



CAMPBELL IRVINE

DIRECT TRAVEL INSURANCE

2025

---

PLEASE ENSURE YOU  
READ THIS DOCUMENT

# Contents

---

Initial disclosure document	Page Number
<b>Demands and needs</b>	<b>1</b>
<b>Policy document</b>	<b>2-30</b>
Introduction	4
Definition of words	4-5
Schedule of cover	6
General enquiries	7
24 hour medical emergency assistance service	7
Making a claim	7
Health declaration and health exclusions	8
How to disclose pre-existing medical conditions	8
Change in health for annual multi-trip customers	9
Change in health for single trip customers	9
Non travelling relatives	9
Pregnancy	9
Making a complaint	10
Period of insurance	10-11
Important information	11
Data protection	12
Cooling off period	13
Reciprocal health care	13
Claim conditions	14-15
General exclusions	15-17
Section A – Emergency medical expenses	18-19
Section B - Personal liability	20
Section C - Personal accident	21
Section D - Cancellation or curtailment	22-23
Section E - Travel delay	24
Section F - Personal effects	25-26
Section G - Legal expenses	26-27
Section H - Winter sports extension (Optional)	28-29
Geographical areas	29
Annual multi-trip policies	29
Sporting and adventurous activities	30
Claims checklist	31
Important contact details	32

### The Financial Conduct Authority

The Financial Conduct Authority (FCA) is an independent watchdog that regulates financial services. It requires us to give you this document. Please use the information below to confirm that the service we are offering is right for you.

### Who regulates us?

Campbell Irvine Ltd (registration No.306242) is authorised and regulated by the Financial Conduct Authority. You may check this on the Financial Services register [www.fca.org.uk](http://www.fca.org.uk) or by contacting them on Tel UK +44 (0)800 111 6768.

### Which service will we provide you with?

We do not recommend products after assessing your needs for Travel Insurance. We will ask you questions to determine that the product we are offering is applicable to your circumstances. You can then choose whether you wish to proceed with this product.

What will you have to pay us for our services? We do not charge for arranging this insurance for you, you only pay us the premium for your policy. We are paid for our services to you by the insurer Hamilton Insurance DAC.

We may charge an administration fee to cover any amendments to your travel insurance policy after it has been issued. Details will be provided to you at the time.

### Are you covered by Financial Services Compensation Scheme (FSCS)?

In the unlikely event the seller of this insurance is unable to meet their liabilities, you may be entitled to compensation under the Financial Services Compensation Scheme. You can contact them by writing to: Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London, EC3A 7QU.  
Phoning: UK +44(0)800 678 1100 or  
UK +44(0)207 74141 00.  
Visiting: [www.fscs.org.uk](http://www.fscs.org.uk)

## Demands and needs

This travel insurance policy will suit the demands and needs of an individual, or group (where applicable) who have no excluded pre-existing medical conditions, are travelling to countries included within the policy terms and who wish to insure themselves against the unforeseen circumstances/events detailed in this policy. Subject to terms and conditions and maximum sums insured.

### Settlement terms

We will be responsible for collecting payment for all premiums and any alterations as soon as practicable but prior to inception of your policy. All premiums paid to us will be held as Agent of the insurer in our non Statutory Trust Bank Account. All premiums are protected under Risk Transfer agreement with the insurers. You will be responsible for paying promptly all of our payment requests for premiums, to enable us to make the necessary payments to insurers. We accept payment by cash, cheque, selected credit/debit cards and bank transfer.

Your policy Should you mislay your policy a replacement will be issued upon written request.

### Governing law and language

The law of England and Wales allows the parties to choose the law applicable to the contract.

You agree that;

- 1 This policy will be governed and interpreted in accordance with the law of England and Wales and the English courts will have exclusive jurisdiction in any dispute; and
- 2 Communication of and in connection with this policy shall be in the English language.

### If the insurer has to cancel your policy

If the insurer no longer wishes to offer this policy and needs to cancel, we will write to you at the current address we have. The policy will then be cancelled 30 days after the date of our letter. If the policy is cancelled, we will refund any premium you paid in respect of the cancelled period, provided you have not made a claim under the policy during that period of Insurance.

### Other taxes or costs

Other taxes or costs may exist which are not imposed or charged by us.

### What to do if you have a complaint

Please see the complaints procedure detailed in the policy.

### Important

This policy will have been sold to you on a non-advised basis and it is therefore important for you to read this policy (paying particular attention to the terms and conditions and exclusions) and ensure that your chosen policy meets all of your requirements. If upon reading this policy you find it does not meet all of your requirements, please refer to the relevant cooling off/policy cancellation section.

## Introduction

This policy, booking invoice or validation certificate (as applicable) and any endorsements set out the terms of the one contract between the **insured person(s)** and the **insurer** and which sections of cover are operative.

Please read all of these documents to make sure they provide the cover required.

If they are not correct, or do not meet **your** demands and needs, please immediately return them within the 21 day cooling off period

**You** must take reasonable care not to make any misrepresentations and to provide complete and accurate answers to the questions **we** ask when **you** take out or make changes to **your** policy. If **you** fail to do so, **your** policy may be void, or it may be

cancelled, or **your** claim may be rejected or not fully paid.

This policy is underwritten by Capacity Insights, a trading name of Healix Insurance Services Ltd, on behalf of the **Insurer**, Hamilton Insurance DAC, under Binding Authority Number B0775RCB44324. Healix Insurance Services Ltd is registered in England and Wales under No. 5484190 and authorised and regulated by the Financial Conduct Authority under No. 437248.

Hamilton Insurance DAC is registered in Ireland under No. 484148 and authorised by the Central Bank of Ireland and subject to limited regulation by the Financial Conduct Authority and Prudential Regulation Authority in connection with their UK branch.

## Definition of words

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

### Baggage

Luggage, clothing, personal effects, **valuables** and other articles (but excluding personal money, tickets or 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 insured trip.

### Close relative

Mother, father, sister, brother, wife, husband, partner (including common law and civil partnerships), son, daughter (including fostered/adopted), grandparent, grandchild, parent in-law, son in-law, daughter in-law, brother in-law, sister in-law, step parent, step child, step sister, step brother or legal guardian.

### Computer system

Any computer hardware, software, communication system or electronic device (including smartphones, laptops, tablets and wearable devices), server, cloud, microcontroller or similar system (including any associated input, output or data storage device, networking equipment or backup facility).

### Cyber risk

- Any unauthorised, malicious or illegal act (or the threat of such act), involving access to or the processing, use or operation of any **computer system**;
- Any error or omission involving access to or the processing, use, or operation of any **computer system**;
- Any partial or total unavailability or failure to access, process, use or operate any **computer system**; or
- Any loss of use, reduction in functionality, repair, replacement, restoration or reproduction of any data, including any amount relating to the value of such data.

### Dependent business partner

A person who works for the same employer as **you** and whose absence from work necessitates **your** presence.

### Diagnostic tests

All laboratory and imaging (invasive and non-invasive) tests ordered by the treating **doctor** to help diagnose or rule out a suspected illness or condition including PET scans, CT scans, MRIs, EKGs, EMGs, X-rays, echocardiograms, cardiac nuclear studies or cardiovascular procedures such as coronary angiograms plus blood, urine or histopathological tests.

### **Doctor**

A registered practising member of the medical profession who is not related to **you** or any person with whom **you** are travelling.

### **Epidemic**

A contagious disease recognised by the World Health Organization (WHO) or an official government authority in **your home country** or **your** trip destination.

### **Home country**

The country that **you** normally reside in.

### **Insured person, you, your**

Any person named on the booking invoice or validation certificate (as applicable).

### **Insurer**

Hamilton Insurance DAC.

### **Medical condition**

Any disease, illness or injury.

### **Pandemic**

An **epidemic** that is recognised as a pandemic by the World Health Organization (WHO) or an official government authority in **your home country** or **your** trip destination.

### **Policy excess**

The first part of the claim that **you** will be responsible for paying. When applicable, this amount applies to each claim, per section, for each separate incident per **insured person**.

### **Pre-existing medical condition**

**a** Any respiratory condition (relating to the lungs or breathing), heart condition, stroke, Crohn's disease, epilepsy, allergy, cancer, psychiatric or psychological condition (including anxiety, stress and depression) for which **you** have received treatment (including surgery, tests or investigations by **your doctor** or a consultant/specialist or prescribed medication) in the last five years.

**b** Any **medical condition** for which **you** have received surgery, in-patient treatment or investigations in a hospital or clinic within the last 12 months, or are prescribed medication.

### **Quarantine**

Mandatory confinement, intended to stop the spread of a contagious disease, to which **you** or a **travelling companion** have been exposed.

### **Strike or industrial action**

Any form of industrial action taken by workers which is carried on with the intention of preventing, restricting or otherwise interfering with the production of goods or the provision of services.

### **Terrorism (including cyber terrorism)**

An act, or acts, of any person, or group of persons, committed for political, religious, ideological or similar purposes with the intention to influence any government and/or to put the public, or any section of the public, in fear, including but not limited to, the actual use of force or violence and/or the threat of such use.

Furthermore, the perpetrators of a terrorist activity can either be acting alone, or on behalf of, or in connection with any organization or government.

### **Travelling companion**

A person **you** have arranged to travel with on **your** trip and without whom it would be unreasonable to expect **you** to continue **your** trip.

### **Unattended**

When **you** are not in full view of and not in a position to prevent unauthorised interference with **your** property.

### **Utilisation of nuclear, chemical or biological weapons of mass destruction**

The use of any explosive nuclear weapon or device; or the emission, discharge, dispersal, release or escape of: fissile material emitting a level of radioactivity, or any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesised toxins), or any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing incapacitating disablement or death amongst people or animals.

