

# MEDI-CARD

Winter Sports Insurance for persons  
working at winter sports resorts

Arranged for residents of the United Kingdom  
and the Channel Islands only by

**Fogg Travel Insurance Services Ltd.**

Crow Hill Drive, Mansfield, Notts NG19 7AE

Tel: 01623 631331 E-mail: sales@foggtravelinsurance.com

Underwritten by:

Union Reiseversicherung AG

**Master Policy No.  
WSVMC40079-01 A & B**

**This insurance is valid only in respect of departures  
between the period 1<sup>st</sup> November 2014 to 31<sup>st</sup> May 2015**

## VALIDITY

This insurance applies only to the Insured shown for the Period of Insurance and within the geographical area stated on the Insurance Schedule. Each Insured should ensure that the insurance provided is correct.

## POLICY INFORMATION

Your insurance is covered under master policy number **WSVMC40079-01 A & B** specially arranged through Fogg Travel Insurance Services Limited and insured by Union Reiseversicherung AG. Cover is provided for each passenger who is shown as having paid the insurance premium and whose name is shown on the Insurance Schedule. This insurance wording is a copy of the master policy and is subject to the terms, conditions and exclusions of the master policy.

No refund of the insurance premium will be given after the policy has been issued unless, after receipt of the policy, you find that the terms, conditions and exclusions do not meet your requirements and an alternative is available. In this case you must return the policy, insurance schedule and alternative insurance policy to Fogg Travel within 14 days of receipt for a refund to be considered.

Your policy starts when you leave home to start your trip and ends when you return home or the policy ends, whichever is the first.

We have tried to keep the wording as simple as possible. There are conditions and exclusions applying to your policy. Each section tells you what is covered, what is not covered and what you need to do if you need to claim under that section. There are no hidden parts or small print.

Like most policies they exclude all **pre-existing health conditions** but if you do need the cover, unlike some other policies, you may be able to obtain cover for these conditions by calling the Referral Helpline on the lo-call number shown below the summary of cover section. Cover is not available on all conditions and to include others we may need to charge you an additional premium or increase your policy excess for this condition, an excess is the first part of the claim cost. Cover is not available for conditions where you are under investigation or awaiting treatment. If you do not tell us about your **pre-existing health conditions** they will not be covered at all and you will not be able to claim for anything caused by them.

We are unable to provide any cover on psychological conditions such as stress, anxiety, depression, eating disorders or mental instability unless pre-screened and accepted by the Referral Helpline in writing.

If your health changes after you have bought the policy you must call the Referral Helpline immediately. Travel insurers require stability of health conditions whilst away so what cover is available will depend on the condition, the medication and the period of time before travel.

## AGE LIMITS

This insurance will not cover:

- you if you are aged 85 years or over, or
  - any trip in excess of 31 days if you are aged 65 to 74 years, or
  - any trip in excess of 24 days if you are aged 75 to 84 years
- at the date of departure.

## GEOGRAPHICAL AREAS

**Area 1** - Europe, including the **Channel Islands**, and all countries west of the Ural Mountains, Republic of Ireland, Iceland, Algeria, Morocco, Tunisia, Turkey, the Azores, Canary Islands, Madeira and Mediterranean islands.

**Area 2** - Worldwide including the United States of America and Canada.

## SUMMARY OF POLICY COVER

Policy section	Maximum benefit	Excesses
1. Emergency medical expenses	up to £5,000,000 (See note 1)	£75
2. Personal liability	up to £2,000,000	£75*

\* increased to £250 in respect of rented property damage only.

**Note 1.** Your policy does not provide cover for re-occurring or **pre-existing health conditions**. If you have **ever** had a heart or circulatory related problem, a stroke, cancer, any breathing problems, diabetes, or any other health condition which has been treated in hospital or has been referred to a specialist in the last 2 years you should phone our Referral Helpline quoting **FOGG TRAVEL - MEDI-CARD** on **0845 1300 198** or **01623 635958** to see if cover is available. We will confirm any special terms in writing.

You should also tell us if your health or medication changes between buying this policy and travelling.

## WHERE TO OBTAIN A CLAIM FORM

If you require a claim form you can obtain this online at [www.foggtravelinsurance.com](http://www.foggtravelinsurance.com) and by clicking on **claim forms**, or by email to [claims@foggtravelinsurance.com](mailto:claims@foggtravelinsurance.com) or alternatively if you do not have internet access you can contact:

**Fogg Travel Insurance Services Limited**

Crow Hill Drive, Mansfield, Notts NG19 7AE on telephone: **01623 631331** in all circumstances you should quote **FOGG TRAVEL - MEDI-CARD**, advising the section under which you wish to claim. Normally, if you contacted the emergency medical assistance service during your trip a claim form will have already been sent to your home.

When returning the claim form please enclose this certificate of insurance together with your insurance schedule and the tour operator's confirmation of booking invoice or flight ticket and/or invoice.

## DISCLOSURE OF PRE-EXISTING HEALTH CONDITIONS

Your policy may not cover claims arising from your **pre-existing health conditions** so you need to tell us of anything you know that is likely to affect our acceptance of your cover.

**A. Pre-existing health conditions** - so that we can ensure you are provided with the best cover we can offer please read the following questions carefully:

1. Have you **ever** had treatment for:

- any heart or circulatory condition,
- a stroke or high blood pressure.
- a breathing condition (such as asthma).
- any type of cancer.
- any type of diabetes
- any type of psychological condition (such as stress, anxiety, depression, eating disorders or mental instability).

