



# TRAVELGUARD CRUISE INSURANCE



## EVIDENCE OF INSURANCE

SCHEDULE OF BENEFITS			
SECTION		LIMITS	EXCESS
A	Cancellation & Curtailment	As specified on Schedule	£50
B	Emergency Medical Expenses & Repatriation	£10,000,000	£50
	Dental Treatment	£250	£50
	Funeral Expenses	£1,500	£50
C	Hospital Benefit	£1,000 (£30 per day)	Nil
D	Personal Accident		
	Death Benefit (aged 16 - 64)	£50,000	Nil
	Loss of Limbs or Sight (aged 16 - 64)	£50,000	Nil
	Permanent Total Disablement (aged 16 -64)	£50,000	Nil
	Death Benefit (aged up to 15)	£2,000	Nil
	Loss of Limbs or Sight (aged up to 15)	£50,000	Nil
	Permanent Total Disablement (aged up to 15)	£50,000	Nil
Death Benefit (aged 65 and over)	£2,000	Nil	
E	Personal Possessions	£2,500	£50
	Single Item Limit	£300	£50
	Valuables Limit in total	£500	£50
	Delayed Baggage	£300	£50
F	Personal Money & Documents	£600	£50
	Cash Limit	£400	£50
	Cash Limit (aged up to 18)	£200	£50
	Passport	£600	£50
G	Personal Liability	£2,000,000	£250
H	Travel Delay	£500 (£50 per 12 hours)	Nil
	Abandonment	As specified on Schedule	Nil
I	Missed Departure	£1,000	£50
J	Legal Expenses	£50,000	Nil
K	Missed Port	£50 per port up to £500	£50
L	Stateroom Confinement	£100 per 24 hours Up to £600	£50
M	Unused Excursions	£500	£50

This travel insurance has been arranged on behalf of **TRAVELGUARD**

The Insurer for this **policy** is:

**White Horse Insurance Ireland Ltd**

**Registered Office: 14 Clyde Road, Ballsbridge, Dublin 4, Ireland**

This evidence of insurance is to confirm that those persons who have paid the appropriate premium are insured under Master Certificate Number **WHIL/TGUARD/03/2010**

#### TERRITORIAL LIMITS

**Europe** - The Continent of Europe west of the Ural Mountains, Madeira, Canary Islands, Iceland, the Azores, Mediterranean Islands and Non-European countries bordering the Mediterranean (except Algeria, Lebanon, Libya and Israel)

**Worldwide** - Including USA and Canada

#### POLICY AGE LIMITS

Max **85** years at time of booking **your trip**.

**This document only constitutes a valid evidence of insurance when it is issued in conjunction with a validation certificate/booking invoice issued between 22<sup>nd</sup> March 2010 and 28<sup>th</sup> February 2011.**

## FOR YOUR PEACE OF MIND

**PLEASE** take a little time to read and understand what **We** will cover and what **We** will not cover under **Your** insurance contract along with what **You** should do in the event of a claim to avoid any frustration or disappointment.

**We** would also like to draw **Your** attention to restrictions on this **policy** in terms of age and **Pre-Existing Medical Condition(s)** as outlined in the **policy** document.

This brochure explains the detailed terms of **Your** insurance once **Your** details are accepted by us. **We** have tried to make this insurance contract easily understood by **You**, the customer, in an effort to eliminate unrealistic expectations if an unfortunate incident should occur.

**AT THE SAME TIME LET US ASSURE YOU THAT IF SOMETHING OCCURS THAT IS COVERED BY THIS INSURANCE CONTRACT, THEN WE WILL TRY OUR BEST TO PROVIDE YOU WITH A HIGH LEVEL OF TIMELY AND COURTEOUS SERVICE.**

After reading this document, if **You** decide the terms of the insurance contract do not meet **Your** requirements **You** can, **WITHIN 14 DAYS OF THE DATE YOU RECEIVED THIS DOCUMENT**, return it to **TRAVELGUARD**, for a full refund of premium, provided **you** have not already travelled or incurred a claim.

So read on, have a great holiday and remember **We** are here to help in time of trouble.

*Steve Tighe*

*General Manager, White Horse Insurance Ireland Ltd.*

### READ ME FIRST

#### EVIDENCE OF COVER

**You** should read this document carefully. It gives **you** full details of what is and is not covered and the conditions of the cover. Cover will vary from policy to policy and Insurer to Insurer.

#### CONDITIONS, EXCLUSIONS AND WARRANTIES

Conditions, exclusions and warranties will apply to individual sections of **your evidence of cover** while general exclusions and conditions will apply to the whole of **your evidence of cover**. It is a condition of this **evidence of cover** that all material facts must be disclosed to the **Insurer** at the time of taking out this insurance. Failure to do so may result in the **Insurer's** non-liability for claims.

#### DANGEROUS SPORTS OR PASTIMES

**You** are covered under the **evidence of cover** for claims arising from all onboard **Activities** provided by your cruise company.

#### PROPERTY CLAIMS

These claims are paid based on the value of the goods at the time **you** lose them and not on a 'new for old' or replacement cost basis. An allowance for wear, tear and depreciation will be deducted. Certain items of personal property are not covered.

#### PERSONAL LIABILITY

There is no cover for Personal Liability claims arising directly or indirectly from, happening through or in consequence of ownership, possession or use of any vehicle, automobile, aircraft or any mechanically propelled conveyance.

#### POLICY LIMITS

All sections of **your policy** have limits on the amount the **Insurer** will pay under that section. There are also specific limits under the **Personal Possessions** section for: any **Single Item; Valuables**, items for which an original receipt, proof of purchase or an insurance valuation is not supplied.

#### REASONABLE CARE / UNATTENDED PROPERTY

**You** must exercise reasonable care to prevent illness, injury or loss or damage to **your** property, as if uninsured. There is no cover for property left unattended in a place to which the general public has access. There is no cover for loss of **money** which was not carried on the **Insured** person unless placed in a safety deposit box or similar locked, fixed receptacle.

#### COMPLAINTS PROCEDURE

If **you** have any cause for complaint regarding this insurance, please refer to the relevant section of this document for the complaints procedure to follow.

#### CANCELLATION PERIOD

If, after reading this **policy** **you** are not satisfied with it for any reason, **you** must return the **certificate** to **TRAVELGUARD** within 14 days of issue in order to receive a full refund of premium, provided that a claim does not exist and that travel has not taken place.

