss, theft of or damage to travellers' cheques if **you** have not complied with the issuer's conditions or where the issuer provides a replacement service.
4. Loss or damage due to delay, confiscation or detention by customs or any other authority.
5. Loss or damage due to depreciation (loss in value), or shortages due to error or omission.
6. Travel, event or entertainment tickets paid for using any airline mileage or supermarket reward scheme (for example Avios), unless evidence of specific monetary value can be provided.
7. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

#### Claims evidence

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

- A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- All travel tickets and tags for submission.
- Original receipts, proof of ownership or valuations for items lost, stolen or damaged.
- Receipts or bills or proof of purchase for any transport and accommodation expenses claimed for.
- Receipt for all currency and travellers cheques transactions.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: **0800 923 4213 (calling from abroad + 44 1242 218 163)**

## Section H – Personal liability

#### What is covered

We will pay **you** up to the amount as shown in the **schedule of benefits** (including legal costs and expenses) against any amount **you** become legally liable to pay as compensation for any claim or series of claims arising from any one event or source of original cause for accidental:

1. **Bodily injury**, death, illness or disease to any person who is not in **your** employment or who is not a **close relative** or persons residing with **you** but not paying for their accommodation.
2. Loss of or damage to property that does not belong to and is neither in the charge of or under the control of **you**, a **close relative** and/or anyone in **your** employment other than any temporary holiday accommodation occupied (but not owned) by **you**.

#### Special conditions relating to claims

1. **You** must give **us** written notice of any incident, which may result in a claim as soon as possible.
2. **You** must send **us** every court claim form, summons, letter of claim or other document as soon as **you** receive it.

3. **You** must not admit any liability or pay, offer to pay, promise to pay or negotiate any claim without **our** permission in writing.
4. **We** will be entitled to take over and carry out in **your** name the defence of any claims for compensation or damages or otherwise against any third party. **We** will have full discretion in the conduct of any negotiation or proceedings or in the settlement of any claim and **you** will give **us** all necessary information and assistance which **we** may require.
5. If **you** die, **your** legal representative(s) will have the protection of this cover as long as they comply with the terms and conditions outlined in this policy.

#### What is not covered

1. The **excess** as shown in the **schedule of benefits** unless **you** have purchased the **excess** waiver and this is shown on **your** certificate.
2. Compensation or legal costs arising directly or indirectly from:
  - a) Liability which has been assumed by **you** under agreement (such as a hire agreement) unless the liability would have existed without the agreement.
  - b) Pursuit of any business, trade, profession or occupation or the supply of goods or services.
  - c) The transmission of any contagious or infectious disease or virus.
  - d) **you** owning or occupying any land or building, unless **you** are occupying any temporary holiday accommodation, which is not owned by **you**;
  - e) **you** owning, handling or looking after any animal; or
  - f) **you** owning or using:
    - i) a firearm;
    - ii) a horse drawn or motorised vehicle;
    - iii) a waterborne, motorised, mechanical or towed vehicle (except manually propelled watercraft); or
    - iv) an aircraft of any description, including unpowered flight.
3. Any fines or exemplary damages (punishing, or aimed at punishing, the person responsible rather than awarding compensation) **you** have to pay.
4. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

#### Claims evidence

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

- Full details in writing of any incident.
- Any court claim form, summons, letter of claim or other document must be sent to **us** as soon as **you** receive it.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

**To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)**

## Section I – Delayed departure

#### What is covered

If the **public transport** on which **you** are booked to travel:

1. is delayed at the final departure point from or to the **United Kingdom** (but not including delays to any subsequent outbound or return connecting **public transport**) for at least 12 hours from the scheduled time of departure, or
2. is cancelled before or after the scheduled time of departure as a result of any of the following events:
  - a) strike or
  - b) industrial action or
  - c) adverse weather conditions or
  - d) mechanical breakdown of or a technical fault occurring in the **public transport** on which **you** are booked to travel

If **you** are a **UK** resident living in Northern Ireland and **your** travel itinerary requires **you** to use Republic of Ireland departure/arrival points, **your** cover will be as if **you** were still travelling from Northern Ireland with respect to claims coverage.

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

1. up to the amount as shown in the **schedule of benefits** for each completed 12 hours delay up to a maximum as shown in the **schedule of benefits** (which is meant to help **you** pay for telephone calls made and meals and refreshments purchased during the delay) provided **you** eventually travel, or
2. up to the amount as shown in the **schedule of benefits** for **your** proportion only of any irrecoverable unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay, if:
  - a) after a delay of at least 24 hours, or
  - b) following cancellation, no suitable alternative **public transport** is provided within 24 hours of the scheduled time of departure

**you** choose to cancel **your trip** before departure from the **United Kingdom**.

**You** can only claim under subsection 1. or 2. above for the same event, not both.

**You** can only claim under one of either Section I – Delayed departure or Section J – Missed departure for the same event, not both.

