

Freedom

Travel Insurance

TRAVEL POLICY

Effective date: November 2010

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TRAVEL UNDERWRITERS

Table of contents

Contact Information	4
10-Day Full Refund Provision	5
Insuring Agreement	5
Validation of Coverage	5
Emergency Medical Insurance — Multi Trip Annual & Single Trip ..	5
Visitors to Canada Emergency Medical Insurance — Single Trip ..	13
Trip Cancellation/Trip Interruption Insurance and Trip Interruption Insurance only — Multi Trip Annual & Single Trip	19
Rental Car Protection — Single Trip	26
Accidental Death and Dismemberment Insurance — Multi Trip Annual & Single Trip	28
Baggage Insurance — Single Trip	31
Non-Medical Package — Single Trip	33
All Inclusive Holiday Package — Single Trip	34
Visitors to Canada Holiday Package — Single Trip	34
General Exclusions	35
General Conditions	36
Authorized Extensions to Period of Coverage	39
Automatic Annual Renewal Option	39
Definitions	39
Statutory Conditions	52
How to Claim	53
International Assistance Services	55

Contact information

Keep these numbers handy when you travel. You can contact us at the following numbers or visit us at www.oneworldassist.com

Claims/Hospitalization

In the event of hospitalization, call OneWorld Assist immediately:

From Canada & USA	1-800-663-0399
From Mexico	001-800-514-9976
Outside N. America & Mexico (global toll-free)	*800-663-00399
Worldwide (collect)	**604-278-4108

Notice to insured, physicians and hospitals

It is a condition of the Insurance that in the event of medical emergency due to sickness or injury which may require or result in hospitalization, the insurer must be notified as soon as possible.

Policy Extensions During General Business Hours

To extend your period of coverage while travelling, simply call us:

From Canada & USA	1-800-663-5389
From Mexico	001-800-514-9976
Outside N. America & Mexico (global toll-free)	*800-663-00399
Worldwide (collect)	**604-276-9900

* To use the global toll-free service when you are travelling outside North America and Mexico, you must first dial the international access code (see list below) to reach Canada, then enter our 11-digit toll-free number. For example, if you are in Australia, dial 0011 + 800-663-00399.

Argentina	00	Latvia	00
Australia	0011 or 00111	Luxembourg	00
Austria	00	Macau	00
Belarus	810	Malaysia	00
Belgium	00	Netherlands	00
Bulgaria	00	New Zealand	00
China	00	Norway	00
Colombia	005 or 00	Philippines	00
Costa Rica	00	Poland	00
Cyprus	00	Portugal	00
Czech Republic	00	Russia	810
Denmark	00	Singapore	001
Estonia	00	Slovenia	00
Finland	00 or 990	South Africa	09 or 00
France	00	South Korea	001 or 002 or 008
Germany	00	Spain	00
Hong Kong	001	Sweden	00
Ireland	00	Switzerland	00
Israel	00 or 014	Taiwan	00
Italy	00	Thailand	001
Japan	010 or 0061 010 or 0041 010 or 001 010 or 0033 010	United Kingdom	00
		Uruguay	00

** If you are unable to use the global toll-free service and access codes shown above (subject to change without notice), please call us collect. You can complete your call by speaking immediately with a Canadian operator using one of the Canada Direct access numbers listed on our website at www.oneworldassist.com or with the assistance of a local operator.

Tell the Canadian or local operator you wish to make a collect call to Canada at 604-276-9900 (for policy extensions) or at 604-278-4108 (for claims/hospitalization).

Some restrictions may apply depending on the country from which the call is originating.

This is your insurance document. This document contains clauses that may exclude or limit your coverage. Please read it carefully.

All italicized words have the meanings set out in the Definitions section.

10-day full refund provision

You have 10 days from the *application date* to review this Policy to ensure it meets *your* Insurance needs. A full refund is available provided no travel has taken place and/or no claim has been or will be submitted.

This does not apply to Policies with Trip Cancellation/Trip Interruption Insurance or Packages.

To cancel *your* Policy, you must contact *your* agent or *Travel Underwriters* during general business hours. The request must be received no later than 10 days from the *application date* of the Policy.

Other refunds may be available, please refer to the Refunds section of the plan you have purchased.

Insuring agreement

In consideration of having paid the required premium in full for the coverage(s) chosen and having completed in full the *application* which has been provided to you either by *Travel Underwriters* or one of its *designated representatives*, this policy wording booklet becomes *your* Policy of Insurance. The *company* hereby agrees to provide Insurance in accordance with the terms and conditions of the Policy as set forth herein.

All the limits of Insurance under each benefit are per person, per trip, unless otherwise stated.

Validation of coverage

At the time the required premium is paid, *your* coverage will be validated when the *company* or the *designated representative* provides you with a completed, time dated and numbered *application*.

Emergency medical insurance – multi trip annual & single trip

Eligibility

You are eligible for coverage if:

1. You have not yet reached the age of 90 years at the time of *application date* of the Policy.
2. You are a *Canadian resident*.
3. The expenses you incur result from an *acute*, sudden and unexpected *emergency*.
4. The *emergency* first occurs and the *medical treatment* is provided outside *your home province*.
5. You are not travelling against a *physician's* advice; or
6. You have not been diagnosed with a *terminal condition*.

Period of coverage

Multi trip annual

This Policy begins at 12:01 AM on the effective date as shown on the *application* and continues in force for a period of one year from the effective date. Coverage commences at the time and on the date of each departure from *your home province*. You may travel as many times as you wish during the period of coverage provided that no one trip exceeds the maximum number of days as specified and contracted for at the time of *application*.

Coverage terminates each time you return to *your home province*, subject to the maximum duration limitation of each trip as specified in the *application*, or at 11:59 PM on the expiry date of the Policy, whichever occurs first.

Single trip

Coverage commences on the date and time you depart from *your home province*, which is the same as the effective date as shown on your *application*.

Your coverage terminates on the earliest of the following:

1. At 11:59 PM on the expiry date as shown on the *application*;
2. On the date and time when you return to *your home province*, except as outlined below:
 - a) If you are also covered under the Trip Cancellation/Trip Interruption Insurance or Trip Interruption Insurance only and your trip is interrupted before the scheduled return date as a result of an event mentioned in the Trip Link Benefit; your Policy will not terminate, however you will not be covered while in *your home province*. There will be no refund for the number of days you spend in *your home province*.
 - b) If you are returned to *your home province* under the Emergency Air Transportation Benefit during the period of coverage and you resume your trip by returning to your trip destination under the Return to Your Destination Benefit, your Policy will not terminate, however you will not be covered while in *your home province*. There will be no refund for the number of days you spend in *your home province*.
 - c) One temporary visit to *your home province*, of up to a maximum of 10 days, is permitted during your period of coverage; your Policy will not terminate, however you will not be covered while in *your home province*. There will be no refund for the number of days you spend in *your home province*.

For policies providing Emergency Medical coverage for travel worldwide excluding USA, coverage is limited to travel outside the USA except for transit through or stopovers in the USA of up to five days.

Applicable to multi trip annual and single trip

Coverage shall be void if purchased after the date of departure from *your home province* or for a trip not originating in Canada unless authorized by *Travel Underwriters* in which case it will be subject to the *waiting period* requirements.

When this Policy is purchased to top-up any other insurance plan,

coverage commences the day following the expiry date of the insurance plan being topped-up.

Benefits

Maximum limit — \$5,000,000 per person, per trip.

The wording in this section applies to Emergency Medical:

- Multi Trip Annual and Single Trip Worldwide
- Multi Trip Annual and Single Trip for Travel within Canada
- Single Trip Worldwide excluding USA

If *hospitalization* or *medical treatment* due to a medical *emergency* is required by you while travelling outside *your home province*, the *company* will pay you or the *physician* and/or *hospital* of your choice directly for all eligible *hospital*, medical and related expenses up to the sum insured in the event of a covered claim. To qualify for reimbursement, the expenses must be *medically necessary* for the treatment of an *acute*, sudden and unexpected *sickness* or *accident*.

If you are not insured under the government health care plan of the province or territory in which you reside, the portion that would have been refunded by the provincial or territorial government health care plan is not a benefit of this Insurance.

Eligible *hospital* and related medical expenses are described below.

Emergency medical treatment

- **Hospital confinement and treatment**
Emergency hospital confinement (limited to semi-private accommodation) and/or *emergency medical treatment* by a *physician* for the actual, usual and customary charges for reasonable and necessary *hospital* and medical expenses. This expense includes one *follow-up* visit (not including ongoing treatment), when the medical process in dealing with the *emergency* requires such *follow-up* visit. The *follow-up* visit must take place within 14 days of the initial *emergency*. In the case of *hospital* confinement, any coverage related to the *hospital* confinement terminates upon release from *hospital*, other than one *follow-up* visit within 14 days of the *hospital* discharge.
- **Physician**
 The services of a *physician*.
- **Ambulance services**
 The services of a licensed ambulance and paramedics from the scene of the *accident* or place of onset of the *sickness* to the nearest *hospital*. If an ambulance is medically required but is unavailable, the *company* will reimburse you for taxi expenses, taxi receipt required.
- **X-ray examinations**
 X-ray examinations and diagnostic laboratory procedures when performed at time of initial *emergency*.
- **Medicines and/or drugs**
 Up to a maximum of a 30-day supply for medicines and/or drugs (excluding vitamins, minerals, dietary supplements and over the counter medicines) that require a *physician's* written prescription following a consultation (original pharmacy prescription receipts

are required). While *you* are confined to *hospital*, the *company* will reimburse the total cost of such medicines and/or drugs.

- **Rental of essential medical appliances**
Rental of essential medical appliances including, but not limited to, wheelchairs, crutches and canes, but in no event will the rental amount payable exceed the total purchase price.
- **Private duty nursing**
Private duty nursing services, performed by a registered nurse (R.N.) other than a *family member*, when ordered in writing by the attending *physician* expressly in lieu of *hospitalization*.

Other professional medical services

Up to a maximum of \$500 for any one *emergency*, per practitioner for the services of a licensed physiotherapist, chiropractor, chiropractor, osteopath, podiatrist and optometrist for the relief of an *acute emergency*.

Dental services

The services of a licensed dentist or dental surgeon for *emergency* dental treatment, including the cost of prescription drugs and x-rays, as follows:

Up to a maximum of \$4,000 for dental expenses *you* incur while on *your* trip, for an accidental blow to the face requiring the repair or replacement of sound natural teeth or permanently attached artificial teeth. All treatment must be initiated within 48 hours from the time the *emergency* began and completed no later than 90 days after the treatment began and prior to *your* return to *your home province*.

Up to a maximum of \$500 for dental expenses *you* incur while on *your* trip for any dental *emergencies* other than pain caused by an accidental blow to the face. All treatment must be initiated within 48 hours from the time the *emergency* began and completed no later than 90 days after the treatment began and prior to *your* return to *your home province*.

Hospital allowance

Up to \$50 per day to a maximum of \$500 is allowed to cover incidental *hospital* charges, which are billed by the *hospital*, such as TV rental and telephone charges.

Emergency air transportation

This benefit is payable only when pre-approved and arranged by OneWorld Assist

- Medical air evacuation to the nearest medical facility equipped to provide the required treatment, or for return to Canada; or,
- The cost of stretcher fare or one-way economy airfare on a commercial flight via the most direct route to return to *your home province* for immediate *medical treatment* as a result of an *emergency* providing *medical treatment* is sought within 48 hours of arrival to *home province*, and if the attending *physician* providing treatment outside *your home province* recommends it in writing. This benefit includes the cost of an airline seat upgrade when *medically necessary* if the attending *physician* providing treatment outside *your home province* recommends it in writing; and,
- The cost of a return economy airfare on a commercial flight via the most direct route for a qualified medical attendant

or travelling companion, to accompany *you* when *medically necessary* or required by the airline. This benefit includes the cost of an airline seat upgrade for the medical attendant or travelling companion when *medically necessary* if the attending *physician* providing treatment outside *your home province* recommends it in writing.

Return of excess baggage

This benefit is payable only when pre-approved and arranged by OneWorld Assist

Up to a maximum of \$200 for the return of *your* excess baggage provided there was no room aboard the aircraft if *you* are returned to *your home province* under the Emergency Air Transportation Benefit or Repatriation Benefit.

Return of travelling companion

This benefit is payable only when pre-approved and arranged by OneWorld Assist

A one-way economy airfare for one travelling companion to return back to their original departure point, if *you* are returned to *your home province* under the Emergency Air Transportation Benefit or the Repatriation Benefit.

Escort of children/grandchildren

This benefit is payable only when pre-approved and arranged by OneWorld Assist

A one-way economy airfare to return back to the original departure point for accompanying *dependent children* or *dependent grandchildren* if *you* are returned to *your home province* under the Emergency Air Transportation Benefit. The *company* will also pay for an escort to accompany the *dependent children* or *dependent grandchildren* when necessary.

Repatriation

In the event of *your* death during a trip as a result of an *accident* or an unexpected *sickness* covered under the Policy benefits, the *company* will reimburse:

- Up to a maximum of \$10,000 for the preparation and return of *your* body, including the cost of a standard shipping container (excluding cost of a burial coffin) to *your home province* in Canada; or,
- Up to a maximum of \$4,000 for burial or cremation at the place of death (excluding cost of a burial coffin or urn), in the event *your* body is not returned to *your home province*.
- Transportation costs of one *family member* to go to the place of *your* death to identify *your* body when it is necessary to be identified prior to the release of *your* body and up to a limit of \$150 per day for meals and commercial accommodation to a maximum of five days. The *family member* identifying *your* body will also be covered as an *insured* under this Policy for a maximum of five days.

Family transportation

This benefit is payable only when pre-approved and arranged by OneWorld Assist

If an attending *physician* considers it necessary, the *company* will reimburse one economy return airfare or ground transportation costs

for a *family member* to be with *you* while *you* are in *hospital* due to a covered *sickness* or *injury* if *you* are travelling alone; or for one additional *family member* other than *your* travelling companion if *you* are not travelling alone, and up to a maximum of \$150 per day for reasonable and necessary commercial accommodation, meals, telephone calls, internet charges, taxi or bus fare.