**INFANTS**- please note that any person under the age of 2 years old at the time of inception of this insurance, will be insured for free when travelling with an insured adult.

#### MATERIAL FACTS

**You** MUST disclose all material facts. A material fact is one that is likely to influence the **Insurer** in accepting **your** insurance. This could be the state of **your health** or that of a **close relative**. If **you** are in any doubt as to whether a fact is 'material', **you** should tell **TRAVELGUARD**. If the fact is considered to be 'material', **you** should seek written confirmation from the **Insurer**. If **you** do not disclose material facts, it may result in **your** claim being invalid.

#### PRE-EXISTING MEDICAL CONDITIONS

If **you** are aware that **you** or any other person (including a **relative**, travelling companion or **close business associate**) have:

- a pre-existing condition that could force **you** to cancel or cut short **your trip**;
- been admitted as an inpatient in hospital in the last 24 months;
- suffered from, or received any form of medical advice, treatment or medication for:
  1. **Any Heart or Circulatory related condition (Including Hypertension, Angina, Stroke);**
  2. **Any Lung or Breathing related condition (Other than inhaler controlled, mild Asthma, suffered in isolation);**
  3. **Any Cancerous condition;**
  4. **Any Kidney Related Disorder.**

Then **you** must contact the Medical Pre-screening company in order to arrange cover for that condition. Failure to advise the Medical Pre-screening company of a pre-existing medical condition will result in claims for those undisclosed conditions not being paid. Contact the Medical Pre-screening company on **0845 250 5258**

**Please note that cover cannot be offered for any Pre-Existing Medical Condition if you, or the person you are travelling with:**

- are awaiting the results of medical tests or investigations;
- are travelling against the advice of a medical practitioner;
- are travelling for the purpose of obtaining medical treatment;
- are on a hospital waiting list;
- are receiving ongoing dialysis treatment;
- have been given a terminal prognosis;
- have a psychological condition (including anxiety, stress, depression, psychiatric or eating disorders, phobias);
- are due to give birth within ten weeks of the booked start or return date of your **trip**.

### Accepted medical conditions

**You do not** need to contact the Medical Pre-screening company if the **ONLY** medical condition(s) **you** have appears in the following list provided **you** are not awaiting surgery for the condition and have been fully discharged from any post-operative follow-up:

- Achilles tendon injury
- Acne
- Acid excess
- Allergy not requiring prescriptive treatment
- Anal fissure/fissular
- ADHD (attention Deficit Hyperactive disorder)
- Benign prostatic enlargement
- Blindness
- Broken Bone (not head or spine)
- Carpal tunnel syndrome
- Cataracts
- Chicken pox
- Colitis (no hospital appointments in last 12 months)
- Common cold / influenza
- Corneal graft
- Cosmetic Surgery
- Cut's and abrasions (non self inflicted)
- Cyst - breast
- Cyst - testicular
- Cystitis
- Deafness
- Diarrhoea and/or vomiting
- Dislocated hip (not replacement hip)
- Dyspepsia
- Eczema
- Epidimititis
- Essential tremor
- Fungal nail infection
- Gastric reflux
- Glandular fever (provided there have been no symptoms in the 3 months prior to inception of the **policy**)
- Glaucoma
- Gout
- Haemorrhoids
- Hay Fever
- Hernia (not hiatus)
- Hip replacement
- HRT (Hormone replacement therapy)
- Hyperthyroidism (overactive thyroid)
- Hyperthyroidism (underactive thyroid)
- Hysterectomy
- Irritable Bowel Syndrome
- Impetigo
- Macular degeneration
- Menorrhagia
- Migraine (confirmed diagnosis, with no ongoing investigations)
- Myalgic Encephalomyelitis (if only symptom is fatigue)
- Nasal Polyps
- Neuralgia, Neuritis
- Nutt allergy
- Osteochondritis
- Pelvic Inflammatory disease
- PMT (pre-menstrual tension) ● Pregnancy (with no complications and not due to give birth within ten weeks of the booked start or return date of your **trip**) ● Psoriasis ● Reflux oesophagitis
- Retinal detachment
- Rheumatism
- Rhinitis
- RSI (Repetitive strain injury)
- Shingles
- Shoulder injury
- Sinusitis
- Sleep Apnoea
- Tendon Injury
- Urticaria
- Varicose veins-legs only (If GP has confirmed the client is fit to travel)
- Tinnitus
- Tonsillitis

### What will happen when you call Medical Pre-screening?

Our trained operators will ask **you** a few simple questions about your intended holiday and the medical condition. **You** will be advised as to whether your **Pre-existing Medical Condition** can be covered, whether there will be an additional premium to pay or whether there any changes to be made to the **policy** terms and conditions?

If cover can be provided, **you** will be given an acceptance code and a letter will be sent to **you** upon receipt of payment, detailing the extension of cover where applicable. Please read this letter carefully and keep it with **your** insurance documents as it confirms the terms of the cover. Please note that cover is not effective until **you** are in receipt of this letter.

### What will happen if you do not contact Medical Pre-screening

If **you** do not contact Medical Pre-screening **you** will not be covered in the event of a claim arising out of **your Pre-existing Medical Condition**.

### POLICY CONTRACT PERIOD

#### Contract Period - Single Trip

A single return **trip**, as defined in the **Period of Insurance**, beginning and ending in the United Kingdom.

### PERIOD OF INSURANCE

The **trip duration** as shown in **your certificate**.

Cover under the cancellation section of **your policy**, starts from the date the **certificate** is issued and ends at the start of **your trip**.

The cover under all other sections of **your policy**, starts at **your trip** departure and ends on **your return home**/place of business or on the expiry of the **policy**, whichever is first.

### The Insurer will not cover:

- Any person over the maximum Policy Age Limits;
- Any subsequent trip that starts after you have returned to your home, to a hospital or to a nursing home in the United Kingdom;
- Any trip that exceeds the expiry of the policy.

Cover will automatically be extended day by day up to a maximum of 30 days after the expiry of the period stated on the policy when the return is necessarily delayed as a result of the ill health of you or failure of public transport provided that the assistance company has been notified.

## DEFINITIONS

Any word defined below will have the same meaning wherever it is shown in your policy in bold print.

These definitions have been listed in alphabetical order.

### Accident, Accidental

A sudden, unexpected event caused by something external and visible, which results directly and solely in loss, damage or physical bodily injury.