#### Special conditions relating to claims

1. **You** must check in according to the itinerary given to **you** unless **your** tour operator has requested **you** not to travel to the airport.
2. **You** must get written confirmation (at **your** own expense) from the carriers (or their handling agents) of the cancellation, number of hours of delay and the reason for these together with confirmation of **your** check in times and details of any alternative transport offered.
3. **You** must comply with the terms of contract of the travel agent, tour operator, carrier or transport provider and seek financial compensation, assistance or a refund of **your** ticket from them in accordance with such terms and/or (where applicable) **your** rights under EU Air Passenger Rights legislation in the event of cancellation or long delay of flights.
4. Where applicable **you** must get (at **your** own expense) written confirmation from the **public transport** operator (or their handling agents) and/or provider of accommodation (or their booking agents) that compensation, assistance or reimbursement of any costs, charges and expenses incurred by **you** will not be provided and the reason for this.
5. EC Regulations

This policy is not designed to cover costs which are met under the EC Regulation No. 261/2004. Under this regulation if **you** have a confirmed reservation on a flight, and that flight is delayed by between 2 and 4 hours (length of time depends on the length of **your** flight) the airline must offer **you** meals, refreshments and hotel accommodation. If the delay is more than 5 hours, the airline must offer to refund **your** ticket. The e) regulations should apply to all flights, whether budget, chartered or scheduled, originating in the EU, or flying into the EU using an EU carrier.

If **your** flight is delayed or cancelled, **you** must in the first instance approach **your** airline and clarify with them what costs they will pay under the Regulation. If **you** would like to know more about **your** rights under this Regulation, additional useful information can be found on the Civil Aviation Authority website [www.caa.co.uk](http://www.caa.co.uk).

#### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. Claims arising directly or indirectly from:
  - a) Strike or industrial action existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
  - b) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority,

Port Authority or any such regulatory body in a country to/from which **you** are travelling.

- c) Any delays to any subsequent outbound or return connecting **public transport** following **your** departure from the final departure point from or to the **United Kingdom**.
  - d) Volcanic eruptions and/or volcanic ash clouds.
3. For subsection 2. only of What is covered:
- a) The cost of Air Passenger Duty (APD) whether irrecoverable or not.
  - b) Travel tickets paid for using any airline mileage or supermarket reward scheme (for example Avios), unless evidence of specific monetary value can be provided.
  - c) Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme. In addition any property maintenance costs, fees or charges incurred by **you**, as part of **your** involvement in such schemes is not covered.
  - d) Any costs incurred by **you** which are recoverable from the providers of the accommodation, their booking agents (or the administrators of either) or for which **you** receive or are expected to receive compensation or reimbursement.
  - e) Any costs incurred by **you** which are recoverable from the **public transport** operator or for which **you** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
  - f) Any costs incurred by **you** which are recoverable from **your** credit/debit card provider or for which **you** receive or are expected to receive compensation or re-imbusement.
  - g) Any travel and accommodation costs, charges and expenses where the **public transport** operator has offered reasonable alternative travel arrangements.
  - h) Any cost if **your trip** was booked as part of a **package** holiday.
4. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

#### Claims evidence

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

- Full details of the travel itinerary supplied to **you**.
- A letter from the carriers (or their handling agents) confirming the number of hours delay, the reason for the delay and confirmation of **your** check in time.
- In the case of cancellation claims, **your** booking confirmation together with written details from **your** travel agent, tour operator or provider of transport/accommodation of the separate costs of transport, accommodation and other pre-paid costs or charges that made up the total cost of the **trip**.
- **Your** unused travel tickets.
- Receipts or bills for any transport, accommodation or other costs, charges or expenses claimed for.
- Written confirmation from the provider of transport/accommodation that compensation, assistance or reimbursement of any costs, charges and expenses incurred by **you** will not be provided and the reason for this.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section J – Missed departure on your outward journey

#### What is covered

We will pay **you** up to the amount as shown in the **schedule of benefits** for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** overseas destination if **you** fail to arrive at the departure point in time to board the **public transport** on which **you** are

booked to travel on for the initial international outbound leg of the **trip** as a result of:

1. the failure of other **public transport** or
2. an accident to or breakdown of the vehicle in which **you** are travelling or
3. an accident or breakdown happening ahead of **you** on a motorway or dual carriageway which causes an unexpected delay to the vehicle in which **you** are travelling or
4. strike, industrial action or adverse weather conditions.

If the same expenses are also covered under Section I – Delayed departure **you** can only claim under one section for the same event, not both.

If **you** are a **UK** resident living in Northern Ireland and **your** travel itinerary requires **you** to use Republic of Ireland departure/arrival points, **your** cover will be as if **you** were still travelling from Northern Ireland with respect to claims coverage.

#### Special conditions relating to claims

1. **You** must allow enough time for the **public transport** or other transport to arrive on schedule and to deliver **you** to the departure point.
2. **You** must obtain a report from repairers if **your** claim is because of a **breakdown** or accident to **your** car.
3. **You** must obtain written confirmation from the police or emergency breakdown services of the location, reason for and duration of the delay if an accident or breakdown happening ahead of **you** on a motorway or dual carriageway causes an unexpected delay to the vehicle in which **you** are travelling.

#### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. Claims arising directly or indirectly from:
  - a) Strike or industrial action existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
  - b) An accident to or breakdown of the vehicle in which **you** are travelling when a repairers report or other evidence is not provided.
  - c) Breakdown of any vehicle owned by **you** which has not been serviced properly and maintained in accordance with manufacturer's instructions.
  - d) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **you** are travelling.
  - e) **Your** failure to arrive at the departure point in time to board any connecting **public transport** after **your** departure on the initial international outbound leg of the **trip**.
  - f) Volcanic eruptions and/or volcanic ash clouds (except claims under subsection 1. of What is covered).
  - g) **Trips** solely within the **United Kingdom**.
3. Additional expenses where the scheduled **public transport** operator has offered reasonable alternative travel arrangements.
4. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

#### Claims evidence

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

- A letter from the **public transport** provider detailing the reasons for failure.
- A letter from the relevant **public transport** provider, carrier or authority confirming details of the strike, industrial action or adverse weather conditions.
- **Your** unused travel tickets



- Receipts or bills or proof of purchase for any transport, accommodation or other costs, charges or expenses claimed for.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section K – Catastrophe

### What is covered

**We** will pay **you** up to the amount as shown in the **schedule of benefits** for reasonable additional accommodation and transport costs incurred up to the standard of **your** original booking, if **you** need to move to other accommodation at any point during the **trip** as a result of fire, flood, earthquake, volcanic eruption, explosion, tsunami, landslide, avalanche, hurricane, storm or an outbreak of food poisoning or an infectious disease meaning **you** cannot use **your** booked accommodation.

If the same costs are also covered under Section A – Cancellation or curtailment charges, **you** can only claim for these under one section for the same event.

### Special conditions relating to claims

1. **You** must get (at **your** own expense) written confirmation from the provider of the accommodation, the local Police or relevant authority that **you** could not use **your** accommodation and the reason for this.

### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. Any costs incurred by **you** which are recoverable from the travel agent, tour operator or the providers of the accommodation or for which **you** receive or are expected to receive compensation or reimbursement.
3. Any costs for normal day to day living such as food and drink which **you** would have expected to pay during **your** trip.
4. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

### Claims evidence

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

- Written confirmation from the company providing the accommodation, the local Police or relevant authority that **you** could not use **your** accommodation and the reason for this.
- Receipts or bills for any transport, accommodation or other costs, charges or expenses claimed for.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section L – Legal expenses

### What is covered

**We** will pay up to the amount shown in the **schedule of benefits** for legal costs to pursue a civil action for compensation if someone else causes **your** **bodily injury**, illness or death.

Where there are two or more **insured persons** insured by this policy, then the maximum amount **we** will pay for all such claims shall not exceed double the amount shown in the **schedule of benefits**.

### What is not covered

#### We shall not be liable for:-

1. Any claim where in **our** opinion or the opinion of the suitably qualified person appointed by **us** there is insufficient prospect of success in obtaining reasonable compensation.

2. Legal costs and expenses incurred in pursuit of any claims against a travel agent, tour operator, carrier, **us**, Zurich Assist or their agents, someone **you** were travelling with, a person related to **you**, or another **insured person**.
3. Legal costs and expenses incurred prior to **our** written acceptance of the case.
4. Any claim where the legal costs and expenses are likely to be greater than the anticipated amount of compensation.
5. Any claim where legal costs and expenses are based directly or indirectly on the amount of compensation awarded (for example a Contingency Fee Agreement).
6. Legal costs and expenses incurred in any claim which is capable of being pursued under a Conditional Fee Agreement.
7. Legal costs and expenses incurred if an action is brought in more than one country.
8. Any claim where in **our** opinion the estimated amount of compensation payment is less than £1,000 for each **insured person**.
9. Travel, accommodation and incidental costs incurred to pursue a civil action for compensation.
10. Costs of any appeal.
11. Claims by **you** other than in **your** private capacity.
12. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

### Special conditions relating to claims

1. Unless **you** have made a nomination in accordance with Special Condition 2 below, **we** or **our** suitably qualified person will decide the point at which **your** legal case cannot usefully be pursued further.
2. If **you** do not want **our** suitably qualified person to assess whether or not **your** claim can be pursued, **you** are free to nominate a suitably qualified person to conduct this assessment by sending **us** the name and address of such suitably qualified person. **You** must confirm either:
  - that the person **you** nominate will not charge more than the suitably qualified person **we** would have appointed; or
  - that **you** are willing to pay the difference between the cost of using **you** suitably qualified person and the cost of using **our** choice of suitably qualified person.
3. On acceptance of a claim, if appropriate, **we** will appoint a suitably qualified person to act on **your** behalf, unless **you** have nominated **your** own suitably qualified person in accordance with Special Condition 4 below
4.
  - i) If there is a conflict of interest; or
  - ii) If it is necessary to start court proceedings and proceedings are being issued within the **United Kingdom**; or
  - iii) **you** are unhappy with **our** suitably qualified person

