

Clear 2Go

Travel Insurance Policy

Making Insurance Accessible for those
With more serious pre-existing conditions

MIA

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Introduction

Welcome to your Clear 2 Go Travel Insurance policy

Please note: Terms shown in bold in this policy have the meanings given to them in the general definitions section on pages 16 and 17.

This policy wording is only valid when issued in conjunction with a MIA Online **policy certificate** and provided the required insurance premium has been paid.

The following cover is provided for each **insured person**. It is important that **you** refer to the individual sections of cover for full details of what **you** are entitled to should **you** need to make a claim. **Your policy certificate** will also show whether **you** have purchased any additional sections of cover as outlined in the following tables.

If **your trip** is solely within the **United Kingdom**, cover under some of the sections listed below will not apply. Please refer to the individual section within the policy wording for full details.

Claims arising from alcohol - **We** do not expect **you** to avoid alcohol during **your trip**, but **we** will not cover any claim arising from excessive alcohol consumption, by which **we** mean where **you** have drunk so much alcohol that **you** have notably impaired **your** faculties and/or judgement and **you** need to make a claim. Please refer to general exclusions 23, 24 and 25 on page 20.

Eligibility

This policy is only available to **you** if:

- **You** are permanently resident in the **United Kingdom** and have **your** main **home** in the **United Kingdom**;
- **You** are registered with a **doctor** in the **United Kingdom**;
- **You** have a UK National Insurance number (where aged 16 years of age or older);
- **You** are in the **United Kingdom** at the time of purchasing this policy. Any **trip** that has begun when **you** purchase this insurance will not be covered;
- **You** are not travelling against the advice of a **doctor** or where **you** would have been if **you** had sought their advice before beginning **your trip**;
- **Your trip** starts and ends in the **United Kingdom**.

Age Eligibility

The person buying this insurance must be 18 years of age or over at the date of purchase.

All **insured persons** must be 100 years of age or under at the date of buying this insurance.

Table of benefits

Section	Benefits	Maximum limit per person	Excess* per person
A	Cancelling your trip	£1,000	£150
B1	Medical and other expenses outside of the United Kingdom	£5,000,000	£150
	Emergency dental treatment	£250	£75
	Additional accommodation & travel costs	£2,000	Nil
B2	Expenses within the United Kingdom	£15,000	£150
C	Cutting your trip short	£1,000	£150
D	Missed departure	£1,000	£50
E1	Personal belongings and baggage	£1,500	£75
	Including: One item/pair or set of items limit	£300	
	Including: Valuables and electronic/other equipment limit	£300	
	Including: Property in a motor vehicle Limit	£100	
E2	Delayed baggage	£150 after each 12 hour period of delay up to £300	Nil
E3	Personal money	£500	£75
	Including: Cash limit	£300	
	Including: Cash limit if 17 years of age or under	£75	
E4	Passport and travel documents	£500	£75
F	Personal liability	£2,000,000 (per policy)	Nil
G	Legal expenses	£10,000 (per policy)	£150
Winter sports cover - only available if included on your policy certificate and you pay the required extra premium.			
H1	Winter sports equipment (you own)	£1,000	£75
	Including: One item/pair or set of items limit	£1,000	
	Hired winter sports equipment	£400	
H2	Winter sports equipment hire	£15 for each 24 hour period up to £150	Nil
H3	Lift pass	£250	Nil
H4	Ski pack	£20 for each 24 hour period up to £200	Nil
H5	Piste closure	£30 for each 24 hour period up to £300	Nil
H6	Avalanche cover	£30 for each 24 hour period up to £300	Nil

Table of benefits (continued)

Section	Benefits	Maximum limit per person	Excess* per person
Mobility equipment cover - only available if included on your policy certificate and you pay the required extra premium.			
I1	Mobility equipment (you own) Including: One item/pair or set of items limit Hired mobility equipment	£5,000 £2,500 £2,500	£75
I2	Mobility equipment hire	£75 for each 24 hour period up to £750	Nil
Replacement carer cover - only available if included on your policy certificate and you pay the required extra premium.			
J	Replacement carer	£2,000	£75
Child carer cover - only available if included on your policy certificate and you pay the required extra premium.			
K	Child carer	£2,000	£75

Excess*

If **you** need to make a claim under certain sections listed in the table above, **we** will deduct the amount shown in respect of the policy excess from the sum **we** pay **you** for any valid claim. The excess will apply to each person claiming, and to each incident and to each section of the policy under which a **claim** is made. When dealing with claims under section A where a **claim** is being made for cancelling more than one **trip** due to one incident, an excess for each person claiming and for each **trip** will be deducted.

General information about this insurance

Insurance provider

This insurance is underwritten by Chaucer Insurance Company DAC.

Chaucer Insurance Company DAC are authorised and regulated by the Central Bank of Ireland and registered in the Republic of Ireland. Registered office: 38 & 39 Baggot Street Lower, Dublin 2, D02 T938, Ireland.

This policy is sold and administered by MIA Online. Clear 2 Go Travel Insurance and MIA Online are trading names of Brokersure Ltd which is authorised and regulated by the Financial Conduct Authority (FCA 501719). This can be checked by visiting the Financial Services Register (www.fca.org.uk).

Your travel insurance

This policy wording along with **your policy certificate** and any appropriate endorsements forms the basis of **your** contract of insurance with **us**. Together, these documents detail and explain what **you** are covered for and what **you** are not covered for.

Additional sections of cover will apply if the **policyholder** has paid the required premium for policy upgrades.

Please read this policy wording to make sure that the cover meets **your** needs and please check the details outlined within **your policy certificate** and any applicable endorsements to make sure that the information shown is correct.

Residency

You and all other persons insured on this policy must have **your** main **home** in the **United Kingdom** and have a **United Kingdom** National Insurance number (when aged 16 years of age or older) and be registered with a **doctor** in the **United Kingdom** at the time **you** buy this policy.

Residents of the Isle of Man must have their main **home** in the Isle of Man and be registered with a local **doctor**.

Law and jurisdiction

This policy will be governed by English Law and **you**, **insured persons** and **we** agree to submit to the courts of England and Wales to determine any dispute arising under or in connection with it, unless agreed to the contrary by **you** and **us** before the commencement date. The Terms and Conditions of this policy will only be available in English and all communication relating to this policy will be in English.

Important conditions relating to health

This policy contains conditions relating to **your** health. **You** must comply with the disclosure of **your medical conditions** as stated on pages 5, 6 and 7.

BE AWARE! We do not provide any cover for the following unless agreed with us in writing:

- Psychological conditions such as stress, anxiety, depression, eating disorders or mental instability.
- Any **medical condition** for which **you** have received a terminal prognosis.
- Any **medical condition you** are aware of but for which **you** have not had a diagnosis.
- Any **medical condition** for which **you** are on a waiting list for, or referred to a specialist or a consultant, or have the knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home.
- Claims caused by an **existing medical condition** of a non-travelling close **relative**, close **business associate** or friend living abroad who **you** had planned to stay with, or any known or recognised complication of or caused by the **existing medical condition**.
- Any circumstances that are not specified in **your** policy.

Please note that if **we** do agree to cover a **medical condition** for which **you** are on a waiting list for, or referred to a specialist or a consultant, or have the knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home, **you** are not covered if **you** have to cancel or curtail **your trip** because an appointment or treatment becomes urgently available.

You should also refer to 'General exclusions' on pages 19 and 20 - applicable to all sections of the policy.

Important conditions relating to health

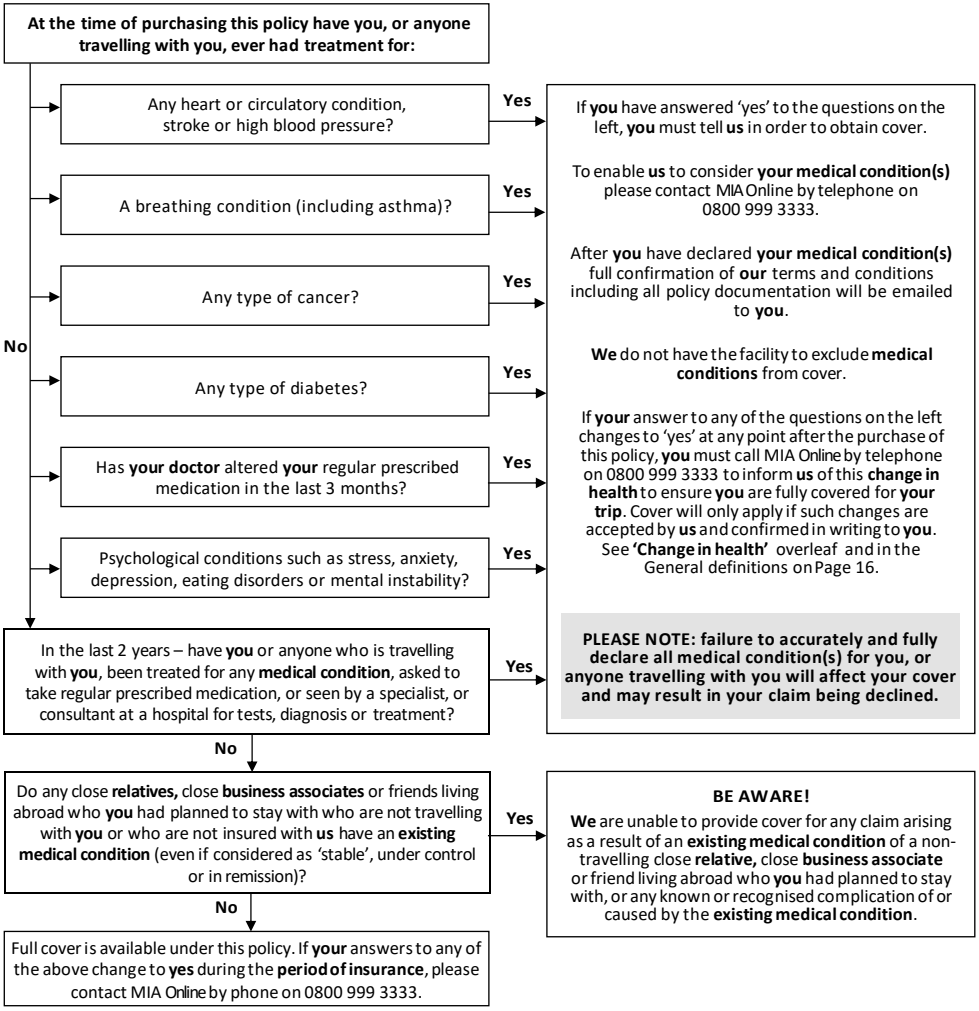
Disclosure of your medical conditions

Your policy may not cover claims arising from **your medical conditions**. If **you** answer 'yes' to any of the questions below then **you** must declare the relevant conditions to **us** at MIA Online. **We** will ask you a series of questions relating to your health and may also require a letter from **your Medical Practitioner** confirming **you** are fit to travel/fit to fly.

So that **we** can ensure **you** are provided with the best cover **we** can offer please read and answer the following questions accurately and carefully.

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

Failure to accurately and fully declare all **medical condition(s)** for **you**, or anyone travelling with **you** will affect **your** cover and may result in **your** claim being declined.



Important conditions relating to health

CHANGE IN HEALTH

If **your** health or **your** ongoing medication changes between the date **your** policy was purchased and the date of travel **you** must advise MIA Online by phone on 0800 999 3333 as soon as possible. **We** will advise **you** what cover **we** are able to provide.

Following **your change in health we** reserve the right to exclude the condition or withdraw the cover should the stability of the condition make it necessary (please refer to 'General definitions' for more information).