### Act of Terrorism

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

### Assistance Company

AXA Assistance

**Tel: 0044 (0) 845 271 2457**

**24 hours a day, 365 days a year.**

### Business Equipment

Computer equipment, communication devices and other business related equipment that is carried by **you** in the course of **your** business.

### Cash

Bank currency notes and coins.

### Cancellation Costs

Travel and accommodation expenses paid or contracted to be paid by **you** in respect of **your trip**.

### Certificate

An insurance validation certificate or booking invoice issued by your cruise company which describes **you** and the Insured person(s) who are covered under this **policy**.

### Claims Handler

White Horse Administration Services Limited,  
P.O PO Box 5633, Walsall, WS6 9BB

Tel: \*0871 664 7995 quoting reference: **WHIL/TGUARD/03/2010**  
\* *Calls from BT land lines cost 10p per minute. Calls from mobiles and other networks may be extra*

### Close Business Associate

A person in the same employment as **you** in **your country of residence**, whose absence from work or place of employment for one or more complete days at the same time as **you**, prevents the effective continuation of that business.

### Common-Law Partner(s)

Any couple (including same sex) in common law relationship or who have co-habitated for at least 6 months.

### Country of Residence

The country of permanent residence in which **you** live, for no less than 6 months of the year.

### Curtailement Costs

Travel costs necessarily incurred to return **you home** before the booked return date and a pro-rata amount representing the total pre-paid or contracted costs of accommodation, car hire and excursions attributable to each complete day which is not spent overseas.

The following are not included in the definition:

- all costs attributable to the outward and return travel tickets, whether used or unused.

### Family

Two (2) adults and all dependent children under the age 16 years in full time education.

### Hazardous Sports & Activities

The following activities are included within the cover as standard, as long as they are amateur activities, conducted under adequate supervision and on an incidental basis. Archery, badminton, baseball, basketball, beach games, black water rafting (Grade 1 to 4), bungee jumping (Maximum of two jumps), canoeing (excluding white water canoeing of any grade), cricket, cycling (excluding BMX or mountain biking), dinghy sailing, fell walking, fencing, fishing (excluding wade fishing), football, golf, hiking (under 2,000 meters altitude), horse riding (excluding jumping, hunting, polo and racing), hot air ballooning which has been booked in the UK prior to departure, jet boating, jet skiing, jogging, marathon running, motorcycling up to 125cc (Providing rider holds a full driving license and is wearing a crash helmet), netball, orienteering, paintballing (Providing protective eye-wear and clothing worn), parasending (over water), pony trekking, racquetball, rambling, river canoeing, roller skating, roller blading, rounders, rowing, safari (if pre booked through UK operator, excluding the use of fire arms), sail boarding, sailing within **territorial limits**, scuba diving up to 15 meters (excluding solo dives and no dives less than 24 hours before departure), skate boarding, snorkelling, squash, surfing, tennis, track events, trekking (under 2,000 meters altitude), triathlon, volleyball, water skiing, white water rafting (up to grade 4), windsurfing, yachting (inside territorial waters).

### Home

**Your** usual place of residence in the United Kingdom or Republic of Ireland for no less than 6 months of the year.

### Insurance Premium Tax (IPT or IGL)

A Government tax which must be paid by you in addition to the insurance premium. Only residents of the Channel Islands and Isle of Man are exempt from taxation.

### Money

Bank currency notes and coins.

### Medical Pre-Screening Company

Tel: 0845 250 5258

9.00 am to 5.00pm Monday to Saturday. Giving reference **WHIL/TGUARD/03/2010** and the sales receipt number.

### Pair or Set

Two or more items of **personal possessions**, which are complimentary or used or worn together.

### Personal Possessions

Luggage, clothing, **valuables** and personal items which are owned by **you** and have been either taken or purchased on the **trip**.

The following are not included in the definition:

Animal skins, Antiques, bicycles, binoculars, bonds, coupons, documents of any kind, **money**, securities, stamps, travellers cheques, mobile phones, computer or telecommunications equipment of any kind, computer games and computer games consoles, ipods, MP3 players, contact or corneal lenses, diving equipment, furs, musical instruments, radios, tape recorders, television sets, video equipment or DVD equipment of any kind.

### Policy

**Your certificate**, this evidence of insurance and endorsements.

### Public Transport

A train, bus, coach, ferry service or scheduled airline flight operating to a published timetable to join the booked travel itinerary.

### Redundancy, Redundant

**You** becoming unemployed under the Employment Protection Act. **You** must have been given a Notice of **Redundancy** and be receiving payment under the current **redundancy** payments legislation.

The following are not included in the definition:

- Any employment which has not been continuous and with the same employer;
- Any employment which is not on a permanent basis;
- Any employment which is on a short term fixed contract;
- Any instance where **you** had reason to believe that **you** would be made **redundant** at the time of booking **your trip**.

### Relative

Brother, brother-in-law, **common law partner**, daughter, daughter-in-law, fiancé(e), grandchild, grand parents, legal guardian, parent, parent-in-law, sister, sister-in-law, son, son-in-law, or spouse who live in the United Kingdom or Republic of Ireland.

### Serious Illness or Serious Injury

Any illness or injury which in the opinion of the doctor in attendance and the **Underwriters** medical advisors:

- (a) restricts **your** mobility; or
- (b) results in **you** being a patient in hospital for more than 48 hours.

### Single Item

Any one article, pair, set or collection owned by **You**.

### Sports Equipment

Those items that are usually worn, carried, used or held during the participation in a sporting activity.

The following are not included in the definition:

- ski equipment;
- golf equipment.

### Total Disablement

Means **you** are prevented from engaging in paid employment or paid occupation of any and every kind, except any occupation normally reserved for the disabled.

### TRAVELGUARD

**TRAVELGUARD** is one of the trading names of the legal entity Golfguard Limited a company registered in England and Wales with Company number 2542429. Golfguard Ltd is authorised and regulated by the Financial Services Authority (FSA) Registration number 310410. Correspondence address is: PO Box 270, East Grinstead, West Sussex RH19 3WP. Telephone Number: 01342 318368. Email: info@golfguard.com.

### Trip, Trip Duration

A journey which begins when **you** leave **your home** and ends on **your** return, during the **period of insurance**, to either:

- (a) **your home**; or
- (b) a hospital or nursing home in the United Kingdom following **your** repatriation.

### Valuables

Articles made of or containing gold, silver or other precious metals, jewellery, leather goods, camcorders, photographic equipment, precious or semi-precious stones, silks, telescopes, watches, computer equipment, cameras, compact disc players, MP3 players & iPods, sunglasses, spectacles, Mini-Disc players.