**you** are free to nominate a suitably qualified person by sending **us** the name and address of such suitably qualified person. **You** must confirm either:

- that the person **you** nominate will not charge more than the suitably qualified person **we** would have appointed; or
  - that **you** are willing to pay the difference between the cost of using **your** suitably qualified person and the cost of using **our** choice of suitably qualified person.
5. If **we** do not agree to **your** choice of suitably qualified person under Special Condition 2 or 4. above, **you** may choose another suitably qualified person.
  6. If there is still a disagreement with regard to the suitably qualified person **we** will ask the president of a relevant national law society to choose a suitably qualified person to represent **you**. **We** and **you** must accept such choice.

7. Where **you** have not notified **us** of a nominated suitably qualified person in accordance with Special Condition 2 and/or Special Condition 4, **we** will be free to choose a suitably qualified person.
8. Where **we** appoint a suitably qualified person to represent **you** such appointment will be in accordance with **our** standard terms of appointment.
9. **We** will have direct access to the suitably qualified person who will, upon request, provide **us** with any information or opinion on **your** claim.
10. **You** must co-operate fully with **us** and the suitably qualified person and must keep **us** up to date with the progress of the claim.
11. At **our** request **you** must give the suitably qualified person any instructions that **we** require.
12. **You** must notify **us** immediately if anyone offers to settle a claim or makes a payment into court.
13. If **you** do not accept the recommendation of the suitably qualified person to accept a reasonable offer or payment into court to settle a claim, **we** may refuse to pay further costs and expenses.
14. No agreement to settle on the basis of both parties paying their own costs is to be made without **our** prior approval.
15. If **you**:
  - i) settle a claim or withdraw a claim without **our** prior agreement;
  - ii) do not give suitable instructions to the suitably qualified person ;
  - iii) dismiss a suitably qualified person without **our** prior consent, **our** consent not to be withheld without good reason;

the cover **we** provide will end immediately and **we** will be entitled to reclaim any costs and expenses **we** have incurred from **you**.
16. **You** must take every available step to recover costs and expenses that **we** have to pay and must pay **us** any costs and expenses that are recovered.
17. **We** may, at **our** own expense, take proceedings in **your** name to recover compensation from any third party in respect of any indemnity paid under this policy including **our** legal costs and other related expenses. **You MUST** give such assistance as **we** shall reasonably require and any amount recovered shall belong to **us**.

#### Claims evidence

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

- Relevant documentation and evidence to support **your** claim, including photographic evidence.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4217 (calling from abroad +44 1242 218 166)

## Section M – Alternative accommodation

This section is available only if **you** have purchased a traveller deluxe policy.

#### What is covered

**We** will pay **you** up to the amount as shown in the **schedule of benefits** for reasonable additional accommodation and transport costs incurred (up to a similar standard of **your** original booking and within the same resort), if it is necessary for **you** to move to more suitable accommodation on arrival at **your** booked accommodation, as a result of **your** accommodation provider failing to supply **you** with **your** booked accommodation that caters for **your** mobility/disability requirements, meaning **you** cannot use **your** booked accommodation.

#### Special conditions relating to claims

1. **You** must get (at **your** own expense) written confirmation from the provider of the accommodation, the local Police or relevant authority that **you** could not use **your** accommodation and the reason for this.

#### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. Any costs incurred by **you** which are recoverable from the travel agent, tour operator or the providers of the accommodation or for which **you** receive or are expected to receive compensation or reimbursement.
3. Any costs for normal day to day living such as food and drink which **you** would have expected to pay during **your** trip.
4. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

#### Claims evidence

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

- Written confirmation from the company providing the accommodation that **you** could not use **your** accommodation and the reason for this.
- Receipts or bills for any transport, accommodation or other costs, charges or expenses claimed for.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Sections N1, N2, N3, N4 and N5 – Winter sports (only operative if shown on your policy certificate)

Cover for sections N1, N2, N3, N4 and N5 only operates:-

1. Under single trip policies - if the appropriate winter sports extension has been chosen and the appropriate additional premium has been paid and is shown on the policy certificate.
2. Under annual multi trip policies for a period not exceeding 17 days in total in each **period of insurance**, providing the appropriate winter sports section is shown as operative in the schedule.

## Section N1 – Ski equipment

(only operative if shown on your policy certificate)

#### What is covered

**We** will pay **you** up to the amount as shown in the **schedule of benefits** for the accidental loss of, theft of or damage to **your** own **ski equipment**, or up to the amount as shown in the **schedule of benefits** for hired **ski equipment**.

The amount payable in the event of a total loss, will be the value at today's prices less a deduction for wear, tear and depreciation (loss of value - calculated from the table below), or **we** may replace, reinstate or repair the lost or damaged **ski equipment**.