If **we** cannot cover **your medical conditions**, **we** will give **you** the choice of either:

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

How we use personal information

We will use the information from **your** policy for the purpose of providing **you** with insurance services and additional products and services. **We** fully accept **our** responsibility to promote the privacy of customers and the confidentiality and security of information entrusted to **us**.

The information provided by or on behalf of **you** when the policy was taken out, together with other information, will be used by **us**, **our** Group companies and **our** service providers and agents. It will be used for administration, customer service and claims.

It may also be used for the purpose of fraud prevention including passing details to other insurers and regulatory bodies. **You** have provided information in connection with the purchase and performance of this insurance policy and **you** have consented to the processing of the personal data, including sensitive personal data and **you** have consented to the transfer of this information abroad.

Unless **you** have informed **us** otherwise, **we** or **our** service providers and agents may contact **you** by mail or telephone to let **you** know about any goods, services or promotions that may be of interest to **you** and/or share **your** information with organisations that are **our** business partners. Under the UK Data Protection Act 2018 which incorporates the General Data Protection Regulation (EU)2016/679, **you** have certain rights regarding access to **your** information. **You** have the right to see a copy of the personal information held about **you**, if **you** believe that any of the information **we** are holding is incorrect or incomplete, please let **us** know as soon as possible. Any information which is found to be incorrect will be corrected promptly.

We may monitor and/or record communication with **us** either directly or by reputable organisations selected by **us**, to ensure consistent servicing levels and account operation.

We will keep information about **you** only for as long as is appropriate.

In certain circumstances, **we** may need **your** consent to process certain categories of information about **you** (including sensitive details such as information about **your** health). Where **we** need your consent, **we** will ask **you** for it separately. **You** do not have to give **your** consent and **you** may withdraw **your** consent at any time. However, if **you** do not give **your** consent, or **you** withdraw **your** consent, this may affect **our** ability to provide the insurance cover from which **you** benefit and may prevent **us** from providing cover for **you** or handling **your** claims.

Want more details?

For more information about how **we** use your personal information please see **our** full privacy notice(s), which is/are available online on **our** website www.chaucerplc.com/privacy-cookie-policy/ or in other formats on request. If **you** require details of MIA Online's privacy policy, this can be found online at https://quote.miatravelinsurance.co.uk/privacy-policy.

UK Data Protection Act 2018 which incorporates the General Data Protection Regulation (EU)2016/679.

Financial Services Compensation Scheme (FSCS)

We are covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from the scheme (depending on the type of insurance and the circumstances of the claim) if **we** are unable to meet **our** financial obligations under this policy. A claim under this type of insurance is covered for 90% of the claim without any upper limit.

Further information about the compensation scheme is available from: Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU. Tel: 020 7741 4100 or 0800 678 1100 Website: www.fscs.org.uk

Health agreements

EU EEA or Switzerland

If **you** are travelling to a country in the European Union, **you** are strongly advised to take a European Health Insurance Card (EHIC) with **you**. Application forms to obtain an EHIC are available from **your** local post office or **you** can download an application form from the following website: **www.ehic.org.uk**. This entitles European citizens to benefit from the health agreements which exist between countries in the European Union. If **you** already hold an EHIC please check it is valid for **your trip**. In the event of liability being accepted for a medical expense which has been reduced as a direct result of **you** presenting **your** European Health Insurance Card to the medical facility at the time of treatment **we** will not apply the deduction of the excess under section B1 (Medical and other expenses outside of the United Kingdom).

Australia or New Zealand

If **you** require medical treatment in Australia, **you** must enrol with a local MEDICARE office. **You** do not need to enrol on arrival, but **you** must do this after the first occasion **you** receive treatment. Inpatient and out-patient treatment at a public hospital is then available free of charge. Details of how to enrol and the free treatment available can be found by visiting the MEDICARE Website on www.humanservices.gov.au/medicare or by emailing: medicare@humanservices.gov.au.

If **you** require medical treatment in New Zealand, there are reciprocal agreements, but a person may not enrol with a Primary Health Organisation (PHO). They should get the same health subsidies as a New Zealand citizen visiting a general practitioner as a casual patient, if the **doctor** has decided the condition needs prompt attention. For more information, please go to www.health.govt.nz or email: info@health.govt.nz.

Alternatively, please call the Medical Emergency Assistance Company for guidance.

If **you** are admitted to hospital contact must be made with the Medical Emergency Assistance Company as soon as possible and their authority obtained in respect of any treatment NOT available under MEDICARE or a Primary Health Organisation (PHO).

In the event of liability being accepted for a medical expense which has been reduced by the use of either a EHIC, Medicare in Australia or private health insurance, **we** will not apply the deduction of the policy excess under section B1 (Medical and other expenses outside of the United Kingdom).

Travel delays - EC Regulations

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

If **your** flight is cancelled, **you** must approach **your** airline and clarify with them what costs they will pay under the Regulation.

If **you** would like to know more about **your** rights under this Regulation, additional useful information can be found on the Civil Aviation Authority website (**www.caa.co.uk**).

Sports and activities

Any involvement in the following sports and/or activities is subject to **your** compliance with local laws and regulations and the use of recommended safety equipment (such as a helmet, harness, knee and/or elbow pads, life jacket etc…). If you have a **medical condition you** must ensure that **your** usual treating G.P. is happy for **you** to participate in such activity. Please note the policy terms and conditions will still apply in all other respects. Please also refer to the 'General conditions' on page 18 and 'General exclusions' on pages 19 and 20.

This policy automatically covers **you** to undertake the activities listed below on a recreational and amateur basis.

Animal Sanctuary/Refuge Work	Diving (indoor up to 5 metres)	Biking (not downhill or freeriding)	Sleigh riding (reindeer, horses or dogs)
Archery	Elephant Trekking (UK-Booked)	Netball	Snooker
Athletics	Fell Walking	Petanque	Snorkelling
Badminton	Flag football	Pigeon racing	Softball
Ballooning - Hot Air	Football	Pony Trekking	Squash
Banana Boating	Fresh Water/Sea Fishing	Pool	Stoolball
Bar Work	Frisbee	Quoits	Surfing
Basketball	Fruit or Vegetable Picking	Rackets	Swim Trekking
Beach Games	Glass Bottom Boats	Racquet Ball	Swimming
Biathlon	Golf	Rafting (Grade 1 rivers only)	Swimming with Dolphins
Billiards	Gymnastics	Rambling	Sydney Harbour Bridge
Bird Watching	Highland games	Restaurant Work	Table Tennis
Body Boarding	Hiking/Trekking/Walking up to 1500m excluding the use of ropes or guides.	Ringo's	Ten Pin Bowling
Bowling	Horse Riding (no hunting, jumping or polo)	River Walking	Tennis
Bowls	Ice Skating	Road Cycling	Tubing
Bungee Jumping (maximum of 2 jumps)	Jet Boating	Rounders	Tug of War
Camel/Elephant Riding	Jet Skiing	Rowing	Volleyball
Camping	Jogging	Running Sprint/Long Distance	Wake Boarding
Canoeing/Kayaking -cover included for White water rafting up to Grade 2 rivers.	Keepfit	Safari (UK Organised)	Water Skiing
Catamaran Sailing (In-shore)	Kiting	Sail Boarding	Whale Watching
Clay Pigeon Shooting	Korfball	Sailing/Yachting inshore (recreational)	Windsurfing
Cricket	**Manual Labour** (Office and clerical work, bar and restaurant work, music performance and singing, fruit picking (not involving the use of machinery)	Scuba Diving to 30m if qualified and not diving alone or down to 18 metres if not qualified and must be accompanied by a qualified instructor	Working (non-manual)
Croquet	Marathons (Maximum of 2 and not extreme marathons)	Sea Fishing	Yachting (inland and coastal waters)
Curling	Model Flying	Shooting	Yoga
Dancing	Model Sports	Shooting (target range-not hunting)	
Darts	Motorcycling (EU Only - on road wearing a helmet provided **you** hold an appropriate **UK** licence for the capacity of the motorcycle **you** are riding)	Sledging/Tobogganing	

If the activity in which **you** are participating is not listed or **you** are participating in anything other than on a recreational or amateur basis, please contact MIA Online on 0800 999 3333.

Cruises

There is no cover provided for **cruises** unless **you** have paid the appropriate additional premium and cover is shown on **your policy certificate**. In any event there is no cover for cargo ship travel.

Cancellations and refunds

Your right to cancel the policy within 14 days of purchase

If this cover is not suitable for **you** and **you** want to cancel **your** policy, the **policyholder** must contact **us** by phoning 0800 999 3333, emailing info@miatravelinsurance.co.uk or by writing to MIA Online, Digital House, Threshelfords Business Park, Inworth road, Feering, Essex CO5 9SE within 14 days of buying **your** policy or the date **you** receive **your** policy documents. In line with the conditions below **we** will refund the premium the **policyholder** has paid within 30 days of the date **you** contact MIA Online Customer Services to ask to cancel the policy.

We will not refund the premium if **you** have travelled or made a claim before **you** asked to cancel the policy within the 14-day period.

Your right to cancel the policy outside the 14-day cooling-off period

If **you** decide this cover is no longer suitable for **you** and **you** want to cancel **your** policy after the 14 day cooling -off period, the **policyholder** must contact MIA Online Customer Services by phoning 0800 999 3333 or by e-mailing info@miatravelinsurance.co.uk or by writing to MIA Online, Digital House, Threshelfords Business Park, Inworth road, Feering, Essex CO5 9SE. In line with the terms outlined below **we** will refund a proportion of the premium the **policyholder** has paid within 30 days of the date **you** contact MIA Travel Insurance Customer Services to ask to cancel the policy.

If **you** have not travelled or made a claim before **you** asked to cancel the policy, the **policyholder** will be entitled to a refund of the premium paid, subject to deduction of 30% of the premium paid to represent the period during which **you** have been on risk for cancellation cover plus a £15 administration fee.

Our right to cancel the policy

We have the right to cancel this policy by giving at least 30 days' notice in writing to the **policyholder** at their last known address where **we** have serious grounds for doing so, including any failure by **you** to comply with the conditions on page 18 of this policy which is incapable of remedy or which **you** fail to remedy within 14 days of receiving a notice from **us** requiring **you** to remedy the breach. A proportionate refund of the premium paid will be made to the **policyholder** from the date **we** cancel the policy.

Age limits

The person buying this insurance must be 18 years of age or over at the date of purchase.

All **insured persons** must be 100 years of age or under at the date of buying this insurance.

Winter Sports cover is only available if **you** are age 65 years or under.

Cover options available

Types of cover and durations

Single trip

This gives **you** cover to travel on one **trip** made by **you** within the geographical areas as shown on **your policy certificate** if **you** are 100 years of age or under.

Upgrades - The following upgrades are available by paying an additional premium:

Winter sports

Please see page 31 for a list of **winter sports** activities which are covered by this policy if **you** have paid the appropriate additional premium and cover is shown on **your policy certificate**. If the **winter sport you** intend to take part in is not shown in the list, please check that cover will be provided by contacting MIA Online Customer Services on 0800 999 3333 or by e-mailing info@miatravelinsurance.co.uk. Please see section H for full details of cover. Winter sports cover is only available to insureds age 65 years or under.

