



# EXPLORER TRAVEL INSURANCE POLICY WORDING



## HEALTH NOTICE AND EMERGENCY ASSISTANCE

Phone calls are recorded & may be monitored

If you or any person who is travelling has an existing medical condition(s), then you must declare that medical condition(s) to the **Medical Screening Department** on **+353 1 533 7357**. We recommend making this declaration within 14 days of purchasing this policy.

Please do not incur inpatient medical expenses without first contacting the **Emergency Assistance Service**  
**+44 1733 224 875**.

For any claim other than for emergency medical treatment, you must contact the **Claims Department** by phone:  
**+353 1 533 7352** or email: [claims@white-horse.ie](mailto:claims@white-horse.ie).

# Welcome Statement – About Your Policy Wording

To maximize the benefits of your policy, we strongly advise reviewing your policy wording, Insurance Product Information Document (IPID) and certificate of insurance carefully. These documents provide essential details about the exclusions and conditions that apply to your policy. Failure to comply with these conditions may affect the outcome of any claims you make.

Please note, no policy provides cover for every situation. We do not cover certain things including, but not limited to:

- Losses that are not specifically listed under 'What is covered'.
- Circumstances you were aware of before purchasing this insurance or booking any trip which could reasonably be expected to result in a claim under this policy.

The exclusions to your policy are detailed in the "General exclusions applying to all sections" and the "What is not covered" sections. If a type of loss is not explicitly stated as covered, it should be considered excluded.

## Contacting Us

When you contact us, please provide your name, policy number and contact details so we can assist you. We recommend saving our contact details into your mobile phone. Telephone calls are recorded and may be monitored.

<b>Before you travel</b>	<b>Cancellation Period</b> You may cancel this policy at any time. If you choose to cancel within 14 days of receiving your policy documents, you can do so in writing to the address provided on your certificate of insurance. You will be eligible for a refund, provided that you have not travelled and no claims have been made or are pending. If cancellation occurs after the initial 14-day period, no premium refund will be issued. For full details, please refer to the "Cooling Off - Policy Cancellation Provisions" section.	<b>Cancellation Period</b> Contact your issuing agent
	<b>Policy Questions</b> If you have any questions about your policy, please contact the issuing agent who sold you your policy.	<b>Policy Questions</b> Contact your issuing agent
	<b>Medical Screening Department</b> To apply for cover for an existing medical condition call us, quoting the reference <a href="#">A&amp;G Explorer</a> . We recommend making this declaration within 14 days of purchasing this policy. You may not be covered for any existing medical conditions unless you call us and we have agreed in writing to provide cover. If you fail to disclose a medical condition, or if your answers to the medical questions are incorrect, this may result in your claim being turned down and your cover under this policy being invalid. Please refer to the Medical Warranty and Important Conditions Relating to Health section.	<b>Medical Screening Department</b> Phone: +353 1 533 7357
<b>For overseas emergency assistance</b>	<b>Emergency Medical Assistance</b> 24 hour worldwide medical & emergency assistance service, if you need emergency medical treatment, need to go to hospital or need to return home earlier than planned. Please do not incur inpatient medical expenses without first contacting the Emergency Assistance Service.	<b>Emergency Medical Assistance</b> Phone: +44 1733 224 875
<b>To make a claim</b>	<b>Claims Department</b> For any claim other than for emergency medical treatment.	<b>Claims Department</b> Phone: +353 1 533 7352 Email: <a href="mailto:claims@white-horse.ie">claims@white-horse.ie</a>

## Important Information - Travel Regulations

### Travel Delays - EC Regulations

This policy is not designed to cover costs which are met under the EC Regulation No. 261/2004. Under this Regulation if you have a confirmed reservation on a flight, you may be entitled to compensation if you arrive at your destination 3 hours or more after your scheduled arrival time. The amount of compensation payable depends on the distance of your flight. If the delay is more than 5 hours long and you no longer wish to travel, 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 delayed or cancelled due to a natural catastrophe, you must in the first instance approach your airline and clarify with them what costs they will pay under the Regulation. If you would like to know more about your rights under this Regulation, additional information can be found on the Irish Aviation Authority website ([www.iaa.ie](http://www.iaa.ie)).

### Baggage Complaints and the Montreal Convention

The Montreal Convention covers liability for baggage issues on international flights within the EU, including domestic flights. It applies to both checked and uncheck baggage. You should first contact your air carrier directly to resolve your baggage complaint. For additional guidance regarding complaints against air carriers registered in Ireland, you can reach out to the Competition and Consumer Protection Commission (CCPC) at [www.ccpc.ie](http://www.ccpc.ie). If the airline is based in another EU country, Norway or Iceland, contact the European Consumer Centre Ireland (ECC) at [www.eccireland.ie](http://www.eccireland.ie). Ensure you submit your complaint promptly, as the Montreal Convention imposes strict deadlines for filing claims. Key timeframes (in calendar days) under the Montreal Convention:

- Damaged Baggage: File a written complaint within 7 days of receiving your checked baggage.
- Delayed Baggage: Submit a written claim within 21 days from when the baggage is returned to you.
- Lost Baggage: Baggage is deemed lost after 21 days of delay. You then have 2 years to file a written claim for compensation.

It's important to note that failing to comply with these deadlines may result in losing your right to compensation from the airline. Always report baggage issues immediately at the airport and file a Property Irregularity Report (PIR) before leaving the airport.

# Medical Warranty Summary

This Medical Warranty Summary doesn't include all the details and conditions of cover. The full terms are located in the Medical Warranty and Important Conditions Relating to Health section of this policy. To ensure full protection under this policy, you (and all insured persons) must follow the Medical Warranty and Important Conditions Relating to Health section. Failure to do so may result in policy cancellation, claim denial or a reduction in claim payments.

At the time of booking and at the start date of your trip, you (and all insured persons) must:

- a) Be healthy and fit to travel.
- b) Not be travelling against medical advice.
- c) Be following recommended treatments or prescribed medications as directed by a medical practitioner.
- d) Not be travelling to seek medical treatment abroad.
- e) Not have been diagnosed with a terminal condition.

## Pre-Existing Medical Condition

If you have a pre-existing medical condition, you must make a medical declaration before travelling. Failure to declare relevant pre-existing conditions may result in your claim being turned down and your cover under this policy being invalid. We recommend making this declaration within 14 days of purchasing this policy.

Based on the medical information you provide, we will assess whether cover can be offered, if any exclusions or restrictions apply or if an additional premium is required. If an additional premium is necessary, cover will not commence until we have received full payment and provided you with written confirmation.

Any medical information provided in a medical screening or health declaration will be kept confidential and used only for the specific purposes of administering your claim and providing the cover and services described, which may include sharing with service providers.

Medical Screening	Telephone
To complete a medical screening, you and/or insured person(s) must contact us quoting the reference A&G Explorer. Please note certain medical condition(s) will incur an additional premium.	+353 1 533 7357

## Important Notice

1. It is your responsibility to review the answers to the medical warranty questions provided on your certificate of insurance. If any answers provided to us are incorrect or if you are unsure about any responses, you must contact medical screening at +353 1 533 7357. The answers given form part of your insurance cover.
2. If someone else has answered the medical warranty questions on your behalf, it is your responsibility to ensure that all answers provided are correct and accurate.
3. Failure to disclose a medical condition or providing incorrect answers to the medical questions may result in your claim being denied and your insurance cover being invalidated.
4. If you have been diagnosed with a terminal illness, this policy is not suitable for you and we cannot offer you cover.
5. This policy does not cover any medical condition directly or indirectly related to any medical condition where you are on a waiting list, receiving hospital treatment or awaiting the results of tests or investigations at the time of booking the insurance.
6. This policy does not cover any claims arising directly or indirectly from a known pre-existing medical condition(s) unless:
  - a) You have declared all pre-existing medical condition(s) to us; and
  - b) We have accepted the pre-existing medical condition(s) for insurance in writing; and
  - c) You have paid any additional premium required.

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## Schedule of Cover

Each cover section of the policy has a limit on the amount **we** will pay for each **insured person** per **trip**, called the **sum insured**, unless it is otherwise stated. This table shows the maximum sum insured that each **insured person** can claim. All sums insured are per **insured person**. The amount **we** pay up to varies by level of cover (Silver, Gold or Platinum). Some sections of cover are not available under the Silver or Gold level of cover. Please check the Schedule of Cover against **your certificate of insurance** to ensure the level of cover **you** have purchased meets **your** needs. Claims under most sections of the policy will be subject to an **excess**, meaning **you** are responsible for paying the first amount of each and every claim, per incident, per section, for each **insured person** claiming. This amount is known as the **excess**. The **excess** applies unless **you** have purchased Excess Waiver by paying an additional premium and this is shown on **your certificate of insurance**.

No.	Section		Platinum Sum Insured	Gold Sum Insured	Silver Sum Insured	Platinum, Gold, Silver Excess
1	Cancellation	Cancellation	Up to €3,000	Up to €2,250	Up to €1,500	€60
2	Curtailment	Curtailment	Up to €1,500	Up to €1,500	Up to €1,500	€60
		Return of Airfare	Up to €225	No Cover	No Cover	Nil
3	Travel Delay or Abandonment	Travel Delay	€25 for the first 12 hours, €15 per each 12 hours thereafter, up to €150	€25 for the first 12 hours, €15 per each 12 hours thereafter, up to €150	€25 for the first 12 hours, €15 per each 12 hours thereafter, up to €150	Nil
		Abandonment (after a 24-hour delay)	Up to €3,000	Up to €2,250	Up to €1,500	€60
4	Missed Departure or Flight Connection		Up to €600	Up to €600	No Cover	Nil
5	Emergency Medical Expenses	Emergency Medical Expenses	Up to €7,500,000	Up to €3,000,000	Up to €1,500,000	€150
		Emergency Dental Treatment	Up to €750	Up to €500	No Cover	
		Funeral Expenses	Up to €3,000	Up to €3,000	Up to €3,000	
6	Continuing Medical Expenses in Ireland	Corrective Cosmetic Surgery	Up to €4,000	No Cover	No Cover	Nil
		Physiotherapy Treatment	Up to €150	No Cover	No Cover	
		Dental Treatment	Up to €150	No Cover	No Cover	
7	Trip Resumption	Trip Resumption - Europe	Up to €600	No Cover	No Cover	€60
		Trip Resumption - Worldwide	Up to €1,200	No Cover	No Cover	
8	Personal Property (Baggage)	Baggage	Up to €2,250	Up to €1,200	Up to €300	€60
		Single Article / Pair or Set Limit	€400	€225	€150	
		Valuables Limit	€450	€400	€150	
		Unsubstantiated items	Up to €75	Up to €75	Up to €75	
		Delay (after a 12-hour delay)	Up to €150	Up to €150	Up to €150	Nil
9	Lost or Stolen Travel Tickets		Up to €600	Up to €450	No Cover	€60
10	Lost Passport Expenses		Up to €800	Up to €400	Up to €400	Nil
11	Personal Accident	Loss of Limb / Loss of Sight	€15,000	€15,000	No Cover	Nil
		Permanent Total Disablement	€45,000	€45,000	No Cover	
		Death	€15,000	No Cover	No Cover	
12	Personal Liability (Per Policy)		Up to €1,500,000	Up to €1,500,000	Up to €750,000	Nil
13	Legal Expenses		Up to €5,000	Up to €5,000	Up to €5,000	Nil
14	Government Travel Advice	Cancellation, Curtailment, Missed Departure or Flight Connection and Additional Expenses	Up to €1,500	No Cover	No Cover	Nil
15	Search and Rescue		Up to €4,500	No Cover	No Cover	Nil
16	Student Loans		Up to €4,000	Up to €4,000	No Cover	Nil
17	Personal Assistance		Covered	No Cover	No Cover	Nil
18	Winter Sports	Winter Sports Equipment (owned)	Up to €450	No Cover	No Cover	€60
		Winter Sports Equipment (Hired)	Up to €225	No Cover	No Cover	
		Ski Pack	Up to €300	No Cover	No Cover	
		Ski Hire	Up to €300	No Cover	No Cover	

# Your Policy

## Understanding This Policy

This is **your** travel insurance policy wording. The policy wording contains details of the insurance cover **we** provide. Please read the policy carefully to ensure that it meets **your** needs, the policy document outlines the cover, what is not covered, conditions and exclusions and is the basis on which **we** settle all claims. It is validated by the issue of the **certificate of insurance** which must be attached to the policy. The **certificate of insurance** and any endorsements are all part of the policy. **Your certificate of insurance** is evidence of the contract of insurance.

In return for having accepted **your** premium, **we** will, in the event of **bodily injury**, death, **serious illness**, loss, **theft**, damage or other events happening within the **period of insurance**, provide insurance in accordance with the operative sections of **your** policy. Each section of the policy details the cover provided. This policy provides cover for specific reasons only as per each "What is covered" section and should be read together with "What is not covered" and "Special conditions." **You** should take time to read and understand the general exclusions and general conditions which apply to all sections of this policy.

## Your Travel Insurance policy

This travel insurance policy is arranged by Accident & General Insurance Services Ltd and is underwritten by White Horse Insurance Ireland dac.

## About Accident & General Insurance Services Ltd ('Accident & General')

Accident & General is a multi-agency intermediary authorised and regulated by the Central Bank of Ireland. Regulated Number 8954. Company Registration number 146193. Registered address is 20 Harcourt Street, Dublin, D02 H364.

## About White Horse Insurance Ireland dac

This policy is underwritten by White Horse Insurance Ireland dac. White Horse Insurance Ireland dac is registered in Ireland, no. 306045. White Horse Insurance Ireland dac's Registered Office is Rineanna House, Shannon Free Zone, Shannon, County Clare, Republic of Ireland. White Horse Insurance Ireland dac is regulated by the Central Bank of Ireland. This can be checked by visiting their website – [www.centralbank.ie](http://www.centralbank.ie).

## The Law Applicable to this Contract

**You** and **we** are free to choose the laws applicable to the policy. **We** propose to apply the laws of the Republic of Ireland.

## Claim Settlement

All claim payments by **us** to **insured persons** will be made in EUR.

## Your Responsibilities

**You** must provide complete and accurate answers to the questions asked by the **issuing agent** when **you** purchase or make changes to this policy. If any of the answers **you** have given change, **you** must inform the **issuing agent** as soon as possible. If **you** need to make changes to the details in **your certificate of insurance**, contact the **issuing agent** as soon as possible. They will then advise whether the changes can be made and if any additional premium is required. Please note that if the information **you** provide is not complete and accurate, **your** policy may become invalid. This means that **your** insurance policy may not provide cover in the event of a claim or **we** may not pay out the full claim amount.

This policy has been sold to **you** on a non-advised basis and **you** should read this information to ensure that it meets **your** requirements. **You** may already possess alternative insurance(s) for some, or all, of the features and benefits provided by this product; it is **your** responsibility to investigate this. If, upon reading this policy, **you** find it does not meet **your** requirements, please refer to the relevant cooling off/policy cancellation section.

## Sports and Activities

Cover for sports and activities is included for recreational, amateur purposes only, unless otherwise stated. When engaging in any sport or activity **you** must accept and follow the supervision and tuition of experts qualified in the pursuit or activity in question, and **you** must use all appropriate precautions, equipment and eye protection. Although **we** are prepared to cover **you** when undertaking certain sports and activities, the availability of the insurance cover does not, in itself, imply that **we** consider such sports and activities to be safe. At all times **you** must satisfy yourself that **you** are capable of safely undertaking the planned sport or activity and **you** must take care to avoid injury, accident or loss to yourself and to others. If **you** wish to undertake a pursuit or activity which is not listed in this policy or are in any doubt as to whether cover will apply, please call the A&G Travel Helpline on (01) 874 8458.

## Residency and Eligibility

This policy is only available to **you** if **you** are permanently resident in **Ireland** and have been for the six months prior to the date of issue of this insurance.

## Geographical Areas

When purchasing this policy, it is important to carefully review the geographical areas and the countries they include. **Your certificate of insurance** will specify the area of cover **you** have selected, and this determines the countries or regions where **your** policy is valid. If **you** are unsure which area applies to **your trip**, please contact **your issuing agent** before finalising **your** policy.

Please note:

- Cover is only valid for travel within the geographical area **you** selected and paid for.
- If **you** travel to a region or country classified under a higher-priced area than purchased, **your** policy will not provide cover.
- **You** are responsible for ensuring that the area of cover specified on **your certificate of insurance** includes all **your** intended travel destinations.

**Your** policy will provide cover for **your** chosen countries and regions of travel unless a restriction is issued. **You** are not insured to travel to a country, specific area or **event** to which the Department of Foreign Affairs ([www.ireland.ie/en/dfa/overseas-travel/advice](http://www.ireland.ie/en/dfa/overseas-travel/advice)) has issued travel restrictions. If the Department of Foreign Affairs has issued travel restrictions specifically related to **COVID** and **you** commence **your trip** whilst **COVID** travel restrictions are in effect, **you** are insured to travel, however there is no cover whatsoever under any section of this policy for any claim directly or indirectly related to **COVID** during **your trip**.

Geographical Areas	Countries Covered
Europe	Means the continent of Europe, including all countries west of the Ural Mountains, Canary Islands, Iceland, the Azores, islands in the Mediterranean and non-European countries bordering the Mediterranean (except Algeria, Lebanon and Libya).
Worldwide excluding North America	Means all countries worldwide, excluding the United States of America, Canada, and the Caribbean.
Worldwide including North America	Means all countries worldwide.

## Pregnancy

This policy is intended to cover unforeseen events. Pregnancy and childbirth, including multiple pregnancies, are not considered unforeseen events and therefore the normal costs and expenses associated with them are not covered. However, this policy will cover **you** should complications arise with **your** pregnancy which fall within the definition of **complications of pregnancy and childbirth** which occurs during **your period of insurance**.

## Special Notice – This is Not a Private Medical Insurance Policy

This is not a private medical insurance policy and only gives cover in the event of an **accident** or sudden **serious illness** that requires emergency treatment whilst outside **your home country**. This policy does not cover procedures that can be carried out in **Ireland** after **your** repatriation (unless stated otherwise). Medical costs in private facilities abroad will not be covered unless authorised in advance by **us** and no private treatment will be covered where medically suitable state facilities are available.

If **you** plan to receive elective treatment (treatment that is not necessary, but which **you** have chosen to have) when **you** travel on a **trip** or choose to have any treatment abroad which is not an emergency, this will not be covered under the policy.

If **you** need any medical treatment which results in a claim under this insurance, **we** will expect **you** to allow **us** or **our** representatives unrestricted and reasonable access to all of **your** medical records and information. It is essential that **you** read and understand the Medical Warranty and Important Conditions Relating to Health section of **your** policy wording to have the full protection of **your** policy.

# Claims Conditions

**You** must keep to the following conditions to be protected by **your** policy. If **you** do not keep to the conditions, **we** may cancel **your** policy, refuse to deal with **your** claim or reduce the amount of any claim payment.

**You** must contact **us** by phone if **you** want to make a claim using the number given below:

## 1. Claims

If **you** want to make a claim under this policy, **you** must phone us on +353 1 533 7352 or email **us** at [claims@white-horse.ie](mailto:claims@white-horse.ie).

**You** need to tell **us** about **your** claim as soon as possible after any **bodily injury, serious illness**, incident, **event** or discovering any loss, **theft** or damage which may give rise to a claim under this policy.

**You** must also tell **us** if **you** are aware of any writ, summons or possible prosecution against **you**. **You** must send **us** every communication relating to a claim without delay. **You** or anyone acting on **your** behalf must not negotiate, admit or reject any claim without **our** permission in writing.

**You** or **your** legal representatives must provide **us** with, at **your** own expense, all information, evidence, details of household insurance and medical certificates **we** ask for. **We** can ask **you** to have an independent medical examination(s), which **we** will pay for. **We** may also ask for, and will pay for, a post-mortem examination.