Out of pocket expenses

Up to \$400 per day to a maximum of \$4,000 for *your* reasonable and necessary commercial accommodation, meals, telephone calls, internet charges, taxi, bus fare or rental car in lieu, parking charges and child care costs for *insured* dependants up to the age of 18 years (excluding child care provided by a *family member*) in the event:

- a) *You* or *your* travelling companion are confined to *hospital* on the date *you* are scheduled to return to *your home province*; or,
- b) *You* or *your* travelling companion are transferred to a different *hospital* in another city for *emergency medical treatment*.

Benefits are payable only if these expenses have been incurred by *you*.

Return of vehicle

Up to a maximum of \$4,000 for the actual reasonable and necessary charges incurred for a commercial agency to return a *vehicle* that *you* own or rent to either *your home province* or the nearest appropriate *vehicle* rental agency if the attending *physician* determines that as a result of an *emergency*, *you* are incapable of continuing *your* trip by means of the *vehicle* used for the trip and *your* travelling companion is unable to do so for *you*.

Return to your destination

If *you* are returned to *your home province* under the Emergency Air Transportation Benefit, the *company* will pay the cost of a one-way economy airfare by the most direct route to return *you* to the place where the emergency air transportation commenced or to continue *your* trip as originally booked. Once *you* are returned to *your* trip destination, a *recurrence* of the same medical condition which necessitated the emergency air transportation or the occurrence of a related condition will not be covered under this Policy. This benefit can only be offered once during the same covered trip, and will not apply after *your* original expected return date.

Return of accompanying dog or cat

Up to a maximum of \$300 for the cost of returning *your* accompanying dog or cat to Canada if *you* are returned to *your home province* under the Emergency Air Transportation Benefit.

Exclusions

In addition to the General Exclusions, the *company* will not be liable to provide coverage or services, or to pay claims for expenses incurred directly or indirectly as a result of:

1. Any *pre-existing condition* as defined, except as follows:

Applicable to persons 59 years and under (on the application date)

- a) On trips 35 days or less, except for conditions and/or symptoms which arose or worsened on the date of departure, or at any time within the seven days prior to the date of departure, other than a *minor ailment*.

- b) On trips over 35 days, any condition which has remained *stable* in the 90 days prior to the commencement date of a covered trip.

Applicable to persons 60 to 74 years (on the application date)

On all trip lengths, *pre-existing conditions* must be *stable* in the 180 days prior to the commencement date of a covered trip.

Applicable to persons 75 to 89 years (on the application date)

On all trip lengths, *pre-existing conditions* must be *stable* in the 365 days prior to the commencement date of a covered trip.

Pre-existing conditions that do not meet the criteria set out above are not covered.

Refer to the following definitions: *accident* and *injury*, *alteration*, *medical treatment*, *minor ailment*, *pre-existing condition*, *sickness* and *stable*.

2. Any *medical treatment*, *recurrence* or complications related directly or indirectly to a *sickness* or *injury* which was diagnosed or for which symptoms first occurred, or *medical treatment* was received after the date of departure but prior to the effective date of this Insurance or the date coverage under this Policy commenced, when this Policy is purchased to top-up any other insurance plan, or as an extension.
3. A medical condition for which symptoms were present or *medical treatment* was received during a temporary visit to *your home province* during the period of coverage or any condition wholly or partly, directly or indirectly, related thereto.
4. Any *loss* incurred as a result of *sickness* that originated or was symptomatic during the *waiting period*.
5. A trip that is undertaken against a *physician's* advice.
6. A trip that is undertaken after the diagnosis of a *terminal condition*.
7. Conditions or any related conditions for which, prior to departure, testing or investigative consultation took place, was scheduled to take place or was recommended (not including routine check-up or routine monitoring for a medical condition), and for which results had not yet been received at the time of departure. This includes tests that were recommended or scheduled prior to departure, but had not yet taken place at the time of departure.
8. Tests and investigative consultation except when performed at the time of initial *emergency sickness* or *injury*.
9. Any condition(s) for which *you* are registered on a waiting list in Canada for treatment or diagnosis.
10. Any *medical treatment* which is a continuation of or subsequent to an *emergency sickness* or *injury*, including its *recurrence* or any complications related directly or indirectly thereto, unless *you* are declared by an attending *physician* medically unfit to return to *your home province*.
11. Expenses once the *emergency* ends and in the opinion of the attending *physician*, *you* are able to travel to *your home province*

for any further treatment relating to the *sickness* or *accident* that led to the *emergency* (other than for a *follow-up* visit as listed under the benefits for Emergency Medical Treatment).

12. Loss, theft or breakage of prescription glasses, contact lenses, prosthetic devices, hearing aids and dentures.
13. Expenses incurred after emergency air transportation, when the emergency air transportation was not arranged by *OneWorld Assist*.
14. Expenses incurred and trips where the date of departure from *your home province* preceded the effective date of coverage under this Policy, unless authorized in advance by *Travel Underwriters*.
15. Any amount which would have been payable under the provincial or territorial government health care plan of *your home province*, if *you* are not insured under that plan.

Deductible

The *company* will reimburse eligible expenses for losses incurred in excess of the amount of the *deductible* as shown on the *application*, per *insured* per covered condition or event. This *deductible* applies to the portion of eligible expenses remaining after payment by *your* provincial or territorial government health care plan or other insurance policies, plans or contracts, including private or provincial automobile insurance.

Applicable to persons 60 to 89 years

If *you* qualify for the coverage selected but fail to answer truthfully and accurately any question in the Health Questionnaire, or at the time of *application*, any claim will be subject to an extra *deductible* of \$10,000 in addition to any other applicable *deductible* amount, and no future coverage will be provided under this Policy unless *you* pay the additional premium reflecting true and accurate answers to those questions.

Automatic extensions to coverage

This Policy, after termination of any one period of coverage, will be automatically extended:

1. For 72 hours in the event *your common carrier* is delayed due to circumstances beyond *your* control, preventing *you* from returning to *your home province*.
2. If *you* are *hospitalized* during the term of this Policy, for the period of *hospital* confinement plus five days after release for *you* to travel home; or,
3. For five days for *you* to travel home if a *sickness* or *injury* renders *you* unable to travel on *your* scheduled return date but *you* are not *hospitalized*, provided written documentation is provided by the attending *physician* to substantiate *your* inability to travel home as scheduled.

Refunds

Applicable to multi trip annual and single trip

1. Refunds are not available if a claim has been or will be submitted.
2. When the request for refund is received PRIOR to the effective date of the Policy, a full refund is available.

3. When no travel has taken place and the request for refund is received AFTER the effective date of the Policy:
 - a) A full refund is available within 10 days of the *application date*; or,
 - b) A refund less an administration fee is available when the request for refund is received more than 10 days after the *application date* but no later than 30 days after the effective date and prior to the expiry date of the Policy.
 - c) Refunds must be requested in writing.

Applicable to single trip only

1. In the case of early return to *your home province*, partial refunds may be available provided:
 - a) A satisfactory proof of return to *your home province* is sent to *Travel Underwriters*.
 - b) The request is received by *Travel Underwriters* no later than 30 days after *your* actual return date. Refunds will be calculated from the date of return. All partial refunds will be subject to an administration fee.
 - c) Refunds must be requested in writing.

Visitors to Canada emergency medical insurance – single trip

Eligibility

You are eligible for coverage if:

1. *You* have not yet reached the age of 90 years at the time of *application date* of the Policy.
2. *You* are:
 - a) A foreign worker, or a visitor to Canada with valid legal status in Canada; or,
 - b) An immigrant awaiting provincial or territorial government health care coverage; or,
 - c) A returning Canadian not eligible for provincial or territorial government health care plan due to an extended leave.
3. The expenses *you* incur result from an *acute*, sudden and unexpected *emergency*.
4. *You* are not travelling against a *physician's* advice; or,
5. *You* have not been diagnosed with a *terminal condition*.

Period of coverage

Coverage commences on the effective date and time as shown on the *application*, subject to the *waiting period* requirements. The effective date must be on or after *your* arrival date in Canada.

Coverage terminates on the earliest of the following:

1. At 11:59 PM on the expiry date as shown on the *application*; or,
2. On the day *you* obtain immigrant status from the government of Canada and become eligible for or insured under the government health care plan of the province or territory in which *you* reside.

This Period of Coverage is also applicable to the 24-Hour Accident Insurance Additional Benefit as stated in this section.

Travel outside Canada: Travel worldwide during the period of coverage is valid as long as the majority of the period of coverage is spent in Canada. Visits to *your* country of permanent residence are permitted; *your* Policy will not terminate, however, expenses will not be covered while in *your* country of permanent residence.

Benefits

This Policy will provide coverage up to the sum insured as indicated on the application, per person, per period of coverage.

If *hospitalization* or *medical treatment* due to a medical *emergency* is required by *you* while travelling outside *your* country of permanent residence, the *company* will pay *you* or the *physician* and *hospital* of *your* choice directly for all eligible *hospital*, medical and related expenses up to the sum insured. To qualify for reimbursement, the expenses must be *medically necessary* for the treatment of an *acute*, sudden and unexpected *sickness* or *accident*.

The following expenses will be reimbursed up to the maximum aggregate Policy limit as shown on the *application* for which the appropriate premium has been paid:

Emergency medical treatment

- **Hospital confinement and treatment**

Emergency hospital confinement (limited to semi-private accommodation) and/or *emergency medical treatment* by a *physician* for the actual, usual and customary charges for reasonable and necessary *hospital* and medical expenses. This expense includes three *follow-up* visits (not including ongoing treatment), when the medical process in dealing with the *emergency* requires such *follow-up* visits. The *follow-up* visits must take place within 14 days of the initial *emergency*. In the case of *hospital* confinement, any coverage related to the *hospital* confinement terminates upon release from *hospital*, other than three *follow-up* visits within 14 days of *hospital* discharge.

- **Physician**

The services of a *physician*.

- **Ambulance services**

The services of a licensed ambulance and paramedics from the scene of the *accident* or place of onset of the *sickness* to the nearest *hospital*. If an ambulance is medically required but is unavailable, the *company* will reimburse *you* for taxi expenses, taxi receipt required.

- **X-ray examinations**

X-ray examinations and diagnostic laboratory procedures when performed at time of initial *emergency*.

- **Medicines and/or drugs**

Up to a maximum of a 30-day supply for medicines and/or drugs (excluding vitamins, minerals, dietary supplements and over the counter medicines) that require a *physician's* written prescription following a consultation (original pharmacy prescription receipts are required). While *you* are confined to *hospital*, the *company* will reimburse the total cost of such medicines and/or drugs.

- **Rental of essential medical appliances**

Rental of essential medical appliances including, but not limited to, wheelchairs, crutches and canes, but in no event will the rental amount payable exceed the total purchase price.

- **Private duty nursing**

Private duty nursing services, performed by a registered nurse (R.N.) other than a *family member*, when ordered in writing by the attending *physician* expressly in lieu of *hospitalization*.

Other professional medical services

Up to a maximum of \$500 for any one *emergency*, per practitioner for the services of a licensed physiotherapist, chiropractor, chiroprapist, osteopath, podiatrist and optometrist for the relief of an *acute emergency*.

Dental services

The services of a licensed dentist or dental surgeon for *emergency* dental treatment, including the cost of prescription drugs and x-rays, as follows:

Up to a maximum limit of \$4,000 for dental expenses *you* incur while on *your* trip, for an accidental blow to the face requiring the repair or replacement of sound natural teeth or permanently attached artificial teeth. All treatment must be initiated within 48 hours from the time the *emergency* began and completed no later than 90 days after the treatment began.

Up to a maximum limit of \$500 for dental expenses *you* incur while on *your* trip for any other dental *emergencies* other than pain caused by an accidental blow to the face. All treatment must be initiated within 48 hours from the time the *emergency* began and completed no later than 90 days after the treatment began.

Hospital allowance

Up to \$50 per day to a maximum of \$500 is allowed to cover incidental *hospital* charges, which are billed by the *hospital*, such as TV rental and telephone charges.

Emergency air transportation

This benefit is payable only when pre-approved and arranged by OneWorld Assist

- a) Medical air evacuation to the nearest medical facility equipped to provide the required treatment, or for return to *your* country of permanent residence; or,
- b) The cost of stretcher fare or one-way economy airfare on a commercial flight via the most direct route to return to *your* country of permanent residence for immediate *medical treatment* as a result of an *emergency* if the attending *physician* providing treatment outside *your* country of permanent residence recommends it in writing. This benefit includes the cost of an airline seat upgrade when *medically necessary* if the attending *physician* providing treatment outside *your* country of permanent residence recommends it in writing, and
- c) The cost of a return economy airfare on a commercial flight via the most direct route for a qualified medical attendant or travelling companion to accompany *you* when an attendant is required by the airline or *medically necessary* if the attending *physician* providing treatment outside *your* country

of permanent residence recommends it in writing. This benefit includes the cost of an airline seat upgrade for the medical attendant or travelling companion when *medically necessary* if the attending *physician* providing treatment outside *your* country of permanent residence recommends it in writing.

This benefit is limited to the maximum aggregate Policy limit as shown on the *application* for which the appropriate premium has been paid.

Return of travelling companion

This benefit is payable only when pre-approved and arranged by *OneWorld Assist*

A one-way economy airfare for one travelling companion to return back to their original departure point if *you* are returned to *your* country of permanent residence under the Emergency Air Transportation Benefit or the Repatriation Benefit.

Escort of children/grandchildren

This benefit is payable only when pre-approved and arranged by *OneWorld Assist*

Up to an economy airfare to return back to the original departure point for accompanying *dependent children* or *dependent grandchildren* in the event *you* are returned to *your* country of permanent residence under the Emergency Air Transportation Benefit. The *company* will also pay for an escort to accompany the *dependent children* or *dependent grandchildren* when necessary.