### **Valuables**

Audio, visual, video, photographic, computer, laptops, iPod and/or android tablet or similar device, and portable navigation equipment, ipods, ipod touch and/or accessories, ebook readers, jewelry, furs, gold and silver items, watches, binoculars, musical instruments, electronic games and sports equipment.

### **Volunteering**

**You** taking part in community or wildlife based conservation/project work when arranged by a professional organisation. This includes caring and teaching; and may also include supervised building/renovation projects if the activity does not form part of **your** usual occupation or involve the use of plant/trade/industrial machinery, or non domestic power tools.

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

Capacity Insights on behalf of the Insurer, Hamilton Insurance DAC.

### **Winter sports equipment**

Skis (including bindings), ski boots, ski poles and snowboards.

## Schedule of cover

	Cover limits per person (up to)	Excess (per person)
<b>A Emergency medical expenses</b>	£10 million	*£75
Diagnostic tests	£10,000	£75
In-patient benefit	£20/day max £300	Nil
Criminal injuries	£100/day max £5,000	Nil
Additional mountain rescue (risk to life)	£2,000	£75
<b>B Personal Liability</b>	£2 million	£250
<b>C Personal Accident</b>	£25,000	Nil
<b>D Cancellation or curtailment</b>	£3,000	£75
<b>E Travel delay</b>		
Delayed departure or arrival	£25 / 8 hr delay, max. £100	Nil
Abandonment	£2,000 after 8 hrs delay	Nil
Hijack of aircraft	£100 / day, max. £3,000	Nil
Missed departure	£300	Nil
Missed flight connection (Optional)	£1,000	£75
<b>F Personal effects</b>		
Baggage	£2,000	£75
Personal money	£500	£75
Tickets	£1,000	£75
Passport and visas	£250	£75
Delayed baggage	£100 after 8 hour delay	Nil
<b>G Legal expenses</b>	£50,000	£250
<b>H Winter sports extension (Optional)</b>		
Winter sports equipment	£350	£75
Winter sports equipment hire	£200	£75
Ski pack	£300	£75
Piste closure	£20 / day, max. £200	Nil
Avalanche closure	£150	£75

### Note

#### Inner limits

This is only a summary of the sums insured and policy excess. Please refer to the individual sections of cover of this policy for full details.

#### \*Helicopter mountain medical rescue in Nepal

If **you** require helicopter mountain medical rescue in Nepal, all costs will need to be pre-authorised by the **insurer's** medical emergency assistance service and the **policy excess** will be increased to **£500**.

## General enquiries

---

If **you** have any general enquiries concerning this insurance, or if there is anything **you** do not understand, please contact the Insurance Brokers who arrange the scheme:  
Write to: Campbell Irvine limited, 52 Earls Court Road, Kensington, London W8 6EJ  
Phone **UK +44 (0)20 7938 1734**.

## 24-hour medical emergency assistance service

---

Please tell **us** immediately about any serious illness or accident abroad where **you** have to go into hospital or **you** may have to return home early or extend **your** stay because of any illness or injury. If **you** are unable to do this because the condition is life, limb, sight or organ threatening, **you** should contact **us** as soon as **you** can. **You** must also tell **us** if **your** medical expenses are over **£500**. If **you** are claiming for a minor illness or accident **you** should, where possible, pay the costs and reclaim the money from **us** when **you** return. **You** can call 24 hours a day 365 days a year or email.

Phone: **+44 (0)203 667 2998**

Email: **internationalhealthcare@healix.com**

Quote ref: **Campbell Irvine Direct A78865**

Please give **us your** age and **your** insurance booking or validation certificate number. Say that **you** are insured with Campbell Irvine Direct A78865. Below are some of the ways the 24-hour medical emergency assistance service can help.

### Confirmation of payment

**We** will contact hospitals or **doctors** abroad and guarantee to pay their fees, providing **you** have a valid claim. **We** may require written consent to contact **your doctor** to obtain details of any past medical history specifically relating to **your** claim.

### Repatriation

If **our** medical advisers think it would be in **your** medical interests to bring **you** back to **your** home or to a hospital or nursing home in **your home country**, **you** will normally be transferred by regular airline or road ambulance. Where medically necessary in very serious or urgent cases, **we** will use an air ambulance. **We** will consult the treating **doctor** and **our** medical advisers first. If **you** need to go home early, the treating **doctor** must provide a certificate confirming that **you** are fit to travel. Without this the airline can refuse to carry any sick or injured person.

**You** can contact **us** at any time, day or night. **You** will be answered by one of **our** experienced assistance co-ordinators who **you** should give all relevant information to. Please make sure **you** have details of **your** policy before **you** phone.

### Note

Failure to contact the medical emergency assistance service to obtain **our** authorisation may result in **your** claim being reduced or declined.

## Making a claim

---

### For all claims

To submit a claim online please go to: <https://rpclaims.com/cid>

Alternatively, **you** can contact us by:

Telephone: +44(0)208 667 8987

Email: [claim@rpclaims.com](mailto:claim@rpclaims.com)

Quote Campbell Irvine Direct A78865

## THIS IS NOT PRIVATE MEDICAL INSURANCE.

A note to all **insured persons, doctors** and hospitals. This is not a private medical insurance. If any medical treatment is needed, **you** must tell **us** immediately or **we** may not guarantee medical expenses. If **you** need any medical treatment, **you** must allow the medical emergency assistance service to see all of **your** medical records and information.

---

## Health declaration and health exclusions

### Important declaration

Anyone named under this policy should have read this Important declaration and understood the terms, conditions and exclusions relating to the health of **you** and anyone else upon whom **your** trip depends.

This policy contains health restrictions that apply to **your** cover under certain sections of this policy. This policy can only provide cover in respect of an accident or illness which is sudden, unforeseen and beyond **your** reasonable control.

Cover is excluded for any defined **pre-existing medical condition**. If in doubt please contact **our** medical screening service, in confidence on:

**UK +44 (0)1702 427 237** or, online at [www.policyscreening.com/cidirect](http://www.policyscreening.com/cidirect)

### Definition of a Pre-existing medical condition:

**a** Any respiratory condition (relating to the lungs or breathing), heart condition, stroke, Crohn's disease, epilepsy, allergy, cancer, psychiatric or psychological condition (including anxiety, stress and depression) for which **you** have received treatment (including surgery, tests or investigations by **your doctor** or a consultant/specialist or prescribed medication) in the last five years.

**b** Any **medical condition** for which **you** have received surgery, in-patient treatment or investigations in a hospital or clinic within the last 12 months, or are prescribed medication

## How to disclose pre-existing medical conditions

---

### Medical screening

The medical screening service is optional for those persons wishing to establish if additional cover may be offered to include **pre-existing medical conditions**. **You** will be asked for **your** personal and travel details. Please have **your** insurance policy number to hand if known.

**You** will be advised whether the **pre-existing medical condition** may be covered, an optional additional premium may be quoted and whether any amendments will be made to the policy terms and conditions. If terms can be provided for the condition and **you** elect to take up the offer of the additional cover, **you** will be given a medical screening reference number and a letter will be sent to **you** upon receipt of payment. Any additional premiums must be paid directly to the medical screening service and not the company **you** are arranging **your** travel insurance with.

If **you** do not:

declare full details about **your pre-existing medical condition** to the medical screening service; or accept the special terms applied to **your** policy by the medical screening service

**you** will not be covered for any claims arising from:

- any **pre-existing medical conditions**; or
- any **medical conditions** linked to these **pre-existing medical conditions**.

There is no cancellation or curtailment cover for a **pre-existing medical condition** of persons not necessarily travelling but upon whom travel depends, such as a **close relative**, unless **you** are able to agree to the 'Non travelling relatives' section of this policy.

**You** should also refer to the 'General exclusions' of this policy.

If **you** fail to declare a **medical condition** and the policy would have still been issued to **you** but for an additional premium, the **insurer** may decide to make a proportionate settlement in line with the premium **you** have paid.



## Change in health for annual multi-trip customers

---

If **your** health changes after taking out this insurance, **you** must tell **us** as soon as possible by calling the Medical Screening service on **UK +44 (0)1702 427 237** if this means **you** have to:

- see a **doctor** and be referred to a consultant or specialist; or
- be admitted to hospital for treatment (including surgery, tests or investigations); or
- await treatment or the results of tests and investigations.

**We** will tell **you** whether or not **your** medical condition (or conditions) can be covered and if **you** need to pay an extra premium. If **we** cannot cover **your medical condition** (or conditions), or **you** do not want to pay the extra premium, **you** can choose to:

- make a cancellation claim for any trip already booked; or
- continue cover on this policy, but without cover for **your medical conditions**; or
- cancel this policy and request a proportionate/ partial refund (as long as **you** have not made a claim or intend to make a claim).

## Change in health for single trip customers

---

If **your** health changes after taking out this insurance, **you** do not need to tell **us** providing **your doctor** has confirmed to **you** that **you** remain medically fit to undertake the planned trip itinerary.

**We** cannot provide cover for new medical conditions for which **you** have not received a formal diagnosis.

## Non-travelling relatives

---

**You** may have a **close relative** with a **medical condition** who is not travelling with **you**. In some cases, if their state of health deteriorates greatly, **you** may want to cancel or curtail **your** trip. Subject to all the other terms and conditions, such claims are covered if the **close relative's doctor** is prepared to state that at the date **you** bought this policy, he/ she would have seen no substantial likelihood of his/her patient's condition deteriorating to such a degree that this would become necessary. If the **doctor** will not confirm this, **your** claim is not covered.

## Pregnancy

---

Claims relating to normal pregnancy, where there is no accompanying bodily injury, illness, disease or complication, are not covered under this policy. This policy is designed to provide cover for unforeseen events, accidents, illnesses and diseases and normal childbirth would not constitute an unforeseen event.

There is no cover for any claims arising from pregnancy when **you** are expected to give birth within two months of the return date of **your** trip.