**You** must keep any property which is damaged and, if **we** ask, send it to **us** at **your** own expense. Once **we** have settled **your** claim, all items will become **our** property and if the property is later recovered, it will become **our** property.

Where it is possible for **us** to recover sums that **we** have paid out under the terms of the policy, **you** must fully co-operate with **us** in any recovery efforts **we** make. **We** will pay all costs associated with the recovery. If **you** pursue **your** own recovery from third parties, any amounts **we** have paid under the policy must be reimbursed to **us** from the recovery **you** obtain.

In the event of a valid claim, **you** shall allow **us** the use of any relevant travel tickets **you** are not able to use because of the claim.

Any certificates, information, evidence and receipts required by **us** must be obtained at **your** expense (originals must be provided). No payment will be made under this policy without appropriate evidence to confirm the details of the claim.

**You** will be required to repay to **us**, within one month of **our** request to **you**, any costs or expenses **we** have paid on **your** behalf which are not covered under the terms and conditions of this policy.

Loss, damage or expense which at the time of any incident happening is insured by, or would, but for the existence of this policy, be insured by any other existing certificate, policy or any motoring organisation's service. If **you** have any other policy in force, which may cover the event for which **you** are claiming, **you** must tell **us**. Examples of this would include (but not limited by) Private Medical Insurance, Home Contents Insurance, Gadget Insurance or through the carrier)

All claim payments will be made in EUR.

## 2. Transferring of rights - Subrogation

**We** are entitled to take over any rights in defending or settling any claim and to take proceedings in **your** name for **our** benefit against any other person or organisation.

## 3. Fraud

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

- a) makes a claim under the policy knowing the claim to be false or fraudulently exaggerated in any way;
- b) makes a statement in support of a claim knowing the statement to be false in any way;
- c) submits a document in support of a claim knowing the document to be forged or false in any way; or
- d) makes a claim relating to any loss or damage caused by **your** wilful act or with **your** agreement;

**we** will do the following:

- a) **we** will not pay the claim.
- b) **we** will not pay any other claim which has been or will be made under the policy.
- c) **we** may declare the policy void (not valid).
- d) **we** will be entitled to recover from **you** the amount of any claim already paid under the policy.
- e) **we** will not return any premiums.
- f) **we** may tell the police.

**We**, **our** agents and fraud-prevention agencies get and share information with each other to prevent and detect fraudulent claims, to help protect **our** customers and ourselves.

# How to Claim – Claims Procedure

You must keep to the conditions in the Claims Conditions section to be protected by your policy. If you do not keep to the conditions we may cancel your policy, refuse to deal with your claim or reduce the amount of any claim payment.

## All Claims (other than a medical emergency)

You need to tell us about your claim as soon as possible after any **bodily injury, serious illness, incident, event** or discovering any loss, **theft** or damage which may give rise to a claim under this policy. To make a claim other than any claim for medical emergencies please contact us to request a claim form:

By writing to	White Horse Insurance Ireland dac, Rineanna House, Shannon Free Zone, Shannon, County Clare, V14 CA36, Republic of Ireland.
Telephone	+353 1 5337352
Email	<a href="mailto:claims@white-horse.ie">claims@white-horse.ie</a>

Return your completed claim form, remembering to keep a copy for your records, to either [claims@white-horse.ie](mailto:claims@white-horse.ie) or White Horse Insurance Ireland dac, Rineanna House, Shannon Free Zone, Shannon, Co. Clare, V14 CA36 together with all original documentation required below:

- **Your certificate of insurance**, confirmation of booking your original journey booking invoice(s) and travel documents showing the dates and times of travel.
- Original receipts and accounts for all out-of-pocket expenses you have to pay or have paid.
- Original bills, invoices and/or original medical reports you are asked to pay.
- Proof of ownership in respect of claims for lost/**stolen** personal property, tickets, etc.
- Police report (obtained within 24 hours of discovery) in the event of **theft** of personal property.
- Evidence of delay in the event of a claim under Section 3 – Travel Delay or Abandonment or Section 4 – Missed Departure or Flight Connection.
- As much evidence as possible to support your claim including the specific information requested on the claim form.
- Comply with the 'Special conditions relating to claims' listed in each section 1 through to 18 as appropriate to your claim.
- Details of any other insurance you may have that may cover the same loss, such as household insurance.

## Medical emergency and medical service claims

If you suffer an illness or **bodily injury** on your trip, you must contact our **Emergency Assistance Service** if this leads to **hospital** treatment as an inpatient or before any arrangements are made to transport you home. Failure to do so could mean we will reduce the amount we pay for medical expenses.

The service is available 24 hours a day, 365 days a year for advice and helps making arrangements to admit you to **hospital** or to transport you home and for authorising medical expenses. If you cannot contact our **Emergency Assistance Service** at the time we specify because you need immediate emergency treatment, you or someone designated by you must contact the **Emergency Assistance Service** as soon as possible and within 48 hours, otherwise we may not pay your claim.

The **Emergency Assistance Service** may be able to guarantee costs on your behalf. When contacting the **Emergency Assistance Service** please tell them you have Accident & General Travel Insurance and give them your policy number, along with a telephone number where you can be contacted.

You must retain receipts for medical expenses and any costs incurred. You are responsible for any policy **excess**, which should be paid by you at the time of treatment, unless you have purchased Excess Waiver and this is shown on your **certificate of insurance**, under which no **excess** applies.

## Medical assistance abroad

Our **Emergency Assistance Service** has the medical expertise, contacts and facilities to help you if you are injured in an **accident** or become ill. They will also arrange to transport you home if this is considered to be medically necessary. If you need medical treatment, you must contact the **Emergency Assistance Service** immediately.

**Repatriation:** If you have to return to your home country under Section 5 – Emergency Medical Expenses, you must contact the **Emergency Assistance Service**. If you do not, this could mean that we will not provide cover or we may reduce the amount we pay for your return to your home country. We reserve the right to repatriate you should our medical advisors consider you fit to travel.

## Payment for medical treatment abroad

If you are admitted to a **hospital** or clinic while abroad, our **Emergency Assistance Service** will arrange for medical expenses covered by this policy to be paid direct to the **hospital** or clinic. To take advantage of this benefit, someone must contact our **Emergency Assistance Service** for you as soon as possible.

## Simple outpatient treatment

For simple outpatient treatment, you should pay the **hospital** or clinic yourself and claim back medical expenses from us. Be cautious if you are asked to sign for excessive treatment or charges. If in doubt, call our **Emergency Assistance Service** for guidance. If you want to make a claim for simple outpatient treatment under this policy, you must phone us on +353 1 5337352 or email us at [claims@white-horse.ie](mailto:claims@white-horse.ie).

Phone calls are recorded and may be monitored.

# Definitions

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

**Accident(s)(al)** - Means an event that is sudden and unexpected, which is caused by external and visible means at a time that can be identified.

**Accidental Bodily Injury** - Means a sudden, violent, external, unexpected specific event, which occurs at an identifiable time and place, which solely and independently of any other cause results, within one year, results in **your** death, **loss of limb**, **loss of sight** or the **permanent total disablement**.

**Adverse Weather** - Means rain, flood, snow, sleet, hail, wind, fog, lightning storm or thunderstorm.

**Baggage, Personal Baggage** - Means luggage, clothing, personal effects and other articles which belong to **you** (or for which **you** are legally responsible) which are worn, used or carried by **you** during any **trip**, excluding **valuables** and **ski equipment**.

- Note 1: Items **you** hired and all items loaned or entrusted to **you** are excluded from cover.
- Note 2: This travel insurance is not designed to cover high-value items. If **you** are planning to take expensive items such as jewellery, gadgets, photographic or telecommunications equipment or other items that **we** define as **valuables** on **your trip**, please ensure **you** have sufficient coverage under a separate insurance policy.

Note 3: **Baggage** claims are settled based on the original purchase price, with deductions made for **wear, tear and depreciation**. This means claims are not settled on a "new for old" basis and a reduction in value will be applied to each item when **your** claim is assessed.

**Bodily Injury** - Means an identifiable physical injury sustained by **you** due to a sudden, unexpected, external and specific event. Injury as a result of **your** unavoidable exposure to the elements shall be deemed to have been caused by **bodily injury**.

**Certificate of Insurance** - Means the document which is provided to **you** and which includes policy information such as the **period of insurance**, unique policy number and the names of all **insured person(s)** under this insurance policy.

**Close Relative, Immediate Relative** - Means spouse or common-law partner, parent, parent-in-law, step-parent, legal guardian, children (including legally adopted, foster and step-children and daughter/son-in-law), sibling (including step-siblings and sister/brother-in-law), uncle, aunt, niece, nephew, grandparent, grandchild, or fiancé(e).

**Complications of Pregnancy and Childbirth** - Means a diagnosis of toxæmia, gestational hypertension, pre-eclampsia, ectopic pregnancy, hydatidiform mole (molar pregnancy), postpartum haemorrhage, retained placenta membrane, placental abruption, hyperemesis gravidarum, placenta praevia, per vaginal bleeding, miscarriage or threatened miscarriage, medically necessary emergency Caesarean section, medical necessary termination and premature births. This definition only applies if the complication happens more than 8 weeks (or 16 weeks in the case of a known multiple pregnancy) before the expected delivery date.

**Connecting Flight(s), Flight Connection** - Means a flight that is scheduled to depart from **your** international arrival airport, within 24 hours of **your** arrival at the same international arrival airport.

**COVID** - Means COVID-19, coronavirus disease, severe acute respiratory syndrome coronavirus (SARS-COV-2) or any mutation or variation of these.

**Curtailment, Curtail, Curtailed** - Means either:

- a) abandoning or cutting short **your trip** by direct early return to **Ireland**, in which case claims will be calculated from the day **you** returned to **Ireland** and based on the number of complete days of **your trip** **you** have not used, or
- b) by attending a **hospital** abroad as an inpatient or being confined to **your** accommodation abroad on the orders of a **medical practitioner**, in either case for a period in excess of 48 hours. Claims will be calculated from the day **you** were admitted to **hospital** or confined to **your** accommodation and based on the number of complete days for which **you** were hospitalised or confined to **your** accommodation.

Please note that **curtailment** claims are calculated from the day **you** return to **your home** or when **you** are hospitalised as an inpatient. In respect of travel expenses, **we** will pay for **your** additional travel costs only and not for the loss of **your** pre-booked travel arrangements. If **you** have not purchased a return flight, there is no coverage for the cost of **your** return flight.

**Cyber-terrorism** - Means the use of disruptive activities, or the threat thereof, against computers and/or networks, with the intention to cause real-world harm or severe disruption of infrastructure.

**Emergency Assistance Service** - Means the emergency service provider nominated by **us**. To contact the **Emergency Assistance Service**, call +44 1733 224 875.

**Epidemic, Pandemic** - Means any event(s) declared as an epidemic or a pandemic by the World Health Organization or its equivalent or by a relevant national government body.

**Event** - Means a concert, sporting event, match, competition or other public entertainment for which tickets are purchased in advance of the travel date, taking place at a specific location on a specific date or other organised occasion e.g. a wedding abroad, scout jamboree or amateur competition, which is the main purpose of **your trip**.

**Excess** - Means, where applicable, the **excess** is the first amount of each claim as shown on the Schedule of Cover, per section, for each separate **incident**, payable for each **insured person**. The **excess** applies unless **you** have purchased optional Excess Waiver and this is stated on **your certificate of insurance**.

**Government Travel Advice** - Means travel advice as issued by the Department of Foreign Affairs (<https://www.ireland.ie/en/dfa/overseas-travel/advice>) of the government of the Republic of Ireland.

**Home, Home Area** - Means **your** normal place of residence (residential address) in the Republic of Ireland or Northern Ireland.

**Home Country** - Means the country where **you** are resident and have permanently resided for 6 months or more.

**Hospital(s)** - Means a licensed medical institution which meets the following criteria:

- it has facilities for medical diagnosis and/or for treating injured and sick people; and
- it is run by medical practitioner(s); and
- it provides care supervised by state registered nurses or the local equivalent; and
- it is not a medical institution only specialised in training and education, a nursing or convalescent facility, a hospice or place for the terminally ill, a residential care facility or a place for drug and/or alcohol rehabilitation.

**Incident** - Means a specific or sudden **accident** during a **trip** which causes **your** death or **bodily injury**.

**International Departure Point** - Means the final departure point in **Ireland** on **your** outward journey or **your** final departure point overseas to return **you** back to **Ireland** on **your** return journey. This must be an airport, international train station, or port.

**International Inbound Trip** - Means **your public transport** flight, sailing or train journey that departed (or was scheduled to depart) from another country to travel to **your** country of residence.

**International Outbound Trip** - Means **your public transport** flight, sailing or train journey that departed (or was scheduled to depart) from **your country of residence** to travel to another country.

**Ireland** - Means the Republic of Ireland or Northern Ireland.

**Irrecoverable** - Means that **we** will only cover costs that **you** have not already recovered, for which reasonable remedy was not offered or provided by another source and which **you** are not entitled to recover or regain from another source or another third party.

**Issuing Agent** - Means the agent from whom **you** purchased this policy.

**Loss of Limb** - Means loss by permanent severance of an entire hand or foot or the total and permanent loss of use of an entire hand or foot.

**Loss of Sight** - Means total **loss of sight** which shall be considered as having occurred:

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

**Manual Work** - Means work involving the:

- a) interaction with wild animals of any kind;
- b) installation, assembly, maintenance, repair or use of heavy electrical, mechanical or hydraulic plant equipment or machinery;
- c) undertaking of any trade(s) of plumber, electrician, lighting or sound technician, carpenter, painter/decorator, builder, manual labour of any kind or the use of power tools or lifting; or
- d) working more than 3 metres above ground level.

**Medical Condition(s)** - Means any medical or psychological disease, **serious illness** or **bodily injury**.

**Medical Practitioner, Doctor(s)** - Means a registered practising member of the medical profession who is not related to **you** or to any person with whom **you** are travelling and/or insured on this policy.

**Pair or set** - Means two or more items of **baggage** or **valuables** which are or used or worn together.

**Period of Insurance** - Means the period of **your trip** that must coincide with the period shown on **your certificate of insurance**.

**Section 1 – Cancellation Cover:** Cancellation begins once **you** have paid **us** the insurance premium and when **your certificate of insurance** is issued. Once **you** leave **home** to start **your** original **trip**, all cover under Section 1 - Cancellation ends, and cover under all other sections of the policy begins.

If **you** submit a **curtailment** claim, cover will remain in place until the specified end date on **your certificate of insurance**. A claim for **curtailment** is calculated on the unused and pre-paid portion of **your** pre-booked **trip** between the dates when **you** return to **Ireland** and

the date if **you** recommence **your** original pre-booked planned itinerary. No cover shall apply for the time that **you** spend in **Ireland** unless otherwise stated in this policy and no further cover will be available under the **curtailment** section of **your** insurance policy with **us** once **you** have made a **curtailment** claim.

**Period of Insurance Note: (Platinum cover level only)**

- a) If, due to unexpected circumstances beyond **your** control and if the unexpected circumstance(s) is covered by this insurance policy and **you** cannot finish **your trip** within **your period of insurance** (as specified on **your certificate of insurance**), **we** will extend **your** insurance cover with **us** for up to a maximum period of 30 days at no extra charge.
- b) Any **trip** that had already begun before **you** purchased this insurance is not covered.
- c) The maximum period of cover is 730 days from the purchase date of this insurance stated on **your certificate of insurance**.
- d) **Platinum cover level only - You** are covered for taking part in **winter sports** activities for up to a maximum of 31 days in total during the **period of insurance** or per year, if the **period of insurance** is over one year (365 days) in duration.

**Permanent Total Disablement** - Means a physical or mental impairment that lasts for 12 months and, in the opinion of an independent qualified specialist at the end of that period, shows no prospect of improvement. This condition must have a substantial and long-term adverse effect on **your** ability to carry out any form of employment and all of the following normal day-to-day activities:

- Dressing and undressing;
- Getting up and down a flight of stairs;
- Getting in and out of a bed or chair;
- General household duties, including cleaning, ironing or shopping.

**We** will consider that **you** are unable to do any of the above activities when both of the following apply:

- **You** are unable to carry out the activity even with the use of equipment;
- **You** always need the help of another person to do the activity.

**Personal Accident** - Means an **incident** resulting in **accidental bodily injury** caused solely and directly by outward violent and visible means.

**Personal Assault** - Means an attack on **you** that requires police investigation and/or leads to medical expenses or inpatient hospitalisation due to the attack.

**Pre-Existing Medical Condition(s)** - Means any **medical condition(s)**, disease, illness or injury for which **you** are taking or have taken prescribed medication or are waiting to receive or have received treatment (including surgery, tests or investigations) within 2 years.

**Public Transport** - Means any publicly licensed aircraft, sea vessel, train or coach on which **you** are booked to travel, operating to a published timetable but excluding private cars, taxis, etc.

**Personal Liability** - Means **your** legal liability for damages resulting from an **accident**.

**Serious Illness** - Means any disease, infection or **bodily injury** which is unexpectedly contracted by **you** prior to **your trip** or unexpectedly manifests itself for the first time during **your trip**.

**Single Article** - Means any one article, collection, **pair or set**.

**Ski Equipment** - Means **winter sports** equipment as follows: skis (including bindings), ski boots, ski poles, ski goggles and snowboards, snowboard bindings and snowboard boots. Please note **ski equipment** claims are settled based on the original purchase price, with deductions made for **wear, tear and depreciation**. This means claims are not settled on a "new for old" basis and a reduction in value will be applied to each item when **your** claim is assessed. Please note cover for **winter sports** only applies if **you** have purchased Platinum cover and this is shown on **your certificate of insurance**.

**Stolen** - Means the unauthorised taking of **your baggage, valuables** and/or personal property by another person with the intention of permanently depriving **you** of it.

**Strike, Industrial Action** - Means any form of organised action, which is carried out with the intention of preventing, restricting, stopping, disrupting or otherwise interfering with the production of goods or the provision of services.

**Terrorism** - Means an act, 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 government(s), 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.

**Theft** - Means any **theft** committed by violence, threat of violence, **mugging**, assault or through break in by a third party (i.e. a person who is not a relative, **close relative or travel companion**).

**Travelling Companion** - Means any named person(s) on **your certificate of insurance** with whom **you** have booked to travel and/or are travelling with on the same booking invoice and without whom **your** travel plans would be impossible.

**Trip** - Means a pre-booked holiday or journey made by **you** within the covered area as stated on **your certificate of insurance** which begins and ends in **your home country** during **your period of insurance**.

**Unattended** - Means when **you** cannot see or are not close enough to **your baggage, valuables** property or vehicle to stop it being damaged or **stolen**.

**Unattended Vehicle** - Means a motor vehicle which is not occupied by a driver or passenger.

**Unsubstantiated** - Means when **you** have not supplied an original receipt, proof of purchase or an insurance valuation (which **you** got before the date of the incident **you** are claiming for).

**Valuables** - Means cameras, photographic and video equipment and associated equipment of any kind, computer hardware and software, computer tablets, satellite navigation equipment, games consoles (PlayStation, Gameboy, Nintendo), accessories and games, personal organisers, mobile telephones, television, portable audio equipment (DVD, CD, mini-disc, MP3 players, iPods, etc.) and all associated discs and accessories, spectacles, prescription sunglasses, telescopes, binoculars, jewellery, watches (including smart watches), furs, perfumes, leather articles, precious stones and articles made of or containing gold, silver or other precious metals.