Cruises

This policy can be extended to cover **you** on a **cruise** provided **you** contact MIA Online Customer Services on 0800 999 3333 or by e-mailing info@miatravelinsurance.co.uk and **you** having paid the appropriate additional premium and cover is shown on **your policy certificate.**

Mobility equipment

This policy can be extended to cover **your** mobility equipment provided **you** contact MIA Online Customer Services on 0800 999 3333 or by e-mailing info@miatravelinsurance.co.uk and **you** having paid the appropriate additional premium and cover is shown on **your policy certificate.**

Replacement carer

This policy can be extended to provide cover for a replacement **carer**, should **your carer** fall ill or is injured during **your trip** and **you** are unable to look after **yourself.** This is subject to **you** having paid the appropriate additional premium and cover being shown on **your policy certificate.** To arrange cover, **you** should contact MIA Online Customer Services on 0800 999 3333 or by e-mailing info@miatravelinsurance.co.uk .

Child carer

This policy can be extended to provide cover for a replacement **carer** for **your child/children**, should **you** fall ill or are injured during **your trip** and **you** are unable to look after **your child/children yourself.** This is subject to **you** having paid the appropriate additional premium and cover being shown on **your policy certificate.** To arrange cover, **you** should contact MIA Online Customer Services on 0800 999 3333 or by e-mailing info@miatravelinsurance.co.uk .

Geographical areas

One of the following areas will be shown on **your policy certificate**. This describes the area of the world which this policy provides cover for **you** to travel to.

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

United Kingdom - England, Scotland, Wales, Northern Ireland and the Isle of Man.

Europe 1 - Austria, Belgium, Bulgaria, Croatia, Cyprus (not Northern Cyprus), Czech Republic, Denmark (including Faroe Islands), Estonia, Finland, France (including Corsica), Germany, Gibraltar, Hungary, Iceland, Ireland, Italy (including Aeolian Islands, Sardinia, Sicily), Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway (including Jan Mayen, Svalbard Is), Poland, Portugal (including Azores, Madeira Islands), Romania, Slovakia, Slovenia, Spain (including Balearic and Canary Islands), Sweden and Switzerland.

Europe 2 - Those countries listed above in Europe 1 and including: Albania, Andorra, Armenia, Azerbaijan, Belarus, Bosnia-Herzegovina, **Channel Islands**, Egypt, European **Cruises**, Georgia, Greece (including Greek Isles), Liechtenstein, Macedonia, Moldova, Monaco, Morocco, Northern Cyprus, Russia (European), San Marino, Serbia/Montenegro (including Kosovo), Tunisia, Ukraine and Vatican City.

Australia, New Zealand and Cook Islands

Worldwide - excluding Australia, New Zealand, Cook Islands, Canada, Caribbean, Mexico and USA

Worldwide - including Australia, New Zealand, Cook Islands, Canada, Caribbean, Mexico and USA

Please note:

- No cover is provided under this policy for any **trip** in, to, or through Afghanistan, Liberia or Sudan.
- No cover is provided for claims arising as a direct result of a situation highlighted by the Foreign and Commonwealth Office where **you** have travelled to a specific country or to an area where, prior to **your trip** commencing, the Foreign and Commonwealth Office have advised against all (but essential) travel.
- A stopover of up to a maximum of 72 hours is allowed in **Worldwide – excluding Canada, Caribbean, Mexico and USA** if travelling to **Australia, New Zealand and Cook Islands.**

Period of cover

On single trip policies cover for cancellation starts at the time **you** book the **trip** or pay the insurance premium, whichever is later. Cover for cancellation ends as soon as **you** start **your trip**.

Cover under all other sections starts when **you** leave **your home** address in the **United Kingdom** (but not earlier than 24 hours before the booked departure time) or from the first day of the **period of cover** as shown on **your policy certificate**, whichever is the later.

Cover ends when **you** return to **your home** address in the **United Kingdom** (but not later than 24 hours after **your** return to the **United Kingdom**) or for single trip policies at the end of the **period of cover** as shown on **your policy**

certificate, whichever is earlier.

Any **trip** that had already begun when **you** purchased this insurance will not be covered.

Each **trip** must begin and end in the **United Kingdom**.

Cover is only provided in the **United Kingdom** if **you** stay in accommodation which **you** have paid for in advance of the date **you** depart on **your trip** or if **you** have paid for **public transport** or air fares in advance of the date of departure to enable **you** to reach **your** destination in the **United Kingdom**. All **trips** within the **United Kingdom** must be for at least one night away from **home**.

Trip extensions if you decide you wish to extend your trip whilst overseas

If, once **you** have left the **United Kingdom** and before the end of the **period of cover**, **you** decide **you** want to extend **your** policy, please contact MIA Online Customer Services on 0800 999 3333 or by e-mailing: info@miatravelinsurance.co.uk.

Extensions can usually only be considered if there has been no change in **your** health (or that of a **relative** or **business associate**) and no claim has been made or is intended to be made and no incident likely to give rise to a claim has occurred. However, should there have been a change in **your** health or **you** are aware that a claim has been made or will need to be made under the original policy then **we** may still be able to consider the extension provided full details are disclosed to MIA Online Customer Services for consideration.

Trip extensions if you are unable to return home from your trip as planned

If, due to unexpected circumstances beyond **your** control, for example, due to illness or injury or unavoidable delays affecting **your** return flight or **public transport**, **your trip** cannot be completed within the **period of cover** outlined in **your policy certificate**, cover will be extended for **you** at no extra cost for up to 30 days. This also applies to one person travelling with **you** who is authorised to stay with **you** by the Medical Emergency Assistance Company if the extension is due to medical reasons. All requests for more than 30 days must be authorised by the Medical Emergency Assistance Company. Please see Medical and other emergencies on page 13 for details of how to contact the Medical Emergency Assistance Company.

Medical and other emergencies

Your Clear 2 Go policy is not a private medical insurance policy and does not cover private medical treatment, private hospital costs or other related expenses incurred unless these have been specifically agreed and authorised by the Medical Emergency Assistance Company.

The Medical Emergency Assistance Company will provide immediate help if **you** are ill, injured or die outside the **United Kingdom**. They provide a 24-hour emergency service 365 days a year. The contact details are as follows:

Phone: +44 (0) 20 3824 0742 E-mail: operations@emergencyassistance.co.uk

Please have the following information available when **you** (or someone on **your** behalf) contact the Medical Emergency Assistance Company so that **your** case can be dealt with swiftly and efficiently:

- **Your** name and address;
- **Your** contact phone number abroad including the hospital and treating **doctors'** details;
- **Your** policy number shown on **your policy certificate**; and
- The name, address and contact phone number of **your** GP.
- Quote the scheme name which is: Clear 2 Go.

Please note: This is not a private medical insurance. If **you** go into hospital abroad and **you** are likely to be kept as an inpatient for more than 24 hours or if **your** outpatient treatment is likely to cost more than £500, someone must contact the Medical Emergency Assistance Company for **you** as soon as reasonably possible. If they do not, **we** may not provide cover or **we** may reduce the amount **we** pay for **your** inpatient or outpatient treatment.

In the event that **you** require in-patient hospital treatment and/or evacuation/repatriation, it is imperative that the Medical Emergency Assistance Company is contacted and authorisation obtained prior to such treatment and/or evacuation/repatriation taking place.

Failure to contact the Medical Emergency Assistance Company and obtain authorisation may prejudice the claim and could mean that some or all of the costs involved may not be paid. **You** should not attempt to find **your** own solution and then expect full reimbursement from **us** without prior approval first having been obtained from the Medical Emergency Assistance Company.

If **you** have to return to the **United Kingdom** under section C (Cutting your trip short) or section B1 (Medical and other expenses outside of the United Kingdom) the Medical Emergency Assistance Company must authorise this. If they do not, **we** may not provide cover or **we** may reduce the amount **we** pay for **your** return to the **United Kingdom**.

You must contact the Medical Emergency Assistance Company for authorisation of an alternative carer for **you** during the remainder of **your trip**, and/or an escort to return **you** to **your home** if under optional Section J – Replacement carer **your carer** is insured under a MIA Online travel insurance policy and is unable to care for **you**, due to them suffering bodily injury or illness and/or compulsory quarantine or death and no other person with whom **you** are travelling or a close **relative** is already present and able or competent to become **your carer**.

You must contact the Medical Emergency Assistance Company for authorisation of reasonable expenses for one **relative** or friend to travel from the **United Kingdom** to stay with **you** (room only) and travel **home** with **you**; or the reasonable costs of hiring an alternative **carer** for **your child** during the remainder of **your trip** if under optional Section K – Child carer cover **you,** the other **parent** or a travelling companion are unable to care for **your child**, due to **you** suffering bodily injury or illness and/or compulsory quarantine or death which is covered under either section B1 (Medical and other expenses outside of the United Kingdom) or section B2 (Expenses within the United Kingdom).

How to make a claim

You must register a claim under all sections by contacting the following company:

Claims Settlement Agencies
308-314 London Road, Hadleigh, Benfleet, Essex. SS7 2DD Tel: 01702 553443, E-mail: info@csal.co.uk
To download a claim form please visit www.csal.co.uk
The fastest and easiest way to make a claim is online at www.submitaclaim.co.uk/mia

The process should take approximately 10-15 minutes to complete (depending on the type of claim), but before continuing **you** should ensure **you** have **your policy certificate**, **trip** dates, supporting documentation and details of the incident.

Please note: All claims must be notified as soon as it is reasonably practical after the event which causes **you** to submit a claim. Late notification of a claim may affect **our** acceptance of a claim or result in the amount **we** pay being reduced.

Claims Settlement Agencies are open Monday to Friday between 9am and 5pm. A claim form will be sent to **you** as soon as **you** tell them about **your** claim.

We will ask the claimant to complete a claim form and to provide at their own expense all reasonable and necessary evidence required by **us** to support a claim. If the information supplied is insufficient, **we** will identify the further information which is required. If **we** do not receive the information **we** need, **we** may reject the claim. For further details about claims, please refer to 'General conditions' on page 18.

To help **us** prevent fraudulent claims, **we** store **your** personal details on computer and **we** may transfer them to a centralised system. **We** keep this information in line with the conditions of the UK Data Protection Act 2018 which incorporates the General Data Protection Regulation (EU)2016/679.

How to make a complaint

We aim to provide the highest standard of service to every customer. If **our** service does not meet **your** expectations, **we** want to hear about it so **we** can try to put things right. All complaints **we** receive are taken seriously. The following will help **us** understand **your** concerns and give **you** a fair response.

1. Does your complaint relate to a claim?

a) In the first instance, please contact:

The Complaints Officer, Claims Settlement Agencies, 308-314 London Road, Hadleigh, Benfleet, Essex, SS7 2DD.
Tel: 01702 553443, Email: info@csal.co.uk

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

- **Your** name, address and postcode, telephone number and e-mail address (if **you** have one).
- **Your** policy and/or claim number, and the type of policy **you** hold.
- The reason for **your** complaint.

Any written correspondence should be headed 'COMPLAINT' and **you** may include copies of supporting material.

If **we** are unable to resolve **your** complaint immediately, **we** will send **you** a written acknowledgement within two (2) days of receipt. **We** will then investigate **your** complaint and, in most cases, send **you** a full response in writing within two (2) weeks of receipt. In exceptional cases, where **we** are unable to complete **our** investigations within two (2) weeks, **we** will send **you** a full written response as soon as **we** can, and in any event within four (4) weeks of receipt of **your** complaint.

b) If **you** are dissatisfied with **our** response, then **you** can raise the matter with the Financial Services and Pensions Ombudsman (FSPO), an independent body that adjudicates on complaints, at the following address:

Financial Services and Pensions Ombudsman
Lincoln House
Lincoln Place
Dublin 2
D02 VH29

Telephone: +353 1 567 7000
Email: info@fspo.ie
Website: www.fspo.ie

2. Does your complaint relate to your policy?

a) In the first instance, please contact:

MIA Online, Digital House, Threshelfords Business Centre, Feering, Kelvedon, Colchester, Essex CO5 9SE.
Tel: 0800 999 3333, Email: info@miatravelinsurance.co.uk

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

- **Your** name, address and postcode, telephone number and e-mail address (if **you** have one).
- **Your** policy number and the type of policy **you** hold.
- The reason for **your** complaint.