Repatriation

In the event of *your* death during a trip, as a result of an *accident* or unexpected *sickness* covered under the Policy benefits, the *company* will reimburse for:

- a) Up to a maximum of \$10,000 for preparation and return of *your* body, including the cost of a standard shipping container (excluding the cost of a burial coffin) to *your* country of permanent residence; or,
- b) Up to a maximum of \$4,000 for burial or cremation at the place of death (excluding cost of a burial coffin or urn), in the event *your* body is not returned to *your* country of permanent residence; and
- c) Transportation costs of one *family member* to go to the place of *your* death to identify *your* body when it is necessary to be identified prior to the release of *your* body and up to a limit of \$150 per day for meals and commercial accommodation to a maximum of five days. The *family member* identifying *your* body will also be covered as an *insured* under this Policy for a maximum of five days.

Family transportation

This benefit is payable only when pre-approved and arranged by *OneWorld Assist*

If an attending *physician* considers it necessary, the *company* will reimburse one economy return airfare or ground transportation costs for one *family member* to be with *you* while *you* are in *hospital* due to a covered *sickness* or *injury* if *you* are travelling alone, or for one additional *family member* other than *your* travelling companion if *you* are not travelling alone, and \$150 per day for reasonable and

necessary commercial accommodation, meals, telephone calls, internet charges, taxi or bus fare.

Out of pocket expenses

Up to \$250 per day to a maximum of \$2,500 for *your* reasonable and necessary commercial accommodation, meals, telephone calls, internet charges, taxi, bus fare or rental car in lieu, parking charges and child care costs for *your insured* dependants up to the age of 18 years (excluding child care provided by a *family member*) in the event:

- a) *You* or *your* travelling companion are confined to *hospital* on the date *you* are scheduled to return to *your* country of permanent residence; or,
- b) *You* or *your* travelling companion are transferred to a different *hospital* in another city for *emergency medical treatment*.

Benefits are payable only if these expenses have been incurred by *you*.

Additional benefit

24-Hour Accident Insurance: Maximum sum insured - \$25,000. Refer to section Accidental Death and Dismemberment Insurance for details.

This benefit is not applicable for the Visitors to Canada Holiday Package or if *you* have purchased an Accidental Death and Dismemberment Insurance plan for the same covered trip.

Exclusions

In addition to the General Exclusions, the *company* will not be liable to provide coverage or services, or to pay claims for expenses incurred directly or indirectly as a result of:

1. A medical condition which existed prior to the effective date of the Policy or any condition wholly or partly, directly or indirectly, related thereto.
2. A trip that is undertaken against a *physician's* advice.
3. A trip that is undertaken after the diagnosis of a *terminal condition*.
4. A medical condition for which symptoms were present or *medical treatment* was received during a temporary visit to *your* country of permanent residence during the period of coverage or any condition wholly or partly, directly or indirectly, related thereto.
5. Any *loss* incurred as a result of *sickness* that originated or was symptomatic during the *waiting period*.
6. Conditions or any related conditions for which, prior to the arrival date in Canada, testing or investigative consultation took place, was scheduled to take place or was recommended (not including routine check-up or routine monitoring for a medical condition), and for which results had not yet been received at the time of departure from country of permanent residence. This includes tests that were recommended or scheduled prior to departure but had not yet taken place at the time of departure.
7. Tests and investigative consultation except when performed at the time of initial *emergency sickness* or *injury*.
8. Any *medical treatment* which is a continuation of or subsequent to an *emergency sickness* or *accident*, including its *recurrence* or any

complications related directly or indirectly thereto, unless *you* are declared by an attending *physician* medically unfit to return to *your* country of permanent residence.

9. Loss, theft, breakage of prescription glasses, contact lenses, prosthetic devices, hearing aids and dentures.
10. *Medical treatment* and expenses incurred while in *your* country of permanent residence. This exclusion does not apply to a returning Canadian.

Deductible

The *company* will reimburse eligible expenses for *losses* incurred in excess of the amount of the *deductible* as shown on the *application*, per *insured* per covered condition or event.

Automatic extensions to coverage

This Policy, after termination of any one period of coverage, will be automatically extended:

1. For 72 hours in the event *your common carrier* is delayed due to circumstances beyond *your* control, preventing *you* from returning to *your* country of permanent residence.
2. If *you* are *hospitalized* during the term of this Policy, for the period of *hospital* confinement plus five days after release for *you* to travel home to *your* country of permanent residence; or,
3. For five days for *you* to travel home if a *sickness* or *injury* renders *you* unable to travel on *your* scheduled return date but *you* are not *hospitalized*, provided written documentation is provided by the attending *physician* to substantiate *your* inability to travel home as scheduled.

Refunds

1. Refunds are not available if a claim has been or will be submitted.
2. When no travel has taken place and the request for refund is received PRIOR to the effective date of the Policy, a full refund is available.
3. When no travel has taken place and the request for refund is received AFTER the effective date of the Policy:
 - a) A full refund is available within 10 days of the *application date*; or,
 - b) A refund less an administration fee is available when the request for refund is received more than 10 days after the *application date* but no later than 30 days after the effective date and prior to the expiry date of the Policy.
 - c) Refunds must be requested in writing.
4. A partial refund is available if:
 - a) *You* return to *your* country of permanent residence and a minimum term of 30 days remains unused on the Policy; or,
 - b) *You* become eligible and/or covered under a provincial or territorial government health care plan during the period of coverage.
 - c) A satisfactory proof of return to country of permanent residence or proof of the date *you* became eligible and/or covered under

a provincial or territorial government health care plan, is sent to *Travel Underwriters*.

d) Refunds must be requested in writing.

All refund requests must be received by *Travel Underwriters* no later than 30 days from the date *you* became eligible and/or covered under a provincial or territorial government health care plan. Refunds will be calculated from the date *you* return to *your* country of permanent residence or the date *you* become eligible and/or covered under a provincial or territorial government health care plan. All partial refunds will be subject to an administration fee.

Trip cancellation/trip interruption insurance and Trip interruption insurance only – multi trip annual & single trip

- Trip cancellation means an event occurring prior to *your departure date*, causing *you* to cancel *your trip*.
- Trip interruption means an event occurring while on *your trip* causing *you* to interrupt or disrupt *your trip* as originally scheduled or to return earlier or later than *your return date*.

Eligibility

You are eligible for coverage if:

1. *You* have not yet reached the age of 90 years at the time of *application date* of the Policy.
2. *You* are a *Canadian resident*; or,
3. *You* are a visitor to Canada purchasing this single trip Insurance as follows:
 - a) Prior to arriving in Canada, provided *your trip* is booked and Insurance is paid for in Canada; or,
 - b) After arriving in Canada, for travel anywhere in the world provided Insurance is purchased in Canada and travel originates in Canada.

Applicable to trip interruption insurance only

To be eligible for coverage this Insurance must be purchased prior to leaving for *your trip*.

Period of coverage

Multi trip annual

This Policy begins at 12:01 AM on the effective date as shown on the *application* and continues in force for a period of one year from the effective date. Coverage commences at the time of booking *your trip*. Coverage terminates on the date of the cause of cancellation if the *trip* is cancelled prior to the *contracted departure date*, or on the date when *you* return to *your home province*, or at 11:59 PM on the expiry date as shown on the *application*, whichever first occurs.

If a *trip* has already been booked when *you* purchase this Insurance, the effective date must be the same as the *application date*.

If a *trip* has not yet been booked when *you* purchase this Insurance, the effective date may differ from the *application date*.

Single trip

Coverage commences on the *application date* as shown on the *application* and terminates on the earliest of the following:

1. The date of the cause of cancellation if the *trip* is cancelled prior to *your contracted departure date*;
2. *Your return date* or the date *you* return home, except as outlined below:
If *your trip* is interrupted before the scheduled *return date* as a result of an event as mentioned in the Trip Link Benefit. *Your Policy* will not terminate, however *you* will not be covered while in *your home province*. There will be no refund for the number of days *you* spend in *your home province*.
3. At 11:59 PM on the expiry date as shown on the *application*.

Covered risks

1. *Your* and/or *your travelling companion's* sickness, injury, death or quarantine.
2. Sickness, injury, death or quarantine of *your immediate family* or *your travelling companion's immediate family*.
3. Death or *hospitalization* of *your* or *your travelling companion's* business partner, or key employer/employee. Death or admission to *hospital* must occur either within 10 days prior to *departure date* or anytime during the *trip*.
4. Quarantine, death or *hospitalization* of host at final destination.
5. Sickness or injury of *your immediate family* who is at *your* final destination.
6. The legal adoption of a child by *you* or *your travelling companion* when the actual date of that adoption is scheduled to take place during *your trip*.
7. A natural disaster, which renders *your* or *your travelling companion's* principal residence uninhabitable or place of business inoperative.
8. An unforeseeable event completely independent of any intentional or negligent act that renders *your* or *your travelling companion's* principal residence uninhabitable or place of business inoperative.
9. Delay of a connecting *common carrier* due to weather conditions, earthquakes, volcanic eruptions, mechanical failure of the *common carrier*, a traffic accident, or an emergency police-directed road closure.
10. Delay of a private automobile resulting from mechanical failure of that automobile, weather conditions, earthquakes, volcanic eruptions, a traffic accident, or an emergency police-directed road closure.
11. An accident on the way to the *departure point* involving a private passenger automobile in which *you* are a passenger or driver; or *common carrier* in which *you* are a passenger (police report required).
12. A formal written travel advisory and/or travel warning issued by the Department of Foreign Affairs and International Trade Canada (DFAIT) or Public Health Canada (PHC), recommending that, on the *contracted* dates, *you* avoid all or non-essential travel to the *contracted* destinations, provided such travel advisory/warning was issued after the date the *trip* is booked or after the date this Insurance is purchased, whichever occurs later, and is still in effect on *your* scheduled *departure date*.
13. A *schedule change* of the airline carrier that is providing transportation for a portion of *your trip*, causing *you* to miss a connection.
14. *You* or *your travelling companion* being summoned to police, fire or military service (active or reserve).
15. A cancellation of a *business meeting* at *your* final destination beyond *your* or *your employer's* control. Only the travel arrangements directly related to the *business meeting* will be reimbursed.
16. The cancellation or delay of *your* or *your travelling companion's* *common carrier*, due to weather conditions, earthquakes or volcanic eruptions, for a period of at least 30% of the total duration of the *trip*, when *you* choose not to continue with the *trip*.
17. The cancellation or delay of *your travelling companion's* *common carrier* due to weather conditions, earthquakes or volcanic eruptions, for a period of at least 30% of the total duration of the *trip*, when *you* choose to continue with the *trip* as originally planned without *your travelling companion*.
18. *You* or *your travelling companion's* job transfer that results in the relocation of *your* or *your travelling companion's* principal residence of at least 160 km and within 30 days of departure or return (self-employment not applicable).
19. *You* or *your travelling companion* being subpoenaed, after the *trip* is booked or after the date this Insurance is purchased, whichever occurs later, for jury duty, as a witness, or required to appear at a court proceeding during the period of travel (excluding law enforcement officers).
20. Involuntary loss of *your*, *your spouse's*, *your travelling companion's* or *your travelling companion's spouse's* permanent employment provided *you*, *your spouse*, *your travelling companion* or *your travelling companion's spouse* have been continuously employed by the same employer for more than one year prior to the date the *trip* is booked or prior to the date this Insurance is purchased, whichever occurs later.

Applicable to trip cancellation only (coverage for prior to departure)

21. The non-issuance of *your* or *your travelling companion's* travel or student visa (not including an immigration or employment visa) for reasons beyond *your* or *your travelling companion's* control, provided *you* or *your travelling companion* were eligible to make such an application.
22. *You*, *your spouse's* or *your immediate family member's* pregnancy, or *your travelling companion's*, *your travelling companion's*

spouse's or your travelling companion's immediate family member's pregnancy, being diagnosed after the date the *trip* is booked or after the date this Insurance is purchased, whichever occurs later, if *you or your travelling companion's trip* is scheduled to take place in the nine weeks before or after and including the expected date of delivery.

23. Complications of *your, your spouse's or your immediate family member's* pregnancy, or *your travelling companion's, your travelling companion's spouse's or your travelling companion's immediate family member's* pregnancy, occurring within the first 31 weeks of pregnancy.

Benefits

Trip cancellation before departure

Benefits, as outlined below, are payable if cancellation of *your trip* results in unexpected travel costs as a result of covered risks 1 to 23.

Sum insured payable up to the maximum limit as shown on the *application*.

The sum insured amount as shown on the *application* is an aggregate limit per *insured*, per Policy.

1. Reimbursement of non-refundable prepaid airfare and/or other prepaid travel arrangement costs that cannot be recovered from another source. Note: if *you* choose not to cancel *your trip*, reimbursement of the change fee charged by the transportation supplier when such an option is available to *you*.
2. Reimbursement of the additional single supplement commercial accommodation expense in the event *your travelling companion* cancels their *trip*.

Trip interruption after departure

Benefits, as outlined below, are payable if interruption of *your trip* results in unexpected travel costs as a result of covered risks 1 to 20.

Sum insured payable up to the maximum limit as shown on the *application* or the amount listed in this Policy, whichever is less.

The sum insured amount as shown on the *application* is an aggregate limit per *insured*, per Policy.

1. Reimbursement of either:
 - a) *Your* non-refundable, unused prepaid airfare costs; or,
 - b) The change fee; or,
 - c) The cost of a one-way economy airfare to the original *contracted departure point* to return earlier or later than the *contracted return date*; or,
 - d) An airline seat upgrade when *medically necessary* to the original *contracted departure point* to return earlier or later than the *contracted return date*. This benefit is payable only when pre-approved and arranged by *OneWorld Assist*.
2. Reimbursement of *your* non-refundable unused prepaid travel arrangements excluding the cost of unused prepaid transportation back to the original *contracted departure point*.
3. Reimbursement of *your* non-refundable unused prepaid airfare costs when the *trip* is interrupted after arrival at *your* destination,

excluding reimbursement of the cost of unused prepaid transportation back to the original *contracted departure point*.