**Wear, Tear and Depreciation** - Means a reduction in value through age, natural deterioration, ordinary use, depreciation due to use, damage by exposure to light, lack of maintenance or damage which happens gradually over a period of time. **Baggage** and **ski equipment** claims are settled based on the original purchase price, with deductions made for **wear, tear and depreciation**. This means claims are not settled on a "new for old" basis, and a reduction in value will be applied to each item when **your** claim is assessed as follows:

Wear and Tear Table	
- up to 1 year old	<b>We</b> will pay 85% of purchase price
- up to 2 years old	<b>We</b> will pay 70% of purchase price
- up to 3 years old	<b>We</b> will pay 50% of purchase price
- up to 4 years old	<b>We</b> will pay 25% of purchase price
- up to 5 years old	<b>We</b> will pay 10% of purchase price
- over 5 years old	No payment
- <b>Unsubstantiated</b> - Where there are no receipts	€75 in total for all items.

**We/Us/Our** - Means White Horse Insurance Ireland dac, **our** agents or sub-agents.

**Winter Sports** - Means the activities listed in the following table:

Winter Sports Table (Platinum cover levels only)	
Cross-Country Skiing (must be accompanied by a guide or instructor)	Sleighrides (Reindeer)
Ice-Skating	Snowboarding - except in areas deemed unsafe by local resort management, unless under the guidance of a locally qualified instructor
Skiing - except in areas deemed unsafe by local resort management, unless under the guidance of a locally qualified instructor	Snow-mobiling (no cover for third party injuries or liability)
Skiing off-piste - except in areas deemed unsafe by local resort management, unless under the guidance of a locally qualified instructor	Snow Sledging (non-competitive and excluding cresta run)
Sledding (Dog)	Tobogganing (non-competitive and excluding cresta run)

**Winter Sports Note: (Platinum cover level only)**

- Section 12 – Personal Liability covers claims arising as a result of **you** undertaking or participating in **winter sports**.
- There is no cover for competitive or professional **winter sports**.
- Under no circumstances will any claims arising from any activities not listed be covered, regardless of whether undertaken as part of an organised excursion or event.
- **Winter sports** exclude ski instructor courses or **winter sports** training or qualification courses.
- **You** are covered for taking part in **winter sports** activities for up to a maximum of 31 days in total during the **period of insurance** or per year, if the **period of insurance** is over one year (365 days) in duration.

**You/Your/Yourself/Insured Person(s)** - Means the person(s) named on the **certificate of insurance** for this policy and for whom the appropriate premium has been paid.

# Medical Warranty and Important Conditions Relating to Health

This insurance is designed to cover **you** for unforeseen events, **accidents** and **serious illnesses** occurring during the **period of insurance**. To ensure full protection under this policy, **you** (and all **insured persons**) must follow this Medical Warranty and Important Conditions Relating to Health section. Failure to do so may result in policy cancellation, claim denial or a reduction in claim payments. Where **you** is used, it will bear the same meaning throughout this section meaning **you** and all **insured persons** on this policy. **We** recommend declaration of all **pre-existing medical condition(s)** within 14 days of purchasing this policy.

**Winter Sports Important Note - Platinum Cover:** If **you** have any **pre-existing medical condition(s)** listed in this section highlighted in *italic* font and marked with an asterisk (\*), and **you** are participating in **winter sports** activities, **you** must contact the Medical Screening Department at +353 1 533 7357 to declare **your pre-existing medical condition(s)** to ensure that the cover is suitable for **your** needs.

Any medical information provided in a medical screening or health declaration will be kept confidential and used only for the specific purposes of administering **your** claim and providing the cover and services described, which may include sharing with service providers. **We reserve** the right not to extend this insurance to cover any **pre-existing medical condition(s)**.

## Medical Screening

## Telephone

To complete a medical screening, **you** must contact **us** quoting the reference - [A&G Explorer](#)

+353 1 533 7357

## Medical Warranty

At the time of purchasing this policy:

**Do you have, or have you had, any medical condition(s) for which you are taking or have taken prescribed medication, or are waiting to receive, or have received treatment (including surgery, tests, or investigations) within the last 2 years?**

**IF NO:** If **you** answer **NO** to the Medical Warranty (including if **you** have had no **medical condition**), please review the conditions below to confirm if they apply to **you**. If none of them apply, **your medical condition(s)** will be covered.

**IF YES:** If **you** answer **YES** to the Medical Warranty, it is a condition of this policy that **you** will not be covered under Section 1 – Cancellation, Section 2 – Curtailment, Section 5 – Emergency Medical Expenses, Section 11 – Personal Accident, Section 7 – Trip Resumption and Section 6 - Continuing Medical Expenses in Ireland for any claims arising directly or indirectly from this **medical condition(s)** unless **you** have contacted **us** to complete a medical screening at +353 1 533 7357 and **we** have agreed in writing to cover **your medical condition(s)**.

If **you** have a **medical condition** and it is one of those shown in the Waived Medical Conditions List on the following page, then this will be covered under the policy without the need to contact **us**.

[Regardless of whether you answer "yes" or "no" to the Medical Warranty, please note:](#)

It is a condition of this policy that neither **you** nor any **insured persons** will be covered Section 1 – Cancellation, Section 2 – Curtailment, Section 5 – Emergency Medical Expenses, Section 11 – Personal Accident, Section 7 – Trip Resumption and Section 6 - Continuing Medical Expenses in Ireland for claims arising directly or indirectly from:

A. At the time of taking out this policy:

- i) Any **medical condition** for which **you** are aware of, but have not yet received a diagnosis for.
- ii) Any **medical condition** for which **you** have received a terminal prognosis.
- iii) Any **medical condition** for which **you** are on a waiting list for, or have the knowledge of the need for, surgery, treatment or investigation at a **hospital**, clinic or nursing home.

B. At any time

- i) Any **medical condition** you have for which a **medical practitioner** has advised **you** not to travel or would have done so had **you** sought their advice, but despite this, **you** still chose to travel.
- ii) Any surgery, treatment or investigations for which **you** intend to travel outside of **Ireland** to receive (including any expenses incurred due to the discovery of other **medical conditions** during and/or complications arising from these procedures).
- iii) Any **medical condition** for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**.
- iv) **Your** travel against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider.

**You** should also refer to the “General Exclusions Applicable to All Sections of the Policy.”

## Waived Medical Conditions List

Please see following lists for **medical condition(s)** which do not require screening. The **medical conditions** listed in the following pages are covered without additional charges and are subject to the terms and conditions of this insurance, provided at the time of purchasing this policy:

1. No more than 5 of these **medical condition(s)** are suffered.
2. **You** satisfy the medical warranty above.

Waived Medical Condition List (and Cover limitations)	Waived Medical Condition (and Cover limitations)	Waived Medical Condition (and Cover limitations)
Abnormal Smear Test	Cervicitis	Epididymitis
<i>Achilles Tendon Injury*</i>	Chalazion	Epiphora (Watery Eye)
Acne	Chicken Pox (Fully resolved)	Epispadias Epistaxis (Nosebleed)
Acronym or Ingrown Toenail Acronym	Cholecystectomy or Gall Bladder Removal	Erythema Nodosum Essential Tremor
Adenoids	Chronic fatigue syndrome (If only symptom is fatigue and no <b>hospital</b> admissions)	Facial Neuritis or Trigeminal Neuralgia Femoral Hernia
Allergic Rhinitis	Coeliac Disease	Fibroadenoma
Alopecia	Cold Sore / Herpes Simplex	Fibroid - Uterine
Anal Fissure/Fistula	Common Cold(s)	Fibromyalgia
Appendectomy	Conjunctivitis	Fibromyositis
Astigmatism	Constipation	Fibrositis
Athlete's Foot / Tinea Pedis	Corneal Graft	Frozen Shoulder
Attention Deficit Hyperactivity Disorder (ADHD)	Cosmetic Surgery	Ganglion
Bell's Palsy (Facial Paralysis)	Cyst - Testicular	Glandular Fever (Full recovery made)
Benign Prostatic Enlargement	Cystitis (No ongoing treatment, no <b>hospital</b> admissions)	Glaucoma
Bladder Infection (No ongoing treatment, no <b>hospital</b> admissions)	Cystocele (No ongoing treatment, no <b>hospital</b> admissions)	Glue Ear (Resolved - must be all clear prior to travel if flying)
Blepharitis	D & C / Dilatation and Curettage	Goitre
Blindness	Deaf Mutism	Gout
Blocked Tear Ducts	Deafness	Grave's Disease
Breast - Fibroadenoma	Dental Surgery	Grommet(s) inserted (for Glue Ear)
Breast Cyst(s)	Dermatitis (No <b>hospital</b> admissions or consultations)	Gynaecomastia
Breast enlargement / Breast Reduction	Deviated Nasal Septum	Haematoma (external)
<i>Broken Bones*</i> (Other than head or spine and no longer in plaster)	Diarrhoea and/or Vomiting (Fully resolved)	Haemorrhoidectomy
Bunion (Hallux Valgus)	Dislocations (No joint replacements or <b>hospital</b> admissions)	Haemorrhoids / Piles
Bursitis or Housemaid's Knee	Dry Eye Syndrome	Hammer Toe
Candidiasis (oral)	Dyspepsia	Hay Fever
Candidiasis (vaginal)	Ear Infections (Resolved - must be all clear prior to travel if flying)	Hernia (not Hiatus)
Carpal Tunnel Syndrome	Eczema (No <b>hospital</b> admissions or consultations)	Herpes Zoster (Shingles)
<i>Cartilage Injury*</i>	Endocervical Polyp	Hip Replacement (No subsequent arthritis and never any dislocation of a joint replacement)
Cataracts	Endocervicitis	Hives / Nettle Rash
Cervical Erosion	Endometrial Polyp	HRT (Hormone Replacement Therapy)

Waived Medical Condition List (and Cover limitations)	Waived Medical Condition (and Cover limitations)	Waived Medical Condition (and Cover limitations)
Hypospadias	Myalgic Encephalomyelitis (ME) (If the only symptom is fatigue and no <b>hospital</b> admissions)	Stigmatisation
Hypothyroidism / Underactive Thyroid	Myxoedema	Stomach Bug (Resolved)
Hysterectomy (Provided no malignancy)	Nasal Infection	Strabismus (Squint)
Impetigo	Nasal Polyp(s)	Stress Incontinence (No urinary infections)
Indigestion	Neuralgia (No <b>hospital</b> admissions)	Synovitis
Influenza (Full recovery made)	Nosebleed(s)	Talipes / Club Foot
Inguinal Hernia	Nystagmus	Tendon Injury* (only Achilles tendon injury)
Insomnia	Osgood-schlatter's Disease	Tennis Elbow
Intercostal Neuralgia (No <b>hospital</b> admissions)	Osteochondritis	Tenosynovitis
Intertrigo	Otosclerosis	Testicles – Epididymitis / Hydrocele / Varicocele
Irritable Bowel Syndrome (IBS) (Provided definite diagnosis made and no ongoing investigations)	Overactive Thyroid /Hyperthyroidism	Testicular Torsion (Twisted Testicle)
	Parametritis	
Keinboeck's Disease	Pediculosis	Throat Infection(s)
Keratoconus	Pelvic Inflammatory Disease	Thyroid - Overactive Thyroid Deficiency
Knee Injury* Collateral/cruciate ligaments	Photodermatoses	Tinnitus
Knee Replacement (No subsequent arthritis and never any dislocation of a joint replacement)	Post Viral Fatigue Syndrome (If the only symptom is fatigue and no <b>hospital</b> admissions)	Tonsillitis
Kohlers Disease	Prickly Heat	Tooth Extraction / Toothache
Labyrinthitis	Prolapsed Uterus (womb)	Torn Ligament*
Laryngitis	Pruritis	Torticollis (Wry Neck)
Leptothrix	Psoriasis (No <b>hospital</b> admissions or consultations)	Trichomycosis
Leucoderma	Repetitive Strain Injury	Turner's Syndrome
Lichen Planus	Retinitis Pigmentosa	Umbilical Hernia
Ligaments (injury)	Rhinitis (Allergic)	Undescended Testicle
Lipoma	Rosacea	Urethritis (No ongoing treatment, fully recovered and no <b>hospital</b> admissions)
Macular Degeneration	Ruptured Tendons* (only Achilles tendon)	URTI (Upper Respiratory Tract Infection) (Resolved and no further treatment)
Mastitis	Salpingo-oophoritis	Urticaria
Mastoidectomy (Resolved and must be all clear prior to travel, if flying)	Scabies	Uterine Polyp(s)
Menopause	Scalp Ringworm / Tinea Capitis	Uterine Prolapse / Womb prolapse
Menorrhagia	Scheuermann's Disease (Provided no respiratory issues)	Varicocele
Migraine (Provided a definite diagnosis is made and there are no ongoing investigations)	Sebaceous Cyst	Varicose Veins (Legs only, never any ulcers or cellulitis (if GP has confirmed that client is fit to travel))
Miscarriage	Sinusitis	Vasectomy
Mole(s)	Skin Ringworm (Tinea Corporis)	Verruca
Molluscum Contagiosum	Sleep Apnoea (No machine used to assist breathing)	Vitiligo
Myalgia	Sore Throat	Warts (Benign, non-genital)
	Sprains	

In addition to any **medical condition(s)** listed on the 'Waived Medical Condition List,' **you** are automatically accepted for cover, provided **you** do NOT have more than ONE of the following **medical conditions** in this table and **you** must NOT have ANY other **pre-existing medical**

**condition(s).** If you have a **pre-existing medical condition(s)** that does not meet the above or below criteria, **you** must contact the Medical Screening Department at +353 1 533 7357 to declare all of **your pre-existing medical conditions** to ensure that the cover is suitable for **your needs**.

Medical Condition	Cover Limitations
Arthritis <ul style="list-style-type: none"> <li>- Juvenile</li> <li>- <i>Osteoarthritis*</i></li> <li>- Rheumatoid Arthritis</li> <li>- Psoriatic Arthritis</li> <li>- Reiter's Syndrome</li> <li>- Rheumatism</li> </ul>	<ul style="list-style-type: none"> <li>- There must have been <b>NO hospital</b> admissions within the last 12 months.</li> <li>- Must NOT affect the back more than any other area of the body.</li> <li>- No more than 2 medications.</li> <li>- No mobility aids (other than walking stick or frame).</li> <li>- There must have been <b>NO</b> dislocations of any joint replacements.</li> <li>- Must NOT be awaiting surgery.</li> <li>- Must have <b>NO</b> lung problems/respiratory disorders.</li> </ul>
Asthma <ul style="list-style-type: none"> <li>- Wheezing</li> </ul>	<ul style="list-style-type: none"> <li>- There must have been <b>NO hospital</b> admissions EVER.</li> <li>- Must have been diagnosed under the age of 50.</li> <li>- Must be controlled with 2 or less medications (NO nebuliser, NO home oxygen).</li> <li>- Must have been a non-smoker for at least 12 months.</li> <li>- Must always be able to walk 200 yards on the flat without becoming short of breath.</li> </ul>
Diabetes Mellitus <ul style="list-style-type: none"> <li>- Sugar Diabetes</li> </ul>	<ul style="list-style-type: none"> <li>- Type 2 (Non-Insulin-Dependent Diabetes Mellitus) only.</li> <li>- Controlled by diet alone or by no more than 1 medication (no insulin).</li> <li>- There must have been <b>NO hospital</b> admissions or diabetic complications EVER.</li> <li>- Must have been a non-smoker for at least 12 months.</li> </ul>
Hypercholesterolaemia <ul style="list-style-type: none"> <li>- High/Raised Cholesterol</li> </ul>	<ul style="list-style-type: none"> <li>- No more than 1 medication.</li> <li>- Must NOT be the inherited (genetic) form.</li> <li>- Must have been a non-smoker for at least 12 months.</li> </ul>
Hypertension <ul style="list-style-type: none"> <li>- High Blood Pressure</li> <li>- White Coat Syndrome</li> </ul>	<ul style="list-style-type: none"> <li>- No more than 2 medications.</li> <li>- There must have been no change in treatment within the last 6 months.</li> <li>- Must have been a non-smoker for at least 12 months.</li> </ul>
Hypotension <ul style="list-style-type: none"> <li>- Low Blood Pressure</li> </ul>	<ul style="list-style-type: none"> <li>- Must NOT be associated with any underlying condition.</li> </ul>
Osteoporosis* <ul style="list-style-type: none"> <li>- <i>Osteopaenia*</i></li> <li>- <i>Fragile Bones*</i></li> </ul>	<ul style="list-style-type: none"> <li>- There must have been no broken bones within the last 5 years.</li> <li>- There must have been <b>NO</b> vertebral (backbone) fractures.</li> </ul>

#### **Winter Sports Important Note: Platinum Cover:**

**Winter Sports** is included as standard under Platinum cover, however some **medical conditions** are excluded for **winter sports** participation.

\*If you have any **medical condition** listed in this section highlighted in *italic* font and marked with an asterisk (\*) and **you** are participating in **winter sports** activities, **you** must contact the Medical Screening Department at +353 1 533 7357 to declare **your medical conditions** to ensure that the cover is suitable for **your needs**.

The following **medical conditions** are not covered for **winter sports** participation: Achilles tendon injury, brittle bones, knee dislocation, ligament damage, osteogenesis imperfecta, osteoporosis, osteopetrosis, osteopenia and patellar dislocation.

If **you** have any of these or any other **medical conditions**, please contact **our** Medical Screening Department for help at +353 1 533 7357.

#### **Cover Relating to the Health of Non-Travellers**

This policy will not cover any cancellation or **curtailment** claims if the claim arises directly or indirectly from a **medical condition** affecting **your immediate relative, travelling companion** or any person with whom **you** have arranged to reside with during **your trip** and who is not insured under this policy, under the following circumstances:

##### **1. At the time of purchasing this policy or booking your trip:**

- i) Any **medical condition** for which they had received a terminal prognosis.
- ii) Any **medical condition** for which they are aware of, but have not had a diagnosis.
- iii) Any **medical condition** for which they are on a waiting list for or have the knowledge of the need for surgery, treatment or investigation at a **hospital**, clinic or nursing home.

##### **2. In the 90 days prior to the purchase date of this policy or booking your trip (whichever is earlier), they:**

- i) required surgery, inpatient treatment or **hospital** consultations.

There is no cover for cancellation or **curtailment** due to a terminal prognosis which has been received by **your immediate relative, travelling companion** or any person with whom **you** have arranged to reside temporarily during **your trip** prior to the purchase of this insurance or booking **your trip** (whichever is later).

**We** have the right not to extend this insurance to cover any **pre-existing medical condition(s)**. Please also refer to the appropriate policy sections and general exclusions section.

#### **Emergency Assistance Service**

In the event of **your bodily injury** or illness which may lead to inpatient **hospital** treatment or before incurring any expenses over €650 or before any arrangements are made for repatriation or in the event of **curtailment**, necessitating **your** early return to **your home area**, **you** must contact the **emergency assistance service**. The service is available to **you** and operates 24 hours a day, 365 days a year for advice,

assistance, making arrangements for **hospital** admission, repatriation and authorisation of medical expenses. If this is not possible because the condition requires immediate emergency treatment, **you** or someone designated by **you** must contact the **Emergency Assistance Service** as soon as possible and within 48 hours, otherwise **we** may not pay **your** claim.

Private medical treatment is not covered unless authorised specifically by the **emergency assistance service**. This travel insurance policy is NOT a private medical insurance policy and does not provide cover for procedures that can be carried out in **your home country** after repatriation.

## Medical Assistance Abroad

The **Emergency Assistance Service** has the medical expertise, contacts and facilities to help should **you** be injured in an **accident** or fall ill. The **Emergency Assistance Service** will also arrange transport to **your home area** when this is considered to be medically necessary or when **you** have notice of **serious illness** or death of a **close relative at home**.