Cover can only be considered where there is a complication of pregnancy or if **you** were unaware of the pregnancy at the time of purchasing the insurance or booking a trip (whichever is later) and **you** are advised not to travel by a **doctor**.

Airlines and ferry companies have their own restrictions due to health and safety requirements so please ensure that **you** check with them or with any other transport provider before **you** book the trip.

Please also ensure that **your doctor** and midwife are aware of **your** travel plans, that there are no known complications and that **you** are not travelling against any medical advice.

# Making a complaint

---

**We** aim to provide **you** with a first class policy and service. However, there may be times when **you** feel **we** have not done so. If this is the case, please tell **us** about it so that **we** can do **our** best to solve the problem. If **you** make a complaint **your** legal rights will not be affected.

## Step 1

### For complaints regarding the sale of your policy:

Write to: The General Manager, Campbell Irvine Ltd,  
52 Earls Court Road, Kensington, London W8 6EJ.  
Phone **UK +44 (0)207 938 1734**  
Email **info@campbellirvine.com**

### For complaints regarding claims or administration of your policy:

Write to: Rightpath Claims, PO Box 6430,  
Basildon, Essex, SS14 0QT  
Telephone: +44(0)208 667 8987  
Email: complaint@rpisolutions.com

# Period of insurance

---

The period that **you** are insured for as shown on **your** booking invoice or validation certificate (as applicable).

## Single trip

Cover under Section D - Cancellation starts from the date of issue stated on **your** booking invoice or validation certificate (as applicable) and ends when **you** leave **your** residence or place of business to commence travel. Cancellation cover shall only apply for a period of up to 24 months prior to the trip departure date stated on **your** booking invoice or validation certificate (as applicable). The maximum trip duration for person aged 70 to 74 years of age is limited to 31 days.

Cover under all other sections of the policy starts when **you** leave **your** normal residence or place of business to commence **your** trip or from the date shown on the booking invoice or validation certificate (as appropriate).

All cover ends on **your** return home, within 24 hours of **your** return to **your home country**, or at the expiry of the period of insurance, whichever is first.

## One way travel

All cover ceases on arrival at final destination.

## Step 2

If **you** are not satisfied with **our** final response **you** can refer the matter to the UK Financial Ombudsman Service for independent arbitration.

Visit: **www.financial-ombudsman.org.uk**

Write to: Financial Ombudsman Service, Exchange Tower, London E 14 9SR

Phone: **UK +44 (0)800 023 4567** or

UK +44 (0)300 123 9123

Email: **complaint.info@financial-ombudsman.org.uk**

## Annual multi-trip

For Worldwide policies - any one trip shall be limited to a maximum duration of 70 days or 31 days if aged 66 years or more at the date of payment of insurance premium.

For Europe policies - any one trip shall be limited to a maximum duration of 31 days irrespective of age.

For any trip known to be exceeding the maximum duration, the entire period of travel including the first 70/31 days will not be insured.

Cover under Section D - Cancellation starts from either the date of issue shown on **your** booking invoice or validation certificate (as applicable), or the booking date of each individual trip to which this insurance relates, whichever is later.

Cover under all other sections of the policy starts from the date shown on **your** booking invoice or validation certificate (as applicable), or the time **you** leave **your** normal residence or place of business to commence **your** trip on the departure date of each individual trip to which this insurance relates, whichever is the later.

Cover for each trip ends on **your** return home or within 24 hours of **your** return to **your home country**, whichever is first. All cover under the policy ends on the expiry of the period of insurance as shown on **your** booking invoice or validation certificate (as applicable).

### Automatic trip extension

If **you** are prevented from completing **your** travel before the expiration of this Insurance as stated under the period of insurance on the booking invoice or validation certificate (as applicable) for reasons which are beyond **your** control, including ill health or failure of public transport, this policy will remain in force until completion but not exceeding a further 31 days on a day by day basis, without additional premium.

## Important information

**You** must comply with all the terms and conditions stated in this policy, exercise reasonable care, and act as if uninsured at all times to have the full protection of the policy. If **you** do not comply the **insurer** may at their option cancel the policy or refuse to deal with the claim or reduce the amount of any claim payment.

### General conditions

At the time of purchasing this policy **you** will have been asked questions to enable **us** to assess **your** risk. These may include but are not limited to questions about **your** state of health or that of a **close relative** or any planned sports or activities. **You** must take reasonable care to answer these questions completely and accurately. If the answers given change after the policy was purchased **you** must notify **us** of this change. Upon any failure to answer the questions completely, accurately or honestly, or to inform **us** of any change, **your** policy may be declared void, or be cancelled, or **we** may refuse to pay **your** claim in full or in part, or **we** may revise the premium due or **we** may change any **policy excess**, or the extent of **your** cover under the policy may be affected.

2. This policy is available for holiday or business travel but excludes overseas residency, permanent overseas employment, work of a predominantly manual nature (other than **volunteering**) or any hazardous activity not agreed on behalf of the **insurer**.

3. An extra premium has to be paid for any person aged 66 years or more at the date of payment of insurance premium. The policy is not available for persons aged 75 years or more at the date of payment of insurance premium (reduced to 70 years or more for annual multi-trip policies, unless **we** agree otherwise in writing).

If **you** are hijacked, cover shall continue whilst **you** are subject to the control of the person(s) or their associates making the hijack during the period of insurance for a period not exceeding 12 months from the date of the hijack.

Please ensure **you** arrange cover for the entire duration of **your** travel.

4. **You** must contact the medical emergency assistance service as soon as possible with full details of anything which may result in a claim as a result of a medical emergency.

5. Unless agreed otherwise, English law will apply and all communications and documentation in relation to this policy will be in English. In the event of a dispute concerning this policy the English courts shall have exclusive jurisdiction.

### Rights of third parties

**We**, the **insurer** and **you** do not intend any term of this contract to be enforceable by any third party pursuant to the Contracts (Rights of Third Parties) Act 1999.

### Financial Services Compensation Scheme (FSCS)

For **your** added protection, the **insurer** is covered by the FSCS. **You** may be entitled to compensation from the scheme if the **insurer** cannot meet its obligations. This depends on the type of business and the circumstances of the claim.

Insurance cover provides protection for 90% of the claim, with no upper limit. Further information about the compensation scheme arrangements is available from the FSCS, telephone number

**UK +44 (0)800 678 1100**

or **UK +44 (0)20 7741 4100**,

or by visiting their website at **[www.fscs.org.uk](http://www.fscs.org.uk)**.

# Data protection

---

Hamilton Insurance DAC, the Data Controller, is committed to Protecting and respecting **Your** privacy in accordance with the current Data Protection Legislation ("Legislation"). Below is a summary of the main ways in which the **Insurer** processes **Your** personal data. For more information, please visit [www.hamiltongroup.com](http://www.hamiltongroup.com).

## How the Insurer uses Your personal data and who they share it with

The **Insurer** may use the personal data they hold about **You** for the purposes of providing insurance, handling claims and any other related purposes (this may include underwriting decisions made via automated means), for offering renewal terms, research or statistical purposes and to provide **You** with information, products or services that **You** request from them or which they feel may interest **You**. The **Insurer** will also use **Your** data to safeguard against fraud and money laundering and to meet their general legal or regulatory obligations.

## Sensitive Personal Data

Some of the personal information, such as information relating to health or criminal convictions, may be required by the **Insurer** for the specific purposes of underwriting or as part of the claims handling process. The provision of such data is conditional for them to be able to provide insurance or manage a claim. Such data will only be used for the specific purposes set out in this notice.

## Disclosure of Your Personal Data

The **Insurer** may disclose **Your** personal data to third parties involved in providing products or services to them, or to service providers who perform services on their behalf. These include the **Insurer's** group companies, affinity partners, brokers, agents, third party administrators, reinsurers, other insurance intermediaries, insurance reference bureaus, credit agencies, medical service providers, fraud detection agencies, loss adjusters, external law firms, external auditors and accountants, regulatory authorities, and as may be required by law.

## International transfers of Data

The Insurer may transfer Your personal data to destinations outside the European Economic Area ("EEA"). Where they transfer Your personal data outside of the EEA, they will ensure that it is treated securely and in accordance with the Legislation.

## Privacy Notice

### Your Rights

**You** have the right to ask the **Insurer** not to process **Your** data for marketing purposes; to see a copy of the personal information they hold about **You**; to have **Your** data deleted (subject to certain exemptions); to have any inaccurate or misleading data corrected or deleted; to ask the **Insurer** to provide a copy of **Your** data to any controller; and to lodge a complaint with the local data protection authority.

### Retention

**Your** data will not be retained for longer than is necessary, and will be managed in accordance with the **Insurer's** data retention policy. In most cases, the retention period will be for a period of ten (10) years following the expiry of the insurance contract unless they are required to retain the data for a longer period due to business, legal or regulatory requirements. If **You** have any questions concerning the **Insurer's** use of **Your** personal data, please contact The Data Protection Officer, Hamilton Insurance DAC - please visit [www.hamiltongroup.com](http://www.hamiltongroup.com) for full address details.

### Capacity Insights

Capacity Insights are a joint Data Controller and are equally committed to protecting and respecting Your privacy in accordance with the current Data Protection Legislation ("Legislation"). For more information please visit [www.capacityinsights.co.uk/privacy-policy/](http://www.capacityinsights.co.uk/privacy-policy/).

If **You** have any concerns, a complaint or any request regarding Capacity Insights' use of **Your** personal data, please contact: The Data Protection Officer, Capacity Insights, Healix House, Esher Green, Esher, Surrey, KT10 8AB Or email: [privacy@capacityinsights.co.uk](mailto:privacy@capacityinsights.co.uk).

If **you** would like to view the full privacy policy of Campbell Irvine limited visit: [www.campbellirvine.com](http://www.campbellirvine.com)

# Cooling off period

---

## Statutory cancellation rights

**You** may cancel this policy within 21 days of receipt of the policy documents by contacting **your** issuing agent.

Any premium already paid will be refunded to **you** providing **you** have not travelled, no claim has been made or is intended to be made and no incident likely to give rise to a claim has occurred.