### We/ Us/ Insurer

White Horse Insurance Ireland Ltd.

### You/ Yours/ Insured

Any person named on the **certificate**.

## SECTIONS OF COVER

The Insurer hereby agrees to the extent and in the manner hereinafter provided, to indemnify the Insured against loss or damage sustained or legal liability for accidents happening during the period stated in the certificate, after such loss, damage or liability are proved. PROVIDED always that the liability of the Insurer shall not exceed the limits of liability as expressed in the attached terms and conditions or such other limits of liability as may be substituted therefore by memorandum hereon or attached hereto signed on behalf of the Insurer.

### SECTION A- CANCELLATION AND CURTAILMENT

#### • What You Are Covered For:

If **your trip** is cancelled or curtailed due to any one of the reasons listed below occurring to **you**, **your** travelling companion or someone on whom **your** trip depends, during the Period of Insurance, the **insurer** will indemnify **you** up to the amount shown in the Schedule of Benefits:

#### • Cancellation

For travel and accommodation expenses paid or contracted to be paid by **you** in respect of **your own trip** (prior to any occurrence giving rise to a claim under this section) which are not recoverable.

#### • Curtailment

For travel expenses to **your home** and pro-rata amount of the total prepaid or contracted cost for each complete day of the **trip** which is foregone and which are not recoverable (excluding pre-paid or contracted costs for transportation to return **home** and used travel ticket costs). Reasons for Cancellation and Curtailment:

- (a) death, **serious injury** or **serious illness**, occurring during the **period of insurance**, to **you**, **your** travelling companion, a **relative** or **close business associate** of **you** or **your** travelling companion, or the person with whom **you** have arranged to stay whilst on the **trip**;
- (b) **you** being called for jury service, witness call or compulsory quarantine;
- (c) **you** posting overseas or emergency and unavoidable requirements of duty in the Armed Forces, Police, Fire, Nursing or Ambulance Services;
- (d) **your redundancy** notified during the **period of insurance** which qualifies for payment under the **redundancy** payments act;
- (e) fire, flood or burglary at **your home** or place of business occurring or becoming apparent within 5 days prior to the commencement of the journey or holiday or during the course of **your** holiday.;
- (f) **your** presence being required by the police following burglary at **home** or **your** place of business; or
- (g) **your** pregnancy where birth is expected before or within 10 weeks of the booked return date or complications of pregnancy occurring prior to the thirtieth week if there have not been complications in any previous pregnancy.

#### • What You Are Not Covered For:

In addition to the General Exclusions of the policy, the **Insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. claims arising directly or indirectly as a result of a **Pre-existing Medical Condition** of:
  - (i). **you** or **your** traveling companion's, or
  - (ii). **Your or your traveling companion's Relative or Close Business Associate**, or
  - (iii). the person with whom **you** have arranged to stay whilst on the **trip**, unless declared to and agreed by the **Insurer** in writing, with any required additional premium paid and/or amendments to policy conditions;
3. claims arising if **you**:
  - (i) are travelling against the advice of a medical practitioner or for the purpose of obtaining medical treatment; or
  - (ii) are on a hospital waiting list or awaiting the results of medical investigations; or
  - (iii) have received a terminal prognosis at the date of application.
4. claims arising which are not supported by written medical confirmation and clinical reports from medical service providers, as well as all other proof of the happening of an event causing Cancellation or Curtailment;
5. claims for any costs associated with unused timeshare property;
6. claims arising where **you** have not received the necessary inoculations or vaccinations or obtain necessary visas;

7. claims arising from any loss resulting from the cancellation or delay of a flight, subsequent to **your** initial International departure or return from or to **your country of residence**;

8. claims arising from where **you** will not and/or cannot travel to an area subject to disease of epidemic or pandemic proportions.

#### SPECIAL CONDITION

It is a condition of this section that any claim for Cancellation be advised verbally to your issuing agent within 48 hours and confirmed in writing to the **Claims Handler**. Curtailment must be authorised by the **Assistance Company** if the cost of **your** trip home is more than £250, following confirmation from the treating doctor that IT IS **MEDICALLY NECESSARY THAT THE INSURED CURTAILS THEIR TRIP**.

**If you curtail your trip due to an illness/death of a third party, family member or relative then you must also contact the Assistance Company, otherwise your claim may be declined. You must always mitigate your costs.**

### SECTION B- EMERGENCY MEDICAL EXPENSES AND REPATRIATION

#### SPECIAL CONDITION

**In the event of your death, incurring medical expenses in excess of £250, or you being involved in an accident, being admitted to hospital, or curtailment for medical reasons, the Assistance Company must be advised as soon as possible and liability shall only attach for expenses agreed by them. Failure to notify the Assistance Company will prejudice the Insurer and will result in the Insurer's non-acceptance of liability of such claims.**

#### • What You Are Covered For:

The **Insurer** will reimburse **you** up to the amount shown in the Schedule of Benefits in respect of the following expenses necessarily incurred as a result of **you** sustaining accidental bodily injury, becoming ill or **your** death:

#### 1 Emergency Medical Expenses

- (a) cost of medical, surgical or hospital treatment (including emergency dental treatment up to £250 for the immediate relief of pain only). The **Insurer** reserves the right to repatriate when, in the opinion of the doctor in attendance and the **Insurers** medical advisors, the **Insured** is fit to travel;
- (b) cost of transporting **your** remains to the UK, or the reasonable cost of a funeral in the country where death occurs, if other than **your** usual country of residence, up to £1,500;
- (c) reasonable additional transportation and accommodation costs incurred by **you** and any one of **your** travelling companions, as a result of **you** receiving medical advice from the doctor in attendance and the **Insurers** medical advisors that **your** originally planned return journey to the UK is impossible due to medical reasons. (Payment shall be based upon the average cost of transportation and accommodation incurred prior to the originally planned return date, at the **Insurers** discretion).

#### 2 Emergency Repatriation

(a) the cost of return to the UK of an injured or sick **Insured** by medically appropriate means where, in the opinion of the **Insurers** medical advisors, such return is medically necessary.