## Payment for Medical Treatment Abroad

If **you** are admitted to a **hospital**/clinic while abroad, the **Emergency Assistance Service** will arrange for medical expenses covered by the policy to be paid direct to the **hospital** or clinic. To take advantage of this benefit someone must contact the **Emergency Assistance Service** for **you** as soon as possible.

## Outpatient Treatment

For simple outpatient treatment, **you** should pay the **hospital** or clinic **yourself** and claim back medical expenses from **us** on **your** return to **your home area**. Beware of requests for **you** to sign for excessive treatment or charges. If in doubt regarding any such requests, please call the **Emergency Assistance Service** for guidance.

Telephone calls are recorded and may be monitored.

## Reciprocal Health Agreements and Private Medical Insurance

If valid medical costs have been reduced using a European Health Insurance Card (EHIC) or Global Health Insurance Card (GHIC), other reciprocal health agreement or private health insurance **we** will not deduct an **excess**.

### Europe and EHIC

Residents of **Ireland** are entitled to health care through the public system in countries of the European Union (EU), European Economic Area (EEA) and Switzerland if **you** become ill or injured while on a temporary stay there. **We** strongly recommend **you** apply for and obtain a European Health Insurance Card (or Global Health Insurance Card for residents of Northern Ireland) for **yourself** and/or family and make sure that any medical treatment is provided at **hospitals** or by **doctors** working within the terms of the reciprocal health care agreement, unless the **Emergency Assistance Service** agree otherwise.

If **you** are admitted to a private clinic, **you** may be transferred to a public **hospital** as soon as the transfer can be arranged safely.

### Private Medical Insurance

If **you** are currently a VHI, Laya Healthcare or Irish Life member, **you** must notify the relevant private medical insurance assistance company at the time of claiming as per contact details below.

- VHI Assistance: Tel +353 1 448 2444
- Laya Healthcare Assistance: Tel +353 21 422 2204
- Irish Life Health Assistance: Tel +353 1 481 7840

### Australia and Medicare

If **you** are travelling to Australia and **you** require medical treatment, **you** must register for and make use of the treatment offered under the national Medicare scheme. **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 outpatient treatment at a public **hospital** is then available free of charge. Details of how to enrol and the free treatment available can be obtained by the Australian Embassy in Ireland by contacting 01 664 5300 or [www.ireland.embassy.gov.au](http://www.ireland.embassy.gov.au).

If **you** are admitted to **hospital**, contact must be made with the **Emergency Assistance Service** as soon as possible and their authority obtained in respect of any treatment NOT available under MEDICARE.

# Sports and Activities Section

The following tables confirm the sports and activities that this policy will cover. Cover for these activities is included for recreational, amateur purposes only, unless otherwise stated. If **you** have purchased a Silver policy, **you** are covered for the sports and activities listed in the Silver Cover column only. If **you** have purchased either a Gold or Platinum policy, **you** are covered for all sports and activities listed in the Gold & Platinum Cover column.

If **you** wish to undertake a pursuit or activity which is not listed in this policy or are in any doubt as to whether cover will apply, please call the A&G Travel Helpline on (01) 874 8458.

## ✓ What is covered

**We** will cover **your** participation in the sports and activities listed for recreational and amateur purposes only unless otherwise stated. **You** are only covered for taking part in sports or activities if they are listed below and the appropriate policy level has been purchased.

## ! Special conditions relating to claims

1. Under no circumstances will any claims arising from any sport or activity not listed in the below tables be covered, regardless of whether undertaken as part of an organised excursion or event.
2. If **you** participate in any listed activity below:
  - a. **you** are required to use the appropriate safety equipment for that activity at all times (e.g. take all necessary precautions, wear protective clothing, use suitable head and eye protection).
  - b. **you** must follow the supervision and instruction of qualified experts for the activityPlease note that this policy includes a general exclusion for claims arising directly or indirectly from "self-exposure to needless peril."
3. If **you** use a motorised vehicle during **your trip**, **you** must hold a full, valid driving licence that allows the use of such vehicles in both **your home country** and **your trip** destination.
4. **You** are covered when travelling by recognised **public transport** between countries; however, coverage will not apply if **you** are being paid to crew a private motor or sailing vessel or if **you** are travelling by private plane.
5. Although coverage is provided for certain sports and activities, this does not imply that **we** consider these activities to be safe. **You** are responsible for ensuring that **you** are capable of safely participating in the planned sport or activity and must take necessary precautions to avoid injury, **accident** or loss to **yourself** or others.

## ✗ What is not covered

These exclusions apply throughout **your** policy. **We** will not pay for claims arising directly or indirectly from:

1. **Unnecessary danger**  
**You** placing **yourself** in unnecessary danger (for example, not wearing suitable head protection or protective clothing when taking part in a specific sport or activity, or not wearing a seatbelt while in a moving vehicle).
2. **Cycle helmet**  
Any claim arising from injuries sustained whilst **you** are cycling, where **you** are not wearing an appropriate cycle helmet at the time of the incident.
3. **Decompression and Scuba Diving**  
Any claim arising as result of flying less than 24 hours after a scuba dive or for any unaccompanied dive, any dive in overhead environments or any dive for gain or reward.
4. **Professional sports or entertaining**  
**Your** participation in or practice of any competitive professional sports or professional entertaining.
5. **Search and rescue costs**  
Any claim arising from air and/or sea search and rescue.
6. **Sports or activity training courses or qualification courses(s)**  
**Your** participation in any professional sports or activity training courses or qualification course(s) racing or participating in speed or time trials.
7. **Motorbike**  
Any claim arising as result of motorbike touring or where a motorbike is the main mode of transport on **your trip**.

### Important Note to All Sports and Activities under Section 11 – Personal Accident and Section 12 – Personal Liability

Any claim under Section 11 – Personal Accident is limited to 50% of the benefit payable if the injury is as a result of undertaking or participating in any listed Sports or Activity listed in the following tables.

**We** will not pay for any claims under Section 12 – Personal Liability which are as a result of undertaking or participating in any sports or activity listed in the following sports and activities table.

Sports and Activities	Silver	Gold & Platinum	Cover Limitation
Abseiling (Indoor/Outdoor climbing wall up to 25m)	✗	✓	(i)
Aerial Safari (Chartered aircraft and organised excursion)	✓	✓	
Aerial Tram	✓	✓	
Aerobics	✓	✓	
Air Boarding	✓	✓	
Amateur Athletic Field/Track Events	✓	✓	
Angling/Fishing - Freshwater (Leisure fishing only - no commercial or rock fishing)	✓	✓	
Angling/Fishing - Sea (Leisure fishing only - no commercial)	✓	✓	
Archery	✓	✓	(i)
Archaeological digging	✓	✓	
Assault course	✗	✓	(i)
Badminton	✓	✓	
Bamboo Rafting	✓	✓	
Banana Boating (Only as a passenger with no right of control)	✓	✓	(i)
Baseball	✗	✓	
Basketball	✓	✓	
Battle re-enactment	✓	✓	
Beach Games	✓	✓	
Biathlon (Organised Event)	✗	✓	
Billiards / Snooker / Pool	✓	✓	
Bird Watching	✓	✓	
Blokarting	✗	✓	(i)
Boardsailing/Sailboarding/Windsurfing	✓	✓	
Body Boarding / Boogie Boarding	✓	✓	
Bowling (lawn, nine/ten-pin, candlepin, duckpin and five-pin bowling, bowls, pétanque & boules)	✓	✓	
Breathing Observation Bubble (BOB)	✗	✓	(i)
Bridge Climb / Walk (Within organiser's guidelines)	✓	✓	(i)
Bridge Swinging (Within organiser's guidelines)	✗	✓	(i)
Bungee/bungy jumping (max 3 jumps per trip)	✗	✓	(i)
Camel Riding	✗	✓	(i)
Camp America Counsellor	✓	✓	
Camping	✓	✓	
Canoeing/Kayaking – Not Sea (Leisure only, in calm waters. Life jacket, helmet must be worn)	✓	✓	
Canoeing/Kayaking - Sea (Leisure only, inside territorial waters. Life jacket, helmet must be worn)	✓	✓	
Canoeing (White Water Grades 1-3. Life jacket and helmet must be worn)	✗	✓	
Caravanning	✓	✓	
Caving (Sightseeing/tourist attraction)	✓	✓	
Clay Pigeon Shooting	✗	✓	(ii)
Climbing (Indoor/Outdoor climbing wall only up to 25m)	✓	✓	
Cricket	✓	✓	
Croquet	✓	✓	
Cross Country Running (non-competitive)	✓	✓	
Curling	✓	✓	
Crewing of a Vessel (Inside territorial waters)	✓	✓	
Cycle Touring (leisure, not racing or downhill racing, helmet must be worn, under 2,500 metres altitude. Excluding professional cycling and mountain biking)	✗	✓	
Cycling (leisure, not racing or downhill racing, helmet must be worn, under 2,500 metres altitude. Excluding professional cycling and mountain biking)	✓	✓	
Dancing	✓	✓	

Sports and Activities	Silver	Gold & Platinum	Cover Limitation
Darts	✓	✓	
Deep Sea Fishing (with a professional fisherman, leisure fishing only, no commercial)	✓	✓	
Disc Golf	✓	✓	
Dragon Boat Racing (Inland or territorial waters only)	✗	✓	
Dry Slope Skiing/Dry Slope Snowboarding	✓	✓	
Elephant Riding	✓	✓	(i)
Falconry	✓	✓	(i)
Fell Walking (Up to 3,000 metres above sea level, not using picks or ropes)	✓	✓	
Fencing	✗	✓	
Fives	✓	✓	
Flag Football	✓	✓	
Fly Boarding	✓	✓	
Flying as a fare paying passenger in a fully licensed passenger carrying aircraft	✓	✓	
Flying as passenger (Private/small aircraft/helicopter, limited to 12 hours maximum flying time)	✗	✓	(i)
Flying Fox - Cable car (Safety harness must be worn)	✗	✓	(i)
Football/Soccer - Organised Amateur, Practice and Training and/or Match	✓	✓	
Frisbee (Recreational / Ultimate Frisbee)	✓	✓	
Gaelic - Camogie, Football, Hurling	✓	✓	
Go-karting (up to 120cc, professionally organised)	✓	✓	(i)
Golf	✓	✓	
Grass Skiing	✗	✓	
Gym Training (Aerobics, spinning, zumba, body pump, weight training, cross training, crossfit)	✓	✓	
Gymnastics	✓	✓	
Handball (Organised Amateur Match)	✓	✓	
High Diving (Under 5 Meters and excluding cliff diving)	✗	✓	
Highland Games	✓	✓	
Hockey (Field – Organised Amateur Match)	✓	✓	
Horse Riding (Leisure, non-competitive riding, no jumping, no polo, no hunting. Wearing a helmet and using tack equipment)	✗	✓	(i)
Hot Air Ballooning (Organised Excursion)	✗	✓	(i)
Hydro Zorbing (Under Supervision of a Licensed Operator)	✓	✓	(i)
Ice Skating	✓	✓	(i)
Indoor Skating	✓	✓	
Iron Man (Organised Event)	✗	✓	
Jeep Safari (Ireland/United Kingdom organised, No guns)	✗	✓	(i)
Jet Boating (Organised Excursion, inland/coastal waters only)	✗	✓	(ii)
Jet Skiing (Inland/coastal waters)	✗	✓	(ii)
Jogging (Up to 3,000 metres above sea level, not using picks or ropes)	✓	✓	
Judo (Organised Training)	✗	✓	
Karate (Organised Training)	✗	✓	
Kayaking (White Water Grades 1-3. Life jacket and helmet must be worn)	✗	✓	
Kendo (Organised Training)	✗	✓	
Kiting / Kite Surfing	✗	✓	
Korfball	✓	✓	
Lacrosse (Organised Amateur Match)	✗	✓	
Laser Tag	✓	✓	
Low Ropes	✓	✓	
Marathon Running (Organised Event)	✗	✓	

Sports and Activities	Silver	Gold & Platinum	Cover Limitation
Martial Arts (Organised Training, No Competition or bouts)	✗	✓	(i)
Mountain Biking (Leisure, on road, no racing or downhill racing, helmet must be worn, under 2,500 metres altitude)	✗	✓	
Netball	✓	✓	
Orienteering	✓	✓	
Paddle Boarding	✓	✓	
Paint Balling	✓	✓	(i)
Parachuting (1 jump per trip, tandem only with a certified instructor and no solo jumps).	✗	✓	(i)
Parasailing (Over water)	✗	✓	
Parascending (When attached to a speedboat)	✗	✓	(ii)
Pedalos	✓	✓	
Peteca	✓	✓	
Pigeon Racing	✓	✓	
Pony-trekking (Leisure/non-competitive riding, no jumping, no polo, no hunting. Wearing a helmet and using tack equipment)	✓	✓	(i)
Pool/Snooker	✓	✓	
Quad-biking (Under 150cc, wearing a helmet)	✗	✓	(i)
Quoit	✓	✓	
Rackets	✓	✓	
Racquet-ball	✓	✓	
Rafting (White Water Grades 1-3. Life jacket and helmet must be worn)	✗	✓	
Rambling (Up to 3,000 metres above sea level, not using picks or ropes)	✓	✓	
Refereeing	✓	✓	
Ringos	✓	✓	(i)
River Punting	✗	✓	
Roller Blading, Line Skating (Excludes racing, competition(s) and helmet & pads must be worn)	✓	✓	
Rounders	✓	✓	
Rowing (Inland/coastal waters, no white water)	✓	✓	
Rugby Football - Organised Amateur, Practice and Training and/or Match	✗	✓	
Running (Up to 3,000 metres above sea level, not using picks or ropes)	✓	✓	
Safari Tours (Ireland/United Kingdom organised, No guns)	✓	✓	(i)
Sailboarding/Windsurfing/Boardsailing	✓	✓	
Sailing/Yachting (Leisure only, inside territorial waters)	✓	✓	(ii)
Sand Yachting (No racing)	✗	✓	
Scuba Diving (Not solo, up to maximum 30m, conventional scuba diving only)	✗	✓	(iii), (iv)
Sea Canoeing/Kayaking (Leisure Only, Inside Territorial Waters. Life jacket, helmet must be worn)	✓	✓	
Segway Tours (Helmet must be worn)	✓	✓	(i)
Shark Cage Diving (Must be pre-organised through a licensed operator in Ireland/United Kingdom organised, in a cage only)	✗	✓	(i)
Shinty	✓	✓	
Skateboarding (Excludes racing, competition(s) and helmet & pads must be worn)	✓	✓	
Snorkelling (Inside marked areas and/or with a lifeguard present)	✓	✓	
Softball	✗	✓	
Sphering	✓	✓	
Squash	✓	✓	
Stoolball	✓	✓	
Street Hockey	✓	✓	
Surfing	✓	✓	
Swimming	✓	✓	

Sports and Activities	Silver	Gold & Platinum	Cover Limitation
Swimming with Dolphins	✓	✓	(i)
Table Tennis	✓	✓	
Ten Pin Bowling	✓	✓	
Tennis	✓	✓	
Theme Parks	✓	✓	
Tour Operator Safari (No guns)	✓	✓	(i)
Tough Mudder (Organised Event)	✗	✓	
Trampolining	✗	✓	
Trapeze/High Wire (Supported by cords, with safety net installed)	✗	✓	(i)
Tree Canopy walking / Canopy Walk	✓	✓	
Trekking / Hiking (Up to 3,000 metres above sea level, not using picks or ropes)	✓	✓	
Trekking / Hiking (Up to 6,000 metres above sea level, not using picks or ropes)	✗	✓	
Triathlon (Organised Event)	✗	✓	
Tubing on Rivers (Grades 1-2)	✗	✓	(i)
Tug of War	✓	✓	
Unicycle Riding	✓	✓	
Volleyball	✓	✓	
Via Ferrata (Grades A-C)	✗	✓	
Voluntary Work - teaching within a school or work within an orphanage only (no <b>manual work</b> )	✗	✓	
War Games/Paint Balling (Wearing eye protection. Professionally organised)	✓	✓	
Water Parks	✓	✓	
Water Polo	✓	✓	
Water Skiing (No water ski-jumping)	✓	✓	(ii)
Weight Lifting	✓	✓	
Whale Watching (Professionally organised)	✓	✓	
Work (excluding <b>manual work</b> ) - Bar and restaurant work, wait staff, chalet, maid, au pair and childcare services, managerial/supervisory roles, retail work, sales, clerical duties, administrative work, occasional manual labour (ground level only and no machinery or use of power tools)	✗	✓	(v)
White and Black Water Rafting (Grades 1 to 4. Life jacket and helmet must be worn)	✗	✓	
Windsurfing/Boardsailing/Sailboarding	✓	✓	
Yachting/Sailing (Leisure only, inside territorial waters)	✓	✓	(ii)
Yoga (Class, alone/home practice)	✓	✓	
Zip Line (Safety harness must be worn)	✗	✓	(i)
4x4 Off-roading (Professionally organised. Seat belt must be worn)	✗	✓	(i), (ii)

## Sports and Activities Cover Limitations

- (i) You must be with a professional, qualified and licensed guide, instructor or operator.
- (ii) You must be with a professional, qualified and licensed guide, instructor or operator or you must have the appropriate certification or licence to do this sport or activity at **home**. If operating a motor vehicle, the driver must have the appropriate valid UK/ROI licence for the vehicle.
- (iii) You must hold a British Sub Aqua Club certificate or Professional Association of Diving Instructors certificate or equivalent and follow the relevant Club or Association rules and guidelines at all times or you must only dive under the constant supervision of a properly licensed diving school and follow their rules and instructions at all times. There is no cover for any unaccompanied dive, any dive in overhead environments or any dive for gain or reward.
- (iv) Scuba diving is covered to the confirmed depths provided you are diving with and under the direction of an accredited Dive Marshall, instructor or guide. If you are suitably qualified, and are not diving alone, cover is provided within the guidelines of the relevant diving or training agency or organisation as confirmed below:
  - PADI Open Water - 18 metres
  - PADI Advanced Open Water - 30 metres
  - BSAC Ocean Diver - 20 metres
  - BSAC Sports Diver - 30 metres
- (v) In the event of an injury occurring as a result of manual labour, the excess under Section 5 – Emergency Medical Expenses will be increased to €300 and Excess Waiver will not apply.