## Cancellation outside the statutory 21 day cooling off period

**You** may cancel this policy at any time after the statutory 21 day cooling off period by contacting **your** issuing agent.

If **you** cancel after the statutory 21 day cooling off period no premium refund will be made.

## Non payment of premiums

We reserve the right to cancel this policy immediately in the event of non payment of the premium.

# Reciprocal health care

---

## European / Global Health Insurance Card (EHIC and GHIC)

- If **you** already have a valid EHIC, it will continue to entitle **you** to reduced-cost, sometimes free, medical treatment that becomes necessary while **you** are in a European Economic Area (EEA) country or Switzerland. The EEA consists of the European Union (EU) countries plus Iceland, Liechtenstein and Norway. Cover will end on the expiry date of **your** EHIC.

- If **you** do not have a valid EHIC or it is due to expire before **you** travel, **you** can apply for a GHIC. This entitles **you** to reduced cost, sometimes free, medical treatment that becomes necessary while **you** are in a European Union (EU) country.

- These cards give access to state-provided medical treatment only. Remember, this might not cover all the things **you** would expect to get free of charge from the NHS in the UK. **You** may have to make a contribution to the cost of your care.

- **You** may apply for a GHIC online at [www.ghic.org.uk](http://www.ghic.org.uk) or by calling **0300 330 1350**.

## Australia

If **you** are travelling to Australia **you** should enrol in Medicare which will entitle **you** to subsidised hospital treatments and medicines. **You** can do this by contacting a local Medicare office in Australia. All claims for refunds under the Medicare scheme must be made before **you** leave Australia. For more information on Medicare visit:

[www.medicareaustralia.gov.au](http://www.medicareaustralia.gov.au)

or email: [medicare@medicareaustralia.gov.au](mailto:medicare@medicareaustralia.gov.au).

If **you** make use of these arrangements or any other worldwide reciprocal health arrangement which reduces **your** medical expenses, **you** will not have to pay a **policy excess** under Section A - Emergency medical expenses.

### Note

The EHIC/GHIC do not cover the cost of medical treatment in a private hospital or clinic, the additional cost of returning to **your home country** or for a **close relative** to stay or fly out to be with **you**. In a medical emergency **you** may have no control over the hospital **you** are taken to or the closest hospital may be private.

# Claim conditions

---

## Duplicate insurance

If at the time of loss, theft, damage, expense or liability insured by Sections A, D, E, F, G and H there is another insurance against such loss or any part thereof, the **insurer** shall be liable under this Insurance for their proportionate share only of such loss.

## Subrogation

The **insurer** is entitled to take over any rights in the defence or settlement of any claim and to take proceedings in **your** name for the **insurer's** benefit against any other party.

## Documentation

All certificates, information and evidence required by the **insurer** shall be furnished at **your** or **your** legal personal representatives expense and shall be in such form and of such nature as the **insurer** may prescribe. **You** shall as often as required submit to medical examination on behalf of the **insurer** at their own expense and in the event of **your** death the **insurer** shall be entitled to have a post-mortem examination at their own expense.

## Recognising our rights

**You** and each **insured person** must recognise the **insurer's** right to:

### 1 Pay, repair or replace

Choose either to pay the amount of a claim (less any **policy excess** and up to any sum insured limit) or repair, replace or reinstate any item or property that is damaged, lost or stolen;

### 2 Inspect and dispose of items

Inspect and take possession of any item or property for which a claim is being made and handle any salvage in a reasonable manner;

### 3 Handle a claim in your name

Take over and deal with the defence or settlement of any claim in **your** name and keep any amount recovered;

### 4 Pay in sterling

Settle all claims in pounds sterling;

### 5 Be reimbursed promptly

Be reimbursed within 30 days for any costs or expenses that are not insured under this policy, which the **insurer** pays to **you** or on **your** behalf;

### 6 Receive medical certificates

Be supplied at **your** expense with appropriate original medical certificates where required before paying a claim;

### 7 Carry out medical examinations

Request and carry out a medical examination and insist on a post-mortem examination, if the law allows them to ask for one, at **our** expense.

## Paying claims

### 1 Death

**a If you** are 18 years old or over, claims are paid to **your** estate and the receipt given to the **insurer** by **your** personal representatives shall be a full discharge of all liability by the **insurer** in respect of the claim.

**b If you** are aged under 18 years, the **insurer** shall pay any claim to **your** parent or legal guardian. **Your** parent or legal guardian's receipt shall be a full discharge of all liability by the **insurer** in respect of the claim.

### 2 All other claims:

**a If you** are 18 years old or over, the **insurer** shall pay the claim to **you** and **your** receipt shall be a full discharge of all liability by the **insurer** in respect of the claim.

**b If you** are aged under 18 years, the **insurer** shall pay the appropriate benefit amount to **your** parent or legal guardian for **your** benefit. **Your** parent or legal guardian's receipt shall be a full discharge of all liability by the **insurer** in respect of the claim. Please refer to the 'Claims checklist' at the back of this policy for a list of documentation required by **our** claims handlers to process a claim.

## Fraudulent claims

**You** must not act in a fraudulent manner. If **you** or anyone acting for **you**:

**1** Make a claim under the policy knowing the claim to be false or fraudulently exaggerated in any respect; or

**2** Make a statement in support of a claim knowing the statement to be false in any respect; or

**3** Submit a document in support of a claim knowing the document to be forged or false in any respect; or

**4** Make a claim in respect of any loss or damage caused by **your** wilful act or with **your** involvement.

Then the **insurer**:

**1** Shall not pay the claim

**2** Shall not pay any other claim which has been made or will be made under the policy

**3** May at their option declare the policy void.

**4** Shall be entitled to recover from **you** the amount of any claim already paid under the policy.

**5** Shall not make any premium returns.

**6** May inform the police of the circumstances.

## Essential Travel

If **you** have decided to travel despite the Foreign, Commonwealth and Development Office advising against all but essential travel, **we** will need evidence of why **you** believe **your** travel should be considered essential in the event of a claim.

## General exclusions

### Policy excesses - Applicable to most claims

The **insurer** shall not pay:

**1** The first **£75** of each and every claim, per incident claimed for under each section by each **insured person**.

**2** The first **£250** of each and every claim arising from the same incident under Section B - Personal liability (in respect of the use of rented temporary accommodation only) and G - Legal expenses.

**3** The first **£500** of each and every claim, by each **insured person** under Section A1, if the claim involves helicopter mountain medical rescue in Nepal.

No **policy excess** applies to Section C - Personal accident, Section D - Cancellation and curtailment (loss of deposit only claims), Section E1, E2, and E3 - Travel delay, Section F5 - Delayed baggage and Section H - Piste closure only.

Please also note that if **you** have a valid claim for medical expenses which is reduced by **you** using an EHIC/GHIC; or taking advantage of a reciprocal health agreement with **your home country**; or using **your** private medical insurance; at the point of treatment, then the **insurer** will not deduct the **policy excess**.

**You will not be covered under Section A - Medical expenses, Section C - Personal accident and Section D - Cancellation or curtailment for any claim directly or indirectly caused by, arising or resulting from, or in connection with either;**

**1** At the time of taking out this policy:

**a** Any **pre-existing medical condition** unless **you** have contacted the medical screening service on **UK +44 (0)1702 427 237** or, online at **[www.policyscreening.com/cidirect](http://www.policyscreening.com/cidirect)** and the **insurer** has agreed to provide cover and **you** have paid any additional premium required.

**b** Any **medical condition** that **you** or any other person not necessarily travelling but upon whom travel depends such as a **close relative** has received a terminal prognosis.

**c** Any **medical condition** **you** are aware of but which has not had a formal diagnosis.

**d** Any **medical condition** for which **you** or any other person not necessarily travelling but upon whom travel depends such as a **close relative** is on a waiting list for or has knowledge of the need for surgery in a hospital; or

**2** After the date this policy was purchased including prior to booking any individual journey in respect of an annual multi-trip policy:

A change of health or where the cost of any claim is increased due to a change of health, if the procedure detailed under the 'Health declaration and health exclusions' section has not been followed.



3 At any time:

**a** Any **medical condition** where **you** have travelled despite a **doctor** advising **you** not to travel (or where they would have advised **you** not to travel had **you** sought their advice).

**b** Any surgery, treatment or investigations for which **you** intend to travel outside **your home country** to receive (including any expenses incurred due to the discovery of other **medical conditions** during and/or complications arising from these procedures).

**c** Any **medical condition** for which **you** or any other person not necessarily travelling but upon whom travel depends such as a **close relative** is not taking the recommended treatment or prescribed medication as directed by a **doctor**.

**d** Pregnancy known at the time of booking **your** trip or buying this policy (whichever is later) if **you** are expected to give birth within two months of the return date of **your** trip;

**e** Participating in any activity where **you** have been advised against doing so by a **doctor** or where **you** would have been advised against participating if **you** had sought your **doctor's** advice.

**The insurer shall not pay (unless agreed in writing by or on behalf of the insurer) for any claim directly or indirectly caused by, arising or resulting from, or in connection with:**

**1 a i** Mountaineering or climbing; pot-holing; sports tours; motorised competitions; racing; competing in or practising for speed or time trials of any kind; or

**ii** Travelling by quadbike or motorcycle (except for motorcycles up to 125cc which are hired or borrowed during the period of insurance and when **you** are wearing a crash helmet); or

**iii** Driving a motor vehicle or riding a motorcycle quad bike or any mechanically assisted cycle on a public highway without the appropriate driving licence; or

**iv** Skiing, snowboarding and snowmobiling, unless the appropriate premium has been paid and is shown on the booking invoice or validation certificate (as applicable), but always excluding ski racing, ski jumping, freestyle winter sports, ice hockey or the use of bobsleighs or skeletons.