4. Reimbursement of a one-way economy airfare or transportation costs to catch-up to a tour as originally booked or a one-way economy airfare or transportation costs to *your* next travel destination if a portion was missed.
5. Repatriation—In the event of *your* death during a covered *trip*, as result of an unexpected *sickness* or *injury*, the *company* will reimburse for:
 - a) Preparation and return of *your* body, including the cost of a standard shipping container (excluding cost of a burial coffin), to *your home province* or country of permanent residence, to a maximum of \$10,000; or,
 - b) Burial or cremation at the place of death (excluding cost of a burial coffin or urn), in the event *your* body is not returned to *your home province* or country of permanent residence, to a maximum of \$4,000.
6. Reimbursement of the additional single supplement commercial accommodation expense in the event *your travelling companion* cancels their *trip*.
7. Up to the limit of \$350 per day to a maximum of \$1,500 for *your* reasonable out-of-pocket expenses for commercial accommodation, meals, internet, telephone and facsimile charges and taxi expenses.
8. Trip Link
In the event *you* return to *your home province* from *your trip* before *your* scheduled *return date* as a result of:
 - a) *Hospitalization* (including home-based palliative care) or death of a *family member* not travelling with *you* after *your* date of *departure date*; or,
 - b) A natural disaster rendering *your* principal residence uninhabitable after *your departure date*.

The *company* will reimburse up to a maximum of \$2,500 for the cost of a one-way economy airfare to travel back to *your* original travel destination point provided the return takes place within the period of coverage. This benefit is not applicable to Visitors to Canada purchasing this Insurance.

Conditions

In addition to the General Conditions, the following conditions apply:

1. When the reason for cancellation occurs prior to departure, *you* must:
 - a) Contact the travel agent or airline on the day the reason for cancellation occurs or on the next business day; and,
 - b) Advise *OneWorld Assist* within the same period. Claim payment will be limited to the cancellation penalties specified in the *trip* contracts which are in effect at the time the cause of cancellation occurs.
2. No claims will be considered unless the original unused transportation ticket(s) are provided to *OneWorld Assist*.
3. If *your trip* is cancelled because of *sickness* or *injury*, the patient must consult a *physician* on or before *your departure date* and

time, and prior to the date and time of cancellation. If *your trip* is interrupted or delayed for *sickness* or *injury*, the patient must consult a *physician* on or before the date and time of interruption or delay. In either case *you* must provide a medical certificate completed by the *physician* that includes: a complete diagnosis, the date of onset of the condition, the dates and type of treatment, and the medical necessity of cancelling, delaying or interrupting *your trip*. **If a *physician* was not consulted as required or if *you* cannot provide the complete written certificate, *your claim will be denied*.** *Your* claim must also include original unused tickets, copies of substitute transportation tickets and travel agent or tour operator invoices (if applicable).

4. If *your contracted* travel dates change, *you* must notify the *company* of *your* new travel dates. Failure to do so will result in denial of *your* claim.
5. If *your* return home is delayed for more than 10 days beyond the scheduled *return date*, benefits will be payable only upon satisfactory proof that the delay resulted from *your* or *your travelling companion's* hospital confinement, or *hospital* confinement of a *family member* travelling with *you*.
6. When *travelling companions* are travelling together, the limit is four *insured* persons regardless of the number of Policies issued, unless authorized by *Travel Underwriters*.
7. The benefits are only applicable if:
 - a) *You* had left enough **travel** time to comply with the travel provider's recommended check-in time prior to departure;
 - b) *Your trip*, whether booked online or through a travel agent, meet the minimum **connection** times approved by the applicable travel provider.
8. If *you* purchased a Multi Trip Annual Trip Cancellation/Trip Interruption Policy or a Multi Trip Annual Trip Interruption Insurance only, *your trip* must start and end within the Period of Coverage of this Policy, unless authorized by *Travel Underwriters*.

Exclusions

In addition to the General Exclusions, this Insurance does not cover loss caused by or arising from:

1. A *trip* for which Insurance is purchased after the diagnosis of a *terminal condition*.
2. A *trip* for which Insurance is purchased after *you* or *your travelling companion* have been advised by a *physician* not to travel.
3. Cancellation or interruption caused by or related to a circumstance known to *you* prior to the date the *trip* is booked or prior to the date this Insurance is purchased, whichever occurs later, and which may eventually prevent or interrupt travel as booked.
4. A *sickness* claim occurring within 72 hours after the date this Insurance is purchased if the Policy was purchased more than 72 hours after the transportation and/or commercial accommodations are booked.
5. Travel to visit an ailing *family member* where the medical condition or death of that *family member* is the cause of the cancellation or interruption of the *trip*.

6. An early or late return due to *sickness* or *injury*, unless ordered in writing by the attending *physician* or unless returning to *your home province* or country of permanent residence to seek immediate *medical treatment*.
7. Any *pre-existing condition* affecting *you*, *your travelling companion* or *immediate family member*, business partner, business associate or host at destination, employer or key employee of any, unless the *pre-existing condition* was *stable*:

Applicable to multi trip annual

- a) During the 60 days prior to the date *your trip* is booked when the Insurance is purchased prior to the booking date; or,
- b) During the 60 days prior to the date this Insurance is purchased when the Insurance is purchased after the date *your trip* is booked.

Applicable to single trip

During the 60 days prior to the date this Insurance is purchased.

8. The non-issuance of a travel or student visa due to late visa application.
9. Refundable tickets, if, as result of a *trip* cancellation, an airline refunds the amount paid for the purchase of a ticket by *you* and does not charge *you* any cancellation penalties. This Insurance will not provide reimbursement for any amounts that are refundable by the airline.
10. Travel arrangements for which no premium was paid before departure.
11. Cancellation or interruption due to *sickness* or *injury* when a *physician* has not been consulted, or has not advised against travel on or before *your departure date* and time or date and time of interruption or delay.
12. *Terrorist activity*.

Refunds

Multi trip annual

1. A full refund is available if *you* have not travelled, no cancellation penalties are applicable and the request for refund is received prior to the effective date of the Policy.
2. A refund less an administration fee is available, if *you* have not travelled, no cancellation penalties are applicable and the request for refund is received no later than 30 days after the effective date of the Policy.

Single trip

A refund less an administration fee is available only if:

1. The tour operator (airline etc.) cancels the *trip* and all penalties are waived; or,
2. *You* cancel the *trip* prior to the effective date of any cancellation penalties; or,
3. The tour operator changes the travel date and if *you* are unable to travel on the new dates, the tour operator waives all cancellation penalties.

Applicable to trip interruption insurance only**Multi trip annual**

- When no travel has taken place and the request for refund is received PRIOR to the effective date of the Policy, a full refund is available.
- When no travel has taken place and the request for refund is received AFTER the effective date of the Policy:
 - A full refund is available within 10 days of the *application date*; or,
 - A refund less an administration fee is available when the request for refund is received more than 10 days after the *application date* but no later than 30 days after the effective date and prior to the expiry date of the Policy.

Single trip

A full refund is available only if the coverage is cancelled prior to *your* departure date.

Applicable to all plans

- Refunds must be requested in writing.
- Refunds are not available if a claim has been or will be submitted.

Rental car protection – single trip

Eligibility

You are eligible for coverage if:

- You* have not yet reached the age of 90 years at the time of *application date* of the Policy.
- You* are a *Canadian resident*; or,
- You* are a visitor to Canada.
- You* hold a valid driver's license.

Period of coverage

Coverage commences either when *you* take control of the rented or leased *automobile* or on the effective date of the Policy, whichever is later.

Coverage terminates at the earliest of:

- The time the rental or leasing agency or company assumes control of the *automobile*; or,
- The time the rental or lease agreement expires or is terminated; or,
- The expiry date of the Policy.

The effective and expiry dates are determined by the dates *you* established with:

- Travel agent at the time of purchase or rental; or,
- Leasing agency or company at the time of purchase, whichever applies.

Benefits

The *company* agrees to reimburse *you* up to a maximum of \$50,000 per trip for *loss* due to *physical damage* or *loss* of a rented or leased *automobile* anywhere in the world while the *automobile* is in *your* care, custody or control or of those persons permitted to operate the *automobile* under the terms of the rental or lease agreement.

This includes the reasonable general average costs of towing, salvage, fire department charges, custom duties and the reasonable loss of use of the rented or leased *automobile* for which *you* are responsible.

Coverage will be limited to the amount of *loss* which would have been waived had *you* purchased collision damage waiver from the *automobile* rental or leasing agency or company.

Conditions

- No coverage is provided for any form of third party automobile liability or personal accident insurance benefits.
- No coverage is provided if collision damage waiver is purchased from the rental or leasing agency or company.
- No coverage is provided unless all terms and conditions of the rental or lease agreement or contract have been met and no restrictions are violated.
- Losses* in excess of \$700 must be documented by a police report.
- Such *automobile* is leased or rented from a duly authorized rental or leasing agency or company.
- The *automobile* is not used for carrying passengers for compensation or hire or for commercial *vehicle*.
- This Insurance is only available for the original leased or rented *automobile*. There shall be no coverage if a *loss* is incurred to any replacement *automobile*.
- Such *automobile* is not operated in contravention of any law or regulation related to motor vehicles in the jurisdiction governing the rental agreement.

Exclusions

In addition to the General Exclusions, the *company* will not be liable to provide coverage or services, or to pay claims for expenses incurred directly or indirectly as a result of:

- Operation of the *automobile* contrary to the terms of the rental or leasing contract that results in damage or damage-related expenses.
- Injury* to or for the death of any person under this Insurance.
- Damage to the property of third persons other than damage to the rental *automobile* of the licensed *automobile* rental or leasing agency.
- Expenses resulting from any kind of race or speed contest.
- Any amount payable under any automobile insurance policy.
- Any amount assumed, waived or paid by the rental or leasing

- agency or company or its insurer.
- Contents of the rental or leased *automobile*.
 - The mechanical failure or breakdown of any part of the rented or leased *automobile*, rust, corrosion, wear and tear, gradual deterioration, inherent defect or freezing.
 - Loss* or damage arising from the neglect or abuse of the leased or rented *automobile* by *you* or any persons listed in the rental or lease agreement.
 - The rental or lease of an *exotic car*.

Refunds

- Refunds are not available if a claim has been or will be submitted.
- When *you* have not taken control of the leased or rented *automobile* and the request is received PRIOR to the effective date of the Policy, a full refund is available.
- When *you* have not taken control of the leased or rented *automobile* and the request is received AFTER the effective date of the Policy:
 - A full refund is available within 10 days of the *application date*; or,
 - A refund less an administration fee is available when the request for refund is received more than 10 days after the *application date* but no later than 30 days after the effective date and prior to the expiry date of the Policy.
 - Refunds must be requested in writing.
- In the case of early return of the leased or rented *automobile*, partial refunds are only available if:
 - A satisfactory proof of return to your ordinary place of residence is sent to *Travel Underwriters*.
 - All refund requests must be received by *Travel Underwriters* no later than 30 days after *your* actual return date. Refunds will be calculated from the date of return. All partial refunds will be subject to an administration fee.
 - Refunds must be requested in writing.

Accidental death and dismemberment insurance – multi trip annual & single trip

Air flight/common carrier accident: Maximum sum insured — \$100,000 per person, per trip

24-hour accident: Maximum sum insured — \$25,000 per person, per trip

Eligibility

You are eligible for coverage if:

- You* have not yet reached the age of 90 years at the time of the *application date* of the Policy.
- You* are a *Canadian resident*; or,
- You* are a visitor to Canada.

- You* are not travelling against a *physician's* advice; or
- You* have not been diagnosed with a *terminal condition*.

Period of coverage

Multi trip annual

This Policy begins at 12:01 AM on the effective date as shown on the *application* and continues in force for a period of one year from the effective date. Coverage commences on the date and time *you* leave for *your* trip.

Coverage terminates on the date and time *you* return to *your* ordinary place of residence or at 11:59 PM on the expiry date, whichever occurs first.

Single trip

Coverage commences on the date and time *you* leave for *your* trip. Coverage terminates on the earliest of the following:

- At 11:59 PM on the expiry date;
- On the date and time *you* return to *your* ordinary place of residence, except as outlined below:
 - If *you* are also covered under the Trip Cancellation/Trip Interruption Insurance or Trip Interruption Insurance only and *your* trip is interrupted before the scheduled return date as a result of an event as mentioned in the Trip Link Benefit; *your* Policy will not terminate, however *you* will not be covered while in *your home province*. There will be no refund for the number of days *you* spend in *your home province*.
 - If *you* are also covered under the Emergency Medical Insurance and *you* are returned to *your home province* under the Emergency Air Transportation Benefit during the period of coverage, and *you* resume *your* trip by returning to *your* trip destination under the Return to Your Destination Benefit, *your* Policy will not terminate, however *you* will not be covered while in *your home province*. There will be no refund for the number of days *you* spend in *your home province*.

Covered risks

Air flight/common carrier accident

Death or dismemberment as a result of an *accident* sustained during the period of coverage while riding as a fare-paying passenger, or while entering or leaving a lawfully operated licensed *common carrier*.

Coverage is also applicable to *insured* children under two years of age accompanied by a fare-paying passenger.

24-hour accident

Death or dismemberment as a result of an *accident* sustained during the period of coverage in any other situation not specifically mentioned under Air Flight/Common Carrier above.

Benefits

In the case of *your* accidental death or certain *losses* resulting from an *accident*, the *company* will pay to or on behalf of *you*, *your* estate or other *beneficiary*, the benefits as defined below, but in no event shall payment exceed the maximum sum insured under this section:

1. 100% of the sum insured for loss of life, double dismemberment or *loss of sight* in both eyes.
2. 50% of the sum insured for single dismemberment or *loss of sight* in one eye.