Age of ski equipment	Amount payable
Less than 1 year old	90% of value
Over 1 year old	70% of value
Over 2 years old	50% of value
Over 3 years old	30% of value
Over 4 years old	20% of value
Over 5 years old	No payment

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

### Special conditions relating to claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get a written report (at **your** own expense) of the loss, theft or attempted theft of all **ski equipment**.
2. If **ski equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
3. If **ski equipment** is lost, stolen or damaged whilst in the care of an airline **you** must:
  - a) get a Property Irregularity Report from the airline
  - b) give formal written notice of the claim to the airline, within the time limit set out in their conditions of carriage (please keep a copy)
  - c) keep all travel tickets and tags for submission if **you** are going to make a claim under this policy.
4. **You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your** claim.

### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. Loss, theft of or damage to **ski equipment** contained in or stolen from an **unattended** vehicle:
  - a) overnight between 9 pm and 9 am (local time) or
  - b) at any time between 9 am and 9 pm (local time) unless:
    - i) it is locked out of sight in a **secure baggage area** and
    - ii) forcible and violent means have been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.
3. Loss or damage due to delay, confiscation or detention by customs or any other authority.
4. Loss or damage caused by wear and tear, depreciation (loss in value), atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
5. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

### Claims evidence

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

- A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- All travel tickets and tags for submission.
- An original receipt or proof of ownership for items lost, stolen or damaged.
- Repair report where applicable.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section N2 – Ski equipment hire

(only operative if shown on your policy certificate)

### What is covered

**We** will pay **you** up to the amount as shown in the **schedule of benefits** for the reasonable cost of hiring replacement **ski equipment** as a result of the

accidental loss of, theft of or damage to or temporary loss in transit for more than 12 hours of **your** own **ski equipment**.

### Special conditions relating to claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of **your** own **ski equipment**.
2. If **ski equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
3. If **ski equipment** is lost, stolen or damaged whilst in the care of an airline **you** must:
  - a) get a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit set out in their conditions of carriage (please keep a copy).
  - c) keep all travel tickets and tags for submission if **you** are going to make a claim under this policy.
4. **You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your** claim.

### What is not covered

1. Loss, theft of or damage to **ski equipment** contained in an **unattended** vehicle:
  - a) overnight between 9 pm and 9 am (local time) or
  - b) at any time between 9 am and 9 pm (local time) unless:
    - i) it is locked out of sight in a **secure baggage area** and
    - ii) forcible and violent means have been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.
2. Loss or damage due to delay, confiscation or detention by customs or any other authority.
3. Loss or damage caused by wear and tear, depreciation (loss of value), atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
4. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

### Claims evidence

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

- A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- All travel tickets and tags for submission.
- An original receipt, proof of ownership or valuations for items lost, stolen or damaged together with receipts or bills detailing the costs incurred of hiring replacement **ski equipment**.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section N3 – Ski pack

(only operative if shown on your policy certificate)

### What is covered

We will pay you:

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

### Special conditions relating to claims

- You** must provide (at **your** own expense) written confirmation to **us** from a **medical practitioner** that the **bodily injury**, illness or disease prevented **you** from using **your** ski pack.

### What is not covered

- Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

### Claims evidence

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

- A medical certificate from the treating **medical practitioner** explaining why **you** were unable to use **your** ski pack.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section N4 – Piste closure

(only operative if shown on your policy certificate)

### What is covered

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

- To the resort which **you** have pre-booked for a period more than 12 hours and for as long as these conditions continue at the resort, but not more than the pre-booked period of **your** trip and
- To **trips** taken outside the **United Kingdom** during the published ski season for **your** resort.

### Special conditions relating to claims

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

### What is not covered

- Any circumstances where transport costs, compensation or alternative skiing facilities are provided to **you**.
- Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

### Claims evidence

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

- A letter from the relevant authority, ski lift operator or **your** tour operator's representative of the number of days skiing facilities were closed in **your** resort and the reason for the closure.
- Receipts or bills for any transport costs claimed for.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section N5 – Avalanche closure

(only operative if shown on your policy certificate)

### What is covered

We will pay **you** up to the amount as shown in the **schedule of benefits** for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** booked resort or returning **home** if **you** are delayed for more than 12 hours by avalanche. The cover only applies to **trips** taken outside the **United Kingdom** during the published ski season for **your** resort.

### Special conditions relating to claims

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

### What is not covered

- Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

### Claims evidence

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

- A letter from the relevant authority or **your** tour operator's representative confirming details of the avalanche, landslide or severe weather conditions that caused the delay and the period of delay.
- Receipts or bills for any accommodation and travel expenses claimed for.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Sections O1, O2 and O3 – Golf cover

(only operative if shown on your policy certificate)

Cover for sections O1, O2 and O3 only operates:-

- Under single trip policies and annual multi trip policies if the appropriate golf cover extension has been chosen and the appropriate additional premium has been paid and is shown on the policy certificate.

## Section O1 – Golf equipment

(only operative if shown on your policy certificate)

### What is covered

We will pay **you** up to the amount as shown in the **schedule of benefits** for the accidental loss of, theft of or damage to **your** own **golf equipment**.