**b** Any activity where **you** do not wear the recommended/recognised safety equipment, or do not follow the safety procedures, rules or regulations of the activity's organisers/providers; or

**c** Any activity in the air (other than as a passenger in a fully licensed passenger-carrying-aircraft, bungee jumping or parasailing); or

**d** Wilful exposure to needless danger (other than in an attempt to save human life); or

**e** Air travel within 24 hours of scuba diving.

#### Note

Exclusions **1a**, **1b**, **1e** and **1d** are not applicable to cancellation claims under Section D.

See 'Sporting and adventurous activities' section.

**2** Private medical treatment unless authorised by the medical emergency assistance service.

**3** Any wilfully self inflicted injury or illness, suicide or attempted suicide, sexually transmitted diseases, solvent abuse, the use of drugs (other than medically prescribed) and the effects of alcohol.

**4** Your participation in any criminal or illegal acts.

**5 a** Unless the **insurer** provides cover under this insurance, any other loss, damage or additional expenses following on from the event for which **you** are claiming. Examples of such loss, damage, or additional expense would be the cost of replacing locks after losing keys, costs incurred of preparing a claim, or loss of earnings following bodily injury or illness.

**b** Any costs for;  
telephone calls (other than the first call to the medical emergency assistance service to notify them of a medical problem requiring hospitalisation); or

**ii** taxi fares (unless a taxi is being used in place of an ambulance to take you to or from a hospital); or

**iii** food and drink expenses (unless these form part of **your** hospital costs if **you** are kept as an in-patient).

**6** Any exposure to the **utilisation of nuclear, chemical or biological weapons of mass destruction**.

**7 a** Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste resulting from the combustion of nuclear fuel; or

**b** The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component of such assembly.



**8** Sonic or pressure waves from aircraft and other airborne devices travelling at sonic or supersonic speeds.

**9** Any consequence of any act of war, invasion, act of foreign enemy, hostilities (whether declared or not), civil war, civil commotion, rebellion, revolution, insurrection, military force, any act of **terrorism (including cyber terrorism)** where **you** are actively engaged and/or where **you** have travelled and/or **you** remain contrary to Foreign and Commonwealth Office travel advice.

**10 An epidemic or pandemic**, except as expressly covered under Section A - Emergency medical expenses, Section D - Cancellation or curtailment and Section H - Winter sports extension.

**11 You** not following any suggestions or recommendations made by the Foreign, Commonwealth and Development Office (FCDO), World Health Organization (WHO) or any government or other official authority. This includes where:

- Certain vaccinations or other preventative measures (such as malaria tablets) are recommended by **your doctor**.

- The FCDO or equivalent government authority in **your home country** has advised against: all travel; or

all but essential travel (unless the purpose of **your** journey is necessary, urgent and cannot be postponed - evidence of this will be required see Claims conditions);

- **You** have travelled against the advice of a local authority at any destination **you** are travelling from, through or to. For further details on FCDO travel advice for British travellers, visit:

**gov.uk/foreign-travel-advice**

**12** Any search or ship to shore rescue costs (cost charged to **you** by a Government, regulated authority or private organisation concerned with finding and rescuing an individual). This exclusion does not include medical evacuation costs by the most appropriate transport detailed in Section A1, or Additional mountain rescue (risk to life) costs detailed in Section A5.

**13** Something that happened before **your** policy or travel tickets for **your** trip were bought (whichever is later) and which could reasonably have been expected to give rise to a claim, unless the **insurer** agrees to it in writing.

**14** The financial failure of a tour operator, travel agent, transport provider, accommodation provider, ticketing agent or excursion provider.

**15** Any other loss connected to the event **you** are claiming for unless the **insurer** specifically provides cover under this policy.

**16** Any disinclination to travel.

**17** Any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose the **insurer** to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

**18 Your** use, ownership, possession or operation of drones of any kind.

**19 Cyber risks** of any kind.

# Section A - Emergency medical expenses

## WHAT YOU ARE COVERED FOR

### 1 Emergency medical, repatriation and associated expenses - Up to £10 million

If **you** suffer accidental bodily injury or become ill (including being diagnosed with an **epidemic** or **pandemic** disease such as COVID-19 as well as being subject to compulsory **quarantine** on the orders of a treating **doctor**) the **insurer** will pay:

**a** normal and necessary receipted expenses of emergency medical or surgical treatment incurred outside **your home country** including, emergency dental treatment to relieve pain and suffering (limited to **£250**), specialists or ophthalmic fees, hospital, nursing attendance charges, physiotherapy, massage and manipulative treatment, surgical and medical requisites, decompression chambers, ambulance/ necessary transport charges (including helicopter/ air ambulance charges if medically necessary and authorised by the medical emergency assistance service; or their agents).

#### Note

The **insurer** reserves the right to repatriate **you** to **your home country** when in the opinion of the medical emergency assistance service, **you** are fit to travel

**b** reasonable additional accommodation and repatriation expenses incurred by **you** and any one member of **your** family or party who has to remain or travel with **you**, when certified by a **doctor** to be strictly necessary on medical grounds, and approved by the medical emergency assistance service.

**c** the travel and reasonable accommodation expenses of one person to travel from their country of residence if their presence is strictly necessary on medical grounds.

**d** the reasonable cost of transporting **your** remains to **your home country** (the costs of burial or cremation is not included) or funeral expenses including burial or cremation incurred abroad up to **£1,000**.

### 2 Diagnostic tests - Up to £10,000

The **insurer** will pay up to **£10,000** for **diagnostic tests** incurred outside **your home country**.

### 3 In-patient benefit - Up to £300

In addition to the costs referred to above, the **insurer** will also pay the sum of **£20** compensation for each complete day, up to **£300**, that **you** are admitted to hospital outside **your home country**

### 4 Criminal injuries - Up to £5,000

Should **you** be admitted to hospital as an in-patient as a result of receiving criminal injuries following a personal assault verified by a written report that substantiates the injuries resulted from an unprovoked personal assault, the in-patient benefit payable under Section A3 is increased to **£100** each complete day, up to **£5,000**, that **you** are admitted to hospital outside of **your home country**.

### 5 Additional mountain rescue (risk to life) - Up to £2,000

If during the period of insurance local rescue authorities declare you need mountain rescue to avoid risk to **your** life despite not being ill or injured, the **insurer** will pay up to **£2,000** for receipted rescue costs if authorised by the medical emergency assistance service or their agents.

#### Conditions specific to A5 - Additional mountain rescue (risk to life).

**1** Contact must be made with the medical emergency assistance service on **+44 (0)203 667 2998** as soon as possible;

**2** All reasonable local safety advice has been obtained and followed;

**3** Expenses are only payable for **your** proportion of the mountain rescue operation up to the sum insured.

**4** Costs will only be covered up to the point when **you** are recovered by the mountain rescue services or at the time when the authorities advise that continuing the rescue is no longer viable.

**5** A written statement from the appropriate local rescue authorities involved in the rescue must be obtained and provided to the **insurer** in the event of a claim.

## WHAT YOU ARE NOT COVERED FOR

### Exclusions applicable to Section A

The **insurer** shall not pay for any claim directly or indirectly caused by, arising or resulting from, or in connection with:

**1** Travel against any health requirements stipulated by the carrier, their handling agents or any other public transport provider.

**2 A pre-existing medical condition** unless the **insurer** has agreed to provide cover and **you** have paid any additional premium required.

**3** The cost of medical or surgical treatment of any kind received by **you** later than 52 weeks from the date of the accident or commencement of the illness.

**4** Medical expenses incurred in **your home country**.

**5** A claim that is not verified by a medical report whilst travelling.

**6** Elective or cosmetic surgery is excluded except in the event of reconstruction following an accident. Any procedures require advance approval from the medical emergency assistance service.

**7** Dental treatment to provide, replace or repair caps, crowns or bridges other than the relief of pain and suffering.

**8** Any form of treatment or surgery which in the opinion of the medical emergency assistance service can be reasonably delayed until **you** return to **your home country**.

**9** Any medical treatment and associated costs **you** have to pay following your refusal of curtailment, or **your** decision not to move hospital or return to **your home country** after the date when, in the opinion of the medical emergency assistance service, **you** should have done so.

**10** Accommodation and travel expenses where the transport and/or accommodation used are of a standard superior to that of the trip unless agreed by the medical emergency assistance service.

**11** Medication **you** are taking before and which **you** will have to continue taking during **your** trip (except in the event of accidental loss or damage to that medication).

**12 A policy excess** which will apply to this section, please refer to 'General exclusions'.

## Section B - Personal liability

### WHAT YOU ARE COVERED FOR

#### Up to £2 million

The **insurer** will pay up to **£2 million** (inclusive of legal costs and expenses) if **you** become legally liable to pay damages in respect of:

**1** Accidental bodily injury, including death, illness and disease to a person; and/or

**2** Accidental loss of or damage to property during the period of insurance. The **insurer** will indemnify **you** for all such damages in respect of each occurrence or a series of occurrences arising directly or indirectly from one source or original cause.

**e** fraudulent, dishonest or criminal acts of **you** or any person authorised by **you**.

any claim resulting from venereal disease, sexually transmitted diseases, infection with the Human Immunodeficiency Virus (HIV) or Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC) howsoever this syndrome has been acquired or may be named;

**g** any claim assumed by **you** under any contract or agreement unless such liability would have attached in the absence of such contract or agreement;

**h** punitive or exemplary damages.

#### Provided that

**You or your** legal representatives give the **insurer** written notice immediately **you** receive any prosecution notice or inquest connected to circumstances which may lead to a claim under this section.

**2** No admission, offer, promise, payment or indemnity shall be made by or on **your** behalf without the **insurer's** prior written consent.