Any written correspondence should be headed 'COMPLAINT' and **you** may include copies of supporting material.

If **we** are unable to resolve **your** complaint immediately, **we** will send **you** a written acknowledgement within two (2) days of receipt. **We** will then investigate **your** complaint and, in most cases, send **you** a full response in writing within two (2) weeks of receipt. In exceptional cases, where **we** are unable to complete **our** investigations within two (2) weeks, **we** will send **you** a full written response as soon as **we** can, and in any event within four (4) weeks of receipt of **your** complaint.

b) If **you** are dissatisfied with **our** response, then **you** can raise the matter with the Financial Ombudsman Service (FOS).

The FOS is an independent body that arbitrates on complaints about general insurance products. **You** have six (6) months from the date of **our** final response to refer **your** complaint to the FOS.

If **we** cannot resolve **your** complaint, **you** may refer it to Financial Ombudsman Service (FOS) at the following address:

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

Telephone: 0800 023 4567 – From **UK** Landline or Telephone: 0300 123 9123 – From **UK** Mobile
Email: complaint.info@financial-ombudsman.org.uk
Website: www.financial-ombudsman.org.uk

If **you** purchased **your** policy online, **you** are also able to use the EC On-line Dispute Resolution (ODR) platform at http://ec.europa.eu/consumers/odr/ who will notify the Financial Services and Pensions Ombudsman on **your** behalf. Please note that this can only be used for complaints about purchases made online.

Complaints about non-insured events and **your** travel arrangements must be referred to **your** travel organiser.

Making a complaint does not affect **your** right to take legal action.

General definitions

Wherever the following words or phrases appear in the policy wording they will always have the meanings shown under them. Please also refer to the section details on pages 31, 35 and 36 for further definitions.

Business associate

Any employee whose level of responsibility in the business is such that if both **you** and they were absent from the business for a period of five full working days or more this would have a detrimental impact on the running of the business.

Change in health

Any deterioration or change in **your** health between the date the policy was purchased and the date of travel, this includes, new medication, change in regular medication, deterioration of a previously stable condition, referral to a specialist, investigation of an undiagnosed condition or awaiting treatment/consultation.

Channel Islands

Jersey, Guernsey, Alderney, Sark, Herm, Jethou, Brecqhou and Lihou.

Child/Children

A person who is 17 years of age or under.

Cruise

A voyage on a ship/vessel sailing on the seas or oceans that includes stopping at various ports. No cover is provided for cargo ship travel.

Cyber event

An unauthorised or malicious act or series of related unauthorised or malicious acts or the threat or hoax thereof involving access to, processing of, use of or operation of any **information technology system** or any electronic data by any person or group(s) of persons.

Doctor

A registered medical practitioner who is not **you** or related to **you**, who is currently registered with the General Medical Council in the **United Kingdom** (or foreign equivalent) to practice medicine.

Existing medical condition(s)

Any serious or ongoing or recurring **medical condition** which has been previously diagnosed or been investigated or treated in any way, at any time prior to travel, even if this condition is currently considered to be stable and under control.

Flood

A general and temporary covering of water of two or more acres of normally dry land.

Home

An **insured person's** usual place of residence within the **United Kingdom**.

Insured person

The person or persons shown on the **policy certificate**.

Information technology system

Any computer, hardware, software, information technology and communications system or electronic device, including any associated input, output or data storage device, networking equipment or back up facility.

Manual labour

Work involving physical labour (which does not include office and clerical work, bar and restaurant work, music performance and singing, or fruit picking which does not involve machinery).

Medical condition(s)

Any disease, illness or injury, including any psychological conditions.

Natural catastrophe

Volcanic eruption, **flood**, tsunami, earthquake, landslide, hurricane, tornado or wildfire.

Pair or set of items

Items of personal property which are substantially the same, complementary or designed to be used together.

Parent

A person with parental responsibility including a legal guardian acting in that capacity.

Partner

A person who is either an **insured person's** husband or wife, civil **partner**, fiancé or fiancée, boyfriend or girlfriend and who permanently lives at the same address and has done so for a minimum of 6 continuous months before the **trip** is booked and before the **trip** commences.

Period of cover

As defined in the **policy certificate**.

Policyholder

The person who has paid for this policy and is shown on the **policy certificate**.

Policy certificate

The document showing details of the cover and which should be read with this policy wording.

Public transport

A bus, coach, ferry, sea-vessel or train operating according to a published timetable.

Relative

husband or wife (or partner with whom **you** are living at the same address), parent, step-parent, grandparent, parent-in-law, brother, sister, step-brother, step-sister, **child**, grandchild, brother-in-law, sister-in-law, son-in-law, daughter-in-law or fiancé(e) or next of kin

Terrorism

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

Trip

Your holiday or journey starting from the time that **you** leave **your home** in the **United Kingdom** or from the start date shown on **your policy certificate**, whichever is the later, until arrival back at **your home** address in the **United Kingdom**.

Unattended

When **you** do not have full view of **your** property or where **you** are not in a position to prevent the unauthorised taking of **your** property, unless it is left in a locked room or a locked safety deposit facility. Property left in a motor vehicle is considered to be **unattended** even when the motor vehicle is locked and the property is out of view in an enclosed storage compartment, boot or luggage space.

United Kingdom

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

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; which is capable of causing incapacitating disablement or death amongst people or animals.

Valuables and electronic/other equipment

Photographic, audio, video, electronic, electrical equipment (including cds, dvds, video and audio tapes and electronic games), MP3 players, computer equipment (but not mobile or smart phones or tablet computers), binoculars, antiques, jewellery, watches, furs, silks, precious stones and articles made of or containing gold, silver or precious metals.

War

Military action, either between nations or resulting from civil war or revolution.

We, us, our

Chaucer Insurance Company DAC.

You, your, yourself

An **insured person**.

General conditions

The following conditions apply to all sections of this insurance:

1. **You** must tell **us** if **you** know about anything which may affect **our** decision to accept **your** insurance (for example, if **you** are planning to take part in a dangerous activity while **you** are on holiday).
2. **You** must comply with the 'Important conditions relating to health' on pages 5, 6 and 7.
3. **You** must take all reasonable steps to avoid or reduce any loss which may mean that **you** have to make a claim under this insurance. (For example if **you** receive hospital treatment in a European Union country, **you** should produce **your** European Health Insurance Card (EHIC), if **you** have one).
4. **You** must give Claims Settlement Agencies all the documents they need to deal with any claim. **You** will be responsible for the costs involved in doing this. For example, in the event of a cancellation claim **you** will need to supply proof that **you** were unable to travel, such as a medical certificate completed by **your doctor**.
5. **You** must help **us** get back any money that **we** have paid from anyone or from other insurers (including the Department for Work and Pensions) by giving **us** all the details **we** need and by filling in any forms. Any fraud, deliberate mis-statement or hiding of information in connection with the application for this policy or when making a claim will make this policy invalid for the **insured person** who has committed the fraud, deliberate mis-statement or hid information. In this event, any benefit due to the **insured person** who has committed the fraud, deliberate mis-statement or hiding of information under this policy will be forfeited and any benefit that has previously been paid to them must be repaid to **us** in full. **We** will also under such circumstances not refund any premium paid on behalf of the **insured person** who has committed the fraud, deliberate mis-statement or hiding of information.
6. The **insured person** must give **us** permission to obtain any medical reports or records needed from any **doctor** who has treated the **insured person**; otherwise **we** may not pay any claim.
7. **We** may ask the **insured person** to attend one or more medical examinations. If **we** do, **we** will pay the cost of the examination(s) and for any medical reports and records and the **insured person's** reasonable travelling expenses to attend (and any person required to travel with them), if these expenses are agreed by **us** in advance. If the **insured person** fails to attend without reasonable cause, **we** may reject the claim.
8. If an **insured person** dies, **we** have the right to ask for a post mortem examination at **our** expense.
9. **You** must pay **us** back any amounts that **we** have paid to **you** which are not covered by the insurance. This could include any overpayments and payments which **you** are not entitled to, for example, if **your** claim for lost luggage has been paid but **your** suitcase is subsequently returned to **you** by the airline.
10. After a claim has been settled, any damaged items which **you** have sent into Claims Settlement Agencies will become **our** property.
11. This policy may not be assigned or transferred unless agreed by **us** in writing.
12. **We** will not pay any interest on any amount payable under this policy.
13. **We** may also contact third parties who have or who were to provide services to the **insured person** (for example, an airline, travel company or hotel) to verify the information provided.
14. Only the **policyholder**, an **insured person** (or their **parent** if they are 17 years of age or under or their executor or personal representative in the event of the **death** of an **insured person**) or **us** may enforce the terms of this policy.
15. All claims must be notified as soon as is reasonably practical after the event which causes the claim. Failure to do so may result in **our** rejection of the claim if it is made so long after the event that **we** are unable to investigate it fully, or may result in **you** not receiving the full amount claimed for if the amount claimed is increased as a result of the delay.
16. Several Liability Notice. The subscribing (re)insurers' obligations under contracts of (re)insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing (re)insurers are not responsible for the subscription of any co-subscribing (re)insurer who for any reason does not satisfy all or part of its obligations.

General exclusions

General exclusions apply to all sections of this policy. In addition to these General exclusions, please also refer to 'What you are not covered for' under each policy section and 'Important conditions relating to health' on pages 5, 6 and 7, as these set out further exclusions which apply to certain sections.

We will not cover the following:

1. Any claims arising if **you** are travelling with the purpose of receiving medical treatment abroad.
2. Any claims arising as a result of an **existing medical condition** of a non-travelling close **relative**, close **business associate** or friend living abroad who **you** had planned to stay with, or any known or recognised complication of or caused by the **existing medical condition**.
3. Any claim relating to an incident or circumstances which were in the public domain or **you** were aware of, at the time **you** purchased this insurance, or at the time of booking any **trip**, which could reasonably be expected to lead to a claim.
4. Any claim arising from **you** acting in a way which goes against the advice of a **doctor**, or **you** travelling against the advice of a **doctor** or where **you** would have been if **you** had sought their advice before beginning **your trip**.
5. Any claim arising before or during **trips** in, to or through the following countries: Afghanistan, Liberia or Sudan.
6. Any claim if **you** are on any official government or police database of suspected or actual terrorists, members of terrorist organisations, drug traffickers or illegal suppliers of nuclear, chemical or biological weapons.
7. Any claim arising out of **war**, hostilities or warlike operations (whether war be declared or not), civil war, invasion, revolution or any similar event.
8. Any claim arising from **terrorism** but this exclusion shall not apply to losses under Section B1 (Medical and other expenses outside of the United Kingdom) and Section B2 (Expenses within the United Kingdom).
9. Any claim arising from civil riots, blockades, strikes or industrial action of any type (except for strikes or industrial action which were not existing or publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**).
10. Loss or damage to any property, or any loss, expense or liability arising from ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel or the radioactive toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of it, or being exposed to the **utilisation of nuclear, chemical or biological weapons of mass destruction**.
11. Any claim if **you** already have a more specific insurance covering this (for example, if an item **you** are claiming for under section E1 (Personal belongings and baggage) is a specified item on **your** household contents insurance policy).
12. Any claim arising as a result of **your** use of a two-wheeled motor vehicle unless:
    a) as a passenger **you** wear a crash helmet and it is reasonable for **you** to believe that the driver holds a licence to drive the two-wheeled motor vehicle under the laws of the country in which the accident occurs; or
    b) **you** are in the EU and as a rider **you** wear a crash helmet and **you** hold an appropriate UK licence which permits **you** to drive the capacity of the two-wheeled motor vehicle and **you** comply with the licencing laws of the country in which the accident occurs.