The amount payable in the event of a total loss, will be the value at today's prices less a deduction for wear, tear and depreciation (loss of value – calculated from the table below), or **we** may replace, reinstate or repair the lost or damaged **golf equipment**.

Age of ski equipment	Amount payable
Less than 1 year old	90% of value
Over 1 year old	70% of value
Over 2 years old	50% of value
Over 3 years old	30% of value
Over 4 years old	20% of value
Over 5 years old	No payment

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

### Special conditions relating to claims

- You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and

get a written report (at **your** own expense) of the loss, theft or attempted theft of all **golf equipment**.

2. If **golf equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
3. If **golf equipment** is lost, stolen or damaged whilst in the care of an airline **you** must:
  - d) get a Property Irregularity Report from the airline
  - e) give formal written notice of the claim to the airline, within the time limit set out in their conditions of carriage (please keep a copy)
  - f) keep all travel tickets and tags for submission if **you** are going to make a claim under this policy.
4. **You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your** claim.

#### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. Loss, theft of or damage to **golf equipment** contained in or stolen from an **unattended** vehicle:
  - a) overnight between 9 pm and 9 am (local time) or
  - b) at any time between 9 am and 9 pm (local time) unless:
    - i) it is locked out of sight in a **secure baggage area** and
    - ii) forcible and violent means have been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.
3. Loss or damage due to delay, confiscation or detention by customs or any other authority.
4. Loss or damage caused by wear and tear, depreciation (loss in value), atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
5. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

#### Claims evidence

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

- A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- All travel tickets and tags for submission.
- An original receipt or proof of ownership for items lost, stolen or damaged.
- Repair report where applicable.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section O2 – Golf equipment hire

(only operative if shown on your policy certificate)

#### What is covered

**We** will pay **you** up to the amount as shown in the **schedule of benefits** for the reasonable cost of hiring replacement **golf equipment** as a result of the

accidental loss of, theft of or damage to or temporary loss in transit for more than 12 hours of **your** own **golf equipment**.

#### Special conditions relating to claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of **your** own **golf equipment**.
2. If **golf equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
3. If **golf equipment** is lost, stolen or damaged whilst in the care of an airline **you** must:
  - a) get a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit set out in their conditions of carriage (please keep a copy).
  - c) keep all travel tickets and tags for submission if **you** are going to make a claim under this policy.
4. **You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your** claim.

#### What is not covered

1. Loss, theft of or damage to **golf equipment** contained in an **unattended** vehicle:
  - a) overnight between 9 pm and 9 am (local time) or
  - b) at any time between 9 am and 9 pm (local time) unless:
    - i) it is locked out of sight in a **secure baggage area** and
    - ii) forcible and violent means have been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.
2. Loss or damage due to delay, confiscation or detention by customs or any other authority.
3. Loss or damage caused by wear and tear, depreciation (loss of value), atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
4. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

#### Claims evidence

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

- A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- All travel tickets and tags for submission.
- An original receipt, proof of ownership or valuations for items lost, stolen or damaged together with receipts or bills detailing the costs incurred of hiring replacement **golf equipment**.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section O3 – Non-refundable golf fees

(only operative if shown on your policy certificate)

#### What is covered

**We** will pay **you** up to the amount shown in the **schedule of benefits** for the proportionate value of any non-refundable, pre-paid green fees, golf equipment hire or tuition fee necessarily unused due to the following:

- a) **bodily injury** or illness of an **insured person**; or
- b) loss or theft of **your** documentation which prevents **your** participation in the pre-paid golfing activity.

#### Special conditions relating to claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of **your** own **golf equipment**.
2. **You** must provide (at **your** own expense) written confirmation to **us** from a **medical practitioner** that the **bodily injury** or illness prevented **you** from playing golf.

#### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

To make a claim under this section call: **0800 923 4213 (calling from abroad + 44 1242 218 163)**

### Sections P1, P2, P3, P4 and P5 – Cruise cover (only operative if shown on your policy certificate)

Cover for sections P1, P2, P3, P4 and P5 only operates:-

1. Under single trip policies and annual multi trip policies if the appropriate cruise cover extension has been chosen and the appropriate additional premium has been paid and is shown on the policy certificate.

### Section P1 – Missed port departure (only operative if shown on your policy certificate)

#### What is covered

We will pay **you** up to the amount as shown in the **schedule of benefits** where

1. **you** are joining **your** **cruise** ship at a **United Kingdom** embarkation point, to enable **you** to reach **your** **cruise** ship's next port of call if **you** arrive at the original **UK** embarkation point after the ship has departed due to the vehicle in which **you** are travelling to the original **UK** embarkation point suffering from a mechanical breakdown or being involved in an accident or **your** **public transport** is delayed, preventing **you** from being able to embark on time, or
2. **you** are joining **your** **cruise** ship at an embarkation point outside the **UK**, for alternative transport to get **you** to **your** **cruise** ships overseas embarkation point, or next port of call if **you** are unable to reach **your** departure point and check-in on time for **your** outbound departure either because **your** **public transport** is delayed, or the vehicle in which **you** are travelling suffers from a mechanical breakdown or failure or being involved in an accident, causing **you** to miss **your** outbound departure.