**3** Every claim notice, letter, writ or process or other document served on **you** shall be forwarded to the **insurer** immediately upon receipt.

**4** The **insurer** shall be entitled to take over and conduct in **your** name the defence or settlement of any claim or to prosecute in **your** name for the **insurer's** own benefit any claim for indemnity or damages against all other parties or persons.

**5** The **insurer** may at any time pay **you** in connection with any claims) up to **£2 million** (after deduction of any sums already paid as compensation) or any lesser amount for which such claim(s) can be settled. Once this payment is made the **insurer** shall relinquish the conduct and control and be under no further liability in connection with such claim(s) except for the payment of costs and expenses recoverable or incurred prior to the date of such payment.

### WHAT YOU ARE NOT COVERED FOR

#### Exclusions applicable to Section B

**1** The **insurer** will not pay the **policy excess** as shown in the 'General exclusions' section.

**2** The **insurer** will not pay for anything mentioned in the 'General exclusions' section.

**3** The **insurer** will not pay any liability for:

**a** bodily injury, illness or disease of any person who is **your close relative, travelling companion**, or under a contract of employment, service or apprenticeship with **you** when the bodily injury, illness or disease arises out of and in the course of their employment with **you**;

**b** loss or damage to property belonging to or held in trust by or in the custody or control of **you** other than temporary accommodation occupied by **you** during the period of insurance;

**c** bodily injury or damage caused directly or indirectly in connection with the ownership, possession or use by **you** or on behalf of **you** of: aircraft, hovercraft, watercraft (other than non-mechanically powered watercraft), mechanically propelled vehicles (other than wheelchairs, electric wheelchairs and mobility scooters, golf buggies used on golf courses and not on public roads), firearms (other than sporting guns);

**d** bodily injury caused directly or indirectly in connection with: the ownership, possession or occupation of land or buildings, immobile property or caravans or trailers, any wilful or malicious act, carrying on of any trade, business or profession, any racing activity;

# Section C - Personal accident

## WHAT YOU ARE COVERED FOR

### Up to £25,000

In the event of **you** sustaining bodily injury arising wholly and exclusively from violent accidental external and visible means which injury shall solely and independently of any other cause result in **your** death or disablement within twelve calendar months of the injury, the **insurer** will pay the following sums insured:

1 Death, or	£10,000
2 of Loss sight of one or both eyes, or	£25,000
3 Loss of one or more limbs, or	£25,000
4 Permanent total disablement	£25,000

Provided that

**a** the benefit payable under 1 above is reduced to **£1,000** if **you** are under 16 years of age or 66 years of age or over at the time of death

**b** the total compensation in respect of any one **insured person** shall not exceed **£25,000**.

## Section specific definitions

### Loss of one or more limbs:

Loss or severance at or above the wrist or ankle or total permanent loss of use of an entire arm or leg.

### Loss of sight:

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.

**b** in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale.

### Permanent total disablement:

A disability which has lasted for at least 12 months from which the **insurer** believes **you** will never recover and which prevents **you** from carrying out any gainful occupation for which **you** are reasonably qualified by way of training, education or experience.

### Note

If **you** were already disabled before the bodily injury or already had a condition which is gradually getting worse, the **insurer** may reduce their payment. Any reduced payment will be based on their medical assessment of the difference between:

- 1 the disability after the bodily injury; and
- 2 the extent to which the disability is affected by the disability or condition before the accident

## Section D - Cancellation or curtailment

### WHAT YOU ARE COVERED FOR

**Up to £3,000** (Unless the appropriate additional 'Top up cancellation' premium has been paid and is shown on **your** booking invoice or validation certificate (as applicable)).

Should **you** necessarily have to cancel the projected trip before commencement or curtail it before completion as a result of:

**1** The death, accidental bodily injury or illness (including being diagnosed with an **epidemic** or a **pandemic** disease such as COVID-19) of **you** or a **travelling companion**.

**2** **You** or a **travelling companion** being held in **quarantine** before **your** trip or during **your** trip by order or other requirement of a government or public authority, based on their suspicion that **you** or a **travelling companion**, specifically, have been exposed to a contagious disease (including an **epidemic** or a **pandemic** disease such as COVID-19). This does not include any quarantine that applies generally or broadly to some or all of a population, vessel or geographical area, or that applies based on where the person is travelling to, from or through.

**3** Redundancy of **you** or a **travelling companion** that qualifies for payment under current redundancy legislation.

**4** **You** or a **travelling companion's** previously agreed leave being cancelled where **you** or they are a member of the British Forces, police or government security staff.

**5** **You** or a **travelling companion** being summoned for jury service or witness attendance in court.

**6** The death, serious injury or illness of,

**a a close relative**, or

**b** the person with whom **you** intend to reside at the holiday or journey destination, or

**c a dependent business partner;**

of **you** or **your travelling companion** which necessitates the presence of the person concerned.

#### Note

For **6a** above, this will include being diagnosed with an **epidemic** or a **pandemic** disease such as COVID-19.

**7 Hijack.**

**8** Adverse weather conditions making it impossible for **you** to travel to initial point of departure at commencement of outward journey.

**9** Major damage or burglary at **your** home or place of business which at the request of an emergency service requires **your** presence.

**10** **You** or a **travelling companion** being refused boarding of the public transport **you** are booked to travel, on the order of any government, public authority or carrier, due to **you** or a **travelling companion** displaying symptoms of a contagious disease (including an **epidemic** or **pandemic** disease, such as COVID-19).

The **insurer** will pay either:

**1** the cancellation prior to departure; or

**2** the curtailment from the date **you** returned to **your home country** or the dates **you** were hospitalised as an in-patient or the date **your quarantine** period started;

of **your** irrecoverable portion of costs; for travel, air tickets, accommodation, pre-booked excursions, tours, courses and/or events up to the sum insured for any of the above reasons, which have not been used and **you** have paid or are contracted to pay. This includes **winter sports equipment** hire, ski school and lift passes for winter sports trips, when the appropriate premium has been paid and is shown on **your** booking invoice or validation certificate.

#### Note

The proportionate value of costs will be calculated either from the date of return to **your home country**, or from the date **you** were hospitalised as an inpatient until the date **you** are discharged. The claim will only be based on the number of full days not used.

Where return to **your home country** is necessary in an emergency situation **you** should contact the medical emergency assistance service who may be able to assist in having existing air tickets amended.

## WHAT YOU ARE NOT COVERED FOR

### Exclusions applicable to Section D

The **insurer** shall not pay for any claim directly or indirectly caused by, arising or resulting from, or in connection with:

**1** by the carrier, their handling agents or any other public transport provider, unless the reason is shown as being covered.

**2 A pre-existing medical condition** unless the **insurer** has agreed to provide cover and **you** have paid any additional premium required. There is no cancellation or curtailment cover for a **pre-existing medical condition** of persons not necessarily travelling but upon whom travel depends, such as a **close relative** unless **you** are able to agree to the 'Non travelling relatives' section of this policy.

**3** The unused portions of **your** ticket, where repatriation has been arranged at the expense of the **insurer**.

**4 You** having to cut short **your** trip but not returning to **your home country**, in which case the **insurer** will only pay the equivalent costs which **you** would have incurred had **you** returned to **your home country**.

**5 You** being unable to continue with **your** travel due to **you** failing to obtain the passport or visa **you** require for **your** trip

**6** A disinclination to travel or any other adverse financial situation (except redundancy that qualifies for payment under current redundancy legislation)

**7** Claims associated with the cost of accommodation paid for using Avios Awards or any other loyalty point scheme.

**8** Any claim for return travel where the **insurer** has paid extra transport costs for **you** to return to **your home country**.

**9** Any costs for:

**a** telephone calls;

**b** booking, credit card and non-Sterling transaction fees; or

**c** administration costs.

**A policy excess** which will apply to this section, please refer to 'General exclusions'.

## Section E - Travel delay

### WHAT YOU ARE COVERED FOR

#### 1 Delayed departure or arrival

**a** If the departure of the aircraft, train or sea vessel in which **you** have arranged to travel is delayed for at least 8 hours from the departure time specified in the travel itinerary, or if the arrival of the aircraft, train or sea vessel at destination is at least 8 hours later than the time specified in the travel itinerary, due to **strike or industrial action**, disruption, adverse weather conditions, or mechanical breakdown of the aircraft, train or sea vessel.

The **insurer** will pay **£25** for each complete 8 hour period of delay commencing from the original booked departure time or arrival time specified in the travel itinerary up to **£100**.

**b** If the departure of the aircraft, train or sea vessel in which **you** have arranged to travel is delayed for at least 8 hours from the departure time specified in the travel itinerary due to **strike or industrial action**, adverse weather conditions or mechanical breakdown of the aircraft, train or sea vessel, and as a direct result, **you** elect to cancel the whole travel itinerary prior to departure.

The **insurer** will pay irrecoverable payments and charges made for the travel, accommodation, tours or excursions up to **£2,000**

#### 2 Hijack of aircraft

The **insurer** will pay compensation of **£100** per complete day that **you** are in detention due to unlawful seizure or wrongful exercise of control of an aircraft or the crew thereof, in which **you** are travelling as a passenger, up to **£3,000**.

#### 3 Missed departure

If **you** arrive at the point of international departure in **your home country** too late to commence the booked travel as the result of failure of scheduled public transport services in **your home country** due to inclement weather, **strike or industrial action**, disruption, or mechanical breakdown, or as a result of an accident to the motor vehicle in which **you** are travelling to the point of departure, the **insurer** will pay up to **£300** for additional travel and accommodation only expenses necessarily incurred by **you** in order to reach the booked outward destination (no cover for **your** return journey).

#### 4 Missed flight connection (Optional) - Up to £1,000

##### Note

This sub-section benefit is only applicable if the appropriate premium has been paid and is shown on the booking invoice or validation certificate (as applicable) and in addition to the cover granted under all other sections of this policy.