# General Exclusions Applicable to All Sections of the Policy

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

1. Your travel to a country, specific area or **event** to which the Department of Foreign Affairs ([www.ireland.ie/en/dfa/overseas-travel/advice](http://www.ireland.ie/en/dfa/overseas-travel/advice)) has issued travel restrictions. If the Department of Foreign Affairs has issued travel restrictions specifically related to **COVID** and you commence **your trip** whilst **COVID** travel restrictions are in effect, you are insured to travel, however there is no cover whatsoever under any section of this policy for claims directly or indirectly related to **COVID** during **your trip**.
2. Any circumstance known to **you** before purchasing this insurance or at the time of booking any **trip** which could reasonably be expected to result in a claim.
3. Your failure to comply with the terms and conditions of the Medical Warranty and Important Conditions Relating to Health section.
4. You not complying with **your period of insurance**.
5. Any claim for pregnancy which falls outside of the definition of **complications of pregnancy and childbirth**.
6. Any claim arising directly or indirectly, if at the start of **your trip** you are unfit to travel, travelling against medical advice, not following prescribed medical treatment, or travelling to obtain medical treatment abroad.
7. Any claim when **you** have not paid the appropriate premium for **your** planned **trip** and/or if **you** travel for more than the number of days for which **you** have paid for cover; **you** will not be covered after the last day for which **you** have paid.
8. The **excess** as shown in the Schedule of Cover, unless **you** have purchased Excess Waiver and this is shown on **your certificate of insurance**.
9. Your intentional self-injury or self-exposure to needless peril or risk (except in an attempt to save human life).
10. You:
  - a) jumping or diving from a pier, wall, bridge or rock, including tombstoning or shore diving;
  - b) climbing on top of or jumping from a vehicle;
  - c) climbing or jumping from a building or balcony;
  - d) climbing or moving from any external part of any building to another part (not including if **you** are using stairs) and falling, regardless of the height;unless **you** do this because **your** life is in danger, or **you** are attempting to save a human life.
11. Any claim arising or resulting from **your** own unlawful action or any criminal proceedings against **you**.
12. Fighting, except in self-defence.
13. Deliberate, self-inflicted injury or **serious illness**, suicide or attempted suicide, solvent abuse, alcohol abuse or **your** alcohol dependency and use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a **medical practitioner**, but not for the treatment of drug addiction or alcohol dependency).
14. You drinking too much alcohol which is evidenced by one of the following:
  - a) a **medical practitioner** stating that **your** alcohol consumption has caused or actively contributed to **your** injury or illness;
  - b) a witness report from a third party or a police incident report;
  - c) **your** own admission;
  - d) **you** having drunk so much alcohol that **your** judgment is affected, and **you** need to make a claim as a result.
15. Any deliberately, careless or negligent act or omission by **you**.
16. Any other loss, damage or extra expense following on from the event **you** are claiming for, unless **we** provide cover for this under this insurance. Examples of loss, damage or extra expense would be the cost of replacing locks after losing keys, costs arising from preparing a claim or loss of earnings following **bodily injury or serious illness**.
17. Any payment which **you** would normally have made during **your trip** if nothing had gone wrong.
18. Your failure to obtain the required passport or visa for the duration of **your trip**.
19. Loss of enjoyment.
20. **Manual work**.
21. You taking part in any professional sports or professional entertaining.
22. Your participation in any formal organised competition involving any sports and activities (unless stated as covered) or **winter sports**.
23. You taking part in any other sport or activity or racing unless:
  - a) it is shown as covered without charge under the sports and activities table; or
  - b) it is shown as covered on **your certificate of insurance**.
24. You taking part in a **winter sports** activity, unless **you** have selected Platinum cover, and this is shown on **your certificate of insurance**. There is no cover for the following winter sports: ski acrobatics, ski jumping, heli-skiing, bobsledding, luge, ski racing of any kind, the use of skeletons or bobsleighs and snow jumping stunts.
25. Your engagement in or practice of:
  - a) flying, except as a fare paying passenger in a fully licensed passenger carrying aircraft,
  - b) the use of a motorised vehicle, unless a full, valid Republic of Ireland or United Kingdom driving licence is held, permitting the use of such vehicles in both **your home country** and **your trip** destination.
  - c) professional entertaining, professional sports, racing (other than on foot), motor rallies and motor competitions.
26. Any claim arising directly or indirectly from operational duties as a member of the Armed Forces, other than claims arising from authorised leave being cancelled due to operational reasons, as provided for under Section 1 – Cancellation.
27. Any claim caused directly or indirectly from the bankruptcy/liquidation of any tour operator, travel agent or transportation company.
28. Any unused or additional costs incurred by **you** which are recoverable from other sources, not limited to:
  - a) the providers of the accommodation, their booking agents, travel agent or other compensation scheme.
  - b) the providers of the transportation, their booking agents, travel agent, compensation scheme or Air Travel Organisers' Licensing (ATOL).
  - c) **your** credit or debit card provider or PayPal.

29. Any claim arising directly or indirectly from the following:

- a) costs of telephone calls, faxes, meals, taxi fares (except for the initial taxi journey to a **hospital** abroad due to an **insured person's** illness or injury);
- b) interpreters' fees, timeshare maintenance fees, holiday property bonds or points; and
- c) additional travel or accommodation costs

unless pre-authorised by **us** as part of a valid claim under Section 1 – Cancellation, Section 2 – Curtailment, Section 5 – Emergency Medical Expenses, Section 11 – Personal Accident, Section 7 – Trip Resumption and Section 6 - Continuing Medical Expenses in Ireland. **We** will cover costs which **you** are able to provide a receipt or other reasonable evidence to show the cost of the call and the telephone number dialled.

30. **Pandemic or epidemic.**

31. **We** will not pay more than €650 in total for medical expenses, flights, or associated costs if **you** fail to contact **our Emergency Medical Service** at the earliest opportunity, or prior to incurring costs related to a **curtailment** claim.

32. Any claim arising directly or indirectly from the following:

- d) loss of any kind arising from the provision of, or any delay in providing, the services to which this policy relates, unless negligence on **our** part can be demonstrated.
- e) loss or damage caused by the provision of, or any delay in providing, the medical (or medical related) services to which the cover under this policy relates, whether provided by **us** or by anybody else (whether or not recommended by **us** and/or acting on **our** behalf), unless negligence on **our** part can be demonstrated.

33. Any claims caused by or relating to **COVID**. This applies to all sections of cover except Section 1 – Cancellation, Section 2 – Curtailment and Section 5 – Emergency Medical Expenses, provided **you** have not travelled to a country or specific area or **event** to which the Department of Foreign Affairs or the World Health Organization (WHO) or similar body has issued travel security rating restrictions.

34. An outbreak of **COVID** resulting in a national or local lockdown or any restrictions of movement affecting the area where **your home** is located, the country, specific area or event to which **you** were travelling to or through, on the date **you** applied for this insurance or at the time of booking **your trip**.

35. **You** being unable to travel because **you** were forced to cancel **your trip**, abandon **your trip** or **your** return journey is delayed because **you** chose, were legally required to or were recommended to quarantine or isolate as a result of exposure to an infectious disease including **COVID**.

36. **You** cancelling or abandoning **your trip** as a result of the Department of Foreign Affairs or a local government authority advising against travel because of any infectious disease, including **COVID**.

37. **COVID** where **you** have not received a positive **COVID** diagnosis certified by a **medical practitioner**.

38. Any home or self-administered **COVID** rapid antigen test(s).

39. Any claims caused by or relating to a natural disaster. A natural disaster means an extraordinary natural phenomenon such as tsunamis, earthquakes, landslides, volcanic eruptions (including volcanic ash clouds), atypical cyclonic storms, falling objects from space (including meteorites), and in general any extraordinary atmospheric, meteorological, seismic or geological phenomenon.

40. **Your** failure to comply with the 'Special conditions relating to claims' listed in each section 1 through to 18.

41. Any consequences of **cyber-terrorism** including, but not limited to, the delay or cancellation of flights due to the failure of critical systems.

42. War, risk of war, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, **terrorism**, revolution, insurrection, civil commotion or unrest assuming the proportions of or amounting to an uprising, military or usurped power but this exclusion shall not apply to losses under Section 5 – Emergency Medical Expenses or Section 11 – Personal Accident unless such losses are caused by nuclear, chemical or biological attack, or the disturbances were already taking place at the beginning of any **trip**.

43. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste, from combustion of nuclear fuel, the radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly.

44. Loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.

45. The failure or fear of failure or inability of any equipment or any computer programme, whether or not **you** own it, to recognise or to interpret correctly or process any date as its true calendar date or to continue to function correctly beyond that date.

46. Any loss, damage, destruction, distortion, erasure, corruption or alteration of electronic data from any cause whatsoever.

47. Any claim directly or indirectly relating to the malfunction of any computer equipment as a result of a computer virus. This exclusion does not apply to claims under Section 5 – Emergency Medical Expenses and Section 11 – Personal Accident.

48. Any act of **terrorism**; this exclusion will not apply to Section 5 – Emergency Medical Expenses, Section 11 – Personal Accident, Section 6 - Continuing Medical Expenses in Ireland and to any medical emergency assistance, provided **you** have not participated in or conspired in such activities.

## Section 1 – Cancellation

Cancellation must be necessary and unavoidable, this insurance policy provides cover for specific reasons only. Please note that even if **you** claim for a reason that is unforeseen or out of **your** control, there is no cover under this insurance policy unless the reason is listed under the “What is covered” section below.

### ✓ What is covered

#### Cancellation

If cancellation of **your trip** is necessary and unavoidable due to one of the reasons below, **we** will pay **you** up to the amounts shown in the Schedule of Cover for **irrecoverable** cancellation fees for **your**:

- a) Unused travel and accommodation costs.
- b) Unused pre-paid tuition fees paid to a university or equivalent institution abroad, for which **you** have already paid or are contractually obligated to pay.
- c) Ski hire, ski school and ski lift passes. Please note this cover only applies if **you** have purchased a Platinum level of cover and this is shown on **your certificate of insurance**.

Reasons for cancellation:

1. Death, **bodily injury, serious illness** or **complications of pregnancy and childbirth** of:
  - a) **You**;
  - b) **Your immediate relative** resident in **Ireland**; or
  - c) **Your travelling companion**.
2. **You** or **your travelling companion** receiving a diagnosis of **COVID** within 14 days before the start of **your trip**, or in the case of being admitted to **hospital** with a **COVID** diagnosis, within 28 days before the start of **your trip**.
3. **You** are required to attend an examination (university or equivalent institution), or **you** have not attained a result that permits **you** to commence or continue **your** chosen course of study, necessitating a re-sit of the examination, as a result of which **you** have to cancel **your trip**.
4. **You** being called for jury service or as a witness in a Court of Law (but not as an expert witness or where **your** employment would normally require **you** to attend court).

### ! Special conditions relating to claims

1. **You** must tell **your** travel agent, tour operator, transport or accommodation provider as soon as **you** know it is necessary to cancel **your trip**. If **you** do not, **we** are only responsible for the cancellation charges that would have applied at that date.
2. If **you** cancel **your trip** due to any **bodily injury or serious illness**, **you** must contact a **medical practitioner** immediately for treatment or advice (or both). **You** must also provide a medical certificate from a **medical practitioner** stating that **your bodily injury or serious illness** prevents **you** from travelling on **your** booked **trip**.
3. In the event of cancellation of **your trip** due to a positive **COVID** diagnosis, **we** will require (at **your** own expense) a medical certificate from a **medical practitioner** confirming **your** positive **COVID** diagnosis.
4. If **you** cancel **your trip** due to:
  - a) stress, anxiety, depression or any other mental or nervous disorder that **you** are suffering from **you** must provide (at **your** own expense) a medical certificate from a consultant specialising in the relevant field; or
  - b) **bodily injury, serious illness**, disease or **complication of pregnancy and childbirth**, **you** must provide (at **your** own expense) a medical certificate from a **medical practitioner** stating that this necessarily and reasonably prevented **you** from travelling.

### ✗ What is not covered

1. The **excess** as shown in the Schedule of Cover, unless **you** have purchased Excess Waiver and this is shown on **your certificate of insurance**.
2. Any **pre-existing medical condition** which **you** have not declared, and which **we** have not accepted in writing, or **your** failure to comply with the terms and conditions of the Medical Warranty and Important Conditions Relating to Health section.
3. Any claim arising directly or indirectly due to **your travelling companion** cancelling or rearranging their **trip**.
4. More than the cancellation charge that would have applied had **you** notified the travel agent, tour operator or transport or accommodation provider immediately after **you** knew it was necessary to cancel the **trip**.
5. Failure by the provider of any part of the booked **trip** to supply the service or transport (whether as the result of error, insolvency, omission, default or otherwise). **You** should direct these claims to the provider involved.
6. Anything arising directly or indirectly from the following causes:
  - a) prohibitive regulations by the government of any country.
  - b) any circumstance known to **you** likely to cause cancellation prior to the booking of the **trip** and/or insurance.
7. Any **COVID** claims arising within 28 days of the date **you** purchased this insurance or the time of booking any **trip**, whichever is the later, except where the insurance is purchased within 48 hours of booking the **trip**.
8. Travel tickets paid for using any mileage or supermarket reward scheme, for example Avios.
9. Accommodation costs paid for using any Timeshare or Holiday Property Bond or other holiday points scheme.
10. Failure by the provider of any part of the booked **trip** to supply the service or transport (whether as the result of error, insolvency, omission, default or otherwise). **You** should direct any claim in this case to the provider involved.

11. If the examination date was scheduled or if re-sit exam results were available, before **you** purchased this insurance or the time of booking any **trip**, whichever is the earlier.
12. Any costs relating to airport taxes, airport charges, service charges, facility charges, user fees, security charges or air passenger duty. **You** should obtain a refund from **your Carrier** for such charges.
13. Any costs arising from the withdrawal from service of an aircraft on which **you** are booked to travel as a result of ash or other debris arising from a volcano. **You** should direct any claim in this event to the transport operator involved.
14. **Your** failure to obtain the required passport or visa.
15. Claims arising due to **your** disinclination to travel.

**You** should also refer to the Medical Warranty and Important Conditions Relating to Health section, as well as the General Exclusions, General Conditions and Claim Conditions sections as they are also applicable.

## Section 2 – Curtailment

This insurance policy provides cover for specific reasons only. Please note that even if **you** claim for a reason that is unforeseen or out of **your** control, there is no cover under this insurance policy unless the reason is listed under the “What is covered” section below. If **you** have to **curtail your trip** due to **your** illness or injury, **you** must contact the **Emergency Assistance Service** before making any arrangements for **your** repatriation to **your home country**.

### ✓ What is covered

#### Curtailment

If **your trip** is cut short for one of the reasons below, **we** will pay **you** up to the amount shown in the Schedule of Cover for **your irrecoverable**:

- a) unused travel and accommodation **curtailment** costs incurred in returning **home** which **you** have paid or will have to pay if **your trip** is **curtailed** before completion.
- b) school and university fees paid to colleges abroad which have not been used and for which **you** have pre-paid or are contracted to pay.
- c) ski hire, ski school and ski lift passes if **curtailment** of the **trip** is necessary and unavoidable. Please note this cover only applies if **you** have purchased a Platinum level of cover and this is shown on **your certificate of insurance**.

Reasons for **cutting short your trip**:

1. If **you**, and **your travelling companion** insured under this policy or by **us**, are required to cut short **your trip** and return **home** due to the following events occurring during the **period of insurance**:
  - a. Death, **bodily injury**, **serious illness** or **complications of pregnancy and childbirth** of:
    - i **You**;
    - ii **Your immediate relative resident in Ireland**; or
    - iii **Your travelling companion**.
2. **You** are required to attend an examination (University level or equivalent) or **you** not having achieved a result which enables **you** to commence or continue **your** preferred course of study and as a result, **you** are required to re-sit the examination necessitating the **curtailment of your trip**.
3. **You** or **your travelling companion** receiving a diagnosis of **COVID** within 14 days before the start of **your trip**, or in the case of being admitted to **hospital** with a **COVID** diagnosis, within 28 days before the start of **your trip**.
4. **Your immediate relative** being admitted to **hospital** with a **COVID** diagnosis within 14 days before the start of **your trip**.
5. If **you** suffer a **serious illness** or injury and are medically certified as unfit to use **your** pre-paid ski hire, ski lift pass, or ski school, **we** will pay up to €150 for the unused portion — whether or not **you** cut **your trip** short. Please note this cover only applies if **you** have purchased a Platinum level of cover and this is shown on **your certificate of insurance**.

Important Note: Claim payments for **curtailment** are calculated pro-rata on the total cost of the **trip** paid in advance, after deducting the cost of the outward and return transport. The calculation will start from the date of return to **your home country**.

#### Return of Airfare (Platinum Cover only)

If there is no refund available for the unused and **irrecoverable** portion of **your** original flight ticket, **we** will pay **you** up to 25% of the original flight ticket cost up to a maximum of €225 if **you** must **curtail your trip** due to the:

- a) Death, **bodily injury** or **serious illness** of:
  - i **You**;
  - ii **Your immediate relative resident in Ireland**; or
  - iii **Your travelling companion** **you** intended to stay with, where the **trip** depended on them.

Please note Return of Airfare cover only applies if **you** have purchased a Platinum level of cover and this is shown on **your certificate of insurance**.

## ! Special conditions relating to claims

1. You must obtain a medical certificate from a **medical practitioner** abroad and prior approval of the **Emergency Assistance Service** to confirm the necessity to return **home** prior to **curtailment** of the **trip** due to death, **bodily injury** or **serious illness** or **complication of pregnancy and childbirth**.
2. You must tell **your** travel agent, tour operator, transport or accommodation provider as soon as **you** know it is necessary to **curtail your trip**. If **you** do not, **we** are only responsible for the **curtailment** charges that would have applied at that date.
3. If **you curtail your trip** due to any injury or **serious illness**, **you** must contact a **medical practitioner** immediately for treatment or advice (or both). **You** must also provide a medical certificate from a **medical practitioner** stating that **your** injury or **serious illness** prevents **you** from continuing on **your** booked **trip**.
4. In the event of the **curtailment** of **your trip** due to a positive **COVID** diagnosis, **we** will require (at **your** own expense) a medical certificate from a **medical practitioner** confirming **your** positive **COVID** diagnosis.
5. If **you curtail your trip** due to:
  - a) stress, anxiety, depression or any other mental or nervous disorder that **you** are suffering from **you** must provide (at **your** own expense) a medical certificate from a consultant specialising in the relevant field; or
  - b) injury, **serious illness**, disease or **complication of pregnancy and childbirth**, **you** must provide (at **your** own expense) a medical certificate from a **medical practitioner** stating that this necessarily and reasonably prevented **you** from travelling.

## ✗ What is not covered

1. The **excess** as shown in the Schedule of Cover, unless **you** have purchased Excess Waiver and this is shown on **your certificate of insurance** (an **excess** is not applicable for Return of Airfare cover).
2. Any **pre-existing medical condition** which **you** have not declared, and which **we** have not accepted in writing, or **your** failure to comply with the terms and conditions of the Medical Warranty and Important Conditions Relating to Health section.
3. Any claim arising directly or indirectly due to **your travelling companion curtailed** their **trip**, except as stated under 'What is Covered' point 1.
4. More than the **curtailment** charges that would have applied had **you** notified the travel agent, tour operator or transport or accommodation provider immediately after **you** knew it was necessary to **curtail the trip**.
5. Failure by the provider of any part of the booked **trip** to supply the service or transport (whether as the result of error, insolvency, omission, default or otherwise). **You** should direct any claim in this case to the provider involved.
6. Anything arising directly or indirectly from the following causes:
  - a) prohibitive regulations by the government of any country.
  - b) any circumstance known to **you** likely to cause **curtailment** prior to the booking of the **trip** and/or insurance.
7. Any **COVID** claims arising within 28 days of the date **you** purchased this insurance or the time of booking any **trip**, whichever is the later, except where the insurance is purchased within 48 hours of booking the **trip**.
8. Any claims related to 'What is Covered' point 1 if they occur as a result of **COVID**.
9. Travel tickets paid for using any mileage or supermarket reward scheme, for example Avios.
10. Accommodation costs paid for using any Timeshare or Holiday Property Bond or other holiday points scheme.
11. Additional travelling expenses incurred, which are not authorised by **us**.
12. More than €650 or the actual costs incurred by **you** (whichever is the lesser) if **you** do not contact the **Emergency Assistance Service** prior to curtailed **your trip**.
13. Any costs relating to airport taxes or air passenger duty. **You** should obtain a refund from **your** carrier for such charges.
14. If the results of **your** examination were available before **you** purchased this insurance or prior to **your** booked **trip** departure date (whichever is earlier).
15. If the examination date was scheduled or if re-sit exam results were available, before **you** purchased this insurance or the time of booking any **trip**.
16. Your failure to obtain the required passport or visa for the duration of **your trip**.
17. Claims arising due to **your** disinclination to travel.
18. For Return of Airfare claims:
  - a) Any claim made under the Resumption of Journey section.
  - b) Any costs relating to airport taxes, airport charges, service charges, facility charges, user fees, security charges or air passenger duty. **You** should obtain a refund from **your** Carrier for such charges.

**You** should also refer to the Medical Warranty and Important Conditions Relating to Health section, as well as the General Exclusions, General Conditions and Claim Conditions sections as they are also applicable.