    There is no cover for off-roading.
13. Any claims arising from **your** use of a quad bike.
14. Any indirect losses, costs, charges or expenses (meaning losses, costs, charges or expenses which are not listed under the headings 'What you are covered for' in sections A to L, for example, loss of earnings if **you** cannot work after **you** have been injured or the cost of replacement locks if **your** keys are stolen).
15. Any claim arising from the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfil any part of their obligation to **you**.
16. Any claim arising as a direct result of a situation highlighted by the Foreign and Commonwealth Office where **you** have travelled to a specific country or to an area where, prior to **your trip** commencing, the Foreign and Commonwealth Office have advised against all (but essential) travel.
17. Any claim arising from **you** being involved in any deliberate, malicious, reckless, illegal or criminal act.
18. Motor racing, rallying or vehicle racing of any kind.
19. Any claim involving **you** taking part in **manual labour**.
20. Any claim involving **you** taking part in any sport or activity unless the **policyholder** has paid the necessary premium (if applicable) to extend **your** policy to provide cover for this. Please see the Sports and activities section on page 9 of this policy wording for further details.

21. Any claim relating to **winter sports** unless the **policyholder** has paid the necessary premium to extend **your** policy to provide cover for this.
22. Any claim arising from:
    - **your** suicide or attempted suicide; or
    - **you** injuring **yourself** deliberately or putting **yourself** in danger (unless **you** are trying to save a human life).
23. **Your** use of drugs or excessive consumption of alcohol.
24. **Your** alcohol intake whilst taking any combination of medication or drugs known (or would reasonably be suspected) to cause drowsiness, impaired vision or judgment when combined with alcohol whether such drugs are prescribed or not.
25. Any claim which is as a result of **you** having been diagnosed as suffering from acute alcohol intoxication, alcohol dependency or alcohol withdrawal.
26. Any costs which **you** would have had to or would have chosen to pay had the reason for the claim not occurred (for example, the cost of food which **you** would have paid for in any case).
27. Any claim arising as a result of **you** failing to get the inoculations and vaccinations that **you** need in relation to **your trip**.
28. Any claim or loss arising directly or indirectly from a **cyber event**.
29. Any claim arising from a **cruise** unless **you** have paid the appropriate additional premium and cover is shown on **your policy certificate**. In any event there is no cover for cargo ship travel.
30. Flying (other than as a passenger in a fully licensed aircraft).
31. **We** shall not provide any cover or pay any claim or provide any benefit to the extent that this cover, payment of a claim or benefit would expose **us** 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 the United States of America.
32. Anything shown as not covered in the Important Conditions relating to Health on pages 5, 6 and 7.
33. Any claims directly or indirectly related to a pandemic and/or epidemic, including but not limited to Coronavirus (COVID-19), including any related and/or similar condition(s) howsoever called or any mutation of these. This policy will also not provide cover for claims relating to the fear or threat of a pandemic and/or epidemic, including but not limited to Coronavirus (COVID-19) including any related and/or similar condition(s) howsoever called or any mutation of these. In the event of a conflict between this general exclusion and any other term in **your** policy terms and conditions, this general exclusion takes precedence.

    This general exclusion applies to all sections of cover with the exception of Section B1 –Medical and other expenses outside of the United Kingdom, as long as, prior to **your trip** commencing**,** the Foreign and Commonwealth Office had NOT advised against all (but essential) travel to **your i**ntended destination.

Sections of cover

Section A – Cancelling your trip

What you are covered for under section A

We will pay up to the amount shown in the table of benefits for:

- travel and accommodation expenses which **you** have paid or have agreed to pay under a contract and which **you** cannot get back;
- the cost of excursions, tours and activities which **you** have paid for and which **you** cannot get back; and
- the cost of visas which **you** have paid for and which **you** cannot get back.

Please note: If payment has been made using frequent flyer points, avios, airmiles, loyalty card points or similar loyalty card schemes, settlement of **your** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cancellation of **your trip** is necessary and unavoidable as a result of the following.

1. **You** dying, becoming seriously ill or being injured.
2. The death, serious illness or injury of a **relative**, **business associate**, a person who **you** have booked to travel with, or a **relative** or friend living abroad who **you** had planned to stay with during **your trip**. The incident giving rise to the claim must have been unexpected and not something **you** were aware of when **you** purchased this insurance. Please see 'Important conditions relating to health' on pages 5, 6 and 7 and 'General exclusions' on pages 19 and 20 for further details.
3. **You** being made redundant, as long as **you** had been working at **your** current place of employment for a minimum continuous period of two years, and that at the time of booking the **trip** or the date **you** purchased this insurance cover, whichever is earlier, **you** had no reason to believe that **you** would be made redundant. This cover would not apply if **you** are self-employed or accept voluntary redundancy.
4. **You** or a person who **you** have booked to travel with being called for jury service (and **your** request to postpone **your** service has been rejected) or attending court as a witness (but not as an expert witness).
5. If the police or relevant authority need **you** to stay in the **United Kingdom** after a fire, storm, burglary or vandalism to **your home** or place of business within seven days before **you** planned to leave on **your trip**.
6. If **you** are a member of the armed forces or police, fire, nursing or ambulance services which results in **you** having to stay in the **United Kingdom** due to an unforeseen emergency or if **you** are posted overseas unexpectedly.
7. If after the time **you** booked **your trip** or purchased **your** policy, whichever is later, the Foreign and Commonwealth Office advises against all (but essential) travel to **your** intended destination.
8. If **you** become pregnant after the date **you** purchased this insurance cover (or booked **your trip** whichever is later) and **you** will be more than 26 weeks pregnant at the start of or during **your trip**. Or, if **you** become pregnant after the date **you** purchased this insurance cover and **your doctor** advises that **you** are not fit to travel due to complications in **your** pregnancy.

What you are not covered for under section A

1. The excess as shown in the table of benefits. The excess will apply for each **trip** that **you** have booked and for each **insured person.**
2. Cancelling **your trip** because of a **medical condition** or an illness related to a **medical condition** which **you** knew about and which could reasonably be expected to lead to a claim unless declared to **us** and accepted for cover in writing.
3. Any claim if **you** have to cancel **your trip** because an appointment or treatment becomes urgently available which relates to a **medical condition** for which **you** are on a waiting list for, or referred to a specialist or a consultant, or have the knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home.
4. **You** not wanting to travel.
5. Any extra costs resulting from **you** not telling the company with whom **you** have made **your** booking with as soon as **you** know **you** have to cancel **your trip**.
6. **You** being unable to travel due to **your** failure to obtain the passport, visa or other required documentation that **you** need for the **trip**.
7. Airport taxes and credit or debit card fees included in the cost of **your** holiday.
8. Costs that have not been incurred by or on behalf of an **insured person**.
9. Any costs **you** would have still had to pay even if **you** had not been due to travel such as time share management fees or holiday club membership fees.
10. Anything mentioned in 'General exclusions' on pages 19 and 20. **You** should also refer to 'Important conditions relating to health' on pages 5, 6 and 7.

- Proof of travel cost (confirmation invoice, travel tickets, unused excursion, tour or activity tickets)
- Cancellation invoice or letter confirming whether any refund is due
- A medical certificate which **we** will supply for the appropriate **doctor** to complete
- An official letter confirming: redundancy, emergency posting overseas, the need for **you** to remain in the **United Kingdom**
- Summons for jury service

Claims evidence required for section A may include

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section B1 – Medical and other expenses outside of the United Kingdom

Please note: If you are admitted into hospital as an inpatient for more than 24 hours someone must contact the Medical Emergency Assistance Company on your behalf as soon as reasonably possible (please see the Medical and other emergencies section on page 13 for further details).

What you are covered for under section B1

We will pay up to the amount shown in the table of benefits for the necessary and reasonable costs as a result of **you** becoming ill, being injured or dying during **your trip**. This includes:

1. Emergency medical, surgical and hospital treatment and ambulance costs.
2. Emergency dental treatment as long as it is for the immediate relief of pain only (please see the table of benefits for details of the sum **you** are entitled to claim).
3. The cost of **your** return to the **United Kingdom** earlier than planned if approved by the Medical Emergency Assistance Company and this is deemed to be a medical necessity.

4. If **you** cannot return to the **United Kingdom** as **you** originally planned and the Medical Emergency Assistance Company agrees **your** extended stay is medically necessary, **we** will pay for:
   - Extra accommodation (room only) and travel expenses (economy class unless a higher grade of travel is confirmed as medically necessary and authorised by the Medical Emergency Assistance Company) to allow **you** to return to the **United Kingdom**; and
   - Extra accommodation (room only) for someone to stay with **you** and travel **home** with **you** if this is necessary due to medical advice; or
   - Reasonable expenses for one **relative** or friend to travel from the **United Kingdom** to stay with **you** (room only) and travel **home** with **you** if this is necessary due to medical advice.
5. Up to £5,000 for the cost of returning **your** body or ashes to the **United Kingdom** or up to £5,000 for the cost of the funeral and burial expenses in the country in which **you** die if this is outside the **United Kingdom**.

Please note: In the event of **your** injury or illness **we** reserve the right to relocate **you** from one hospital to another and/or arrange for **your** repatriation to the **United Kingdom** at any time during the **trip**. **We** will do this if in the opinion of the **doctor** in attendance or the Medical Emergency Assistance Company **you** can be moved safely and/or travel safely to the **United Kingdom** to continue treatment.

If the claim relates to **your** return travel to the **United Kingdom** and **you** do not hold a return ticket, **we** will deduct from **your** claim an amount equal to **your** original carrier's published one way airfare (based on the same class of travel as that paid by **you** for **your** outward **trip**) for the route used for **your** return.

What you are not covered for under section B1

1. The excess as shown in the table of benefits for each **insured person** and for each incident. The excess will be reduced to nil if **your** medical expenses have been reduced by **you** using the European Health Insurance Card, Medicare or equivalent schemes (please refer to the 'Health agreements' section on page 8 for further details).
2. Any medical treatment that **you** receive because of a **medical condition** or an illness related to a **medical condition** which **you** knew about at the time of purchasing this insurance and / or at the time of commencing travel and which could reasonably be expected to lead to a claim unless declared to **us** and accepted for cover in writing.
3. Any costs relating to pregnancy or childbirth, if **you** are more than 26 weeks pregnant at the start of or during **your trip**.
4. Any treatment or surgery which the Medical Emergency Assistance Company thinks is not immediately necessary and can wait until **you** return to the **United Kingdom**. The decision of the Medical Emergency Assistance Company is final.
5. Inpatient or private treatment which has not been notified as soon as possible to and agreed by **us** or the Medical Emergency Assistance Company.
6. The extra cost of a single or private hospital room unless this is medically necessary and authorised by the Medical Emergency Assistance Company.
7. Treatment in a private hospital or private clinic where suitable state facilities are available.
8. Any search and rescue costs (costs charged to **you** by a government, regulated authority or private organisation connected with finding and rescuing **you**. This does not include medical evacuation costs by the most appropriate transport).
9. Any costs for the following:
   - telephone calls (other than the first call to the Medical Emergency Assistance Company to notify them of the medical problem);
   - taxi fares (unless a taxi is being used in place of an ambulance to take **you** to or from a hospital); or
   - food and drink expenses (unless these form part of **your** hospital costs if **you** are kept as an inpatient).
10. Any costs **you** have to pay when **you** have refused to come back to the **United Kingdom** and the Medical Emergency Assistance Company considered **you** were fit to return **home**.
11. Any treatment or medication of any kind that **you** receive after **you** return to the **United Kingdom**.
12. If **you** become injured or die as a result of a **winter sports** activity and **you** have not purchased the additional **winter sports** cover.
13. Treatment in a private hospital or private clinic unless authorised and agreed by **us**.
14. Damage to dentures.
15. Anything mentioned in 'General exclusions' on pages 19 and 20. **You** should also refer to 'Important conditions relating to health' on pages 5, 6 and 7.