**You** can only claim under one of either Section A – Cancellation or curtailment charges or Section I – Delayed departure or Section J – Missed departure on **your** outward journey or Section P1 Missed port departure for the same event, not under each section.

#### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. Claims arising directly or indirectly from:
  - a) Strike or industrial action existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.

- b) An accident to or breakdown of the vehicle in which **you** are travelling when a repairers report or other evidence is not provided.
  - c) Breakdown of any vehicle owned by **you** which has not been serviced properly and maintained in accordance with manufacturer's instructions.
  - d) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **you** are travelling.
  - e) **Your** failure to arrive at the departure point in time to board any connecting **public transport** after **your** departure on the initial international outbound leg of the **trip**.
  - f) Volcanic eruptions and/or volcanic ash clouds.
  - g) **Trips** solely within the **United Kingdom**.
3. Additional expenses where the scheduled **public transport** operator has offered reasonable alternative travel arrangements.
  4. Additional expenses where **your** planned arrival time at the port is less than 3 hours in advance of the sail departure time if **you** are travelling independently and not part of an integrated **cruise** package.
  5. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

#### Claims evidence

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

- A letter from the **public transport** provider detailing the reasons for failure.
- A letter from the relevant **public transport** provider, carrier or authority confirming details of the strike, industrial action or adverse weather conditions.
- **Your** unused travel tickets
- Receipts or bills or proof of purchase for any transport, accommodation or other costs, charges or expenses claimed for.
- Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

To make a claim under this section call: **0800 923 4213 (calling from abroad + 44 1242 218 163)**

### Section P2 – Cabin confinement

#### What is covered

If there is a valid claim under section B – Emergency medical and other expenses, as a result of **your** **bodily injury** or illness sustained abroad during the period of **your** **trip**, in addition to the cover provided under Section B – emergency medical and other expenses, **we** will pay cabin confinement benefit up to the amount shown in the **schedule of benefits** for each full day that **you** are confined to **your** cabin by the ship's doctor as an in-patient during the period of the **trip**.

#### What is not covered

1. Any claims if **you** do not have a valid claim under section B – Emergency medical and other expenses.
2. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

**You** should also refer to the Important conditions relating to health on pages 11 and 12.

#### Claims evidence

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

- Written confirmation of any confinement to **your** cabin in writing from the ship's medical officer.

To make a claim under this section call: **0800 923 4213 (calling from abroad + 44 1242 218 163)**

## Section P3 – Cruise itinerary changes

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### What is covered

We will pay **you** up to the amount as shown in the **schedule of benefits** if a scheduled port visit is cancelled during **your cruise** due to adverse weather conditions or timetable restrictions and no alternative port can be offered.

### What is not covered

1. A missed port caused by strike or industrial action.
2. **Your** failure to attend the excursion as per **your** itinerary.
3. If **your cruise** ship cannot put people ashore due to a scheduled tender operation failure.
4. Where a monetary amount (including on board credit) of compensation has been offered by the **cruise** ship or **your** tour operator.
5. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

### Claims evidence

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

- A written report from the **cruise** operator, carrier or their handling agents confirming the itinerary change and the reason for it.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section P4 – Unused excursions

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### What is covered

If there is a valid claim under section B - Emergency medical and other expenses, as a result of **your bodily injury** or illness sustained abroad during the period of **your trip**, in addition to the cover provided under Section B – emergency medical and other expenses, **we** will pay for **your** unused excursions from the **cruise** ship that **you** pre-booked and pre-paid for in **your home area** and are unable to take because **you** are confined to bed in **your** cabin by the ship's doctor, and on which **you** are unable to obtain a refund.

### What is not covered

1. Any claims if **you** do not have a valid claim section B - Emergency medical and other expenses.
2. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

**You** should also refer to the Important conditions relating to health on pages 11 and 12.

### Claims evidence

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

- Written confirmation of any confinement to **your** cabin in writing from the ship's medical officer.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Section P5 – Cruise interruption

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### What is covered

If there is a valid claim under section B - Emergency medical and other expenses, as a result of **your bodily injury** or illness sustained abroad during the period of **your trip**, in addition to the cover provided under Section B – emergency medical and other expenses, **we** will pay **you** up to the amount shown in the **schedule of benefits** to enable **you** to reach **your cruise** ship's next port of call in order to re-join the **cruise** following **your bodily injury** or illness requiring hospital treatment on dry land.

### What is not covered

1. The **excess** as shown in the **schedule of benefits**, unless **you** have purchased the **excess** waiver and this is shown on **your** policy certificate.
2. Any claims if **you** do not have a valid claim section B – Emergency medical and other expenses.
3. Claims where **you** re-join **your cruise** when less than 25% of the **trip** duration remains.
4. The cost of additional travel **you** arrange without first contacting **us** so that **we** can approve and assist with travel arrangements.
5. Anything mentioned in What is not covered applicable to all sections of the policy on pages 12 and 13.