#### • What You Are Not Covered For:

In addition to the General Exclusions of the policy, the **Insurer** shall not be responsible for:

1. the **excess** (unless **you** use an EHIC (European Health Insurance Card) which successfully reduces the amount of the claim) as shown in the Schedule of Benefits;
2. claims arising directly or indirectly as a result of a **pre-existing medical condition** of **you** or **your** travelling companion, unless declared to and agreed by the **Medical Screening Company** in writing, with any required additional premium paid and/or amendments to policy conditions;
3. claims arising if **you**:
  - (i) are travelling against the advice of a medical practitioner or
  - (ii) for the purpose of obtaining medical treatment; or
  - (iii) are on a hospital waiting list or awaiting the results of medical investigations; or
  - (iv) are undergoing dialysis treatment; or
  - (v) are suffering from any psychological or mental disorder.
4. claims arising for treatment or surgery which, in the opinion of the **Insurers** medical advisors, is not essential or can reasonably be delayed until **your** return to **your Home**;

5. claims arising from the additional costs of single or private hospital room accommodation;
6. claims arising from medical treatment of any kind received after **you** have returned to the UK;
7. claims arising directly or indirectly from pregnancy, other than complications of pregnancy occurring prior to the thirtieth week;
8. claims arising from medical treatment of any kind not authorised at the time by a recognised registered medical practitioner;
9. claims arising from medical treatment of any kind occurring after **you** have refused the offer of repatriation when, in the opinion of the doctor in attendance and the **Insurers** medical advisors, **you** are fit to travel;
10. claims arising in respect of elective medical treatment, physiotherapy treatment and other associated therapies;
11. claims arising out of **your** failure to contact the **Assistance Company**.

#### SPECIAL CONDITION

Should **you** require medical treatment in Australia and New Zealand, **you** should enrol with MEDICARE. It is not necessary to enrol on arrival. **You** can simply do this at the first occasion on which they receive treatment.

In-patient and out-patient treatment at a public hospital is then available free of charge. Should **you** be admitted to hospital then immediate contact must be made with the **Assistance Company** and their authority obtained in respect of any treatment NOT available under MEDICARE before such treatment is provided.

### SECTION C - HOSPITAL BENEFIT

#### • What You Are Covered For:

The **Insurer** will pay **you** the amount shown in the Schedule of Benefits for each and every completed period of 24 hours for which **you** are an inpatient in a hospital abroad, as a direct result of an accidental injury or illness which is covered under Emergency Medical Expenses and Repatriation section.

#### • What You Are Not Covered For:

In addition to the General Exclusions of the policy, the **Insurer** shall not be responsible for:

1. claims where the **Assistance Company** has not been contacted and a recommended hospital has been appointed.

### SECTION D - PERSONAL ACCIDENT

#### • What You Are Covered For:

The **Insurer** will pay **you** or **your** estate the sum insured as shown in the Schedule of Benefits for one of the following Losses resulting from an external **accident** sustained by **you**: death, loss of limb(s), loss of sight or permanent **total disablement**. Loss must occur within 180 days of the date of **accident**. No benefits shall be paid for more than one Loss suffered.

#### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. Any benefit where **your** death, injury or loss does not occur within 180 days of the **accident**.
2. Any benefit as a result of participating in a hazardous sport or leisure activity, unless **you** have paid the additional premium prior to travel, for that specific **hazardous activity** and cover is confirmed on **your** **certificate**.
3. Any benefit if **you** cannot prove to the **Insurer** that the permanent total disablement has continued for 12 months from the date of the injury and in all probability will continue for the remainder of **your** life.
4. More than one lump sum under this section.

### SECTION E - PERSONAL POSSESSIONS

#### • What You Are Covered For:

##### • Lost, Stolen or Damaged

The **Insurer** will reimburse **you** up to the amount as shown in the Schedule of Benefits, for the value of personal effects and baggage taken or purchased on the trip by **you** which is accidentally lost, stolen or damaged. The maximum payment for any **Single Item** are shown in the Schedule of Benefits. The maximum payment for **valuables** is shown in the Schedule of Benefits.

#### • Travel Documents

The **Insurer** will reimburse **you** up to the maximum as shown in the Schedule of Benefits for the value of travel documents (passport, green cards, travel tickets and accommodation vouchers) held by **you** which are lost or stolen (and reasonable expenses directly consequential to any such loss whilst abroad).

#### • Baggage Delay

The **Insurer** will reimburse **you** for the cost of purchase of necessities, up to the maximum as shown in the Schedule of Benefits should **personal possessions** be delayed or lost in transit on the outward journey for more than 24 hours. Payment made under this heading will be set against the amount of any claim arising if the personal effects and baggage are permanently lost. **You** must supply receipts for the items purchased and confirmation from the carrier of the length of delay.

#### • What You Are Not Covered For:

In addition to the General Exclusions of the policy, the **Insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. wear, tear and depreciation of the article(s);
3. claims arising from breakage of fragile articles unless caused by fire or accident to a vehicle;
4. claims arising for loss, theft or damage to prams, buggies, wheelchairs, pedal cycles, motor vehicles, marine or diving equipment and craft, surfboards, sailboards or related equipment or fittings of any kind;
5. claims arising from damage caused by leakage of powder or liquid carried within personal effects or baggage;
6. claims arising for **money**, cheques, contact lenses, antiques, computer equipment of any kind, mobile telephones, TV sets;
7. claims arising for theft which are not reported to any appropriate police authority within 24 hours of discovery and an official report obtained;
8. claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official report obtained (and specifically for claims arising against or in common carriers and hotels, any claim not reported in writing to such carrier or hotel within 24 hours of discovery, and an official report obtained). In the case of an airline, a Property Irregularity Report will be required;
9. claims arising for breakage of **sports equipment** whilst in use;
10. claims arising from delay, detention, seizure or confiscation by customs or other officials;
11. claims arising for loss, theft or damage to household goods or anything shipped as freight or under a bill of lading;
12. claims arising for loss or damage of dentures or bridgework, artificial limbs or hearing aids of any kind;
13. claims arising for **personal possessions** left unattended in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property. Including, theft or damage occurring on a beach or in or around a swimming pool;
14. claims arising for loss, theft or damage of items from an unattended motor vehicle, unless taken from a locked boot, glove box or locked & secured roof box between 8am and 8pm local time and there is evidence of forced entry which is confirmed by a police report;
15. claims arising for loss or damage to items carried on a vehicle roof rack;
16. claims arising for loss, theft or damage to **valuables** which at the time of such loss, theft or damage were located in checked-in luggage or a motor vehicle;

### SECTION F - PERSONAL MONEY

#### • What You Are Covered For:

The **Insurer** will indemnify **you** up to the amount as shown in the Schedule of Benefits in respect of loss of **money** which is the property of **you** and carried on **your** person (a reduced limit applies as shown in the Schedule of Benefits for children under 18 unless an adult premium has been paid for that person) or placed in a safety deposit box or similar locked, fixed receptacle. Cover for **money** is limited to the **money** limit as shown in the Schedule of Benefits.

#### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. claims arising for theft which has not been reported to any appropriate police authority within 24 hours of discovery and an official report obtained;

3. claims for loss which has not been reported to any appropriate authority within 24 hours of discovery and an official report obtained (and specifically for claims arising against common carriers and hotels, any claim not reported in writing to such carrier or hotel within 24 hours of discovery, and an official report obtained);
4. claims arising from delay, detention, seizure or confiscation by Customs or other officials;
5. claims arising from shortages due to error, omission or depreciation in value;
6. claims arising for loss or theft of **personal money** which at the time of such loss or theft was located in checked-in luggage or an unattended motor vehicle at any time;
7. claims arising for **Personal Money** left unattended in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property. Including loss or theft occurring on a beach or in or around a swimming pool.

## SECTION G - PERSONAL LIABILITY

### • What You Are Covered For:

The **Insurer** will indemnify **you** up to the amount as shown in the Schedule of Benefits for the legal liability of the **Insured** for accidental injury to third parties and/or accidental damage to their property within the **territorial limits** of their **policy**. This cover is applicable only in respect of liability under the law of the country in which the event giving rise to the claim occurred, or under Irish or UK law.

### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. claims arising directly or indirectly from, happening through or in consequence of:
  - (i) employer's liability, contractual liability, or liability to a member of **your family** or **your** travelling companion;
  - (ii) animals belonging to, or in the care, custody or control of the **Insured**;
  - (iii) wilful, malicious or unlawful acts or the use of firearms;
  - (iv) the pursuit of trade, business or profession;
  - (v) ownership or occupation of land or buildings (other than **your** temporary trip accommodation); or
  - (vi) the influence of intoxicating liquor or drugs;
3. claims arising directly or indirectly from, happening through or in consequence of ownership, possession or use of any vehicle, automobile, aircraft, watercraft, or any mechanically propelled conveyance;
4. claims for legal fees and costs resulting from any criminal proceedings;
5. any claim where **you** have cover under another insurance policy.

### SPECIAL CONDITION

No liability shall be admitted and no admission, arrangement, offer, promise or payment shall be made by the **Insured** without the written consent of the Insurer, who shall be entitled, if they so desire, to take over and conduct, in the name of the **Insured**, their defence of any claim or to prosecute for their own benefit any claims for indemnity, damages or otherwise against any third party. The **Insurer** shall have full discretion in the conduct of any negotiations, proceedings, or the settlement of any claims and the **Insured** shall, wherever possible, give all such information and assistance as the Insurer may require.

## SECTION H - TRAVEL DELAY AND HOLIDAY ABANDONMENT

### • What You Are Covered For:

In the event of a delay of **your** outward flight, international rail journey or sea **trip** from the United Kingdom or planned inbound flight, international rail journey or sea **trip** to the United Kingdom, the **Insurer** will compensate **you** as follows:

#### 1. Travel Delay

The amount shown in the Schedule of Benefits for the first full 12 hour period of delay and an additional amount for each full 12 hour period of delay thereafter, up to the maximum amount shown in the Schedule of Benefits, inclusive of reasonable costs incurred should **your** internal scheduled **public transport** provided always that **you** obtain in writing from the carrier a statement confirming the length and exact nature of the delay.

### 2. Abandonment

If the holiday or journey is necessarily cancelled following a delay of not less than 24 hours beyond the scheduled departure time (and written confirmation obtained from the carrier), the **Insurer** will indemnify **you** up to the amount shown in the Schedule of Benefits for travel and accommodation expenses paid or contracted to be paid by **you** in respect of **your** own **trip** (prior to any occurrence giving rise to a claim under this section) and which are not recoverable.

### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising for delay caused by strike or industrial action, if the strike or industrial action was notified at the time the insurance was purchased;
2. **your** failure to check in as per **your** original itinerary;
3. any claim payable that can be paid under the section missed departure.

**NOTE: Both travel delay and abandonment are restricted to the following causes:**

- i) Strike or industrial action
- ii) Adverse weather conditions
- iii) Mechanical breakdown

## SECTION I - MISSED DEPARTURE

### • What You Are Covered For:

The insurer will indemnify **you** up to the amount shown in the Schedule of Benefits, in respect of reasonable additional costs of travel and accommodation necessarily incurred if **you** are unable to reach the international point of departure of the booked travel itinerary on the initial outward or final return journey as a consequence of the failure of **public transport** services or the accident/breakdown of a motor vehicle in which **you** are traveling, inclusive of reasonable costs incurred should delay or cancellation of **your** scheduled **public transport**, cause **you** to miss **your** ships departure.

### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. claims arising as a result of **your** not having taken reasonable steps to complete the journey to the departure point on time;
3. claims arising from the failure of **public transport** services caused by strike, riot or civil commotion for which warning has been given prior to the commencement of departure to the departure point;
4. claims arising from the vehicle not having been properly serviced and maintained, in the event of vehicle breakdown;
5. claims arising from an accident/ breakdown of a motor vehicle, where no written evidence of such accident/ breakdown has been supplied.
6. claims arising from delay/cancellation of **public transport**, where no written evidence of such delay/cancellation has been supplied.

## SECTION J - LEGAL EXPENSES

### • What You Are Covered For:

We will pay up to the overall limit shown on the schedule of benefits for all insured people in connection with any one event leading to a claim for legal costs and expenses arising as a result of claims for compensation and damages resulting from **your** death, illness or injury during **your trip**.

### SPECIAL CONDITION

It is a condition of the cover provided under this section that:

- 1 **we** will have complete control over any legal representatives appointed and any proceedings; and
- 2 **you** follow our advice or that of our agents in handling any claim.

### • What You Are Not Covered For:

- 1 Any claim where **we** or our legal representatives believe that an action is not likely to be successful or if **we** believe that the costs of taking action will be greater than any award.
- 2 The costs of making any claim against **us**, our agents or representatives, or against any tour operator, accommodation provider, carrier or any person who **you** have travelled or arranged to travel with.
- 3 Any costs or expenses which are based directly or indirectly on the amount of any award.