Section B2 – Expenses within the United Kingdom

What you are covered for under section B2

We will pay up to the amount shown in the table of benefits for the necessary and reasonable costs as a result of **you** becoming ill, being injured or dying during **your trip**. This includes:

1. The cost of **your** return **home** earlier than planned if this is medically necessary and the treating hospital **doctor** approves this.
2. If **you** cannot return **home** as **you** originally planned and the treating **doctor** approves this, **we** will pay for:
   - Extra accommodation (room only) and travel expenses (of the same mode of transport and class of travel as that used by **you** on **your** outward **trip**) to allow **you** to return **home**; and
   - Extra accommodation (room only) for someone to stay with **you** and travel **home** with **you** if this is necessary due to medical advice; or
   - Reasonable expenses for one **relative** or friend to travel from their **home** in the **United Kingdom** to stay with **you** (room only) and travel **home** with **you** if this is necessary due to medical advice.
3. Up to £1,000 for the cost of returning **your** body or ashes to **your home** town if **you** die during **your trip**.

Please note: If **your trip** is within the **Channel Islands** cover is also provided for emergency medical, surgical and hospital treatment but only if **you** do not reside in the **Channel Islands**.

What you are not covered for under section B2

1. The excess as shown in the table of benefits for each **insured person** and for each incident.
2. Any claim arising from a **medical condition** or an illness related to a **medical condition** which **you** knew about at the time of purchasing this insurance and / or at the time of commencing travel and which could reasonably be expected to lead to a claim unless declared to **us** and accepted for cover in writing.
3. Anything mentioned in 'General exclusions' on pages 19 and 20. **You** should also refer to 'Important conditions relating to health' on pages 5, 6 and 7.

Claims evidence required for sections B1 and B2 may include

- Proof of travel (confirmation invoice, travel tickets)
- Invoices and receipts for **your** expenses
- An official letter from the treating **doctor** in the resort to confirm the additional expenses were medically necessary (for claims under section B2)

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section C – Cutting your trip short

Please note: If you need to return home to the United Kingdom earlier than planned, you must contact the Medical Emergency Assistance Company as soon as reasonably possible (please see the Medical and other emergencies section on page 13 for further details).

What you are covered for under section C

We will pay up to the amount shown in the table of benefits for:

- travel and accommodation expenses which **you** have paid or have agreed to pay under a contract and which **you** cannot get back;
- the cost of excursions, tours and activities which **you** have paid for either before **you** left the **United Kingdom** or those paid for locally upon arrival at **your** holiday destination and which **you** cannot get back; and
- reasonable additional travel costs to return back to the **United Kingdom** (or costs to return **home** if **your trip** is within the **United Kingdom**) if it is necessary and unavoidable for **you** to cut short **your trip**.

Please note: If payment has been made using frequent flyer points, avios, airmiles, loyalty card points or similar loyalty card schemes, settlement of **your** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cutting short of **your trip** is necessary and unavoidable as a result of the following:

1. **You** dying, becoming seriously ill or being injured.
2. The death, serious illness or injury of a **relative**, **business associate**, a person who **you** are travelling with, or a **relative** or friend living abroad who **you** had planned to stay with during **your trip**. The incident giving rise to the claim must have been unexpected and not something **you** were aware of when **you** purchased this insurance. Please see 'Important conditions relating to health' on pages 5, 6 and 7 and 'General exclusions' on pages 19 and 20.
3. **Your** inability to use, or participate in, pre-paid activities, excursions or tours due to **you** becoming temporarily ill or injured during **your trip**.
4. If the police or relevant authority need **you** to return to **your home** in the **United Kingdom** after a fire, storm, burglary or vandalism to **your home** or place of business.
5. If **you** are a member of the armed forces, police, fire, nursing or ambulance services which results in **you** having to return to **your home** in the **United Kingdom** due to an unforeseen emergency or if **you** are posted overseas unexpectedly.

Please note: We will calculate claims for cutting short **your trip** from the day **your** return to the **United Kingdom** begins or the day **you** go into hospital overseas as an inpatient. **Your** claim will be based on the number of complete days **you** have not used.

What you are not covered for under section C

1. The excess as shown in the table of benefits for each **insured person** and for each incident.
2. Cutting short **your trip** because of a **medical condition** or an illness related to a **medical condition** which **you** knew about at the time of purchasing this insurance and / or at the time of commencing travel and which could reasonably be expected to lead to a claim unless declared to **us** and accepted for cover in writing.
3. Any claim if **you** have to cut short **your trip** because an appointment or treatment becomes urgently available which relates to a **medical condition** for which **you** are on a waiting list for, or referred to a specialist or a consultant, or have the knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home.
4. Any claims where the Medical Emergency Assistance Company have not been contacted to authorise **your** early return back to the **United Kingdom**.
5. Any additional expenses incurred should **you** decide to travel to any destination other than the **United Kingdom** in the event of cutting short **your trip**. If **you** have to cut short **your trip** and **you** do not return to the **United Kingdom, we** will only be liable for the equivalent costs which **you** would have incurred had **you** returned to the **United Kingdom**.
6. **You** being unable to continue with **your** travel due to **your** failure to obtain the passport or visa **you** need for the **trip**.
7. The cost of **your** intended return travel to the **United Kingdom** if **we** have paid additional travel costs for **you** to cut short **your trip.**

8. Costs where **your** inability to use pre-paid activities, excursions, or tours due to temporarily illness or injury is not verified in writing by **your** treating **doctor**.
9. Anything mentioned in 'General exclusions' on pages 19 and 20. **You** should also refer to 'Important conditions relating to health' on pages 5, 6 and 7.

Claims evidence required for section C may include

- Proof of travel cost (confirmation invoice, flight tickets)
- Invoices and receipts for **your** expenses
- An official letter confirming: the need for **your** return to the **United Kingdom**, emergency posting overseas
- An official letter from **your** treating **doctor** to confirm **your** temporary illness or injury

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section D– Missed departure

This section does not apply to trips taken solely within the United Kingdom

What you are covered for under section D

We will pay up to the amount shown in the table of benefits for the reasonable extra costs of travel and accommodation **you** incur to reach **your** booked holiday destination if **you** cannot reach the final international departure point on the outward or return journey from or to the **United Kingdom** because:

- **public transport** services fail due to poor weather conditions (but not including weather conditions defined as **natural catastrophe**), a strike, industrial action or mechanical breakdown; or
- the vehicle in which **you** are travelling is directly involved in an accident or suffers a mechanical breakdown (this would not include **your** vehicle running out of fuel, oil or water or suffering a flat tyre, puncture or flat battery).

What you are not covered for under sections D

1. Any claims arising due to a **natural catastrophe** or volcanic ash carried by the wind.
2. Any claims where **you** have not allowed enough time to reach **your** initial departure point or check in, at or before the recommended time.
3. Any claims where **you** have not obtained written confirmation from the appropriate transport company or authority stating the reason for the delay and how long the delay lasted.
4. Any claims relating to **your** own vehicle suffering a mechanical breakdown if **you** are unable to provide evidence that the vehicle was properly serviced and maintained and that any recovery or repair was made by a recognised breakdown organisation.
5. Claims arising from strike or industrial action if the strike or industrial action was existing or publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
6. Anything mentioned in 'General exclusions' on pages 19 and 20.

Claims evidence required for sections D may include

- Proof of travel cost (confirmation invoice, flight tickets)
- Invoices and receipts for **your** expenses
- An official letter confirming the reason for **your** late arrival and the length of the delay

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section E1 – Personal belongings and baggage

What you are covered for under section E1

We will pay for items which are usually carried or worn by **you** for **your** individual use during a **trip**. **We** will pay up to the amount shown in the table of benefits for items owned (not borrowed or rented) by **you** which are lost, stolen or damaged during **your trip**.

Please note:

- Payment will be based on the value of the property at the time it was lost, stolen or damaged. A deduction will be made for wear, tear and loss of value depending on the age of the property.
- The maximum amount **we** will pay for any one item, **pair or set of items** is shown in the table of benefits. Please refer to the definition of **'pair or set of items'** on page 16.
- The maximum amount **we** will pay for **valuables and electronic/other equipment** in total is shown in the table of benefits. Please refer to the definition of **'valuables and electronic/other equipment'** on page 17.
- The maximum **we** will pay for property which is lost or stolen from an **unattended** motor vehicle is £100 for each **insured person** if the property was kept in a locked boot, a locked and covered luggage compartment or a locked glove compartment and there was evidence of forced and violent entry to the vehicle.

Section E2 – Delayed baggage

What you are covered for under section E2

We will pay up to the amount shown in the table of benefits for buying essential items if **your** baggage is delayed in reaching **you** on **your** outward international journey for more than 12 hours.

Please note: You must get written confirmation of the length of the delay from the appropriate airline or transport company and **you** must keep all receipts for the essential items **you** buy.

If **your** baggage is permanently lost **we** will deduct any payment **we** make for delayed baggage from the payment **we** make for **your** overall claim for baggage.

Section E3 – Personal money

What you are covered for under section E3

We will pay up to the amount shown in the table of benefits for the loss or theft of the following if **you** can provide evidence **you** owned them and provide evidence of their value (this would include receipts, bank statements or cash-withdrawal slips):

- Cash; and
- Traveller's cheques (if these cannot be refunded by the provider).

Please note: The maximum amount **we** will pay for cash carried by one **insured person**, whether jointly owned or not, is the cash limit as shown in the table of benefits (please note a lower limit applies to **children** who are 17 years of age or under).

Section E4 – Passport and travel documents

What you are covered for under section E4

We will pay up to the amount shown in the table of benefits for the cost of replacing the following items belonging to **you** if they are lost, stolen or damaged during **your trip**:

- Passport;
- Travel tickets; and
- Visas.

Please note: The cost of replacing **your** passport includes the necessary and reasonable costs **you** pay overseas associated with getting a replacement passport to allow **you** to return back to the **United Kingdom** (this would include travel costs to the Consulate as well as the cost of the emergency passport itself). A claim for the lost or stolen passport would be calculated according to its expiry date - depending upon how many years there were left to run on the original passport, an unused proportionate refund would be made of its original value.