## Section 3 – Travel Delay or Abandonment

### IMPORTANT INFORMATION - TRAVEL REGULATIONS

Please note **you** are entitled to compensation under certain circumstances. Please refer to the 'Important Information - Travel Regulations' information in this policy on page 1.

#### ✓ What is covered

If the departure of the flight on which **you** are booked to travel as a passenger, according to **your** travel itinerary at the **international departure point**, is delayed due to:

- a) **strike or industrial action**;
- b) **adverse weather** conditions; or
- c) mechanical breakdown of or a technical fault of the flight **you** are booked to travel on;

**we will pay you:**

1. **Travel Delay:** Up to the amount shown under 'Travel Delay' in the Schedule of Cover for the first completed 12 hours of delay and for each full 12 hours delay thereafter (applies to scheduled initial **international outbound trip** or **international inbound trips** only).  
or
2. **Abandonment:** Up to the amount shown under 'Abandonment' in the Schedule of Cover for any **irrecoverable** unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay if after a minimum 24 hours delay has elapsed, **you** choose to cancel **your trip** (applies to scheduled **international outbound trip** only).

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

**You** can claim only under Section 3 – Travel Delay or Abandonment or Section 4 – Missed Departure or Flight Connection for the same event.

#### ! Special conditions relating to claims

1. **You** must check in according to the itinerary **you** have been given.
2. **You** must get written confirmation from the carriers (or their handling agents) of the number of hours **you** were delayed and the reason for the delay.
3. **You** must keep to the terms of contract of the travel agent, tour operator or transport provider.
4. For abandonment, **you** must provide **your** booking confirmation together with written details from **your** travel agent, tour operator or provider of transport or accommodation of the separate costs of transport, accommodation and other pre-paid costs or charges that made up the total cost of the **trip**.

#### ✗ What is not covered

1. The **excess** as shown in the Schedule of Cover, unless **you** have purchased Excess Waiver and this is shown on **your certificate of insurance** (an **excess** is not applicable for Travel Delay under point 1 'What is Covered').
2. Claims arising directly or indirectly if **you** did not check-in for the flight departure in accordance with the recommended check-in time limits.
3. Claims arising directly or indirectly from **adverse weather** conditions existing or known of on the date of purchase of this policy or arranging the **trip** whichever is later.
4. Claims arising directly or indirectly from **strike or industrial action** existing or publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**, whichever is the later.
5. Withdrawal from service (temporary or otherwise) of an aircraft on the recommendation of the Irish Aviation Authority or any similar body in any country.
6. If the aircraft on which **you** are booked to travel is withdrawn from service as a result of ash or other debris arising from a volcano. **You** should direct any claim in this event to the transport operator involved.
7. Any costs relating to airport taxes, airport charges, service charges, facility charges, user fees, security charges or air passenger duty. **You** should obtain a refund from **your** carrier for such charges.
8. **Connecting flights** (or any flight that is not **your** final flight to or from **Ireland**).

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 4 – Missed Departure/Flight Connection (Gold & Platinum Cover Levels Only)

#### ✓ What is covered

**We** will pay up to the amounts shown in the Schedule of Cover for **your** necessary, **irrecoverable** additional travel (Economy) and accommodation expenses (room only) that **you** incur to reach **your** pre-booked destination if **you** arrive at the **international departure point** and/or any intermediate/**flight connection** departure point enroute on **your** pre-booked journey too late to board the flight or continue the booked **trip** as a result of the failure of **public transport**, provided that **you** have taken reasonable steps to complete the journey to the **international departure point** on time to check-in in accordance with the recommended check-in limits.

## ! Special conditions relating to claims

1. **You** must take every reasonable step to commence and complete the journey to the **international departure point** and check in for the scheduled light, sea crossing, coach or train journey on time.
2. **You** must get written confirmation from the carriers (or their handling agents) of the number of hours **you** were delayed and the reason for the delay.
3. **You** must allow sufficient time for the scheduled **public transport** or other transport to arrive on schedule and to deliver **you** to the **international departure point**.
4. **You** must check in according to the itinerary **you** have been given.
5. **You** must keep to the terms of contract of the travel agent, tour operator or transport provider.
6. If the aircraft on which **you** are booked to travel is withdrawn from service as a result of ash or other debris arising from a volcano. **You** should direct any claim in this event to the transport operator involved.

## ✗ What is not covered

1. Claims arising directly or indirectly if **you** did not check-in for the flight departure in accordance with the recommended check-in time limits.
2. Claims arising directly or indirectly from **adverse weather** conditions or **strike or industrial action** publicly announced or known of on or by the date **you** purchased this insurance or at the time of booking any **trip**, whichever is the later.
3. Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Irish Aviation Authority or a Port Authority or any similar body in any country.
4. Claims if the reason for the failure of the **public transport** is within the control of the provider.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 5 – Emergency Medical Expenses

In the event of **your bodily injury** or illness which may lead to inpatient **hospital** treatment or before incurring any expenses over €650 or before any arrangements are made for repatriation or in the event of **curtailment**, necessitating **your** early return to **your home area**, **you** must contact the **Emergency Assistance Service**. The service is available to **you** and operates 24 hours a day, 365 days a year for advice, assistance, making arrangements for **hospital** admission, repatriation and authorisation of medical expenses. If this is not possible because the condition requires immediate emergency treatment, **you** or someone designated by **you** must contact the **Emergency Assistance Service** as soon as possible and within 48 hours, otherwise **we** may not pay **your** claim. Failure to contact the **Emergency Assistance Service** could result in **your** claim being limited to €650. The **Emergency Assistance Service** telephone number is +44 1733 224 875.

## ✓ What is covered

We will pay **you** up to the amount shown in the Schedule of Cover for the following expenses necessarily and reasonably incurred outside of **your home country** if **you** suffer a **serious illness** or **bodily injury** during **your trip**.

1. Emergency medical, surgical treatment, **hospital** and nursing home fees and charges incurred outside **your home country**.
2. Reasonable and necessary cost of additional accommodation (room only) and economy class travel expenses (unless otherwise authorised by the **Emergency Assistance Service**) incurred abroad due to an unforeseen medical emergency. This includes expenses for one or both parents, or a friend or **close relative**, provided the travel is authorised and arranged by the **Emergency Assistance Service**, in the following circumstances:
  - a) to travel to, remain with, and/or accompany **you home** if **you** suffer a **serious illness** or **bodily injury** to identify **your** remains in the event of death resulting from a **personal accident**; or
  - b) to escort **you home** if **you** are a child under 16 years of age.
3. We will pay a benefit of €30 per complete 24-hour period to cover reasonable day-to-day expenses (such as meals, phone calls, local transport, etc.) incurred by the person travelling to be with **you** as described in point 2 'What is Covered' above, when this travel has authorised and arranged by the **Emergency Assistance Service**.
4. In the event of a positive diagnosis of **COVID** abroad, the policy will cover reasonable additional transport (economy class), and accommodation expenses (room only) expenses incurred, up to the standard of **your** original booking if **you** must extend **your** stay, up to a maximum of €2,000.
5. In the event of **your** death, reasonable expenses incurred for the conveyance of **your** body or ashes to **your home country** or local funeral expenses abroad, up to a maximum of €3,000.
6. Emergency dental treatment for the immediate relief of pain (to **your** natural teeth). Please note this cover only applies if **you** have purchased a Gold or Platinum level of cover and this is shown on **your certificate of insurance**.

## ! Special conditions relating to claims

1. **You** must give notice immediately to the **Emergency Assistance Service** of any **bodily injury** or illness which necessitates **your** admittance to **hospital** as an inpatient or before any arrangements are made for **your** repatriation.

2. In the event of **your bodily injury** or illness, **we** reserve the right to relocate **you** from one **hospital** to another and arrange for **your** repatriation to **Ireland** at any time during the **trip**. **We** will do this if, in the opinion of **our Emergency Assistance Service**, **you** can be moved safely and/or travel safely to **Ireland** to continue treatment.
3. For medical expenses incurred in the United States of America (USA), **we** will only pay for reasonable and necessary emergency treatment, surgical, **hospital** and transport costs in line with the negotiated rate with the provider, if one exists. If no negotiated rate with a provider exists, **we** will pay a maximum of 150% of the USA Medicare rate.
4. **You** must claim against **your** private health insurer first for any inpatient medical expenses abroad up to **your** policy limit.
5. **We** reserve the right to limit payment to what **our Emergency Assistance Service** deems reasonable.
6. If **our Emergency Assistance Service** advises a date when it is feasible and practical to repatriate **you**, but **you** choose instead to remain abroad, **our** liability to pay any further costs under this section after that date ceases and will be limited to what **we** would have paid if **your** repatriation had taken place at the time **we** specified.
7. Receipts must be retained and produced in the event of a claim as these will help **you** to substantiate **your** claim. **Your** claim may be rejected if receipts are not produced.
8. **You** must claim against **your** private health insurer first for any inpatient medical expenses abroad up to **your** private health insurer policy limit.
9. If **you** are undergoing medical treatment for a **medical condition** at the time of paying the final **trip** balance, **you** must obtain a written certificate of fitness and ability to travel from a **medical practitioner**.

## What is not covered

1. The **excess** shown in the Schedule of Cover unless:
  - a) **you** have purchased Excess Waiver, and this is shown on **your certificate of insurance**; or
  - b) **you** have successfully reduced **your** medical expenses bill by more than **your excess** amount by using **your** European Health Insurance Card (EHIC), Global Health Insurance Card (GHIC), Reciprocal Health Agreement or private health insurance policy.
2. Any additional **hospital** costs arising from single or private room accommodation, unless medically necessary.
3. Any **pre-existing medical condition** which **you** have not declared, and which **we** have not accepted in writing, or **your** failure to comply with the terms and conditions of the Medical Warranty and Important Conditions Relating to Health section.
4. Any expenses **you** incur outside of **your home area** which can be recovered by **you** and/or which are covered under any National Health Insurance Scheme, any Reciprocal Health Arrangement, the Health Authority in **your home area**, through a reciprocal health agreement or any private health insurance.
5. Any claim for pregnancy which falls outside of the definition of **complications of pregnancy and childbirth**.
6. Treatment or services provided by a private clinic or **hospital**, health spa, convalescent home or any rehabilitation centre, unless agreed by the **Emergency Assistance Service**.
7. Any expenses incurred for illness, injury or treatment required in consequence of:
  - a) any form of medical treatment or surgery which in the opinion of the **Emergency Assistance Service** can reasonably be delayed until **your** return to **your home area**;
  - b) preventative treatment which can be delayed until **you** return to **your home country**;
  - c) expenses incurred in obtaining or replacing medication, which at the time of departure is known to be required or to be continued outside **your home area**;
  - d) **your** decision not to be repatriated after the date when in the opinion of the **Emergency Assistance Service** it is safe to do so;
  - e) claims for treatment that is not confirmed as medically necessary by the **Emergency Assistance Service**; or
  - f) any claim for expenses exceeding the repatriation costs to **your home country** if **you** are confirmed as fit to travel by the **Emergency Assistance Service**, and **you** have refused the offer of repatriation assistance to **your home country**.
8. Any elective (non-emergency) treatment or surgery, including exploratory tests, which are not directly related to the illness or the injury which necessitated **your** admittance into **hospital**.
9. More than €650 in respect of medical expenses incurred by **you** if **you** did not contact the **Emergency Assistance Service** prior to incurring these expenses.
10. Any claims arising directly or indirectly from:
  - a) treatment for cosmetic purposes, unless the **Emergency Assistance Service** agrees that such treatment is necessary as a result of an **accident** covered under this policy;
  - b) any pre-planned or expected medical treatment(s) or diagnostic procedure(s); or
  - c) any treatment which is not a surgical or medical procedure with the sole purpose of curing or relieving acute unforeseen illness or injury.
11. Any dental treatment under 'What is covered' point 6:
  - a) unless **you** have purchased the Gold or Platinum levels of cover;
  - b) which is not solely for the immediate relief of pain or discomfort or to alleviate distress in eating; and
  - c) not involving the use of precious metals.
12. Expenses incurred as a result of a **medical condition** (including a tropical disease) where **you** have not had the recommended inoculations and/or taken the recommended medication.
13. Any expenses and/or medical treatment in **your home country**, unless **you** have purchased the Platinum level of cover which provides limited cover as detailed under 'What is covered' Section 6 - Continuing Medical Expenses in Ireland.
14. Claims arising directly or indirectly from **Winter Sports**, unless **you** have purchased the Platinum level of cover.
15. Any claim arising from air or sea search, rescue or transfer services.

**You** should also refer to the Medical Warranty and Important Conditions Relating to Health section, as well as the General Exclusions, General Conditions and Claim Conditions sections as they are also applicable.

## Section 6 – Continuing Medical Expenses in Ireland (Platinum Cover Level Only)

This section provides cover for necessary and reasonable medical expenses that continue after **your return home**, directly resulting from an **accidental injury or personal assault** that occurred during **your trip**.

### ✓ What is covered

We will pay **you** up to the amounts stated below for **your** continuing medical treatment received after **your return home**, provided that:

- a) The treatment is directly referable to the **accidental** injury or **personal assault** for which **you** contacted the **Emergency Assistance Service** during **your trip**; or
- b) **You** can provide a medical report from the attending **medical practitioner** abroad showing the injury or dental issue first arose during **your trip**; or
- c) The original **accidental** injury or **personal assault** occurred during **your trip**; and
- d) A **medical practitioner** has confirmed the need for further treatment.

**Dental Treatment** - Up to €150 for necessary further dental treatment following **your return home**, provided that:

- i) The treatment directly relates to emergency dental treatment **you** received during **your trip** following **your accidental** injury or **personal assault**, and
- ii) The initial dental emergency during **your trip** required immediate attention abroad covered under Section 5 – Emergency Medical Expenses.

**Physiotherapy Treatment** - Up to €150 for physiotherapy treatment received after **your return home**, provided that:

- i) **You** suffered an **accidental** injury or **personal assault** during **your trip**, and
- ii) As a direct result of **your accidental** injury or **personal assault**, a **medical practitioner** has recommended physiotherapy is medically necessary as part of **your** ongoing treatment.

**Cosmetic Surgery** - Up to €4,000 for corrective cosmetic surgery carried out after **your return home** following **your accidental** injury or **personal assault**, provided that:

- i) **You** suffered an **accidental** injury or **personal assault** during **your trip**, and
- ii) As a direct result of **your accidental** injury or **personal assault**, a **medical practitioner** has advised that corrective cosmetic surgery is medically necessary.

### ! Special conditions relating to claims

1. A **medical practitioner** in **your home country** must confirm that the continuing treatment is directly referable to the **accidental** injury or **personal assault** that occurred during **your trip**.
2. All treatment must occur within 30 days of **your return home**.
3. Claims must be supported by original receipts, invoices, and medical reports including from the treating doctor to confirm the illness or injury and treatment given including **hospital** admission and discharge dates, if this applies.
4. All cosmetic surgery claims must include a specialist's report confirming the surgery is corrective and a direct result of an **accidental** injury or **personal assault** sustained during **your trip**.
5. **You** must notify **us** of any planned post-**trip** treatment prior to it commencing, where possible.
6. No benefits are payable under this section if the original incident was not reported to **us** during **your trip** or as soon as reasonably practicable after **your return**.

### ✗ What is not covered

1. Cosmetic surgery undertaken for aesthetic or non-corrective purposes.
2. Elective, preventive or routine dental, physiotherapy or cosmetic treatments.
3. Anything listed under Section 5 – Emergency Medical Expenses ‘What is not covered’.
4. Any treatment not directly resulting from an **accidental** injury or **personal assault** that occurred during **your trip**.
5. Any claims for dental treatment in **Ireland** which is not certified as necessary by the **medical practitioner** or dental surgeon which **you** would normally attend in **Ireland**.
6. If the dental treatment, physiotherapy treatment or cosmetic surgery received at **home** does not take place within 30 days of **your return home**.
7. If **you** are unable to provide a medical report from the attending **medical practitioner** abroad showing the **accidental** injury, **personal assault** or dental emergency first arose during **your trip**.
8. Any treatment for **existing medical conditions** or complications arising from them.

**You** should also refer to the Medical Warranty and Important Conditions Relating to Health section, as well as the General Exclusions, General Conditions and Claim Conditions sections as they are also applicable.

## Section 7 – Trip Resumption (Platinum Cover Level Only)

This insurance policy provides cover for specific reasons only. Please note that even if **you** claim for a reason that is unforeseen or out of **your** control, there is no cover under this insurance policy unless the reason is listed under the “What is covered” section below. If **you** have to **curtail your trip** due to **your** illness or injury, **you** must contact the emergency assistance company on +44 1733 224 875

### ✓ What is covered

We will pay **you**, up to the amount shown in the Schedule of Cover, for the flight costs incurred to return to **your trip** destination following **your** repatriation to **Ireland** due to the following events occurring during the **period of insurance**:

Death, **bodily injury** or **serious illness** of:

- i **You**;
- ii **Your immediate relative** resident in **Ireland**; or
- iii **Your travelling companion**.

This section applies if **your trip** is curtailed and **you** are repatriated to **Ireland** due to **serious illness** or **bodily injury** covered under this policy provided, they occur during **your period of insurance**.

### ! Special conditions relating to claims

1. The return transportation must be organised through the travel agent (**issuing agent**) **you** bought this policy from.
2. If **you curtail your trip** due to any injury or **serious illness**, **you** must contact a **medical practitioner** immediately for treatment or advice (or both). **You** must also provide a medical certificate from a **medical practitioner** stating that **your** injury or **serious illness** prevents **you** from continuing on **your** booked **trip**.
3. If **you curtail your trip** due to:
  - a) stress, anxiety, depression or any other mental or nervous disorder that **you** are suffering from **you** must provide (at **your** own expense) a medical certificate from a consultant specialising in the relevant field; or
  - b) injury, **serious illness**, disease or **complication of pregnancy and childbirth**, **you** must provide (at **your** own expense) a medical certificate from a **medical practitioner** stating that this necessarily and reasonably prevented **you** from travelling.

### ✗ What is not covered

1. The **excess** as shown in the Schedule of Cover, unless **you** have purchased Excess Waiver and this is shown on **your certificate of insurance**.
2. Any **pre-existing medical condition** which **you** have not declared, and which **we** have not accepted in writing, or **your** failure to comply with the terms and conditions of the Medical Warranty and Important Conditions Relating to Health section.
3. Any claims if the original duration of **your** booked **trip** was for less than three months from the date of first departure.
4. Any claims if there is less than fifty per cent duration remaining of **your** original booked travel.
5. Any claim arising directly or indirectly due to **your travelling companion** **curtailing** their **trip**, except as stated under ‘What is Covered’ point 1.
6. Failure by the provider of any part of the booked **trip** to supply the service or transport. **You** should direct these claims to the provider involved.
7. Travel tickets paid for using any mileage or supermarket reward scheme, for example Avios.
8. Anything arising directly or indirectly from the following causes:
  - a) prohibitive regulations by the government of any country.
  - b) any circumstance known to **you** likely to cause **curtailment** prior to the booking of the **trip** and/or insurance.
9. Accommodation costs.

**You** should also refer to the Medical Warranty and Important Conditions Relating to Health section, as well as the General Exclusions, General Conditions and Claim Conditions sections as they are also applicable.

## Section 8 – Personal Property (Baggage)

**You** must take reasonable care for the safety and supervision of **your baggage**. **You** must take suitable precautions to ensure the safety of **your** belongings and must not leave them unsecured, **unattended** or beyond **your** reach at any time.

### ✓ What is covered

#### Personal Baggage

We will pay **you**, up to the amount shown in the Schedule of Cover if **your baggage** (not hired, loaned or entrusted to **you**) and/or **valuables** are lost, **stolen** or damaged during **your trip**.