The **insurer** will pay up to **£1,000** for the cost of reasonable extra accommodation and travel expenses to allow **you** to carry on with **your** trip, if **you** arrive at **your** departure point on either the outbound or return leg of **your** trip too late to board **your** booked scheduled public transport due to **strike or industrial action**, adverse weather conditions which interrupts **your** booked scheduled public transport services including booked connecting flights.

### WHAT YOU ARE NOT COVERED FOR

#### Exclusions applicable to Section E

The **insurer** shall not pay for any claim arising directly or indirectly caused by, arising or resulting from, or in connection with:

**1 Strike or industrial action**, disruption, war, invasion, riot, or civil commotion in existence or publicised at the time of effecting the Insurance.

**2** The withdrawal from service (temporary or otherwise) of an aircraft or train or sea vessel on the recommendation of a port authority or the Civil Aviation Authority or of any similar body.

**3** Any claim for Missed flight connection when the appropriate additional premium has not been paid.

**4** Any claim for Missed flight connection when less than a minimum connection time of 2 hours between connecting flights at an international point of departure has been arranged (or longer if flight reservation systems require longer periods for connections).

**5 A policy excess** which will apply to sub-section E4 - Missed flight connections, please refer to 'General exclusions'.

**6** **You** may only claim for the same event under one sub-section under Section E and not under multiple sub-sections.



## Section F - Personal effects

### WHAT YOU ARE COVERED FOR

The **insurer** will pay for loss, theft or damage to:

#### 1 Baggage - Up to £2,000

The amount payable will be the value at today's prices less the deduction for wear, tear and depreciation.

#### 2 Personal money - Up to £500

Cash, bank or currency notes, including reasonable expenses incurred as a result of loss, theft or damage.

#### 3 Tickets - Up to £1,000

Air or other tickets including reasonable expenses incurred as a result of loss, theft or damage.

#### 4 Passport or visas - Up to £250

In respect of the cost of an emergency replacement or temporary passport or visa obtained whilst abroad including reasonable and receipted expenses incurred to obtain the same.

#### 5 Delayed baggage - Up to £100

If **baggage** is temporarily lost for more than 8 hours by an airline, railway or shipping company on the outward journey, for the purchase of immediate necessities the **insurer** will pay **you** up to **£100** supported by receipts, but this will be deducted from the final claim if the loss is permanent.

#### Note

In respect of cash cover will be effective from time of collection from bank or currency exchange agent, or for 3 days before commencement of journey, or from date of commencement of this insurance, whichever is later.

### WHAT YOU ARE NOT COVERED FOR

#### Exclusions applicable to Sections F and H

The **insurer** shall not pay for any claim directly or indirectly caused by, arising or resulting from, or in connection with:

1 Damage due to moth, vermin, wear and tear and gradual deterioration.

2 Loss, theft or damage to contact or corneal lenses, dentures or other aids or appliances cycles, wind or kite/surf boards or mobile telephones.

**Winter sports equipment** is excluded unless the appropriate premium has been paid and is shown on the booking invoice or validation certificate (as applicable).

3 Loss, theft or damage to property hired to **you** or confiscated by police, customs or other relevant authority.

4 Loss, theft or damage not reported whilst travelling overseas to the police or other relevant authority and a written statement obtained in confirmation.

5 The breakage of fragile or brittle articles being transported by a carrier, unless the breakage is due to fire or other accident to the vessel, aircraft or vehicle in which they are being carried.

6 Mechanical breakdown or derangement.

7 Loss, theft or damage to business or professional goods, equipment or samples.

8 Loss, theft or damage to money, or **valuables** left **unattended** (including in a vehicle or the custody of scheduled transport service providers including airlines), unless in a locked safe, a locked hotel room, locked apartment, or locked holiday residence. **Valuables** and money are not insured if left in 'checked in' baggage.

9 Shortages due to error or omission, depreciation in value.

10 A **policy excess** which will apply to this section, please refer to 'General exclusions'.

#### Provided that

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

1 **You** shall at all times act as if un-insured and shall exercise reasonable care for the safety and supervision of **your** property and in the event of loss, theft or damage hereunder **you** shall take all reasonable steps to recover any lost property.

2 The maximum the **insurer** will pay for any insured article shall be limited to **£250**, the value of a pair or set of articles shall be limited to **£250**, and the value of disc collections, including DVDs, electronic games and music discs shall be limited to **£200**. **You** shall produce receipts or other evidence of value and ownership where possible and in any event in respect of any item valued in excess of **£100**. Where this is not done liability shall be limited to **£100**.

### Provided that (continued)

**3** Loss, theft or damage whilst in the custody or control of a carrier, authority, transport company, garage or hotel must be reported in writing to them and written acknowledgement obtained.

**4** There is a maximum limit of **£350** in total in respect of all **valuables**.

**5** Payment for air tickets is limited to the original purchase price proportionately for each leg of the journey. Any loss, theft or damage of air tickets must be reported immediately to the issuing agent.

**6** Claims for loss, theft or damage to spectacles or sunglasses are limited to **£150** per pair. No **policy excess** shall apply.

**7** Your failure to comply with local authority advice when checking in **baggage** may result in a claim being reduced or declined.

## Section G - Legal expenses

### Section specific definitions

#### Legal expenses:

**1** Fees, expenses and other disbursements reasonably incurred (as determined by the **insurer's** legal counsel) by a **legal representative** in pursuing a claim or legal proceedings for damages and/or compensation against a third party who has caused **your** bodily injury, death or illness.

**2** Fees, expenses and other disbursements reasonably incurred (as determined by the **insurer's** legal counsel) by a **legal representative** in appealing or resisting an appeal against the judgment of a court tribunal or arbitrator.

**3** Costs that **you** are legally liable for following an award of costs by any court or tribunal or an out-of-court settlement made in connection with any claim or legal proceedings.

#### Legal representative

A solicitor, firm of solicitors, lawyer, or any appropriately qualified person, firm or company, appointed by the **insurer** to act on **your** behalf.

### WHAT YOU ARE COVERED FOR

#### Up to £50,000

If **you** suffer an incident that results in bodily injury, death or illness caused by a third party during the period of insurance, the **insurer** will indemnify **you** for **legal expenses** incurred in pursuit of a claim for damages or compensation against the third party up to **£50,000** for any one journey.

### WHAT YOU ARE NOT COVERED FOR

#### Exclusions applicable to Section G

**1** A **policy excess** will apply to this section, please refer to 'General exclusions'.

**2** The **insurer** will not pay for anything mentioned in the General exclusions section.

**3** The **insurer** will not pay any liability arising from:  
**a** Any claim reported to the **insurer** more than 12 months after the beginning of the incident which led to the claim;

**b** **Legal expenses** incurred in the defence against any civil claim or legal proceedings made or brought against **you**;

**c Legal expenses** incurred before receiving the **insurer's** prior written approval, unless such costs would have been incurred subsequently to the **insurer's** approval;

**d Legal expenses** incurred in connection with any criminal or wilful act committed by **you**;

**e Legal expenses** incurred for any claim or legal proceedings brought against:

i A travel agent, tour operator, carrier, **insurer** or their agent; or

ii The **insurer**, **you** or any company or person involved in arranging this policy; Fines, compensation or other penalties imposed by a court or other authority;

**g Legal expenses** incurred after **you** have not accepted an offer from a third party to settle a claim or legal proceeding where the offer is considered by all parties to be reasonable or **you** not accepting an offer from the **insurer** to settle a claim;

**h Legal expenses** which the **insurer** considers to be unreasonable or excessive or unreasonably incurred (as determined by the **insurer's** legal counsel);

Actions between individuals named on the booking invoice or validation certificate;

**Legal expenses** incurred in pursuing any claim for compensation against the manufacturer, distributor or supplier of any drug, medication or medicine.

### Provided that

**1** Written consent must be obtained from the **insurer** prior to incurring **legal expenses**. This consent will be given if **you** can satisfy the **insurer** that:

**a** there are reasonable (as determined by the **insurer's** legal counsel) grounds for pursuing or defending the claim or legal proceedings; and

**b** it is reasonable (as determined by the **insurer's** legal counsel) for **legal expenses** to be provided in a particular case.

The decision to grant consent will take into account the opinion of **your legal representative** as well as that of the **insurer's** own advisers. The **insurer** may request, at **your** own expense, an opinion of counsel as to the merits of the claim or legal proceedings. If the claim is admitted, **your** costs in obtaining this opinion will be covered by this policy.

**2** All claims or legal proceedings including any appeal against judgement resulting from the same original cause, event, or circumstance, will be regarded as one claim.

**3** If **you** are successful in any action, any **legal expenses** provided by the **insurer** will be reimbursed to the **insurer**.

**4** The **insurer** may at their discretion assume control at any time of any claim or legal proceedings in **your** name for damages and or compensation from a third party.

**5** The **insurer** may at their discretion offer to settle a claim with **you** instead of initiating or continuing any claim or legal proceedings for damages and or compensation from a third party, and any such settlement will be full and final in respect to the claim.

**6** The **insurer** may at their discretion offer to settle a counter-claim against **you** instead of continuing any claim or legal proceedings for damages and or compensation from a third party.

## Section H - Winter sports extension (Optional)

### WHAT YOU ARE COVERED FOR

#### Note

This section is only applicable if the appropriate premium has been paid and is shown on the booking invoice or validation certificate (as applicable) and in addition to the cover granted under all other sections of this policy.

#### Winter sports equipment - Up to £350

The **insurer** will pay up to the sum insured in respect of:

**a** loss, theft or breakage of **winter sports equipment** owned by **you**.

**b** loss, theft or breakage of **winter sports equipment** hired to and in **your** charge.

#### Note

There is a limit of **£250** for any single item, set or pair.