Benefits for *loss of life, limb or sight* are payable for *loss* which occurs within 90 days of the date of the *accident*.

Any claim for indemnity for loss of life, dismemberment or *loss of sight* must be substantiated by a certificate from the attending medical *physician* at the place of the *accident* attesting to the actual *injuries* sustained.

Exclusions

In addition to the General Exclusions, the *company* will not be liable to provide coverage or services, or to pay claims for expenses incurred directly or indirectly as a result of:

1. *Terrorist activity*.
2. A trip that is undertaken against a *physician's* advice.
3. A trip that is undertaken after the diagnosis of a *terminal condition*.

Limitation

The total aggregate limit is \$10 million for any one *accident* or event under this Policy and all policies issued by the *company*, which will be shared proportionately among all policyholders.

Refunds

Applicable to multi trip annual and single trip

1. Refunds are not available if a claim has been or will be submitted.
2. When no travel has taken place and the request for refund is received PRIOR to the effective date of the Policy, a full refund is available.
3. When no travel has taken place and the request for refund is received AFTER the effective date of the Policy:
 - a) A full refund is available within 10 days of the *application date*; or,
 - b) A refund less an administration fee is available when the request for refund is received more than 10 days after the *application date* but no later than 30 days after the effective date and prior to the expiry date of the Policy.
 - c) Refunds must be requested in writing.

Applicable to single trip only

1. In the case of early return to your ordinary place of residence, partial refunds may be available provided:
 - a) A satisfactory proof of return to *your* ordinary place of residence is sent to *Travel Underwriters*.
 - b) The request is received by *Travel Underwriters* no later than 30 days after *your* actual return date. Refunds will be calculated from the date of return. All partial refunds will be subject to an administration fee.
 - c) Refunds must be requested in writing.

Baggage insurance – single trip

Maximum sum insured — \$1,500 per person

Maximum sum insured — \$3,000 per *family*

Eligibility

You are eligible for coverage if:

1. You have not yet reached the age of 90 years at the time of *application date* of the Policy.
2. You are a *Canadian resident*; or,
3. You are a visitor to Canada.

Period of coverage

Coverage commences on the date and time *you* leave for *your* trip. Coverage terminates on the earliest of the following:

1. At 11:59 PM on the expiry date;
2. On the date and time *you* return to *your* ordinary place of residence, except as outlined below:
 - a) If *you* are also covered under the Trip Cancellation/Trip Interruption Insurance or Trip Interruption Insurance only and *your* trip is interrupted before the scheduled return date as a result of an event as mentioned in the Trip Link Benefit; *your* Policy will not terminate, however *you* will not be covered while in *your home province*. There will be no refund for the number of days *you* spend in *your home province*.
 - b) If *you* are also covered under the Emergency Medical Insurance and *you* resume *your* trip by returning to *your* trip destination under the Return to Your Destination Benefit, *your* Policy will not terminate, however *you* will not be covered while in *your home province*. There will be no refund for the number of days *you* spend in *your home province*.

Benefits

Baggage and personal effects

The *company* agrees to pay for the loss, damage, destruction or theft of personal effects owned by the *insured* while in transit, or while in any hotel or other building, en route anywhere in the world, on land or water or in the air.

Currency

The *company* agrees to pay for loss of currency through theft or robbery of personal currency (excluding unexplained disappearance; police report required), up to a limit of \$100.

Baggage delay

The *company* agrees to pay for personal necessities if *your* baggage is delayed beyond 12 hours while en route and before returning to *your* original *departure point*, up to a limit of \$200.

Conditions

1. **Notice of loss** — If the insured property is lost or damaged through perils insured against, *you* must notify *OneWorld Assist*

within 30 days of return from journey and take all reasonable measures to protect, save and/or recover the property, and promptly notify either police, hotel proprietors, steamship lines, railroad or station authorities, airlines or any other carrier or bailee in whose custody the property was at the time of loss, damage or theft. This coverage is conditional upon *your* compliance with this clause.

2. **Payment of loss** — Any claim hereunder for damage and/or destruction shall be paid immediately after presentation to *OneWorld Assist* of evidence substantiating such damage and/or destruction.
3. **Valuation** — The *company* shall not reimburse beyond the actual cash value of the property at the time any loss or damage occurs.
4. **Reduction in amount of insurance** — Upon the occurrence of any loss covered hereunder, the amount of insurance and the applicable limit is reduced by the amount of such loss.

Limitation

Coverage for risk of loss of or damage to *your* property for any single item is limited to not more than 25% of the sum insured per person per claim.

Exclusions

In addition to the General Exclusions, the *company* will not be liable to provide coverage or services, or to pay claims for expenses incurred directly or indirectly as a result of:

1. Loss, damage or theft of animals; self-propelled conveyances of any kind or their equipment; trailers, boats, motors, aircraft or other conveyances or their appurtenances; bicycles except while checked as baggage with a *common carrier*; household effects and furnishings; artificial teeth and limbs; hearing aids; eye glasses, contact lenses; money (except as provided for currency), securities, tickets and documents; personal entertainment devices including but not limited to portable DVD players, mp3 players including but not limited to iPods, personal computers, software, pagers or cellular phones; professional or occupational equipment or property; antiques and collectors items; property illegally acquired, kept or stored, or transported; works of art, jewellery, furs, cameras or camera equipment.
2. Loss or damage caused by wear and tear, deterioration, moths or vermin.
3. Expenses incurred if other insurance policies, plans or contracts cover the loss. If, however, the loss exceeds the limits of the other policies, plans or contracts and if this Insurance covers losses and periods not covered by those other policies, plans or contracts, this Insurance shall then apply in excess of all other valid insurance.
4. Loss caused by theft from an unattended vehicle unless the vehicle was securely locked and displayed visible signs of forced entry.

Refunds

1. Refunds are not available if a claim has been or will be submitted.
2. When no travel has taken place and the request for refund is received PRIOR to the effective date of the Policy, a full refund is available.
3. When no travel has taken place and the request for refund is received AFTER the effective date of the Policy:
 - a) A full refund is available within 10 days of the application date; or,
 - b) A refund less an administration fee is available when the request for refund is received more than 10 days after the *application date* but no later than 30 days after the effective date and prior to the expiry date of the Policy.
 - c) Refunds must be requested in writing.
4. In the case of early return to *your* ordinary place of residence, partial refunds may be available provided:
 - a) A satisfactory proof of return to *your* ordinary place of residence is sent to *Travel Underwriters*.
 - b) The request is received by *Travel Underwriters* no later than 30 days after *your* actual return date. Refunds will be calculated from the date of return. All partial refunds will be subject to an administration fee.
 - c) Refunds must be requested in writing.

Non-medical Package – single trip

This Insurance is subject to the general conditions, general exclusions and definitions as well as the benefits, terms, conditions, limitations and exclusions as specified for each of the Insurance coverages listed below:

Trip Cancellation/Trip Interruption Insurance

Sum insured prior to departure — Up to the limit of Insurance purchased

Sum insured after departure — \$25,000

Accidental Death and Dismemberment Insurance

Maximum sum insured for Air Flight/Common Carrier Accident — \$100,000

Maximum sum insured for 24-Hour Accident — \$25,000

Baggage Insurance

Sum insured — \$500

Refunds

A refund less an administration fee is available only if:

1. The tour operator (airline etc.) cancels the trip and all penalties are waived; or,
2. *You* cancel the trip prior to the effective date of any cancellation penalties; or,
3. The tour operator changes the travel date and if *you* are unable to travel on the new dates, the tour operator waives all cancellation penalties.

- Refunds must be requested in writing.
- Refunds are not available if a claim has been or will be submitted.

All inclusive holiday package – single trip

Available for persons 59 years and under

This Insurance is subject to the general conditions, general exclusions and definitions as well as the benefits, terms, conditions, limitations and exclusions as specified for each of the Insurance coverages listed below:

Emergency Medical Insurance

Maximum limit — \$5,000,000

Trip Cancellation/Trip Interruption Insurance

Sum insured prior to departure — Up to the limit of Insurance purchased

Sum insured after departure — \$25,000

Accidental Death and Dismemberment Insurance

Maximum sum insured for Air Flight/Common Carrier Accident — \$100,000

Maximum sum insured for 24-Hour Accident — \$25,000

Baggage Insurance

Sum insured — \$500

Refunds

A refund less an administration fee is available only if:

- The tour operator (airline etc.) cancels the *trip* and all penalties are waived; or,
- You* cancel the trip prior to the effective date of any cancellation penalties; or,
- The tour operator changes the travel date and if *you* are unable to travel on the new dates, the tour operator waives all cancellation penalties.
- Refunds must be requested in writing.
- Refunds are not available if a claim has been or will be submitted.

Visitors to Canada holiday package – single trip

This Insurance is subject to the general conditions, general exclusions and definitions as well as the benefits, terms, conditions, limitations and exclusions as specified for each of the Insurance coverages listed below:

Visitors to Canada Emergency Medical Insurance

Maximum limit — Up to the limit of Insurance purchased

Trip Cancellation/Trip Interruption Insurance

Sum insured prior to departure — Up to the limit of Insurance purchased

Sum insured after departure — \$25,000

Accidental Death and Dismemberment Insurance

Maximum sum insured for Air Flight/Common Carrier Accident — \$100,000

Maximum sum insured for 24-Hour Accident — \$25,000

Baggage Insurance

Sum insured — \$500

Refunds

A refund less an administration fee is available only if:

- The tour operator (airline etc.) cancels the trip and all penalties are waived; or,
- You* cancel the trip prior to the effective date of any cancellation penalties; or,
- The tour operator changes the travel date and if *you* are unable to travel on the new dates, the tour operator waives all cancellation penalties.
- Refunds must be requested in writing.
- Refunds are not available if a claim has been or will be submitted.

General exclusions

In addition to the exclusions specified in each Insurance coverage, this Insurance does not provide payment or indemnity for expenses incurred directly or indirectly as a result of:

- War, civil war, riot, rebellion, insurrection, revolution, invasion, hostilities or warlike operations (whether war be declared or undeclared), civil commotion, overthrow of the legally constituted government, military or usurped power, explosions of war weapons, utilization of nuclear, chemical or biological weapons;
 - death or disablement in any way caused by or contributed by radioactive contamination; or,
 - any action taken in controlling, preventing or suppressing any, or all of a) or b) above.
- Your* suicide or attempt thereof, self-inflicted *injury*.
- Your* commission or attempted commission of any crime or offence.
- Routine pre-natal care;
 - Voluntary termination of pregnancy or resulting complications;
 - Childbirth, complications related to pregnancy or childbirth occurring within the nine weeks immediately before or after and including the expected date of delivery;
 - Medical treatment* incurred by a newborn child following the unexpected birth during *your* trip.
- Any medical condition or recognized complication of a condition, where the purpose of *your* trip is to seek *medical treatment*, advice or services, and where the medical evidence indicates the *medical treatment*, advice or services received are related to that condition.
- Injury* or *sickness* while scuba diving unless *you* are certified by an internationally recognized and accepted program (including but not limited to NAUI, PADI).

7. *Your* participation in, training or practicing for any sport as a *professional* athlete or while participating in, training or practicing for any *motorized speed contest*, rodeo, show jumping or horse racing.
8. Psychological disorders, *emotional* or *mental disorders*. Acute psychosis is not excluded unless drug or alcohol induced.
9. Ongoing care, rehabilitation or check-ups.
10. *Medical treatment*, services or supplies provided in a chronic care facility of a *hospital* or convalescent or nursing home, health spa, or rehabilitation centre.
11. *Elective* (non-emergency) *treatment* or *surgery*.
12. Emergency Air Transportation unless pre-approved and arranged by *OneWorld Assist*.
13. Treatment or services that contravene any provisions of any government health care plan of the province or territory in which *you* reside.
14. *Your* abuse of (prior to or during *your* trip), or intoxication due to alcohol, drugs or medication.
15. A condition arising out of or resulting from Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC) if the condition first manifested itself prior to the effective date of coverage or if the condition arose out of Human Immunodeficiency Virus (HIV) which had first been diagnosed or that manifested itself prior to the effective date.
16. Expenses incurred as a result of *your* failure to accept or follow the *physician's* advice, treatment or recommended treatment.
17. Unless otherwise stated in this Policy (see General Condition, number 2), expenses incurred if other insurance policies, plans or contracts, including any private or provincial automobile insurance, cover the loss. If, however, the loss exceeds the limits of the other policies, plans or contracts and if this Insurance covers losses and periods not covered by those other policies, plans or contracts, this Insurance shall then apply in excess of all other valid insurance. This exclusion does not apply to Accidental Death and Dismemberment Insurance.

General conditions

Provisions and conditions

1. Qualification, Misrepresentation and Fraud

- a) The coverage under this Policy shall be void if *you* do not meet the eligibility requirements for the plan selected as set out in the *application*. The eligibility requirements are material to the risk for which Insurance is sought. In addition, the coverage under this Policy shall be void if, before or after any loss or claim, *you* or *your* representative conceal, misrepresent or fail to disclose any material fact or commit any fraud or false swearing pertaining to *you* or any claim.
- b) Health questionnaire—applicable to persons 60 to 89 years. If *you* qualify for the coverage selected but fail to answer truthfully and accurately any question asked in the Medical

Health Questionnaire or at the time of *application*, any claim will be subject to an extra *deductible* of \$10,000 in addition to any other applicable *deductible* amount, and no future coverage will be provided under this Policy unless *you* pay the additional premium reflecting true and accurate answers to those questions.