The maximum **we** will pay for any **valuables**, **single article** or a **pair or set** of articles is the amount shown in the Schedule of Cover. In the case of a claim for a **pair or set**, **our** liability will be limited to the value of the specific part that is lost, **stolen** or damaged.

**Baggage** claims are settled based on the original purchase price, with deductions made for **wear, tear and depreciation**. This means claims are not settled on a "new for old" basis and a reduction in value will be applied to each item when **your** claim is assessed.

### Delayed Personal Baggage

We will pay **you**, up to the amount shown in the Schedule of Cover for the emergency replacement of clothing, medication and toiletries if **your baggage** is temporarily lost during the outward journey (including a **connecting flight**) and not returned to **you** within 12 hours, **you** must get and send **us** written confirmation from the carrier confirming the number of hours that the **baggage** was delayed. If the loss is permanent, **we** will deduct the amount paid from the final amount **we** will pay under this section. **You** are not covered with **us** if **you** successfully claim through the responsible carrier. Original receipts will be required in the event of a claim and cover applies to **your** outward journey only.

### Important Notes - Personal Baggage:

1. The maximum **we** will pay for **valuables**, any **single article**, or for any one **pair or set** of articles, is shown in the Schedule of Cover.
2. The maximum **we** will pay for **personal baggage** or **valuables** lost, damaged, **stolen** from a beach or poolside is €150 per **insured person**.
3. The maximum **we** will pay per **insured person** for:
  - a) **your** sunglasses, or prescription glasses of any kind or personal stereo is €60 for each item up to €225 in total per **insured person**.
  - b) mobile telephones of any kind is €150.
  - c) any cigarettes or alcohol lost, damaged or stolen is €75 in total per **insured person**.
4. The maximum **we** will pay for **unsubstantiated** items is €75 in total per **insured person**. If **you** cannot provide an original receipt, valuation report or other satisfactory proof of ownership and value (such as a photograph of **you** wearing the item), the compensation for any **single article**, or for any one **pair or set** of articles, will be limited to €75. Evidence of replacement value is not sufficient.

## **!** Special conditions relating to claims

1. **Baggage** claims are settled based on the original purchase price, with deductions made for **wear, tear and depreciation**. This means claims are not settled on a "new for old" basis and a reduction in value will be applied to each item when **your** claim is assessed.
2. **You** must report to the police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, **theft** or attempted **theft** of all **baggage** or **valuables**.
3. If **your baggage** is temporarily lost in transit, **you** must obtain written confirmation from the carrier as to the exact nature and length of time it is temporarily lost. If **your baggage** is lost, **stolen** or damaged while in the care of a carrier, transport company, authority or hotel **you** must report to them, in writing, details of the loss, **theft** or damage and obtain written confirmation. If **your baggage** is lost, **stolen** or damaged whilst in the care of an airline **you** must:
  - a) obtain a Property Irregularity Report (PIR) from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags, **we** may request these if a claim is to be made under this insurance.
4. **You** must supply original receipts for items lost, **stolen** or damaged or proof of ownership must be retained as these will help **you** to substantiate **your** claim.
5. If **you** are claiming for damaged items, **you** must produce an estimate of repair from an appropriate retailer or reputable dealer confirming the estimated cost of repair (salvage to be retained until **your** claim is completed).
6. **You** must block lost or **stolen** mobile phones with **your** network provider and obtain written confirmation from them.

## **✗** What is not covered

1. The **excess** as shown in the Schedule of Cover, unless **you** have purchased Excess Waiver and this is shown on **your certificate of insurance**. An **excess** is not applicable to Delayed Personal Baggage.
2. Loss, **theft** or damage to **valuables** left **unattended** at any time (including in a vehicle or in the custody of carriers), unless left in a locked premises and kept out of sight.
3. Loss, **theft** of or damage to **baggage** left **unattended** at any time or contained in or **stolen** from an **unattended** vehicle:
  - a) overnight between 9pm and 8am (local time); or
  - b) at any time between 8am and 9pm (local time), unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot, locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a Garda/police report.
4. **Valuables** left as checked-in **baggage**.
5. Loss or damage due to delay, confiscation or detention by customs or other officials or authorities.
6. Loss or damage due to depreciation in value, variations in exchange rates or shortages due to error or omission.
7. Items that can be reissued or replaced by the original issuer.
8. Loss, **theft** or damage to dental or medical fittings, hearing aids, contact or corneal lenses, unused mobile phone rental charges or prepayments or credits, coupons, unset precious stones, china, antiques, musical instruments, glass, pictures, deeds, bonds, stamps, manuscripts, securities, or documents of any kind (including driving licenses and passports), perishable goods, tobacco products, alcohol, vehicles and/or their accessories, surfboards/sailboards, bicycles/pedal cycles, boats/marine equipment or craft and any related equipment or fittings of any kind, ski passes or **ski equipment** (unless **you** purchased Platinum Cover) and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).

9. Loss, **theft** of or damage to business goods and/or samples, specialised trade equipment, tools of trade and other items used in connection with **your** business, trade, profession or occupation.
10. Loss or damage due to mechanical breakdown, malfunction, breakage of or damage to fragile and/or brittle articles, unless caused by fire or an **accident** involving the transport in which they were being carried.
11. Loss or damage caused by **wear, tear and depreciation**, denting or scratching, moth, vermin, any process of cleaning repairing or restoring, deterioration, atmospheric or climatic conditions.
12. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **baggage**.
13. Loss or damage due to breakage of sports equipment or damage to sports clothing whilst in use.
14. Claims covered under Section 9 – Lost or Stolen Travel Tickets and Section 10 – Lost Passport Expenses.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 9 – Lost or Stolen Travel Tickets (Gold & Platinum Cover Levels Only)

### ✓ What is covered

If **your** pre-paid and non-refundable travel ticket(s) are lost or **stolen** on **your trip**, **we** will pay **you**, up to the amount shown in the Schedule of Cover for the cost of obtaining a replacement ticket to continue **your** journey or towards the cost of return travel to **your home country**, whichever is lower.

This applies to the loss or **theft** of any prepaid, non-refundable tickets for **public transport** outside **your home country**, including Inter-Rail passes, Eurail passes, Amtrak passes, Ameripass tickets, and similar, provided the original ticket was personalised and issued specifically for **your** use.

### ! Special conditions relating to claims

1. **You** must report any loss, **theft** or attempted **theft** to the local police within 24 hours of discovery and obtain a written report of the loss, **theft** or attempted **theft** of all travel tickets.
2. Receipts for lost or **stolen** travel tickets must be retained as these will help **you** to substantiate **your** claim.
3. **You** must obtain a written report from the travel ticket provider in the country in which the loss or **theft** occurred.
4. Retain copies of travel tickets (where possible) for submission if a claim is to be made under this policy.

### ✗ What is not covered

1. The **excess** as shown in the Schedule of Cover, unless **you** have purchased Excess Waiver and this is shown on **your certificate of insurance**.
2. Loss, **theft** of or damage to travel ticket(s) left **unattended** at any time (including in a vehicle or in the custody of carriers), unless deposited in a locked hotel safe, locked safety deposit box or left in **your** locked (doors and all windows) accommodation.
3. Loss, **theft** of or damage to travel ticket(s) if **you** have not complied with the issuers conditions or where the issuer provides a replacement service.
4. **You** must exercise reasonable care for the safety and supervision of **your** non-refundable ticket.
5. Loss or damage due to delay, confiscation or detention by customs or other authority.
6. Anything that can be replaced by the travel ticket provider or issuer.
7. Claims covered under Section 8 – Personal Property (Baggage) and/or Section 10 – Lost Passport Expenses.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 10 – Lost Passport Expenses

### ✓ What is covered

If **your** passport is lost or **stolen** during **your trip**, **we** will pay **you** up to the amounts shown in the Schedule of Cover for reasonable additional travel (Economy) and accommodation expenses (room only) run up by **you** abroad while having to get an emergency or temporary passport including the cost of the temporary passport to return to **your home country**.

### ! Special conditions relating to claims

1. **You** must report any loss, **theft** or attempted **theft** to the local police or to the carrier, as appropriate, within 24 hours of discovery and obtain a written report of the loss, **theft** or attempted **theft** of **your** passport.
2. **You** must provide **us** with written documentation from the local police or the carrier confirming that the loss or **theft** occurred during the **trip** otherwise no claim will be paid.
3. A receipt from the Consulate confirming the cost of the replacement passport, if **your** passport is **stolen**.
4. Receipts must be retained as these will help **you** to substantiate **your** claim.
5. Retain all travel tickets and tags for submission if a claim is to be made under this policy.

## ✗ What is not covered

1. Loss, **theft** of or damage to **your** passport left **unattended** at any time (including in a vehicle or in the custody of carriers), unless deposited in a locked hotel safe, locked safety deposit box or left in **your** locked (doors and all windows) accommodation.
2. Loss or damage due to delay, confiscation or detention by customs or other officials or authorities.
3. Claims for **your** replacement passport incurred in **Ireland**.
4. Claims covered under Section 8 – Personal Property (Baggage) and / or Section 9 – Lost or Stolen Travel Tickets.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 11 – Personal Accident (Gold & Platinum Cover Levels Only)

### ✓ What is covered

We will pay **you** the amount shown in the Schedule of Cover if **you** suffer a **personal accident** during **your trip** which, within one year, is the sole and direct, and independent of any other cause, cause of **your** death, **loss of limb(s)**, **loss of sight** or **permanent total disablement**. If **you** are aged under 18 years, the death benefit will be limited to funeral and other expenses up to €3,000 and the **permanent total disablement** benefit will not apply.

Any claim under this section is limited to 50% of the benefit payable if the **personal accident** results from participating in or undertaking a covered sports or activity.

### ! Special condition relating to claims

1. Our **medical practitioner** may examine **you** as often as **we** deem necessary in the event of a claim.
2. Under **permanent total disablement**, **you** need to be in receipt of the applicable disability benefit from **your** local government body.
3. Under **permanent total disablement**, **you** need to be certified by **our medical practitioner** that there is no likelihood of an improvement in **your** condition.

### ! Provisions

1. Benefit is not payable to **you**:
  - a) Under more than one of the items shown in the Schedule of Cover.
  - b) Under **permanent total disablement**, until one year after the date **you** sustain a **personal accident**.
  - c) Under **permanent total disablement**, if **you** are able or may be able to carry out any relevant employment or relevant occupation.
2. The death benefit payment will be paid into the deceased's estate.

### ✗ What is not covered

1. Claims not caused solely by a **personal accident**, whether directly or indirectly.
2. Disablement caused by mental or psychological trauma not involving a **personal accident**.
3. Any claims caused by or arising directly or indirectly from pre-existing diseases, physical disabilities, illness, infirmities, pregnancy or injuries which existed prior to the **trip**.

**You** should also refer to the Medical Warranty and Important Conditions Relating to Health section, as well as the General Exclusions, General Conditions and Claim Conditions sections as they are also applicable.

## Section 12 – Personal Liability

This insurance policy provides personal liability cover for specific reasons only. If **you** are using a mechanical or motorised vehicle, **you** should ensure that **you** are adequately insured for third party liability, as **you** are not covered under this insurance.

### ✓ What is covered

We will pay up to the amounts shown in the Schedule of Cover, towards **your** legal expenses and legal liability for damages payable to a third party resulting from an **accident** occurring during **your trip** in respect of any one occurrence for claims made against **you** for:

1. **Accidental bodily injury** caused to a person who is not a member of **your family** or employed by **you**.
2. Loss or damage to property which **you** do not own and is not hired, loaned or borrowed by **you** or any member of **your family** or **your employee**.
3. Damage to **your** temporary **trip** accommodation that does not belong to **you** or to any member of **your family** or **your employee**.

The amount shown in the Schedule of Cover is the most **we** will pay per policy.

#### Winter Sports Important Note: Platinum Cover:

Section 12 – Personal Liability covers claims arising as a result of **you** undertaking or participating in **winter sports**.

## ! Special conditions relating to claims

1. **You** must give **us** written notice as soon as possible of any incident, which may give rise to a claim.
2. **You** must forward every letter, writ, summons and process to **us** as soon as **you** receive it.
3. **You** must not admit any liability or pay, offer to pay, promise to pay or negotiate any claim without **our** written permission.
4. **We** are entitled to take over and conduct in **your** name the defence of any claims for indemnity or damages. **We** will decide whether and how to conduct any negotiation or proceedings and settle any claim and **you** must give **us** all the necessary information and help **we** need.
5. If **you** die, **your** legal representatives will be protected by this cover, as long as they keep to the terms and conditions outlined in this policy.

## ✗ What is not covered

1. Claims arising directly or indirectly from any agreement or contract which adds any liability which would not have existed otherwise.
2. Claims for compensation or legal costs, injury, loss or damage arising directly or indirectly from:
  - a) ownership or use of firearms, aircraft, horse-drawn or mechanically propelled vehicles, vessels, sail or powered boats other than manually propelled rowing boats, punts or canoes, animals other than horses, domestic dogs or cats or firearms.
  - b) the occupation (except temporarily for the **trip**) or ownership of any land or buildings.
  - c) the carrying out of any business, trade, profession or occupation or the supply of goods or services.
  - d) racing of any kind.
  - e) wilful or malicious acts.
3. Liability from participating in or undertaking any sports or activity.
4. Liability for which indemnity is provided under any other insurance.
5. Liabilities for which **you** are responsible by virtue of an agreement that was made.
6. The transmission of any communicable disease or virus.
7. Fines imposed by a court of law or other relevant body.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 13 – Legal Expenses

### ✓ What is covered

**We** will pay up to:

1. €5,000 in legal costs and expenses if someone else causes **you** **bodily injury** or death during **your trip**.
2. €1,500 for travel and accommodation costs **you** have to incur when traveling to a foreign jurisdiction in connection with any legal action commenced by **you** under point 1 above.

Where there are two or more **insured person(s)** insured by this policy, then the maximum amount payable by **us** for all such claims shall not exceed double the amount shown in the Schedule of Cover.

## ! Special conditions relating to claims

1. In the event that proceedings have been instituted by **you** under this section and no compensation or limited compensation is received by **you**, **we** will indemnify **you** against claims for fees, costs and expenses arising out of the proceedings, but solely to the extent that these fees, costs and expenses exceed the amount of any compensation received, up to a limit of €5,000 in total under this policy per **insured person**. This indemnity will be offset against the advance described above.
2. **We** shall have complete control over the legal case through agents **we** nominate, by appointing agents of **our** choice on **your** behalf with the expertise to pursue **your** claim although **you** do not have to accept the lawyer nominated by **us**. Lawyers must be qualified to practice in the Courts of the country where the event giving rise to the claim occurred or where the proposed defendant is resident. If **you** are unable to agree with **us** on a suitable lawyer, **we** will ask the ruling body for lawyers in that country to nominate another lawyer. In the meantime, **we** may appoint a lawyer to protect **your** interests.
3. **We** may, at **our** own expense, take proceedings in **your** name to recover compensation from any third party in respect of any indemnity paid under this policy. **You** must give such assistance as **we** shall reasonably require and any amount recovered shall belong to **us**.
4. **We** will decide the point at which **your** legal case cannot usefully be pursued further. After that no further claims can be made against **us**.
5. **We** may include a claim for **our** legal costs and other related expenses.
6. **You** must:
  - a) Follow **our** agent's advice and provide any information and assistance required within a reasonable timescale.
  - b) Advise **us** of any offers of settlement made by the negligent third party and **you** must not accept any such offer without **our** consent.

## ✖ What is not covered

1. Legal costs and expenses:
  - a) incurred before **we** have given **our** written agreement to support **your** claim.
  - b) for any claim not reported to **us** in writing within 90 days of the incident giving rise to the claim.
  - c) related to pursuing a claim against any of the following: a travel agent, tour operator, carrier, **us**, the **Emergency Assistance Service** or their agents, any medical facility or medical professional, Accident & General Insurance Services Ltd., **your travelling companion(s)**, members of **your** household, your **close relative** or any other person covered under this policy.
2. Claims related to pregnancy or childbirth unless a **medical practitioner** certifies that the claim is necessary due to **complications of pregnancy and childbirth**.
3. Claims which, in **our** opinion are unlikely to result in obtaining a reasonable settlement or have insufficient prospects of success.
4. Claims where the legal costs and expenses are likely to exceed the potential compensation.
5. Costs or expenses where **you** initiate legal proceedings without **our** control or without **our** agreement on the selection, appointment, or management of **your** legal representation.
6. Legal costs and expenses:
  - a) that are conditional upon the success of **your** claim (such as a contingency fee agreement) and / or claims that could be pursued under a conditional fee agreement.
  - b) incurred if an action is brought in more than one country.
  - c) incurred in defending any civil action or criminal charges brought against **you**.
7. Claims arising from incidents that occur within **Ireland**.
8. Claims made in any capacity other than **your** private, personal capacity.
9. Costs of any appeal.
10. Anything mentioned under Section 11 - Personal Accident and Section 12 - Personal Liability 'What is not covered'.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 14 – Government Travel Advice (**Platinum Level of Cover Only**)

### ✓ What is covered

#### Cancellation

If cancellation of **your trip** is necessary and unavoidable as a direct result of **government travel advice** issued advising not to travel to **your trip** destination and this advice is announced within 7 days of **your** pre-booked **trip** departure date, **we** will pay **you** up to the amounts shown in the Schedule of Cover for **irrecoverable** cancellation fees are provided for:

- a) Unused travel and accommodation costs.
- b) School and university fees paid to colleges abroad which have not been used and for which **you** have pre-paid or are contracted to pay.
- c) **Your** ski hire, ski school and lift passes, which have not been used and for which **you** have pre-paid or are contracted to pay.

#### Curtailment

**We** will pay **you** up to the amount shown in the Schedule of Cover for **irrecoverable** additional travel costs incurred if **you** have to cut short **your trip** and have to return **home** as a direct result of events occurring in the country **you** are visiting and a **government travel advice** announcement is issued advising **you** to leave **your** destination country for **your** own safety due to events occurring in the country **you** are visiting.

Cover for **your irrecoverable curtailment** fees is provided for:

- a) Unused travel and accommodation costs.
- b) School and university fees paid to colleges abroad which have not been used and for which **you** have pre-paid or are contracted to pay.
- c) **Your** ski hire, ski school and lift passes, which have not been used and for which **you** have pre-paid or are contracted to pay.

#### Missed Departure or Flight Connection

**We** will pay **you** up to the amount shown in the Schedule of Cover for **your** necessary additional **irrecoverable** travel (economy) and accommodation expenses (room only) incurred by **you** to reach **your** booked **trip** destination if **your** outward or return journey is cancelled due to the airline or ferry company cancelling the service as a direct result of **government travel advice**.

#### Additional Expenses

**We** will pay **you** up to the amount specified in the Schedule of Cover for additional **irrecoverable** travel (economy) and accommodation (room only) expenses incurred if **your** pre-booked return flight is cancelled or delayed due to the airline **you** are booked to travel on cancelling the service as a direct result of **government travel advice**. The **government travel advice** must be the direct cause of the disruption to **your** pre-booked **trip** itinerary.

### ! Special conditions relating to claims

1. **You** must provide evidence of the **government travel advice** including the restriction notice and its date of issue.
2. Cover only applies to **government travel advice** that is issued after **you** have purchased **your** policy or after **you** have booked any **trip**.