What you are not covered for under sections E1, E2, E3 and E4

1. The excess as shown in the table of benefits for each **insured person** and for each incident (this does not apply if **you** are claiming under section E2 (Delayed Baggage).
2. Property **you** leave **unattended** in a public place.
3. Any claim for loss or theft to personal belongings and baggage, personal money or passports and travel documents which **you** do not report to the police within 24 hours of discovering it and which **you** do not get a written police report for.
4. Any claim for loss, theft, damage or delay to personal belongings and baggage which **you** do not report to the relevant airline or transport company within 24 hours of discovering it and which **you** do not get a written report for. In the case of an airline, a property irregularity report will be required from the airline. If the loss, theft or damage to **your** property is only noticed after **you** have left the airport, **you** must contact the airline in writing with full details of the incident within seven days of leaving the airport and get a written report from them.
5. Any loss or theft of **your** passport which **you** do not report to the consular representative of **your home** country within 24 hours of discovering it and get a written report for.
6. Any loss, theft or damage to **valuables and electronic/other equipment** which **you** do not carry in **your** hand luggage while **you** are travelling on **public transport** or on an aircraft.
7. Money, passports and travel documents which **you** do not carry with **you** unless they are being held in a locked safety deposit facility.
8. Claims arising due to an authorised person fraudulently using **your** credit or debit cards.
9. Claims where **you** are unable to provide receipts or other reasonable proof of ownership wherever possible for the items being claimed.
10. Breakage of fragile objects or breakage of sports equipment while being used.
11. Damage due to scratching or denting unless the item has become unusable as a result of this.
12. Loss due to variations in exchange rates.
13. If **your** property is delayed or detained by Customs, the police or other officials.
14. Loss of jewellery (other than wedding rings) while swimming or taking part in sports and activities.
15. Losses caused by mechanical or electrical breakdown or damage caused by leaking powder or fluid carried within **your** baggage.
16. Loss, theft or damage to mobile phones (including smart phones and tablet computers), contact or corneal lenses, sunglasses, prescription glasses or spectacles, dentures, hearing aids, artificial limbs, paintings, household equipment, bicycles and their accessories, motor vehicles and their accessories (this would include keys), marine craft and equipment or items of a perishable nature (meaning items that can decay or rot and will not last for long, for example, food).
17. Any claim for loss, theft, damage or delay to **winter sports equipment** or **mobility equipment**.
18. Anything mentioned in 'General exclusions' on pages 19 and 20.

Important information:

- **You** must act in a reasonable way to look after **your** property as if uninsured and not leave it **unattended** or unsecured in a public place;
- **You** must carry **valuables and electronic/other equipment** and money with **you** when **you** are travelling. When **you** are not travelling, keep **your** money, passport, **valuables and electronic/other equipment** with **you** at all times or leave them in a locked safety deposit box;
- **You** must report all losses, thefts or delays to the relevant authorities and obtain a written report from them within 24 hours of the incident; and
- **You** must provide Claims Settlement Agencies with all the documents they need to deal with **your** claim, including a police report, a property irregularity report, receipts for the items being claimed as applicable.

Claims evidence required for sections F1 and F2 may include

- Loss or theft of property or money - police report
- Loss, theft or damage by an airline - property irregularity report, flight tickets and baggage check tags
- Delay by an airline - written confirmation of the length of delay from the airline, flight tickets, baggage check tags, receipts for emergency purchases
- Loss or theft of a passport - police report, consular report, receipts for additional expenses to get a replacement passport overseas
- Proof of value and ownership for property and money

Please note: If **you** are unable to provide any of the reports referred to above, **you** may still be eligible to make a claim dependent upon the circumstances which have prevented **you** from obtaining the necessary documentation. Please contact Claims Settlement Agencies to discuss why **you** have been unable to obtain the relevant reports and to obtain a claim form, so **your** claim can be considered.

Section F – Personal liability

Please note: This section does not apply to trips taken within the United Kingdom.

What you are covered for under section F

We will pay up to the total amount shown in the table of benefits if, during an insured **trip**, **you** are legally liable for accidentally:

- injuring someone; or
- damaging or losing someone else's property.

What you are not covered for under section F

1. Any liability arising from an injury or loss or damage to property:
   a. owned by **you**, a member of **your** family or household or a person **you** employ; or
   b. in the care, custody or control of **you** or of **your** family or household or a person **you** employ (other than temporary holiday accommodation occupied but not owned by **you**).
   c. if the claim has been assumed by **you** under any contract or agreement unless such liability would have attached in the absence of such contract or agreement.
2. Any liability for death, disease, illness, injury, loss or damage:
   a. to members of **your** family or household, or a person **you** employ;
   b. arising in connection with **your** trade, profession or business;
   c. arising in connection with **you** acting as a **carer**;
   d. arising in connection with a contract **you** have entered into;
   e. arising due to **you** acting as the leader of a group taking part in an activity;
   f. arising due to **you** owning, possessing or using mechanically-propelled vehicles, watercraft or aircraft of any description, animals (other than domestic cats or dogs), firearms or weapons; or
   g. as a result of a **winter sports** activity if **you** have not purchased the additional **winter sports** cover; or
   h. as a result of the use of **mobility equipment** if **you** have not purchased the additional **mobility equipment** cover.
3. Anything mentioned in 'General exclusions' on pages 19 and 20.

Important information:

- **You** must give Claims Settlement Agencies notice of any cause for a legal claim against **you** as soon as **you** know about it, and send them any documents relating to a claim;
- **You** must help Claims Settlement Agencies and give them all the information they need to allow them to take action on **your** behalf;
- **You** must not negotiate, pay, settle, admit or deny any claim unless **you** get Claims Settlement Agencies permission in writing; and
- **We** will have complete control over any legal representatives appointed and any proceedings, and **we** will be entitled to take over and carry out in **your** name **your** defence of any claim or to prosecute for **our** own benefit any claims for indemnity, damages or otherwise against anyone else.

Claims advice for section F

- Do not admit liability, offer or promise compensation
- Give details of **your** name, address and travel insurance
- Take photographs and videos, and get details of witnesses if **you** can
- Tell Claims Settlement Agencies as soon as reasonably possible about any claim that is likely to be made against **you** and send them all the documents that **you** receive see page 14, 'How to make a claim'.

Section G – Legal expenses

Please note: This section does not apply to trips within the United Kingdom.

What you are covered for under section G

We will pay up to the amount shown in the table of benefits for legal costs and expenses arising as a result of dealing with claims for compensation and damages resulting from **your** death, illness or injury during **your trip**.

What you are not covered for under section G

1. Any legal costs and expenses which **we** have not agreed to accept beforehand in writing.
2. Any claim where **we** or **our** legal representative believe that an action is not likely to be successful or if **we** believe that the costs of taking action will be greater than any award.
3. The costs of making any claim against **us**, MIA Online, Clear 2 Go, **our** agents or representatives, or against any tour operator, travel agent, accommodation provider, carrier or any person who **you** have travelled with or arranged to travel with, pursuing any claim for compensation against the manufacturer, distributor or supplier of any drug, medication or medicine.
4. Any fines, penalties or damages **you** have to pay.
5. The costs of making any claim for bodily injury, loss or damage caused by or in connection with **your** trade, profession or business.
6. Any claims arising out of **you** possessing, using or living on any land or in any buildings.
7. Any claims arising out of **you** owning, possessing or using mechanically-propelled vehicles, watercraft or aircraft of any description, animals, firearms or weapons.
8. Any claim reported more than 180 days after the incident took place.
9. Any claims from **you** becoming injured or dying as a result of a **winter sports** activity and **you** have not purchased the additional **winter sports** cover.
10. The costs incurred in the defence against any civil claim or legal proceedings made or brought against **you**.
11. The costs 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 **us** to settle a claim.
12. Anything mentioned in 'General exclusions' on pages 19 and 20.

Important information:

- **We** will have complete control over any legal representatives appointed and any proceedings;
- **You** must follow **our** advice or that of **our** agents in handling any claim; and
- **You** must use reasonable efforts to get back all of **our** expenses where possible. **You** must pay **us** any expenses **you** do get back.

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.

We may at **our** 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.

We may at **our** 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.

Claims advice for section G

Please phone Claims Settlement Agencies on **01702 553443** to ask for advice as soon as **you** need to make a claim or see page 14, 'How to make a claim'.

Winter sports cover

Please note: The following sections only apply if you are age 65 years or under and you have paid the required premium for winter sports cover and this is shown on your policy certificate.

Definitions relating to winter sports cover

Winter sports

Bigfoot skiing, blade skating, cat skiing (with guide), cross country skiing, curling, glacier walking (up to 4,000 metres), husky dog sledding, ice go carting, ice hockey, ice skating, kick sledging, langlauf, mono skiing, mountain walking up to 1500m, off piste skiing(except in areas considered to be unsafe by local resort management), passenger sledge, ski blading, ski boarding, ski dooing, skiing, skiing nordic, sledging/sleighing, sleigh riding (reindeer, horses or dogs), snowboarding, snow cat driving, snow mobile/ski doos, snow mobiling, snow parascending, snow shoe walking, speed skating, telemarking, tobogganing.

If the **Winter sports** activity in which **you** are participating is not listed above or **you** are participating in anything other than on a recreational or amateur basis please contact MIA Online on 0800 999 3333 or by emailing info@miatravelinsurance.co.uk before taking part.

Please note cover for **Winter sports** activities not listed above may require the **policyholder** to pay an additional premium over and above the normal **winter sports** premium. In some cases, **your** excess under section B1 (Medical and other expenses outside of the United Kingdom) will be increased to £250, and there will be no cover provided under section F (Personal liability) whilst taking part in the activity.

Winter sports equipment

Skis and snowboards and their bindings, ski poles, ski or snowboard boots, ski helmets and ice skates.

Section H1 – Winter sports equipment

What you are covered for under section H1

We will pay up to the amount shown in the table of benefits for **winter sports equipment** owned or hired by **you** which is lost, stolen or damaged during **your trip**.

Please note:

- A deduction will be made for wear, tear and loss of value on claims made for **winter sports equipment** owned by **you** as follows:

  Up to 12 months old – 90% of the purchase price

  Up to 24 months old – 70% of the purchase price

  Up to 36 months old – 50% of the purchase price

  Up to 48 months old – 30% of the purchase price

  Over 60 months old – 20% of the purchase price
- The maximum amount **we** will pay for any one item, **pair or set of items** is shown in the table of benefits. Please refer to the definition of **'pair or set of items'** on page 16.
- **You** must bring any damaged **winter sports equipment you** own back to the **United Kingdom** for inspection.

Section H2 – Winter sports equipment hire

What you are covered for under section H2

We will pay up to the amount shown in the table of benefits for the cost of hiring **winter sports equipment** if **winter sports equipment** owned by **you** is:

- delayed in reaching **you** on **your** outward international journey for more than 12 hours; or
- lost, stolen or damaged during **yourtrip**.

Please note: You must keep all receipts for the **winter sports equipment** that **you** hire.

Section H3 – Lift pass

What you are covered for under section H3

We will pay up to the amount shown in the table of benefits for the loss or theft of **your** lift pass. Claims would be calculated according to the expiry date of the lift pass - depending upon how many days there were left to run on the original lift pass, an unused proportionate refund would be made of its original value.

What you are not covered for under sections H1, H2 and H3

1. The excess as shown in the table of benefits for each **insured person** and for each incident (this does not apply if **you** are claiming under section H2 (Winter sports equipment hire) or section H3 (Lift Pass).
2. Any claim for loss or theft which **you** do not report to the police within 24 hours of discovering it and which **you** do not get a written police report for.
3. Any claim for loss, theft, damage or delay to **winter sports equipment** which **you** do not report to the relevant airline or transport company within 24 hours of discovering it and which **you** do not get a written report for. In the case of an airline, a property irregularity report will be required from the airline. If the loss, theft or damage to **your winter sports equipment** is only noticed after **you** have left the airport, **you** must contact the airline in writing with full details of the incident within seven days of leaving the airport and get a written report from them.
4. **Winter sports equipment you** have left **unattended** in a public place unless the claim relates to skis, poles or snowboards and **you** have taken all reasonable care to protect them by leaving them in a ski rack between 8am and 6pm.
5. Claims where **you** are unable to provide receipts or other reasonable proof of ownership wherever possible for the items being claimed.
6. Anything mentioned in 'General exclusions' on pages 19 and 20.