2. **Subrogation** – The *company* will not subrogate against any employment plans if the lifetime maximum limit for all in-country and out-of-country benefits under that plan is \$100,000 or less. If *you* acquire any right of action against any person, firm or organization for loss covered hereunder, *you* shall, if requested by the *company*, assign and transfer such claim or right of action to the *company* and will permit suit to be brought in *your* name under the direction and expense of the *company*. This right of subrogation is in addition to all other rights of subrogation existing under common law, equity or statute. *You* shall do nothing after a loss to prejudice the *company's* rights of subrogation. If *you* make any claim against a third party based on an event that led to any payment under this Policy, *you* will include the amount of that payment in the claim against the third party, and when the amount of that payment or portion thereof is recovered, that amount shall be held in trust for the sole benefit of the *company* and immediately remitted to the *company*.
3. **Misstatement of Age** – If *your* age has been misstated to the *company*, the coverage and/or premium may be adjusted in accordance with the correct age as of the date *you* became covered. Any premium adjustment is payable upon receipt of a premium notice.
4. **Due Diligence** – *You* must act at all times so as to minimize the costs to the *company*.
5. **Currency** – Any dollar amount expressed as a limit of coverage or benefit payable under this Policy is deemed by the *company* to be in Canadian currency.
6. **Duplication of Coverage** – If *you* are insured under more than one Policy administered by *Travel Underwriters* and the policies are in effect at the same time, the total amount paid to *you* cannot exceed *your* total expenses. Benefits are paid under the one policy with the greatest benefit limit.
7. The date and time of termination of coverage is based on the time zone of the province or territory the Policy was purchased in.
8. Coverage is based on the age of the *insured* at the time of application.
9. The availability, quality, results or effects of any *medical treatment*, assistance, *hospitalization*, transportation or *your* failure to obtain any of the above, is not the responsibility of either the *company* or *Travel Underwriters* or any company or agency providing services on their behalf.
10. The *company* reserves the right to accept or to decline any person as an *insured*.
11. In the case of duplicate benefits in this Policy claims are payable for one benefit only.

12. *OneWorld Assist* has been appointed by the *company* to be the sole provider of all assistance and claims processing services.
13. In the event of *your medical treatment* or other circumstances that have led or may lead to a claim under this Policy, *you* authorize any *hospital, physician* or other person or organization that has records or knowledge of *you* or *your* health, medical history or other information relevant to the claim to provide that information to the *company* or *OneWorld Assist* and authorize the *company* and *OneWorld Assist* to use and disclose that information for the purpose of determining whether any claim that may be made is covered by this Policy or by another plan or Policy.
14. If requested by the *company* or *Travel Underwriters* or *OneWorld Assist* *you* must furnish or consent to the release of *your* medical records for the relevant period prior to the effective date and/or during the term of the insurance required in order to determine if the claim is payable. Failure to produce these records will invalidate *your* claim.
15. In the event of a claim, *you* may be required to establish the date of departure and initially planned date of return of the trip in order to comply with the terms of the Policy.
16. *You* shall be responsible for the verification of any *hospital* and medical expenses incurred and shall obtain itemized accounts of all *hospital* and medical services which have been provided.
17. The *company* shall not reimburse any expense incurred after a period of 365 days has elapsed following the date on which the loss first occurred or the relevant *emergency* first occurred.
18. The *company* and *OneWorld Assist* shall comply with all applicable privacy legislation and regulations.
19. If any of the terms or conditions of this Policy are in conflict with the statutes of the province or territory in which this Policy is issued, the terms and conditions are hereby amended to conform to such statutes.
20. In the event of unresolved disputes respecting any claim or portion thereof, the following should be contacted: *Travel Underwriters*, 11th Floor, 6081 No. 3 Road, Richmond, BC Canada V6Y 2B2.
21. The law of the province or territory of Canada in which *you* ordinarily reside, or in which *you* are staying while a visitor to Canada, will govern this Policy, including all issues of its interpretation and performance. Any legal action or other proceeding related to or connected with this Policy that is commenced by *you* or anyone claiming on *your* behalf or by an assignee of benefits under this Policy must take place in the courts of the province or territory of Canada in which *you* ordinarily resided or in which *you* purchased this Policy, and no other court has jurisdiction to hear or determine any such action or proceeding.
22. This Insurance provides no coverage and no *insurer* shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such coverage, payment of such claim or provision of such benefit would expose that *insurer* to any sanctions, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

Authorized extensions to period of coverage

You can extend *your* period of coverage before *your* Policy expires by calling *your* agent or *Travel Underwriters* during general business hours.

Please refer to Contact Information on page 4.

An administration fee may be charged in addition to the premium for the additional number of days required.

You must meet the following conditions:

Applicable to all coverages

1. *You* have not submitted a claim and have no intent to submit a claim.
2. *Your* period of coverage has not already expired.
3. Extensions are not available if total trip length exceeds two years from the effective date of the original Policy. (This is not applicable to Visitors to Canada Emergency Medical Insurance)

Applicable to emergency medical insurance and visitors to Canada emergency medical insurance

1. *You* have not seen a *physician* or other registered medical practitioner since *your* departure date or the effective date of the Policy.
2. *You* are in good health and *you* do not know of any reason to seek medical attention.

Automatic annual renewal option

This option is only available for persons 58 years and under.

When the automatic annual renewal option is selected as indicated on the *application* of the Policy, *your* Policy will automatically renew on *your* Multi Trip Annual Policy's *renewal date* provided valid credit card or banking information is on file and the premium is received and accepted. A Policy will be issued to *you* for one year. Before the *renewal date* of the Policy, *you* will be notified of the details pertaining to *your* new Multi Trip Annual Policy. If *you* do not wish to have a new Multi Trip Annual plan automatically issued, please notify *Travel Underwriters* by calling 1-800-663-5389.

Definitions

Accident and injury means physical injury to *you* caused by violent external and accidental means requiring *emergency medical treatment* which occurred after coverage commenced.

Acute means initial or *emergency* short course (not chronic) treatment phase of a *sickness* or *injury*.

Alteration means the medication usage, dosage or type has been increased, decreased or stopped and/or a new medication has been prescribed.

Alteration does not include:

- a) Changes in brand due solely to the availability of *your* usual brand or due to a change from a brand name medication to

an equivalent generic brand medication of the same usage or dosage; and

- b) the routine adjustment of the dosage within prescribed parameters to ensure correct blood levels are maintained when *you* are taking insulin or oral diabetes medication or blood thinner medication such as Coumadin/Warfarin and *your* blood levels must be checked regularly and *your* condition remains unchanged; and
- c) The usage changes due to the combination of several medications into one and *your* condition remains unchanged.

Application means the printed form, printed or electronic receipt, Policy declaration, group manifest or document provided by *Travel Underwriters* or one of its *designated representatives*. The application forms part of the Insurance contract.

Application date means the date when premium for this Insurance is paid.

Automobile means a vehicle of the private passenger or station wagon type, but excluding: trucks (except pick-up trucks with no attachments); off-road vehicles; motorcycles, motorbikes or motor scooters; recreational vehicles; vans (except passenger vans); campers or trailers; antique cars which are cars over 20 years old or have not been manufactured for 10 years or more.

Beneficiary means estate unless otherwise requested in writing.

Business meeting means a meeting that was pre-arranged prior to the date the trip is booked or the date this Insurance was purchased, whichever occurs later, between companies with unrelated ownership that pertains to *your* full-time occupation or profession, and was the primary purpose of *your* trip. Conferences, seminars, courses and legal proceedings are not considered to be a business meeting.

Canadian resident means a person who meets the following conditions:

- a) Is eligible for or has a provincial or territorial government health care plan in place; and
- b) Is a Canadian citizen with a primary permanent residence in Canada; or,
- c) Has landed immigrant status in Canada and a primary permanent residence in Canada.

Common carrier means a boat, airplane, bus, taxi, train or other similar vehicle that is licensed, intended and used primarily to transport passengers for hire.

Company means:

- For all plans except Baggage: Industrial Alliance Insurance and Financial Services Inc. and certain *Lloyd's Underwriters*, severally and not jointly.
- For the Baggage plan: *Lloyd's Underwriters*, severally and not jointly.
- For all plans except Baggage and if you are a Quebec resident or purchasing insurance in the province of Quebec: Industrial Alliance Insurance and Financial Services Inc.
- For the Baggage plan and if you are a Quebec resident or purchasing insurance in the province of Quebec: Industrial Alliance Pacific General Insurance Corporation.

Contracted means specified in the travel documents for the insured trip with respect to any destination, date and time/place of arrival or departure.

Deductible means the portion of eligible expenses *you* must pay from *your* own pocket when an eligible claim occurs. For all medical insurance plans (except visitors to Canada plan), the deductible applies to the expenses remaining after payment by *your* provincial or territorial government health care plan.

Departure date means the date on which *you* are scheduled to depart on *your* trip or the date of *your* actual departure as shown on *your application*.

Departure point means the place *you* depart from on the first day of *your* trip.

Dependent children means all unmarried dependent children up to and including 21 years of age, residing in *your* household, or up to 25 years if the child is a full-time student attending an educational institution, or of any age if the child is mentally challenged or physically handicapped. Children named in the *application* need not be travelling with *you* for coverage to apply to them.

Dependent grandchildren means all unmarried grandchildren who are dependant on their parents or grandparents up to and including 21 years of age, residing in their parents' or grandparents' household, or up to 25 years if the child is a full-time student attending an educational institution, or of any age if the child is mentally challenged or physically handicapped. Grandchildren must be travelling with *you* for coverage to apply to them.

Designated representative means *Travel Underwriters* or its appointed agent.

Elective (non-emergency) treatment or surgery means any treatment, investigations or surgery either: a) not required for the immediate relief of *acute* pain and suffering; or, b) which reasonably could be delayed until *you* return to Canada (for Visitors to Canada - country of permanent residence); or, c) which *you* elect to have provided during an insured trip following *emergency medical treatment* of a medical condition or the diagnosis of a medical condition, which on medical evidence would not prevent *you* from returning to Canada (for Visitors to Canada - country of permanent residence) prior to such treatment or surgery.

Emergency means an unforeseen *sickness* or *injury*, which requires immediate *medical treatment* to alleviate existing danger to life or health. An emergency no longer exists, when the medical evidence indicates that *you* are able to continue the trip or return to *your* province or territory of ordinary residence, (for Visitors to Canada *your* country of permanent residence). Once such emergency ends, no further benefits are payable in respect of the condition which caused the emergency.

Emotional or mental disorder means an emotional upset or condition, state of anxiety, situational crisis, anxiety or panic attack, or other mental health disorders.

Exotic car means any luxury *automobile* with a market value equal to or greater than \$50,000.

Family means individuals 59 years and under consisting of *you*, all *dependent children*, *dependent grandchildren*, and/or *your spouse*.

Follow-up means re-examination of *you* to monitor the effects of earlier *medical treatment* related to the initial *emergency*, except while *hospitalized*. Follow-up does not include further diagnostic or investigative testing related to the initial *emergency*.

Home province means *your* province or territory of ordinary residence in Canada.

Hospital means a legally constituted medical facility under the medical supervision of a *physician*, with either permanent facilities on the premises for surgery or a formal arrangement with another institution making such facilities available, and providing 24-hour nursing services. The term “hospital” does not include convalescent, nursing, rest or skilled nursing facilities, whether separate or a part of a regular general hospital, operated exclusively for the treatment of the aged or persons who are drug or alcohol abusers.

Hospitalization or **hospitalized** means *medical treatment* in a *hospital* when admitted as an in-patient.

Immediate family or **family member** means (whether by birth, adoption or marriage) *your* legal or common-law *spouse*, parents, step-parents, brothers, sisters, in-laws, natural or adopted children, stepchildren, stepbrother or stepsister, grandparents, grandchildren, aunts, uncles, nieces, nephews, or any individual of whom *you* are a legal guardian.

Insured or **insured persons** means the person named in the *application* and all *family members* named in the application for whom the applicable premiums have been paid.

Insurer means the same as *company*.

Lloyd's Underwriters means certain Lloyd's Underwriters as identified in the Agreement Number specified in the Policy Declaration.

Loss

For Accidental Death and Dismemberment Insurance: in respect of limbs means actual severance through or above wrist or ankle joints and, in respect of loss of sight, means entire and irrecoverable loss of sight.

For Visitors to Canada Emergency Medical Insurance: means an actual expense, medical or other, including *hospital* confinement, as specified in this Policy, incurred by *you* as a result of an *accident* or *sickness* which occurred outside *your* country of permanent residence during the period of coverage.

Medical treatment means any reasonable medical, therapeutic or diagnostic measure prescribed by a medical *physician* or other registered medical practitioner in any form including prescribed medication, reasonable investigative testing, *hospitalization*, surgery or other prescribed or recommended treatment directly referable to the condition, symptom or problem including referral to a specialist. Medical treatment does not include either: a) the unchanged use of prescribed drugs or medication for a *stable* condition, symptom or problem; or, b) a check-up where the *physician* observes no change in a previously noted condition, symptom or problem.

Medically necessary means the medical service or product in question is necessary to preserve, protect or improve *your* medical condition and well being.

Minor ailment means a condition which does not require the use of medication for a period of greater than 30 days, which did not require *follow-up* or referral visit to a *physician*, or other registered medical practitioner or which did not require *hospitalization* or surgical intervention.

Motorized speed contest means a timed sporting event involving the use of motorized vehicles.

OneWorld Assist means OneWorld Assist Inc.

Physical damage or **loss** means loss or damage to the *automobile* (including glass but excluding tires unless coincidental with other loss or damage covered herein) caused by fire, theft, explosion, earthquake, windstorm, hail, rising water, malicious mischief or collision with another object or by upset.

Physician means a medical practitioner who is registered and licensed to practice their medical profession in accordance with the regulations applying in the jurisdiction where the person practices. A physician must be a person other than *you* or a *family member*.

Pre-existing condition

For Emergency Medical Insurance: means a medical or dental condition, illness or *injury* known to *you*, and for which *you* have received medical consultation, diagnosis, and/or *medical treatment* by a *physician* or dentist prior to the commencement date of a covered trip and includes a medically recognized complication or *recurrence* of a medical or dental condition.