## ✗ What is not covered

1. Fees incurred by **you** if the airline or other carrier or tour operator make alternative arrangements to accommodate **you** or rearrange flights.
2. Claims arising directly or indirectly from **government travel advice** existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
3. Any costs incurred by **you** which are recoverable from the providers of the accommodation (or their administrators) or for which **you** receive or are expected to receive compensation or reimbursement.
4. Any costs incurred by **you** which are recoverable from the **public transport** operator or for which **you** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
5. Any accommodation costs, charges and expenses where the **public transport** operator has offered reasonable alternative travel arrangements.
6. Any claim arising as a result of a **terrorism** incident or threat of a **terrorism** incident.
7. Any claims arising directly or indirectly to **COVID** or any claims due to fear or threat of **COVID**.
8. The cost of recoverable airport charges and levies.
9. Travel tickets paid for using any airline mileage reward scheme, for example Avios.
10. Accommodation costs paid for using any timeshare, holiday property bond or other holiday points scheme.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 15 – Search and Rescue (**Platinum Level of Cover Only**)

### ✓ What is covered

We will pay up to the amount shown in the Schedule of Cover, for the costs necessarily and reasonably incurred on **your** behalf for services provided by official, locally recognised search and rescue organisations in the area where **you** are located during **your trip** in the event that: This applies if **you** go missing or suffer a serious **accident** during **your trip**.

1. **You** are reported missing, or
2. **You** have suffered a serious **accident** during **your trip**, and
3. An official search, rescue, or recovery operation is required.

We will reimburse expenses related to:

- a) Searching for **you**;
- b) Rescuing **you**; or
- c) Recovering **you**.

These expenses must be deemed necessary and have been incurred specifically due to **your** situation, and carried out by an officially recognised local search and rescue authority.

### ! Special conditions relating to claims

1. To make a valid claim under this section, **you** must:  
Provide official documentation confirming the search and rescue activity, including confirmation of:
  - i. The dates of the operation
  - ii. The authority that authorised and carried out the operation
  - iii. A breakdown of costs incurred
2. Report the incident as soon as reasonably possible to the local emergency services and notify our **Emergency Assistance Service** immediately.
3. Cooperate fully with **us**, providing any additional evidence or documentation we may reasonably require.
4. Ensure that all costs were unavoidable, reasonable, and necessary, and were incurred as a direct result of **your** emergency situation.
5. Receipts must be retained as these will help **you** to substantiate **your** claim and evidence the extra costs **you** incurred.
6. This section covers **irrecoverable** expenses only, any costs that **you** can recover from any other source or provider of services will not be reimbursed by **us**.

### ✗ What is not covered

1. If the search and rescue operation was not arranged and authorised by a recognised, locally based search and rescue organisation.
2. If expenses were incurred by individuals or groups acting as an informal, voluntary or unofficial search party.
3. Search and rescue expenses due to **your** failure to heed official local warnings, advisories, or notices about hazards in the area where the incident occurred.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 16 – Student Loans (Gold and Platinum Cover Levels Only)

### ✓ What is covered

We will pay you up to the amount shown in the Schedule of Cover for an outstanding loan in your name, taken from a regulated financial institution which was arranged by you for the purpose of the payment of your tuition fees or course fees at a university or other third level institutions. This applies if you are unable to continue your studies due to your accidental bodily injury during your trip which shall solely and independently of any other cause, results within one year in your death or permanent total disablement.

### ! Special condition relating to claims

1. Our medical practitioner may examine you as often as we deem necessary in the event of a claim.
2. Under permanent total disablement, you need to be in receipt of the applicable disability benefit from your local government body.
3. Under permanent total disablement, you need to be certified by our medical practitioner that there is no likelihood of an improvement in your condition.

### ! Provisions

1. Benefit is not payable to you:
  - a) Under permanent total disablement, until one year after the date you sustain accidental bodily injury.
  - b) Under permanent total disablement, if you are able or may be able to carry out any relevant employment or relevant occupation.
2. The death benefit payment will be paid into the deceased's estate.

### ✗ What is not covered

1. Claims not caused solely by accidental bodily injury, whether directly or indirectly.
2. Disablement caused by mental or psychological trauma not involving accidental bodily injury.
3. Any claims caused by or arising directly or indirectly from pre-existing diseases, physical disabilities, illness, infirmities, pregnancy or injuries which existed prior to the trip.

You should also refer to the Medical Warranty and Important Conditions Relating to Health section, as well as the General Exclusions, General Conditions and Claim Conditions sections as they are also applicable.

## Section 17 – Personal Assistance Services (Platinum Cover Level Only)

If you access the services provided in this section, you can also submit a claim under any other applicable section of the policy, depending on the circumstances of your claim. For assistance with these services, contact the Emergency Assistance Service. This section is intended to offer advice and support and we do not assume any liability for additional costs or damages that may arise, directly or indirectly, from the provision of these services.

### ✓ What is covered

#### Message Relay Assistance

The transmission of up to two urgent messages to your home in your home country following your illness, accident, unforeseen travel delay problems or other unforeseen problems arising.

The Emergency Assistance Service use phone calls, texts and/or emails to relay urgent messages. The Emergency Assistance Service cannot use WhatsApp or any social media platforms for provision of this service.

#### Replacement of Essential Medication

The Emergency Assistance Service will provide advice in replacing essential medication or prescription drugs which have been lost or are unobtainable in the country you are in.

The Emergency Assistance Service will not pay for the replacement costs of any item or the costs of sourcing and delivering blood supplies.

#### Medical Referral

In a medical emergency you need to contact the Emergency Assistance Service who will provide the names and addresses of a local doctor, hospital, clinic or dentist when consultation or treatment is required.

#### Replacement Travel Documents

The Emergency Assistance Service will provide advice to assist with the replacement of lost or stolen tickets and travel documents and provide contact details for your nearest Consulate. The Emergency Assistance Service will not pay for any item.

## Lost Bank Cards

The **Emergency Assistance Service** will provide advice on how to contact the appropriate card issuers if credit or charge cards are lost or stolen. Data Protection legislation prevents the **Emergency Assistance Service** from contacting the card issuers directly. The **Emergency Assistance Service** will not pay for replacement or delivery costs of any card(s).

## ! Special condition relating to personal assistance

1. While **we** will make every effort to provide prompt advice or assistance, **we** cannot accept liability for any loss or damage arising from the use or intended use of the **Emergency Assistance Service**, Medical Referral or Personal Assistance services.
2. The provision of these services is at the sole discretion of the **Emergency Assistance Service**, and in certain circumstances or locations, it may not be possible to deliver them.
3. This section is intended to offer advice and support, and **we** do not assume any liability for additional costs or damages that may arise, directly or indirectly, from the provision of these services.
4. If **you** (and anyone insured under this policy) needs medical assistance or advice during a **trip**, **you** should call the **Emergency Assistance Service**.

## ✗ What is not covered

1. The cost of any replacement item(s), tickets, documents, cards, drugs or other medicines.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 18 – Winter Sports Cover (**Platinum Cover Level Only**)

The maximum amount payable under Section 18 Winter Sports is shown in the Schedule of Cover (up to €450) irrespective of the number of sub sections claimed under.

## Section 18 – Winter Sports Ski Equipment

### ✓ What is covered

**We** will pay **you**, up to €450, for the **accidental** loss of, **theft** of, or damage to **your own ski equipment**. For hired **ski equipment**, **we** will pay **you** up to €225.

- The maximum **we** will pay for any **single article** or a **pair or set** of articles is the amount shown in the Schedule of Cover. In the case of a claim for a **pair or set**, **our** liability will be limited to the value of the specific part that is lost, **stolen** or damaged.
- Skis are covered when carried on a vehicle roof rack when secured by a lockable ski rack.

## ! Special conditions relating to claims

1. **Ski equipment** claims are settled based on the original purchase price, with deductions made for **wear, tear and depreciation**. This means claims are not settled on a "new for old" basis, and a reduction in value will be applied to each item when **your** claim is assessed.
2. **You** must report to the police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, **theft** or attempted **theft** of all **ski equipment**.
3. For items damaged whilst on **your trip** **you** must obtain an official report from an appropriate retailer confirming the item is damaged and beyond repair.
4. If **your ski equipment** is temporarily lost in transit, **you** must obtain written confirmation from the carrier as to the exact nature and length of time temporarily lost.
5. If **your ski equipment** is lost, **stolen** or damaged while in the care of a carrier, transport company, authority or hotel **you** must report to them, in writing, details of the loss, **theft** or damage and obtain written confirmation. If **your ski equipment** is lost, **stolen** or damaged whilst in the care of an airline **you** must:
  - a) obtain a Property Irregularity Report (PIR) from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this insurance.
6. Receipts for items lost, **stolen** or damaged or proof of ownership must be retained as these will help **you** to substantiate **your** claim.
7. **You** must supply original receipts for lost, **stolen** or damaged items as these will help **you** to support **your** claim. The most **we** will pay for any **single item** or for any one **Pair or Set** of articles which **you** cannot supply an original receipt, proof of purchase or insurance valuation (which **you** got before the incident date of **your** claim) for is €25. The most **we** will pay for all such **unsubstantiated** items is €75. Evidence of replacement value is not sufficient.

## ✗ What is not covered

1. The **excess** as shown in the Schedule of Cover, unless **you** have purchased Excess Waiver and this is shown on **your certificate of insurance**.
2. If **you** do not exercise reasonable care for the safety and supervision of **your ski equipment** and/or where **you** have left them unsecured, **unattended** or beyond **your** reach at any time.
3. Loss or damage due to delay, confiscation or detention by customs or other officials or authorities.
4. Loss or damage caused by **wear, tear and depreciation**, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
5. Any additional value an item of **ski equipment** may have because it is part of a **pair or set**.
6. Loss, **theft** or damage to **ski equipment** left **unattended** at any time or contained in or **stolen** from an **unattended** vehicle:
  - a) anytime between 9pm and 8am (local time) or
  - b) at any time between 8am and 9pm (local time), unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot, locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a police report.
7. If **you** fail to produce an estimate of repair from a reputable dealer confirming the estimated cost of repair for damaged or destroyed **ski equipment** (salvage to be retained until claim completed).
8. Claims arising from damage caused by leakage of powder or liquid carried within personal effects, **baggage** or **ski equipment**.
9. Claims arising from loss or **theft** from **your** accommodation, unless there is evidence of forced entry which is confirmed by a police report.
10. Claims arising from loss or **theft**, or damage of **ski equipment** carried on a vehicle roof rack, unless secured by a lockable ski rack.
11. If **you** do not have receipted evidence if the **ski equipment** has been hired by **you**.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 18 – Winter Sports Ski Pack

### ✓ What is covered

We will pay **you** up to €300 for the **irrecoverable**, unused portion of **your** pre-paid ski pack (including ski school fees, lift passes, and hired **ski equipment**) if **you** are unable to ski for more than 48 hours during **your trip** due to **bodily injury** or **serious illness**.

### ✗ What is not covered

1. **Your** failure to comply with the 'Special conditions relating to claims' listed under Section 5 – Emergency Medical Expenses.
2. Anything mentioned under Section 5 – Emergency Medical Expenses 'What is not covered'.

Please refer to the general exclusions, general conditions and claim conditions sections that also apply.

## Section 18 – Winter Sports Ski Hire

### ✓ What is covered

We will pay **you** up to €300 for the reasonable cost of hiring replacement **ski equipment** as a result of the **accidental** loss of or damage to or temporary loss in transit during the outward journey for more than 24 hours of **your own** **ski equipment**.

### ! Special conditions relating to claims

1. **You** must report to the police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, **theft** or attempted **theft** of all **ski equipment**.
2. For items damaged whilst on **your trip** **you** must obtain an official report from an appropriate retailer confirming the item is damaged and beyond repair.
3. If **your ski equipment** is temporarily lost in transit, **you** must obtain written confirmation from the carrier as to the exact nature and length of time temporarily lost.
4. If **your ski equipment** is lost, **stolen** or damaged while in the care of a carrier, transport company, authority or hotel **you** must report to them, in writing, details of the loss, **theft** or damage and obtain written confirmation. If **your ski equipment** is lost, **stolen** or damaged whilst in the care of an airline **you** must:
  - a) obtain a Property Irregularity Report (PIR) from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this insurance.
5. Receipts for items lost, **stolen** or damaged or proof of ownership must be retained as these will help **you** to substantiate **your** claim.

## What is not covered

1. Claims if **you** do not provide hire receipts in respect of alternative **ski equipment**.
2. Anything mentioned in the general exclusions section.

**Please refer to the general exclusions, general conditions and claim conditions sections that also apply.**

## General Conditions Applicable to the Whole Policy

**You** must keep to the following conditions to be protected by **your** policy. If **you** do not keep to the conditions **we** may cancel **your** policy, refuse to deal with **your** claim or reduce the amount of any claim payment.

### 1. Dual insurance

If, at the time of any incident which results in a claim under this policy, there is another insurance covering the same loss, damage, expense or liability then **you** must disclose this to **us** at the time of submitting a claim. In these circumstances, **we** will not be liable to pay or contribute more than **our** proportional share (not applicable to Section 11 – Personal Accident). Under Section 5 – Emergency Medical Expenses, in the event of a private health insurance, **your** private health insurer must pay the first amount as stated in their policy and **we** will commence cover once that limit has been reached.

### 2. Reasonable precautions

**You** must take all reasonable precautions to avoid **bodily injury, serious illness**, disease, loss, **theft** or damage. **You** must also take all practical steps to protect **your** property from loss or damage and to recover property that has been lost or **stolen**.

### 3. Cancellation

#### Statutory Cancellation Rights

**You** may cancel this policy within 14 days of purchasing this policy (the cancellation period), by writing to the address shown in **your** policy schedule during the cancellation period. Any premium already paid will be refunded to **you** providing **you** have not travelled, no claim has been made or is intended to be made and no incident likely to result in a claim has occurred.

Please contact **your issuing agent** as detailed within **your** policyholder cover letter to cancel **your** policy.

#### Cancellation Outside the Statutory Period

**You** may cancel this policy at any time after the cancellation period by writing to the address as detailed within **your** policyholder cover letter. If **you** cancel outside of the terms of the Statutory Cancellation Rights, referenced above, **you** will not receive a premium refund.

#### Non-payment of premiums

**We** can cancel the policy immediately by sending **you** written notice if **you** do not pay the premium.

### 4. Duty of care

**You** must answer all questions honestly and to the best of **your** knowledge. **You** must not misrepresent any fact that could influence **us** in accepting **your** insurance. This includes **your** destination, the length of **your trip** and the ages and state of health of all the people named on this policy. If **you** are in any doubt, should tell **your issuing agent** as detailed within **your** policyholder cover letter.

### 5. Buying this cover

**You** can buy this cover before **you** depart for **your** trip. There is no cover for any claims that arise from circumstances that **you** were aware of (or could reasonably be expected to be aware of) at the time **you** bought this insurance policy. If **you** have any questions, please call **your issuing agent** as detailed within **your** policyholder cover letter.

# Complaints Procedure

We know that sometimes, no matter how hard we try, we don't always get it right. If you have a complaint, it's important that you know that we are committed to providing you with an exceptional level of service and customer care. We want to hear about your complaint so that we can try to put things right.

## If Your Complaint is About the Sale of the Policy

If you have questions, concerns or a complaint regarding the SALE of this insurance including the way in which your policy was sold to you or information about your policy please contact your agent who arranged the insurance on your behalf at:

By writing to	Customer Service Department, Accident & General Insurance Services Ltd. 20 Harcourt Street, Dublin, D02 H364
Email	<a href="mailto:sales@accidentgeneral.ie">sales@accidentgeneral.ie</a>
Telephone	+353 (1) 874 8458

## If Your Complaint is About a Claim

If you have a complaint regarding a CLAIM you have made, please contact White Horse Insurance Ireland dac in writing at:

By writing to	The Customer Experience Manager White Horse Insurance Ireland dac Rineanna House, Shannon Free Zone Shannon, County Clare V14 CA36 Republic of Ireland
Email	<a href="mailto:complaints@white-horse.ie">complaints@white-horse.ie</a>

Our Customer Experience Manager will issue a final response to your complaint. If you are still not satisfied with our decision after following the procedure above, you can contact:

By writing to	The Financial Services and Pensions Ombudsman Lincoln House Lincoln Place Dublin 2 Republic of Ireland D02 VH29
Email	<a href="mailto:info@fsfo.ie">info@fsfo.ie</a>
Website	<a href="http://www.fsfo.ie">www.fsfo.ie</a>
Phone	+353 1 567 7000

The Financial Services and Pensions Ombudsman will not consider your complaint until we have issued a final response letter.

# Cooling Off and Policy Cancellation Provisions

## Statutory Cancellation Rights

If, after reading this policy, this insurance does not meet your requirements, you may cancel this policy within 14 days ("cancellation period") of purchasing this policy by writing to or calling your issuing agent as detailed within your policyholder cover letter during the cancellation period. Any premium already paid will be refunded to you providing you have not travelled, and no claim has been made or is intended to be made and no incident likely to give rise to a claim has occurred. Any cancellations after this 14-day period will not be refunded.

## Cancellation Outside the Statutory Period

You may cancel this policy at any time after the cancellation period by writing to your issuing agent as detailed within your policyholder cover letter. If you cancel after the cancellation period, no premium refund will be made.

We reserve the right to cancel the policy by providing 21 days' notice by registered post to your last known address. No refund of premium will be made.

## Non-Payment of Premiums

We reserve the right to cancel this policy immediately if you do not pay the premium.

## Cancellation by Us

We may, at any time, cancel any insurance policy by giving 14 days' notice in writing where there is a valid reason for doing so. A cancellation notice will be sent to **you** by email and also by post to **your** last known address. Valid reasons may include but are not limited to:

- Where **we** reasonably suspect fraud
- Non-payment of premium
- Threatening and abusive behaviour
- Non-compliance with policy terms and conditions
- **You** have not taken reasonable care to provide complete and accurate answers to the questions **we** ask.

If **we** cancel the policy and/or any additional covers **you** will receive a refund of any premiums **you** have paid for the cancelled cover, less a proportionate deduction for the time **we** have provided cover. Where **our** investigations provide evidence of fraud or misrepresentation, **we** may cancel the policy immediately and backdate the cancellation to the date of the fraud or the date when **you** provided **us** with incomplete or inaccurate information. This may result in **your** policy being cancelled from the date **you** originally took it out and **we** will be entitled to keep the premium. If **your** policy is cancelled because of fraud or misrepresentation, this may affect **your** eligibility for insurance with **us**, as well as other insurers, in the future.

## Data Protection

White Horse Insurance Ireland dac holds **your** personal information in accordance with all applicable data protection laws.

To administer **your** policy White Horse Insurance Ireland dac will collect and use information about **you** provided by **you**. This notice applies to anyone who is insured under this travel insurance policy and whose personal information may be processed for the provision of insurance and related services.

Personal information may be used by **us** for the purposes of administering **your** policy including decision making on provision of insurance cover, underwriting, processing and claims handling. **We** may also use **your** personal information for other related matters such as customer service, analysis, complaints handling and the detection and prevention of crime. The information **you** have supplied may be passed to other insurers and reinsurers for underwriting and claims purposes or to other third-party service providers used by **us** in fulfilling **your** insurance contract.

**We** may send **your** personal information in confidence to other companies who provide services to **us** for processing and storage. This may mean sending information to countries outside of the United Kingdom, European Union or European Economic Area that may not have the same levels of privacy legislation as in the United Kingdom, European Union or European Economic Area. When **we** do this, **we** will ensure that **we** transfer the data securely and accordingly to regulatory requirements.

**You** have various rights in relation to personal information that is held by **us**, including the right to request access to **your** personal information, the right to correct inaccurate personal information or the right to request the deletion or suppression of personal information where this is not restricted by any conflicting legitimate interest.

This notice explains certain aspects of how **we** use **your** information and what rights **you** have in relation to **your** personal information however, **you** can obtain more information about how **we** use **your** data by reviewing **our** full privacy policy. **Our** privacy policy is available to read on **our** website [www.whitehorseinsurance.eu](http://www.whitehorseinsurance.eu).

**Your** data will be treated in accordance with **our** privacy policy.