There is an overall limit of **£100** in respect of hired **winter sports equipment**. **You** will produce receipts or other evidence of value and ownership where possible and in any event in respect of any item valued in excess of **£100**. Where this is not done, the maximum payable shall be limited to **£100**.

Claims will in any event be settled on the basis of 20% depreciation each year for such items.

#### 2. Winter sports equipment hire - Up to £200

The **insurer** will pay up to the sum insured in respect of the cost of necessary hire of **winter sports equipment** following:-

**a** loss, theft or breakage of **your winter sports equipment**.

**b** The misdirection or delay in transit of **your winter sports equipment**, subject to **you** being deprived of their use for not less than 12 hours.

#### 3 Ski pack - Up to £300

The **insurer** will pay up to the sum insured in respect of the proportionate value of any ski pass, hire or tuition fee necessarily unused due to the following:

**a** **Your** accident or sickness (including being diagnosed with an **epidemic or pandemic** disease such as COVID-19);

**b** loss, theft or damage of ski pass.

#### Piste closure - Up to £200

The **insurer** will pay up to **£20** for each 24 hour period that it is not possible to ski, up to the maximum sum insured, for additional transport costs incurred to reach an alternative resort caused by a lack of snow or avalanche at an Insured's pre booked resort following the closure of skiing facilities.

#### 5 Avalanche closure - Up to £150

The **insurer** will pay up to the sum insured in respect of additional travel and accommodation expenses necessarily incurred in the event that the outward or return journey by public transport is delayed beyond the scheduled arrival time as a direct result of avalanche. Subject to a delay of not less than 12 hours having occurred.

#### Note

This winter sports extension is subject to the same conditions and exclusions as Section F Personal effects, other than the exclusion of hired **winter sports equipment**.

## WHAT YOU ARE NOT COVERED FOR

### Exclusions applicable to Section H

The **insurer** shall not be liable for any claim directly or indirectly caused by, arising or resulting from, or in connection with:

- 1 Occurrences detailed above that do not occur during the period of insurance.
- 2 **You** participating in ski-racing, ski-jumping, ice hockey, or the use of bob sleighs or skeletons.
- 3 **Winter sports equipment** hire, Ski pack, Piste closure or Avalanche benefits above not supported by documentary evidence.
- 4 The loss, theft or damage of **winter sports equipment** over five years old.
- 5 loss, theft or damage to **winter sports equipment** carried on a vehicle roof rack.
- 6 loss of or damage to **winter sports equipment** whilst in use.

7 Piste closure outside the months that constitute the local regular ski season.

8 **A policy excess** which will apply to this section, please refer to 'General exclusions'.

#### Note

Winter sports activities using a recognised piste are only insured if the appropriate premium has been paid and is shown on the booking invoice or validation certificate (as applicable).

Random 'off piste' winter sports activities will only be insured if, in addition to the requirement noted above, they are with a qualified instructor or in a group of not less than three persons in possession of working communications or portable telephones.

There is no cover for winter sports activities against local authority advice.

## Geographical areas

### United Kingdom (UK) only

Whilst insurance is available for holidays in the UK (England, Scotland, Wales and Northern Ireland), Section A - Emergency medical expenses shall not apply.

### Europe

Europe means the continent of Europe west of the Ural Mountains, and includes the Isle of Man, the Channel Islands, Iceland, Jordan, Madeira, Republic of Ireland, the Canary Islands, Azores and Mediterranean Islands, as well as the countries bordering the Mediterranean.

### Worldwide excl North America & Mexico

North America means the USA and Canada.

**a** For any period of cover purchased Area 3 can include a single day/night stop-over anywhere in the world for both outward and return travel.

**b** If the period of cover purchased is two months or more Area 3 can be extended to include a maximum of 6 days/nights anywhere in the world.

### Worldwide incl North America & Mexico

## Annual multi-trip policies

When the Annual multi-trip premium has been paid and this is shown on the booking invoice or validation certificate (as applicable) the **insurer** will cover all trips made by **you** during the period of insurance:

- a** To destinations outside of **your home country**, but within the Geographical area **you** have paid for and:
- b** Within **your home country** if such a trip includes at least two nights pre-booked accommodation.

### Subject to the following:

1 Worldwide policies - the maximum duration of any one trip shall not exceed 70 days or 31 days if aged 66 or more at the date of payment of insurance premium.

Europe policies - the maximum duration of any one trip shall not exceed 31 days, irrespective of age. Any trip which is known to be longer than the maximum duration of any one trip as stated is not insured for any part of such trip.

2 Each trip shall be deemed to be a separate insurance subject to the term, conditions, limitations and exclusions contained herein.

3 **Your** children can be included without charge, including independent travel, provided they are 18 years or under, or 21 years or under and in full time education at the date of payment of the insurance premium, and **you** have requested that their name be included on the booking invoice or validation certificate (as applicable).

4 Cover for Section H - Winter sports extension is available for up to a total of 32 days in all during the period of this insurance, but only when the appropriate additional premium has been paid and this is shown on the booking invoice or validation certificate (as appropriate).

5 Annual multi-trip policies are not available to people aged 70 years or more at the date of payment of insurance premium, unless **we** agree in writing.

# Sporting and adventurous activities

---

Subject to the exclusions of this policy, the following recreational non-professional (amateur) and non-competitive activities are automatically covered at standard premiums.

To establish if cover can be provided for any professional or competitive activities please refer to Campbell Irvine for a quotation, as an additional premium may be payable. Tel: **UK +44 (0)207 938 1734**.

Abseiling / Rap jumping (supervised)	Mountain boarding
Aerobics	Netball
Archery	Non-manual work
Athletics	Orienteering
Backpacking	Outward bound pursuits
Baseball/Rounders/Softball	Overland travel
Battle re-enactment (no live ammunition)	Paddle boarding
Banana boating	Paintballing
Basketball	Parascending/Parasailing
Boogie boarding	Racquet sports
Bouldering	Roller blading/Ice skating
Bowls	Rowing
Breathing observation/Bubble diving	Running/Jogging
Bridge walking	Safari/Gorilla trekking
Bungee jumping (maximum 2 jumps)	Safari travel (in a vehicle, horseback or on foot)
Canoeing/Kayaking (fresh water/sea)	Sailing
Canyoning/Kloofing	Scuba diving (up to 40 metres in depth) excl solo diving)
Cricket	Shark cage diving
Cross country skiing/langlaufen	Shooting
Curling	Snorkelling
Cycling (cycles not covered)	Snow shoeing (guided)
Dog sledding	Surfing (surf board excluded from policy)
Drag Hunting	Swimming (excluding long distance in open water)
Dragon boating	Table tennis
Dune/Wadi bashing	Tall ship crewing
Falconry	Trampolining
Fell/Gorge running/walking (on recognised routes)	Tree canopy walks
Fencing	Trekking/Rambling/Hiking - under 5,000 metres (recognised routes only)
Field hockey	Trekking/Rambling/Hiking - 5,000 to 7,000 metres (when guided and on recognised routes only)
Fishing (Course/Fly/Deep-sea)	Triathlon
Football (Soccer)	Tug of war
Go karting	Tubing
Golf	Via ferrata
Gorge swinging	Volleyball
Guided glacier walking	<b>Volunteering</b> (as defined)
Gymnastics	Wake boarding/Water skiing
Helicopter rides (as passenger only)	Wall climbing (man made climbing walls)
Horse riding or riding other animals	Water polo
Hot air ballooning (as passenger only)	White/Black water rafting or Canoeing
Hurling	Windsurfing (boards not covered)
Hydro speeding	Wing surfing
Jet boating	Zip lining
Jet skiing	Zorbing
Marathon running	
Mountain biking (cycles not covered)	

# Claims checklist

---

The following documentation (if applicable) will be required by the Claims Handlers, in order that a claim may be processed.

Originals will be required, as settlement cannot be made with photocopied documents. Further documentation may be required depending on the individual circumstances of **your** claim.

Please note the policy does not cover the cost of obtaining duplicate receipt or medical certificates.

## For all sections of cover you will be required to submit:

- **Your** booking invoice or validation certificate confirming proof of payment of the insurance premium.
- **Your** travel trip itinerary confirming dates of travel.
- **Your** travel booking confirmation receipt(s) showing the date of original booking and amount paid.
- Travel/air tickets.

## For Cancellation or curtailment:

- **Your** cancellation invoice.
- Completed medical certificate if cancellation for medical reasons (which can be found on the claim form).
- Copy of death certificate.
- Redundancy letter.
- Evidence from treating **doctor** confirming curtailment was medically necessary (curtailment only).

## For Personal effects:

- Receipts or other evidence to support ownership and value for the items claimed.
- Baggage check tags.
- A written report from the person / company to whom the loss was reported whilst travelling overseas (e.g. police report).
- Proof of date and time **baggage** was returned to **you** (baggage delay claims only).
- Evidence to support damage (e.g. repairers report of total loss or damage).

## For Emergency medical expenses:

- Original receipts.
- Medical evidence to support nature of illness or injury.
- Evidence of hospital admission and discharge.
- Additional travel tickets.

## For Travel delay (Delayed departure/arrival, Missed departure, Missed flight connection):

- Replacement tickets and invoices /receipts.
- A letter from the airline (or similar) confirming the scheduled and actual time of departure including the official cause of the delay.

## Important contact details

---

**24-hr Emergency medical assistance:**

(for medical emergency or curtailment requests)

Call: **+44 (0)203 667 2998**

Visit: **[internationalhealthcare@healix.com](mailto:internationalhealthcare@healix.com)**

**Customer services:**

Call: **+44 (0)207 938 1734**

**Medical screening helpline:**

(to declare a condition or change in your circumstances)

Call: **+44 (0)1702 427 237**

Visit: **[www.policyscreening.com/cidirect](http://www.policyscreening.com/cidirect)**

**Claims:**

Call: **+44(0)208 667 8987**

Visit: **<https://rpclaims.com/cid>**