For Trip Cancellation/Trip Interruption Insurance and Trip Interruption Insurance only: means a medical or dental condition, illness or *injury* for which medical consultation, diagnosis, and/or *medical treatment* has been received by a *physician* or dentist and includes a medical or dental condition which occurs or develops as a progressive consequence of a pre-existing condition.

Professional means a person receiving financial compensation from their participation in the sport or who is considered professional by the governing body of the sport they participate in.

Recurrence means the appearance of symptoms caused by or related to a medical condition that was previously diagnosed by a *physician* or for which *medical treatment* was previously received.

Renewal date means the date one year from the effective date as indicated in the *application*.

Return date means the date on which *you* are scheduled to return from *your* trip or the date of *your* actual return home as shown on *your application*.

Schedule change means the later departure of an airline carrier causing *you* to miss *your* next connecting flight, or the earlier departure of an airline carrier rendering unusable the ticket *you* have purchased for *your* prior connector flight via another airline carrier. Schedule change does not include a change resulting from a strike or labour disruption.

Sickness

For Emergency Medical Insurance and Visitors to Canada Emergency Medical Insurance: means an *acute* illness requiring immediate *emergency medical treatment* as a result of a sudden onset of symptoms which first manifested after coverage commenced. For Emergency Medical Insurance coverage authorized after departure and for Visitors to Canada coverage refer to the *waiting period* requirements.

For Trip Cancellation/Trip Interruption Insurance and Trip Interruption Insurance only: means an *acute* illness requiring immediate *emergency medical treatment* as a result of a sudden onset of symptoms.

Spouse means the person *you* are legally married to, or a person *you* have been living with for a minimum period of one year and who is publicly presented as *your* spouse, regardless of sex.

Stable

For Emergency Medical Insurance: means that within the period specified in this Policy before the commencement date of a covered trip:

- a) There has been no deterioration of *your* condition as determined by *your physician*, and
- b) There have been no new symptoms or more frequent or severe symptoms, and
- c) *You* have not experienced symptoms related to the condition that remain undiagnosed, and
- d) There has been no change in *medical treatment* or no *alteration* in any medication for the condition, and
- e) There has been no new *medical treatment* prescribed or recommended by a *physician* or received.

For Trip Cancellation/Trip Interruption Insurance and Trip Interruption Insurance only: means that within the period specified in this Policy:

- a) There has been no deterioration of the condition as determined by a *physician*, and
- b) There have been no new symptoms or more frequent or severe symptoms, and
- c) There have been no symptoms related to the condition that remain undiagnosed, and
- d) There has been no change in *medical treatment* or no *alteration* in any medication for the condition, and
- e) There has been no new *medical treatment* prescribed or recommended by a *physician* or received.

Terminal condition means a medical condition that, in the opinion of a *physician*, indicates a restricted or shortened life expectancy.

Terrorist activity means an act, or acts, of any person, or group(s), committed for political, religious, ideological, ethnic or similar purposes with the intention to influence any government and/or, but not be limited to, the use of force or violence and/or the threat thereof. Furthermore, the perpetrators of terrorist activity can either be acting alone, or on behalf of, or in connection with any organization(s) or government(s).

Travel Underwriters means North American Air Travel Insurance Agents Ltd.

Travelling companion

For Trip Cancellation/Trip Interruption Insurance and Trip Interruption Insurance only: means a person who has prepaid shared commercial accommodation or transportation with *you* for the same period of travel (maximum four persons including the *insured*, unless authorized by *Travel Underwriters*).

Trip

For Trip Cancellation/Trip Interruption Insurance and Trip Interruption Insurance only: means the period of travel for which prepaid travel arrangements have been *contracted* before *your departure date* and for which a premium under this Policy has been paid. The trip commences when *you* leave on *your departure date* and ends when *you* return on *your return date*.

Vehicle means an automobile, recreational vehicle, motorcycle, boat or other land or water conveyance used for the covered trip.

Waiting period

For Emergency Medical Insurance means:

- a) If this Policy was purchased in the seven days after departing from *your home province*, there is no coverage for any *sickness* arising in, occurring in or symptomatic during the first 48 hours of the effective date of the Policy, including any related expenses incurred after the first 48 hours from the effective date of the Policy; or,
- b) If this Policy was purchased more than seven days after departing from *your home province*, there is no coverage for any *sickness* arising in, occurring in or symptomatic during the first seven days of the effective date of the Policy, including any related expenses incurred after the first seven days from the effective date of the Policy.

For Visitors to Canada Emergency Medical Insurance means:

- a) If this Policy was purchased prior to arrival in Canada or within 60 days of *your* arrival in Canada, there is no coverage for any *sickness* arising in, occurring in or symptomatic during the first 48 hours of the effective date of the Policy, including any related expenses incurred after the first 48 hours from the effective date of the Policy; or,
- b) If this Policy was purchased 61 days or more after *your* arrival in Canada, there is no coverage for any *sickness* arising in, occurring in or symptomatic during the first seven days of the effective date of the Policy, including any related expenses incurred after the first seven days from the effective date of the Policy.

If the Policy is purchased prior to arrival in Canada the waiting period does not apply for the Visitors to Canada Holiday Package.

You or **your** means the same as *insured* or *insured persons*.

In witness whereof this Policy has been signed as authorized by the insurers listed in the definition of *company*.



K. Starko, Executive Director

Subscription policy

Applicable to all sections of this Policy Excluding Baggage

IN CONSIDERATION OF THE INSURED having paid or agreed to pay each of the INSURERS the required premium, hereinafter called "THE INSURERS".

THE INSURERS SEVERALLY AND NOT JOINTLY agree, each for the Sum(s) Insured or Percentage(s) and for the Coverage(s) Insured set against its name, and subject always to the terms and conditions of the Policy, that if a loss occurs for which insurance is provided by this Policy at any time while it is in force, they will indemnify the INSURED against the loss so caused; the liability of each insurer individually for such loss being limited to that proportion of the loss payable according to the terms and conditions of this Policy which the Sum Insured or the amount corresponding to the Percentage set against it bears to the total of the sums insured or of the amounts corresponding to the percentages of the sums insured respectively set out against the coverage concerned on the Policy Declaration.

Wherever in this Policy, or in any endorsement attached hereto, reference is made to "The Company", "The Insurer", "This Company", "we", "us", or "our", reference shall be deemed to be made to each of the Insurers severally.

This Policy is made and accepted subject to the foregoing provisions, and to the other provisions, stipulations and conditions contained herein, which are hereby specially referred to and made part of this Policy, as well as such other provisions, agreements or conditions as may be endorsed hereon or added hereto.

Several liability clause

PLEASE NOTE – This notice contains important information. PLEASE READ CAREFULLY

The liability of an insurer under this contract is several and not joint with other insurers party to this contract. An insurer is liable only for the proportion of liability it has underwritten. An insurer is not jointly liable for the proportion of liability underwritten by any other insurer. Nor is an insurer otherwise responsible for any liability of any other insurer that may underwrite this contract.

The proportion of liability under this contract underwritten by an insurer (or, in the case of a Lloyd's syndicate, the total of the proportions underwritten by all the members of the syndicate taken together) is shown in this contract.

In the case of a Lloyd's syndicate, each member of the syndicate (rather than the syndicate itself) is an insurer. Each member has underwritten a proportion of the total shown for the syndicate (that total itself being the total of the proportions underwritten by all the members of the syndicate taken together). The liability of each member of the syndicate is several and not joint with other members. A member is liable only for that member's proportion. A member is not jointly liable for any other member's proportion. Nor is any member otherwise responsible for any liability of any other insurer that may underwrite this contract. The business address of each member is Lloyd's, One Lime Street, London EC3M 7HA. The identity of each member of a Lloyd's syndicate and their respective proportion may be obtained by writing to Market Services, Lloyd's, at the above address.

Although reference is made at various points in this clause to "this contract" in the singular, where the circumstances so require this should be read as a reference to contracts in the plural.

Where LLOYD'S UNDERWRITERS are subscribing insurers to the Policy, the following applies to them:

Identification of insurer / Action against insurer

This insurance has been entered into accordance with the authorization granted to North American Air Travel Insurance Agents Ltd. (The Coverholder) by the Underwriting Members of the Syndicates whose definite numbers and proportions are detailed herein and referred to as "the Underwriters". The Underwriters shall be liable hereunder each for his own part and not one for another in proportion to the several sums that each of them has subscribed to the said Agreement.

In any action to enforce the obligations of the Underwriters they can be designated or named as "Lloyd's Underwriters" and such designation shall be binding on the Underwriters as if they had each been individually named as defendant. Service of such proceedings may validly be made upon the Attorney In Fact in Canada for Lloyd's Underwriters, whose address for such service is 1155, rue Metcalfe, Suite 2220, Montreal, Quebec H3B 2V6.

Notice

Any notice to the Underwriters may be validly given to North American Air Travel Insurance Agents Ltd. d.b.a. *Travel Underwriters* (The Coverholder).

THE INSURERS	Coverage(s) Insured	Percentage(s)
Industrial Alliance Insurance and Financial Services Inc.	All Sections of this Wording Excluding Baggage	90%
Lloyd's Underwriters per Agreement Number specified in the Policy Declaration	All sections of this Wording Excluding Baggage	10%

Complaints under all Sections other than Baggage should be referred to the lead insurer Industrial Alliance at 2165 West Broadway, P.O. Box 5900, Vancouver B.C. V6B 5H6

Baggage section only

THIS SECTION IS WRITTEN 100% BY LLOYD'S UNDERWRITERS IDENTIFICATION OF INSURER/ACTION AGAINST INSURER

This insurance has been effected in accordance with the authorization granted to the Coverholder by the Underwriting Members of the Syndicates whose definitive numbers and proportions can be ascertained by reference to the Agreement Number specified in the Policy Declaration (hereinafter referred to as "the Underwriters"). The Underwriters shall be liable hereunder each for his own part and not one for another in proportion to the several sums that each of them has subscribed to the said Agreement.

In any action to enforce the obligations of the Underwriters they can be designated or named as "Lloyd's Underwriters" and such

designation shall be binding on the Underwriters as if they had each been individually named as defendant. Service of such proceedings may be validly made upon the Attorney In Fact in Canada for Lloyd's Underwriters, whose address for such service is 1155 rue Metcalfe, Suite 2220, Montreal, Quebec H3B 2V6.

Should a policyholder wish to file a complaint relative to a policy with Lloyd's Underwriters effected through you, the policyholder must be provided with the following Lloyd's Underwriters' Complaint Protocol:

Lloyd's Underwriters' policyholders' complaint protocol

If you have a complaint with any aspect of your policy with Lloyd's Underwriters: **You may contact** the broker/agent who arranged your policy for you. Should you be dissatisfied with the outcome of your broker's resolution, please submit your written complaint to:

Lloyd's Canada Inc.
1155 rue Metcalfe, Suite 2220
Montreal, Quebec H3B 2V6

Tel: 1-877-4LLOYDS
Fax: (514) 861-0470
E-mail: lineage@lloyds.ca

Your written complaint will be forwarded to Lloyd's Policyholder and Market Assistance Department in London which ensures that Lloyd's Underwriters and their representatives deal with claims and complaints in an acceptable manner. It acts as an impartial mediator. When undertaking a review this Department takes account of general legal principles, good insurance practice, and whether all events surrounding a given case have been considered fairly.

If you are dissatisfied with Lloyd's Policyholder and Market Assistance Department's final letter from London, you may ask the General Insurance OmbudService (GIO) to arrange for mediation. Mediation is not available until Lloyd's has issued its final letter of position on your complaint. The GIO assists in the resolution of conflicts between insurance customers and their insurance companies. GIO works with only those companies offering home, automobile or business insurance.

OR

You may contact the General Insurance OmbudService (GIO) who will contact Lloyd's on your behalf. However, you must first have tried to resolve your problem with your insurance company.

The GIO can be reached across Canada at its national toll-free number: 1-877-225-0446

For more information or to submit the facts of your insurance-related dispute, please visit the GIO website.

GIO - Alberta can be contacted where a policyholder is not satisfied with the basis on which a premium for basic coverage for a private passenger vehicle was determined, or considers that an insurer, directly or indirectly, has taken an adverse contractual action with respect to insurance for basic coverage.

In Québec, you may also avail yourself of the services of Autorité des marchés financiers (l'Autorité). Should you be dissatisfied with Lloyd's Policyholder and Market Assistance Department's final letter from London, you may request Lloyd's Canada Inc. to send your complaint to l'Autorité who will study your file and may recommend mediation, if it deems this action appropriate and if both parties agree to it. L'Autorité can be reached at:

Autorité des marchés financiers (l'Autorité)

Québec City (418) 525-0311
Montréal (514) 395-0311
Toll-free: 1-866-526-0311

E-mail: Renseignements-consommateur@lautorite.qc.ca

The Insured is requested to read this policy, and if incorrect, return it immediately for alteration.

In the event of an occurrence likely to result in a claim under this insurance, immediate notice should be given to the Coverholder whose name and address appears above. All inquiries and disputes are also to be addressed to this Coverholder.

For the purpose of the Insurance Companies Act (Canada), this Canadian Policy was issued in the course of Lloyd's Underwriters' insurance business in Canada.

Notice concerning personal information

By purchasing insurance from certain Underwriters at Lloyd's, London ("Lloyd's"), a customer provides Lloyd's with his or her consent to the collection, use and disclosure of personal information, including that previously collected, for the following purposes:

- the communication with Lloyd's policyholders
- the underwriting of policies
- the evaluation of claims
- the detection and prevention of fraud
- the analysis of business results
- purposes required or authorised by law

For the purposes identified, personal information may be disclosed to Lloyd's related or affiliated organisations or companies, their agents/mandataires, and to certain non-related or unaffiliated organisations or companies, including service providers. These entities may be located outside Canada therefore a customer's information may be processed in a foreign jurisdiction (the United Kingdom and the European Union) and their information may be accessible to law enforcement and national security authorities of that jurisdiction.