**You** should also refer to the Important conditions relating to health on pages 11 and 12.

To make a claim under this section call: 0800 923 4213 (calling from abroad + 44 1242 218 163)

## Making a complaint

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### Our complaints procedure

We are committed to providing a high level of customer service. If **you** don't feel **we** have delivered this, **we** would welcome the opportunity to put things right for **you**.

### Many concerns can be resolved straight away

Therefore first of all, please get in touch with the relevant party shown below as they may be able to provide **you** with an immediate response to **your** satisfaction.

1. If **your** complaint is about a claim on **your** policy, please contact Claims Settlement Agencies;

**Write:** The Complaints Officer, Claims Settlement Agencies Ltd, 308-314 London Road, Hadleigh, Benfleet, Essex. SS7 2DD

**Tel:** 0800 923 4213

**Email:** [info@csal.co.uk](mailto:info@csal.co.uk)

2. If **your** complaint is about the way **your** policy was sold, please contact Fish Insurance;

The Complaints Officer, Fish Insurance,  
12 Sceptre Court, Sceptre Way, Bamber Bridge, Preston, PR5 6AW  
Telephone - 0333 331 3900^  
Email - [travel@fishinsurance.co.uk](mailto:travel@fishinsurance.co.uk)

3. If **your** complaint is about policy cover or the product itself, please contact Zurich;

**Write:** Customer Liason Department, Zurich Insurance plc, Shurdington Road, Cheltenham, Gloucestershire, GL51 4UE

**Tel:** 0800 9234 219

**Email:** [travelclaims.complaints@myzurich.co.uk](mailto:travelclaims.complaints@myzurich.co.uk)

When **you** make contact please provide the following information:

- **Your** name, address and postcode, telephone number and e-mail address (if **you** have one)
- **Your** policy and/or claim number, and the type of policy **you** hold
- The reason for **your** complaint
- Any written correspondence should be headed '**COMPLAINT**' and **you** may include copies of supporting material.

### Most complaints can be resolved within 3 business days

If **we** can resolve **your** complaint to **your** satisfaction within 3 business days **we** will do so and **we** will write to **you** to confirm. (A business day is defined as Monday to Friday, but excluding bank holidays).

### Complaints that take longer than 3 business days to resolve

If **we** have not been able to resolve **your** complaint to **your** satisfaction within 3 business days, **we** will keep **you** updated with progress and will provide **you** with **our** decision as quickly as possible. This will be in the form of a final decision letter.

### Next steps if you are still unhappy

If **you** are not happy with the outcome of **your** complaint, **you** can ask the Financial Ombudsman Service to **review your** case. **You'll** need to contact them within 6 months of the date of **our** final decision letter

**You** can also ask the ombudsman to review **your** case if **we** have not provided **you** with a final decision within 8 weeks of receiving **your** complaint.

The service they provide is free and impartial. They can be contacted as follows:

Post: Financial Ombudsman Service, Exchange Tower, London, E14 9SR

Telephone: 08000 234567 (free on mobile phones and landlines)

Email: [complaint.info@financial-ombudsman.org.uk](mailto:complaint.info@financial-ombudsman.org.uk)

Website: <http://www.financial-ombudsman.org.uk>

If the Financial Ombudsman Service is unable to consider **your** complaint, **you** may wish to obtain advice from Citizens Advice (or a similar service) or seek legal advice.

### Online Sales Only

If **you** purchased **your** policy online, **you** can also use the online European Online Dispute Resolution platform to provide details of **your** complaint, which can then be forwarded to the Financial Ombudsman Service after 30 days. Please note that this service facilitates contact only, it doesn't provide any other complaints service. **You** can find this platform at: <http://ec.europa.eu/odr>.



## Financial Services Compensation Scheme

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**We** are covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from the scheme if in the unlikely event **we** are unable to meet **our** obligations under this contract. A claim under this contract of general insurance is covered 90% of the claim without any upper limit. Further information about the scheme is available from the Financial Services Compensation Scheme at the below address or on their website:

Website: [www.fscs.org.uk](http://www.fscs.org.uk)

Financial Services Compensation Scheme  
10th Floor  
Beaufort House  
15 St Botolph Street  
London EC3A 7QU  
United Kingdom

Telephone: +44 (0)207 892 7300  
Facsimile: +44 (0)207 892 7301

^Calls to 0333 numbers are usually chargeable at a local rate from both **UK** landlines and mobile phones. These calls are usually included within network providers' "free minutes" packages.



Fish Insurance, 12 Sceptre Court, Sceptre Way, Bamber Bridge, Preston, PR5 6AW  
T: 0333 331 3900^ E: [travel@fishinsurance.co.uk](mailto:travel@fishinsurance.co.uk) [www.fishinsurance.co.uk](http://www.fishinsurance.co.uk)