4 The costs of following up a claim for bodily injury, loss or damage caused by or in connection with **your** trade, profession or business, under contract or arising out of **you** owning, using or living on any land or in any buildings.

5 Any claims arising out of **you** owning, possessing or using motorised or mechanically-propelled vehicles, water craft or aircraft of any description, animals, firearms, explosive devices or weapons.

## SECTION K - MISSED PORT

### • What You Are Covered For:

In the event of the cancellation of a scheduled port visit due to adverse weather or timetable restrictions, as confirmed by the tour operator in writing, the **insurer** will compensate **you** as follows:

1. The amount in the Schedule of Benefits for each missed port, up to the maximum amount shown in the Schedule of Benefits, provided always that **you** obtain in writing from the carrier a statement confirming the reason for the missed port.

### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. claims arising from a missed port caused by strike or industrial action if strike or industrial action was notified at the time the insurance was purchased.
3. **your** failure to attend the excursion as per **your** original itinerary.
4. claims arising from when **your** ship cannot put people ashore due to a scheduled tender operation failure.
5. claims where a monetary amount (including on board credit) of compensation has been offered by the ship or tour operator.

## SECTION L - STATEROOM CONFINEMENT

### • What You Are Covered For:

Up to the amounts shown in the Schedule of Benefit for each full day that **you** are confined by the ships medical officer to **your** cabin for medical reasons during the period of the **trip**.

### • What You Are Not Covered For:

In addition to the general exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. any confinement to **your** cabin which has not been confirmed in writing by the ships medical officer.

## SECTION M - UNUSED EXCURSIONS

### • What You Are Covered For:

The **Insurer** will pay **you** up to the Amount shown in the SCHEDULE OF BENEFITS, for the cost of excursions pre-booked in the UK, which **you** were unable to use as a direct result of being a hospital in-patient due to an accident or illness which is covered under the medical section of this **policy**.

### • What You Are Not Covered For:

In addition to the General Exclusion of the **policy**, the **insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. claims where the **Assistant Company** has not been contacted and a recommended hospital has been appointed.

## EXCLUSIONS APPLICABLE TO ALL SECTIONS OF THE INSURANCE

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for claims which are directly or indirectly caused by, occasioned by, resulting from or in connection with any of the following regardless of any other cause or event contributing concurrently or in any other sequence to the claim;

(i) **act of terrorism**; this exclusion will not apply to losses under the Emergency Medical Expenses and Repatriation Section, nor the Hospital Benefit Section nor the Personal Accident Section unless such losses are caused by nuclear, chemical or biological attack or planned attack, or the disturbances were already taking place at the beginning of any **trip** in which case the exclusion will apply

ii) war, invasion or warlike operations (whether war be declared or not), hostile acts of sovereign or government entities, civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power or martial law or confiscation by order of any government or public authority; or

iii) seizure or illegal occupation; or

iv) confiscation, requisition, detention, legal or illegal occupation, embargo, quarantine or any result of any order of public or government authority which deprives **you** of the use or value of **your** property, nor for loss or damage arising from acts of contraband or illegal transportation or illegal trade; or

v) discharge of pollutants or contaminants, which pollutants and contaminants shall include but are not limited to any solid, liquid, gaseous or thermal irritant, contaminant or toxic or hazardous substance or any substance the presence, existence or release of which endangers or threatens to endanger the health, safety or welfare of persons or the environment; or

vi) chemical or biological release or exposure of any kind; or

vii) attacks by electronic means including computer hacking or the introduction of any form of computer virus; or

viii) threat or hoax, in the absence of physical damage due to an act of terrorism; or

ix) any action taken in controlling, preventing, suppressing or in any way relating to any act of terrorism.

2. from loss or destruction of, or damage to any property whatsoever, or any loss or expense whatsoever resulting in or arising therefrom, or any consequential loss of any legal liability of whatsoever nature, directly or indirectly caused by or contributed to, or arising from;

(a) ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel; or

(b) the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof;

3. from **you** engaging in any illegal or criminal act;

4. from any consequential loss whatsoever. Claims shall only be paid for those losses which are specifically stated under the terms of this insurance;

5. wilful exposure to areas known to be infected with;

(a) Severe Acute Respiratory Syndrome (S.A.R.S);

(b) Avian Influenza, Asian Birdflu and/or H5N1;

(c) or any other Influenza A viruses.

6. directly or indirectly out of **your** financial incapacity, except in the circumstance of **redundancy**;

7. which but for the existence of this insurance, would be covered under any other insurance policy(ies), including any amounts recovered by **you** from private health insurance, E111 Card payments, any reciprocal health agreements, airlines, hotels, home contents Insurers or any other recovery by **you** which is the basis of a claim;

8. from the tour operator, airline or any other company, firm or person either becoming insolvent or being unable or unwilling to fulfil any part of their obligation;

9. from any **hazardous activity** (except where an appropriate premium has been paid);

10. from Suicide or attempted suicide or wilful exposure to danger (except in an attempt to save human life), psychological/ mental disorder, anxiety, stress or depression, venereal infection;

11 the influence of or in connection with the use of alcohol or drugs, unless as prescribed by a treating doctor;

12. from **you** being in or entering or descending from an aircraft other than a fully licensed passenger carrying aircraft in which **you** are travelling as a passenger other than as a member of the crew and not for the purpose of undertaking any trade, training or technical operation therein or thereon;

13. from **your** wilful exposure to a peril. **You** must exercise reasonable care to prevent illness, injury or loss or damage of **your** property as if uninsured;

14. directly or indirectly from **you** being engaged in any manual employment after the commencement of the **trip**;

15. which have not been proven and the amount thereof substantiated.