Claims evidence required for sections H1 to H3 may include

- Loss or theft - police report
- Loss, theft or damage by an airline - property irregularity report, flight tickets and baggage check tags
- Delay by an airline - written confirmation of the length of delay from the airline, flight tickets, baggage check tags, receipts for the hire of **winter sports equipment**
- Proof of value and ownership

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section H4 – Ski pack

What you are covered for under section H4

We will pay up to the amount shown in the table of benefits for the unused proportion of **your** ski pack which **you** have already paid for and cannot get back if **you** become ill or are injured during **your trip** and cannot take part in the **winter sports** activities as planned. A ski pack includes ski school fees or ski tuition fees, **your** lift pass and **winter sports equipment** that **you** have hired.

Please note: Your claim will be based on the number of complete days **you** have not used. **You** must get written confirmation of the nature of **your** illness or injury from the treating **doctor** in the resort along with confirmation of how many days **you** were unable to ski.

What you are not covered for under section H4

1. Anything mentioned in 'General exclusions' on pages 19 and 20. **You** should also refer to 'Important conditions relating to health' on pages 5, 6 and 7.

Claims evidence required for section H4 may include

- Proof of travel (confirmation invoice, flight tickets)
- Invoices and receipts for **your** prepaid ski pack
- An official letter from the treating **doctor** in the resort to confirm **your** inability to take part in the planned **Winter sports** activities

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section H5 – Piste closure

Please note: This section only applies between 1 December and 15 April for travel to the Northern hemisphere or between 1 May and 30 September for travel to the Southern hemisphere.

What you are covered for under section H5

We will pay up to the amount shown in the table of benefits if, as a result of not enough snow, too much snow or high winds in **your** booked holiday resort, at least 80% of all lift systems are closed for more than 12 hours. **We** will pay for either:

- the cost of transport to the nearest resort; or
- a benefit for each complete 24-hour period that **you** are not able to ski and there is no other ski resort available.

Please note: You must get written confirmation from the management of the resort stating the reason for the closure and how long the closure lasted.

What you are not covered for under section H5

1. Anything mentioned in 'General exclusions' on pages 19 and 20.

Claims evidence required for section H5 may include

- Proof of travel (confirmation invoice, flight tickets)
- An official letter confirming the cause and length of the closure
- Receipts for **your** travel expenses if **you** travel to the nearest resort

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section H6 – Avalanche cover

What you are covered for under section H6

We will pay up to the amount shown in the table of benefits for reasonable additional travel and accommodation expenses if **you** are prevented from arriving at or leaving **your** booked ski resort for more than 12 hours from the scheduled arrival or departure time because of an avalanche.

Please note: You must get written confirmation from the appropriate authority, for example, **your** tour representative, the ski resort management, stating the reason for the delay and how long the delay lasted.

What you are not covered for under section H6

1. Anything mentioned in 'General exclusions' on pages 19 and 20.

Claims evidence required for section H6 may include

- Proof of travel (confirmation invoice, flight tickets)
- An official letter confirming the cause and length of the delay

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you.**

Mobility equipment cover

Please note: The following sections only apply if you have paid the required premium for mobility equipment cover and this is shown on your policy certificate.

Definition relating to mobility equipment cover

Mobility equipment

Crutches, a walking frame, walking stick(s), a mobility scooter, a wheelchair (motorised & non-motorised) or supplies and equipment designed to provide the mobility and care for the disabled person.

Section I1 – Mobility equipment

What you are covered for under section I1

We will pay up to the amount shown in the table of benefits for **mobility equipment** owned or hired by **you** which is lost, stolen or damaged during **your trip**.

Please note:

- A deduction will be made for wear, tear and loss of value on claims made for **mobility equipment** owned by **you** as follows:

  Up to 12 months old – 90% of the purchase price

  Up to 24 months old – 70% of the purchase price

  Up to 36 months old – 50% of the purchase price

  Up to 48 months old – 30% of the purchase price

  Over 60 months old – 20% of the purchase price
- The maximum amount **we** will pay for any one item, **pair or set of items** is shown in the table of benefits. Please refer to the definition of **'pair or set of items'** on page 16.
- **You** must bring any damaged **mobility equipment you** own back to the **United Kingdom** for inspection.

Section I2 – Mobility equipment hire

What you are covered for under section I2

We will pay up to the amount shown in the table of benefits for the cost of hiring **mobility equipment** if **mobility equipment** owned by **you** is:

- delayed in reaching **you** on **your** outward international journey for more than 12 hours; or
- lost, stolen or damaged during **your trip**.

Please note: You must keep all receipts for the **mobility equipment** that **you** hire.

What you are not covered for under sections I1 and I2

1. The excess as shown in the table of benefits for each **insured person** and for each incident (this does not apply if **you** are claiming under section I2 (Mobility equipment hire).
2. Any claim for loss or theft which **you** do not report to the police within 24 hours of discovering it and which **you** do not get a written police report for.
3. Any claim for loss, theft, damage or delay to **mobility equipment** which **you** do not report to the relevant airline or transport company within 24 hours of discovering it and which **you** do not get a written report for. In the case of an airline, a property irregularity report will be required from the airline. If the loss, theft or damage to **your mobility equipment** is only noticed after **you** have left the airport, **you** must contact the airline in writing with full details of the incident within seven days of leaving the airport and get a written report from them.
4. **Mobility equipment you** have left **unattended** in a public place.
5. Any claim if the **mobility equipment** is not essential for day to day living or medically necessary for **you** to continue **your trip** (this does not apply if **you** are claiming under section I1).

6. Claims where **you** are unable to provide receipts or other reasonable proof of ownership wherever possible for the items being claimed.
7. Anything mentioned in 'General exclusions' on pages 19 and 20.

Claims evidence required for sections I1 and I2 may include

- Loss or theft - police report
- Loss, theft or damage by an airline - property irregularity report, flight tickets and baggage check tags
- Delay by an airline - written confirmation of the length of delay from the airline, flight tickets, baggage check tags, receipts for the hire of **mobility equipment**
- Proof of value and ownership

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Replacement carer cover

Please note: The following sections only apply if you have paid the required premium for replacement carer and this is shown on your policy certificate.

You must contact the Medical Emergency Assistance Company as soon as reasonably possible to obtain authorisation of any claim under this section (please see the Medical and other emergencies section on page 13 for further details).

Definition relating to replacement carer

Carer

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

Section J – Replacement carer

We will pay up to the amount shown in the table of benefits, for the reasonable additional costs of providing:

a) an alternative **carer** for **you** during the remainder of **your trip**, and/or

b) an escort to return **you** to **your home**;

where **your carer** is insured under a MIA Online travel insurance policy and is unable to care for **you**, due to them suffering bodily injury or illness and/or compulsory quarantine or death and no other person with whom **you** are travelling or a close **relative** is already present and able or competent to become **your carer**.

What you are not covered for under section J

1. The excess as shown in the table of benefits for each **insured person** and for each incident.
2. Any claim if **your carer**:
   a) is not insured under a MIA Online travel insurance policy; and
   b) has not accurately declared to **us** and **we** have accepted cover in writing, at the time of purchasing their MIA Online travel insurance policy or at the time of commencing this **trip**, all their **medical conditions** which could reasonably be expected to lead to a claim under this section of cover.
3. Any replacement **carer** or escort which the Medical Emergency Assistance Company thinks is not immediately necessary. The decision of the Medical Emergency Assistance Company is final.
4. Any costs for a replacement **carer** or escort which have not been notified as soon as possible to and agreed by **us** or the Medical Emergency Assistance Company.
5. Any replacement carer or escort cover of any kind that **you** receive after **you** return to the **United Kingdom**.
6. Any replacement carer or escort cover if **you** have not purchased the additional replacement carer cover.
7. Anything mentioned in 'General exclusions' on pages 19 and 20. **You** should also refer to 'Important conditions relating to health' on pages 5, 6 and 7.

Claims evidence required for section J may include

- Proof of travel (confirmation invoice, travel tickets)
- Invoices and receipts for **your** expenses
- An official letter from the treating **doctor** in the resort to confirm the additional expenses were medically necessary

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Child carer cover

Please note: The following sections only apply if you have paid the required premium for replacement child carer and this is shown on your policy certificate.

You must contact the Medical Emergency Assistance Company as soon as reasonably possible to obtain authorisation of any claim under this section (please see the Medical and other emergencies section on page 13 for further details).

Section K – Child carer

What you are covered for under section K

We will pay up to the amount shown in the table of benefits, for:

a) reasonable expenses for one **relative** or friend to travel from the **United Kingdom** to stay with **you** (room only) and travel **home** with **you**; or

b) the reasonable costs of hiring an alternative **carer** for **your child** during the remainder of **your trip**

where **you,** the other **parent** or a travelling companion are unable to care for **your child**, due to **you** suffering bodily injury or illness and/or compulsory quarantine or death which is covered under either section B1 (Medical and other expenses outside of the United Kingdom) or section B2 (Expenses within the United Kingdom).

What you are not covered for under section K

1. The excess as shown in the table of benefits for each **insured person** and for each incident.
2. Any claim if:
   a) **your child** is not insured under a MIA Online travel insurance policy; and
   b) **you** have not accurately declared to **us** and **we** have accepted cover in writing, at the time of purchasing a MIA Online travel insurance policy for **your child** or at the time of commencing this **trip**, all their **medical conditions** which could reasonably be expected to lead to a claim under this section of cover.
3. Any replacement carer for **your child** if the Medical Emergency Assistance Company thinks it is not necessary. The decision of the Medical Emergency Assistance Company is final.
4. Any costs for a replacement carer which have not been notified as soon as possible to and agreed by **us** or the Medical Emergency Assistance Company.
5. Any replacement carer cover of any kind that **you** receive after **you** return to the **United Kingdom**.
6. Any replacement carer cover for **your child** if **you** have not purchased the additional replacement child carer cover.
7. Anything mentioned in 'General exclusions' on pages 19 and 20. **You** should also refer to 'Important conditions relating to health' on pages 5, 6 and 7.

Summary of important contact details

CUSTOMER SERVICE FOR EXISTING POLICYHOLDERS

Phone: 0800 999 3333 E-mail: info@miatravelinsurance.co.uk

Phone lines are open Monday to Friday 8.30am to 6pm, Saturday 8.30am to 5pm and Sunday 10am to 3pm

SALES – MIA Online

Website: www.miatravelinsurance.co.uk Phone: 0800 999 3333

Phone lines are open Monday to Friday 8.30am to 6pm, Saturday 8.30am to 5pm and Sunday 10am to 3pm

THE MEDICAL EMERGENCY ASSISTANCE COMPANY

Phone: +44 (0) 20 3824 0742

E-mail: operations@emergencyassistance.co.uk

Phone lines are open 24 hours a day, 7 days a week

MAKING A CLAIM

Fastest simplest way to submit a claim is by going to:

www.submitaclaim.co.uk/mia

Or call Claims Settlement Agencies on: 01702 553443

E-mail: info@csal.co.uk

CSA is open Monday to Friday 9am to 5pm



Claims Enquiries:

01702 553 443
info@csal.co.uk
www.submitaclaim.co.uk/mia

Sales & Enquiries:

0800 999 3333
info@miatravelinsurance.co.uk
miatravelinsurance.co.uk

The Medical Emergency Assistance Company:

Phone: +44 (0) 20 3824 0742, E-mail: operations@emergencyassistance.co.uk

C2GODACV04 – May 2020 Policy Documentation

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