To obtain written information about Lloyd's policies and practices in respect of service providers located outside Canada, please contact the Ombudsman at lineage@lloyds.ca who will also answer customer's questions about the collection, use, disclosure or storage of their personal information by such Lloyd's service providers.

Further information about Lloyd's personal information protection policy may be obtained from the customer's broker or by contacting Lloyd's on: 514 861 8361, 1 877 455 6937, or through info@lloyds.ca

LLOYD'S

Lloyd's underwriters code of consumer rights & responsibilities

Lloyd's Underwriters are committed to safeguarding your rights when you shop for insurance and when you submit a claim following a loss. Your rights include the right to be informed fully, to be treated fairly, to timely complaint resolution, and to privacy. These rights are grounded in the contract between you and your underwriters and the insurance laws of your province/territory. With rights, however, come responsibilities including, for example, the expectation that you will provide complete and accurate information to the underwriters with whom insurance is being negotiated. Your policy outlines other important responsibilities. Underwriters and intermediaries acting on your behalf, and governments also have important roles to play in ensuring that your rights are protected.

Right to Be Informed

In dealing with Lloyd's Underwriters, you will be represented by an intermediary, such as a broker acting as your agent, and they may deal with other intermediaries. From the intermediary with whom you deal, you can expect to access clear information about your policy, your coverage, and the claims settlement process. You have the right to an easy-to-understand explanation of how insurance works and how it will meet your needs. You also have a right to know how premiums are calculated based on relevant facts.

A policy issued by Lloyd's Underwriters will expire on the day specified in the policy. If you wish to renew the policy, the intermediary with whom you deal will have to approach the Underwriters participating in it, often through another intermediary. If Lloyd's Underwriters are given the information they require to determine renewal terms for the policy at least 45 days prior to its expiry, under normal circumstances, they will advise the intermediary who approaches them of any changes to the policy terms at least 30 days prior to the expiration of the policy. Terms may subsequently change if there is a change in material facts prior to the expiration date.

Intermediaries may receive payments from Lloyd's Underwriters in a variety of ways, which may include the payment of commissions. Lloyd's strongly supports the disclosure and transparency of these commission arrangements. You have the right to ask the intermediary with whom you deal for details of how and by whom the intermediary is being paid.

Lloyd's Underwriters accept business as members of syndicates each of which is managed by a 'managing agent'. Lloyd's has risk management procedures in place in respect of the relationship between Lloyd's managing agents and any related companies that act as intermediaries. This is to ensure that the managing agent makes proper disclosures of any such arrangements. A policyholder may ask the intermediary whom he is dealing to disclose if it is a related company to a Lloyd's managing agent. Depending on the jurisdiction, disclosure may be required in writing.

Responsibility to Ask Questions and Share Information

To safeguard your right to purchase appropriate coverage at a competitive price, you should ask questions about your policy so that you understand what it covers and what your obligations are under it. You can access information through brochures and websites, as well as through one-on-one meetings with the intermediary with whom you deal. You have

the option to shop the marketplace for the combination of coverages and service levels that best suits your insurance needs. To maintain your protection against loss, you must promptly inform your underwriters of any change in your circumstances through the intermediary with whom you deal. The Underwriters with whom renewal is being negotiated must be given information required to determine renewal terms of your policy, via the intermediary whom you are dealing with, at least 45 days prior to the expiration of the policy.

Right to Complaint Resolution

Lloyd's Underwriters are committed to high standards of customer service. If you have a complaint about the service you have received, you have a right to access the Lloyd's complaint resolution process for Canada. The intermediary with whom you deal can provide you with information about how you can ensure that your complaint is heard and promptly handled. Disputes involving claims settlement matters may be handled by the independent General Insurance OmbudService www.gio-scad.org where your complaint may be referred to an independent mediator or Senior Adjudicative Officer.

Responsibility to Resolve Disputes

You should always enter into the dispute resolution process in good faith, provide required information in a timely manner, and remain open to recommendations made by independent observers as part of that process.

Right to Professional Service

You have the right to deal with insurance professionals who exhibit a high ethical standard, which includes acting with honesty, integrity, fairness and skill. Brokers and agents must exhibit extensive knowledge of the product, its coverages and its limitations in order to best serve you.

Right to Privacy

Because it is important for you to disclose any and all information required by underwriters with whom insurance is being negotiated on your behalf to provide the insurance coverage that best suits you, you have the right to know from the intermediary with whom you deal the purposes for which Lloyd's Underwriters will use your personal information. This information will not be disclosed to anyone except as permitted by law. You should know that Lloyd's Underwriters are subject to Canada's privacy laws with respect to their business in Canada.

The following sections do not apply to Quebec residents or individuals purchasing insurance in the province of Quebec:

- Subscription policy
- Several liability clause
- Identification of insurer/action against insurer
- Notice
- Baggage section only
- Lloyd's Underwriters' policyholders' complaint protocol
- Notice concerning personal information
- Lloyd's Underwriters code of consumer rights and responsibilities
- Lloyd's Underwriters definition

The following sections apply only to Quebec residents or individuals purchasing insurance in the province of Quebec:

ACTION AGAINST COMPANY

Service of legal proceedings to enforce the obligations under this Policy of the insurer listed in the definition of *company* may be validly made by serving the offices of North American Air Travel Insurance Agents Ltd. d.b.a. Travel Underwriters, 11th Floor, 6081 No. 3 Road, Richmond, British Columbia Canada V6Y 2B2.

NOTICE TO COMPANY

Notice under this Policy to the insurer listed in the definition of *company* may be validly given to North American Air Travel Insurance Agents Ltd. d.b.a. Travel Underwriters, 11th Floor, 6081 No. 3 Road, Richmond, British Columbia Canada V6Y 2B2.

Statutory conditions

The contract

The application, this policy, any document attached to this policy when issued and any amendment to the contract agreed on in writing after this policy is issued constitute the entire contract and no agent has authority to change the contract or waive any of its provisions.

Waiver

The insurer is deemed not to have waived any condition of this contract, either in whole or in part, unless the waiver is clearly expressed in writing signed by the insurer.

Copy of application

The insurer must, upon request, furnish to insured or to a claimant under the contract a copy of the application.

Material facts

No statement made by the insured or a person insured at the time of application for the contract may be used in defence of a claim under or to avoid the contract unless it is contained in the application or any other written statements or answers furnished as evidence of insurability.

Notice and proof of claim

Notice of a claim shall be given in accordance with the claims procedures clause included in this policy as soon as practical but in no case later than 30 days from the date a claim arises under this policy. You must also within 90 days from the date the claim arises under this policy furnish such proof and additional information as is reasonably possible and if required by the company, furnish a certificate from a physician detailing the cause or nature of the sickness or injury for which the claim has been instituted.

Failure to give notice or proof

Failure to give notice of claim or furnish proof of claim within the time required by this condition does not invalidate the claim if (a) the notice or proof is given or furnished as soon as reasonably possible, and in no event later than one year after the date of the accident or the date a claim arises under the contract on account of sickness or disability, and if it is shown that it was not reasonably possible to give notice or furnish the proof in the time required by this condition, or (b) in the case of death of the person insured, if a declaration of presumption of death is necessary, the notice or proof is given or furnished no later than one year from the date a court makes the declaration.

Insurer to furnish forms for proof of claim

The insurer must furnish forms for proof of claim within 15 days after receiving notice of claim, but if the claimant has not received the forms within that time the claimant may submit his or her proof of claim in the form of a written statement of the cause or nature of the accident, sickness or disability giving rise to the claim and of the extent of the loss.

Rights of examination

As a condition precedent to recovery of insurance moneys under the contract,

- a) the claimant must give the insurer an opportunity to examine the person of the person insured when and as often as it reasonably requires while a claim is pending, and
- b) in the case of death of the person insured, the insurer may require an autopsy, subject to any law of the applicable jurisdiction relating to autopsies.

When moneys payable

All money payable under this contract shall be paid by the insurer within sixty days after it has received proof of claim.

Limitation of actions

An action or proceeding against the *company* for the recovery of insurance money under this *policy* must be commenced not later than one year* after the date of the occurrence giving rise to the claim for insurance.

*Two years in Ontario, Saskatchewan, Alberta, British Columbia, Nunavut and the Northwest and Yukon Territories, three years in Quebec.

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act*.

Applicable to Saskatchewan residents

Notwithstanding any other provisions herein contained, this contract is subject to statutory conditions in Saskatchewan Insurance Act respecting contracts of accident and sickness insurance.

Applicable to Quebec residents

When the construction of this policy is governed by the law of the Province of Quebec, statutory conditions shall refer to the applicable provisions in the laws of the Province of Quebec.

How to claim

Claims procedures and payment of benefits

For information on how to contact us, please refer to Contact Information at the beginning of this policy wording booklet.

Applicable to all claims

1. Any notices of claim or correspondence concerning a claim should be promptly sent to:

**OneWorld Assist Inc.
11th Floor, 6081 No. 3 Road
Richmond, BC Canada V6Y 2B2**

2. Claims for medical, dental and trip cancellation/trip interruption can be opened online at www.oneworldassist.com, although some

restrictions apply. Navigate to the section for Insureds, clicking Online Claim Services, for more information.

3. Any cost incurred by *OneWorld Assist* in obtaining further documentation required to confirm eligibility of your claim is the responsibility of the claimant.
4. Claim Forms will be provided to the claimant for completion and return to *OneWorld Assist*. It is the responsibility of the claimant to complete and/or produce any documentation required by *OneWorld Assist* to enable them to process and confirm the eligibility of the claim.
5. All required documentation must be received within one year from the date of loss. Failure to do so will result in the denial of the claim.
6. To qualify for reimbursement, original itemized receipts must be provided as support for all eligible expenses. If original, itemized receipts are not provided, the expense will not be reimbursed.
7. To receive benefits, any requested supporting documentation must be submitted along with your notice of claim.

Applicable to emergency medical insurance

1. *OneWorld Assist* will submit a claim for medical expenses to your provincial or territorial government health care plan offices PROVIDED THAT the Claim Form, as well as the appropriate Provincial Assignment Form are completed in full and forwarded together with original, itemized receipts from physicians or hospitals along with medical certificate(s) from attending physician(s) within the time frame provided. The claim must be submitted to your provincial or territorial government health care plan offices within 90 days from the date of service. If you fail to meet this time line, you will be responsible for the provincial or territorial government health care plan portion.
2. Claims will not be considered unless the Claim Form is completed in full and signed by the claimant (or legally authorized representative). If requested by *OneWorld Assist* a Certificate of Canadian Physician must also be completed. Failure to provide fully completed forms will invalidate your claim.

Applicable to emergency medical insurance and visitors to Canada emergency medical insurance

1. Only bills from physicians, hospitals and other medical care provider(s) that are original itemized and which state insured's name, diagnosis, date(s) of service and type of treatment or service will be considered. Only original pharmacy prescription receipts will be considered. For all other benefits, original itemized receipts are required.

Applicable to trip cancellation/trip interruption insurance and trip interruption insurance only

1. To receive benefits, the following documents must be submitted along with your notice of claim:
 - a) The original unused airline ticket and/or all additional travel tickets purchased to return home or to rejoin the tour.
 - b) Itemized travel agency dated invoices showing full payment, taxes and premiums paid for your trip.
 - c) A statement from the travel agency/airline/tour operator documenting refunds provided for cancelled or unused tickets

and/or cancelled or unused land and sea services.

- d) If the claim occurred prior to departure, a medical certificate provided by the physician at the time of consultation prior to the departure date and time, stating the diagnosis, date of onset of the condition, dates and type of treatment, and the reason why travel was not possible.
- e) If the claim occurred after the trip began, a medical certificate provided by the attending physician at the place where the illness occurred, stating the diagnosis, date of onset of the condition, dates and type of treatment, and the reason why it was medically necessary to return home earlier or later than the originally scheduled return date.

Applicable to baggage insurance

1. If baggage is lost or stolen, proof of loss (copy of notice and/or police report) is necessary to substantiate claim.
2. If baggage is damaged, a written estimate to repair damaged luggage from a repair shop of your choice (if under \$25, please have repairs completed and forward the invoice to us) is necessary to substantiate claim.
3. If baggage is delayed, proof of delay is required and copies of itemized and dated receipts for personal necessities are necessary to substantiate claim.

Applicable to rental car protection

1. To receive benefits, the following documents must be submitted along with your notice of claim:
 - a) A copy of the police accident report.
 - b) A copy of the lease or rental contract.

International assistance services

The following services will be provided to all Policyholders:

1. Toll-free help line 24 hours a day, every day (for medical emergencies only).
2. Vital communications link between claimant/hospital regarding insurance coverage and procedures.
3. Medical (physician and surgeon) consultative and advisory services including review of appropriateness and analysis of medical care.
4. Monitoring of progress during treatment and recovery.
5. Establishing contact with family, personal physician and/or employer as appropriate.
6. Multilingual capabilities.
7. Coordination of payments.
8. Special assistance respecting claims.
9. Management, arrangement and authorization of emergency medical evacuation.
10. Arrangement and coordination of repatriation of remains.
11. Interpretation of policy wordings.



TRAVEL UNDERWRITERS

Insurance is administered by North American Air Travel Insurance Agents Ltd. d.b.a. Travel Underwriters, a licensed insurance broker in British Columbia, Alberta, Saskatchewan, Manitoba, and Ontario, represented by licensed insurance agents Kathleen S. Starko and Bradley G. Dance in New Brunswick, Nova Scotia and P.E.I. 11th Floor – 6081 No. 3 Road, Richmond, BC Canada V6Y 2B2. Insurance is underwritten by Industrial Alliance Insurance and Financial Services Inc. and certain Lloyd's Underwriters, severally and not jointly. If you are a Quebec resident or purchasing insurance in the province of Quebec, Insurance is underwritten by Industrial Alliance Insurance and Financial Services Inc. and Industrial Alliance Pacific General Insurance Corporation.