## CONDITIONS APPLICABLE TO ALL SECTIONS OF THE INSURANCE

1. All material facts must be disclosed to the **Insurer** at the time of taking out this Insurance. Failure to do so may result in the Insurers non-liability for claims. A material fact is any fact known to the **Insured** which is likely to influence the Insurers in the acceptance or assessment of the insurance. If **you** are in any doubt as to whether a fact is 'material' then for **your** own protection it should be disclosed. All information provided in purchasing this insurance shall form the basis of the contract. The **Insured** should keep a record (including copies of letters) of all information provided by **TRAVELGUARD** for the purpose of entering into this contract.
2. All **Certificates**, information and evidence required by the Insurer shall be furnished at the expense of the **Insured** or his legal personal representatives and shall be in such form and of such nature as the Insurer may prescribe. The **Insured** shall as often as required submit to a medical examination on behalf of the Insurer at the **Insured's** expense.
3. In the event of death of the **Insured**, the Insurer shall be entitled to have a post-mortem examination at the **insurer's** own expense.
4. Any items which become the subject of a claim for loss or damage shall be retained for **Insurer** inspection and shall be forwarded to their Agents upon request at the expense of the **Insured** or his legal personal representatives. All such items shall become the property of the **Insurer** following final settlement of the claim.
5. In the event of any occurrence which may give rise to a claim under this insurance, the **Insured** shall take all reasonable steps to minimize any loss arising out of such claim.
6. This insurance is non-transferable. Should the journey or holiday be cancelled prior to departure for any reason whatsoever other than those set out in Section A of the **policy** then the insurance cover terminates immediately and the premium is neither apportionable nor refundable.
7. The **Insurer** and the **Insured** are entitled to choose the law applicable to the insurance contract. The Insurer chooses Irish law and, in the absence of any agreement to the contrary, Irish law shall apply.
8. The **Insurer**, at its own expense, may take proceedings in the name of the **Insured** to recover compensation or secure an indemnity from any third party in respect of any loss or damage covered by this insurance and any amount so recovered shall belong to the **Insurer**.
9. In the event that the **Insured** recovers by any means, damages from any third party in respect of personal accident, all benefits paid to the **Insured** shall be repaid to the Insurer.
10. If any fraudulent claim is made or if any fraudulent means or devices are used to obtain any benefit under this **policy**, all benefits thereunder shall be forfeited as well as all premiums paid.
11. In the event that the **Insured** experiences a problem with the **policy** or the claims process, please refer to the Complaints Procedure.

## COMPENSATION SCHEME

White Horse Insurance Ireland Limited are covered by the Financial Services Compensation Fund. If White Horse Insurance Ireland Limited cannot meet their obligations **you** may be entitled to compensation from The Financial Services Compensation Fund. The Insurance Compensation Fund provides funds for liquidators so that they may pay the valid claims of insolvent insurers. The fund will provide an amount up to £2,000 or 90% of the net loss, whichever is less. **You** can get more information about compensation fund arrangements from the Financial Services Authority.

## DATA PROTECTION

Please note that any information provided to **us** will be processed by **us** and our agents in compliance with the provisions of the Data Protection Act 1998 as amended, for the purpose of providing insurance and handling claims, if any, which may necessitate such information being provided to third parties.

## COMPLAINTS PROCEDURE

Should **you** have any query or complaint regarding **your** insurance or in the way **your** claim has been dealt with, in the first instance please write to:

**The Operations Director**  
**White Horse Administration Services Limited**  
**PO Box 5633, Walsall, WS6 9BB**

If **you** are still not satisfied with our decision after following the above procedure, **you** may then write to:

**The Financial Services Ombudsman's Bureau**  
**Third Floor, Lincoln House, Lincoln Place, Dublin 2, Republic of Ireland**  
**Tel: 00353 (1) 6620 899**  
**Fax: 00353 (1) 6620 890**

Please note the Ombudsman will not consider **your** case until **you** have followed the complaints procedure by writing to White Horse Insurance Ireland Limited, as outlined above.

Please quote **your** insurance reference number and **your** claim number in all **your** correspondence to all parties involved with this procedure. This procedure is intended to provide **you** with a prompt and practical service with any complaints that **you** may have, and does not affect **your** legal rights.

## FOR 24 HOUR EMERGENCY MEDICAL ASSISTANCE

Please telephone AXA Assistance  
**Tel: 0044 (0) 845 271 2457**  
**24 hours a day, 365 days a year.**

## FOR CLAIMS

Please telephone the White Horse Administration Services Limited Claims Department on

**Tel: \*0871 664 7995**

*\* Calls from BT land lines cost 10p per minute. Calls from mobiles and other networks may be extra*

Please note that it is a condition of **your policy** that **you** notify us of **your** intention to make a claim within 45 days of **your** return date. Our postal address is:

**White Horse Administration Services Limited Claims Department**  
**PO Box 5633, Walsall, WS6 9BB, England**

When **you** contact **us** please ensure that **you** have the following information available to **you** as **we** will require it to process **your** claim:

● Master policy reference of **WHIIL/TGUARD/03/2010**

Name of **your policy** **TRAVELGUARD CRUISE INSURANCE**

● **Your policy** number

● Date of purchase of **your policy**

● Country and resort **you** visited or intended to visit

● Actual or intended travel dates

● Incident date

● Brief circumstances of **your** claim

● Value of **your** claim

Please note that **your** claim may be delayed if **you** are unable to advise **us** on the above information.

## WE WANT YOU TO FULLY ENJOY YOUR TRIP SO WE HAVE INCLUDED A FEW HELPFUL HINTS

1. Never leave your belongings unattended or with strangers, especially at airports or on the beach, nor in view within vehicles.
2. Leave in plenty of time to get to the airport/port by the earliest stated check-in time, allowing for the time of day, weather and the latest available travel information.
3. If you are taking valuable items such as jewellery or camcorders on holiday, you should insure them under an All Risks insurance or your household contents insurance.
4. Do not pack valuables, money and fragile items in the baggage that you intend to check-in at the airport, etc. Keep them with you at all times during your journey.
5. If you need regular medication, take enough with you to last your holiday. You should also take an extra supply that should be packed separately in case you lose your first supply.
6. Check your baggage for damage each time you reclaim it.
7. Think before you dive into water, check the depths of swimming pools and the sea and only dive if you are sure the water is deep enough and never after alcohol or a heavy meal.
8. The sun abroad can be much more powerful than you are used to at home, particularly if you are on the water. To prevent sunburn and sunstroke, use plenty of high factor sun cream and take care not to stay out in strong sunlight too long.
9. Check that the tap water is safe to drink. Unless you know it is safe, always drink bottled water. Avoid ice in drinks, or cold food such as salads that may have been washed in tap water.
10. Remember simple first aid remedies and medications can reduce or eliminate your need to take up valuable holiday time seeking treatment.
11. Make sure all passports, visas, vaccinations and health requirements are up to date, and be sure to take all necessary documents with you.

### USEFUL NUMBERS:

- **Emergency Medical Assistance: 0044 (0) 845 271 2457**
- **Medical Pre-Screening: 0845 250 5258** *\*Calls from BT land lines cost 10p per minute. Calls from mobiles and other networks may be extra.*
- **Claims: 0871 664 7995**