2. In the last 2 years - have you been treated for any serious or re-occurring medical condition, asked to take regular prescribed medication, or referred to a specialist or consultant at a hospital for tests, diagnosis or treatment?

If you have answered 'Yes' to any of the above questions we may be able to offer some cover and may be able to cover your health condition, although an increased premium may be required. To enable us to consider your health condition please contact the Referral Helpline quoting **FOGG TRAVEL - MEDI-CARD** on **0845 1300 198** (this will be charged as a local call from wherever you are calling in the **United Kingdom** or **Channel Islands**) or **01623 635958** to see if cover is available. All calls will be treated in the strictest confidence.

3. You must also tell us if:

- you are waiting for tests or treatment of any description
- your doctor alters your regular prescribed medication

You need to keep copies of all letters we send you for future reference.

If when you buy this policy you are aware of anyone or anything that could increase the risk or result in a claim you must tell us. If you do not tell us, your policy may not cover you, and might be invalidated altogether. We reserve the right to charge an increased premium, decline, withdraw cover or increase the policy excess as well as cancel or restrict cover for any person.

Should we require any additional premium, and you accept our offer, this should be paid to Fogg Travel either by credit card or cheque, made payable to URV, and sent within 14 days of receipt. Should you decide not to pay the additional premium the declared health condition will not be covered. Full confirmation of our terms and conditions will be sent out to your address after your call. Any additional health conditions not declared to us will not be covered.

## NEW MEDICAL CONDITION OR CHANGE IN MEDICAL CONDITION OR ONGOING MEDICATION

If your health or your ongoing medication changes between the date the policy was bought and the date of travel you should advise our Referral Helpline quoting **FOGG TRAVEL - MEDI-CARD** on **0845 1300 198** or **01623 635958** as soon as possible. We will advise you what cover we are able to provide after the date of diagnosis. We reserve the right to charge an additional premium, increase the excess, exclude the condition or withdraw cover if the condition declared makes this necessary.

## DEFINITION OF WORDS

Listed below are certain words that appear throughout the policy. These will always be shown in **bold** type and in all cases will have the meanings shown below.

**Channel Islands** - means Jersey, Guernsey, Alderney, Sark, Herm, Jethou, Brecqhou and Lihou.

**Hazardous activity** - means any activity that requires skill and involves increased risk of injury. Please see the list of **hazardous activities** listed under the sports and activities cover section at the rear of this document that are covered for free under this insurance. If you are taking part in any sport or activity not listed please contact Fogg Travel (telephone **01623 631331** (retail option) or email [queries@foggtravelinsurance.com](mailto:queries@foggtravelinsurance.com) (Mon to Fri 9am to 5pm) to ensure you are covered quoting **FOGG TRAVEL - MEDI-CARD**. An additional premium may apply for those activities which are not free but for which cover is available.

**Home** - means one of your normal places of residence in the **United Kingdom** or the **Channel Islands**.

**Home country** - means both the country you live in within the **United Kingdom** or the **Channel Islands** and your country of nationality.

**Insured-person/you/your** - means any person named in the Insurance Schedule for which the appropriate premium has been paid.

**Manual labour** - means work involving the lifting or carrying of heavy items in excess of 25 kg, work at a higher level than two storeys or any form of work underground.

**Pre-existing health condition** – means any heart, circulatory or breathing conditions, cancer or diabetes or serious or re-occurring medical condition which has been previously diagnosed, investigated or treated in any way, at any time prior to travel, even if this condition is currently considered to be stable and under control.

**Resident** - means a person who has had their main **home** in the **United Kingdom** or the **Channel Islands** and has not spent more than six months abroad in the year before buying this policy.

**Trip** - means a holiday or journey that begins when **you** leave **home** and ends on **your** return to either (i) **your home**, or (ii) a hospital or nursing home in **your home country** following **your** repatriation, both during the period of cover. Any subsequent holiday or journey that starts after **you** have returned **home** or to a hospital or nursing home (as described above) is not covered.

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

**We/our/us** - means Union Reiseversicherung AG.

**Winter sports** – means skiing, snow boarding and ice skating.

### HOW YOUR POLICY WORKS

**Your** policy shows the sections of cover, limits, conditions, exclusions and information on what to do if **you** need to claim and how to contact the **24** hour emergency medical assistance service. It is essential that **you** read it. The policy is a contract between **us** and **you**. **We** will pay for any event, as set out in the policy, that happens during the period of cover for which **you** have paid the appropriate premium.

**Your** policy covers for treatment of medical conditions in emergency and which will respond quickly to treatment. It is not intended to cover **you** for recurrent or long term treatment and in these circumstances, bearing in mind the advice given by **our** Chief Medical Officer, **we** reserve the right to transfer **you** to a state hospital, where adequate facilities are available, or repatriate **you** to **your home country**.

**We** are unable to provide any cover on psychological conditions such as stress, anxiety, depression, eating disorders or mental instability unless pre-screened and accepted by the Referral Helpline in writing.

All numbers and letters shown under 'For each insured-person this insurance will not cover:' refer to the same numbers and letters under 'For each insured-person this insurance will pay:' Where no letters or numbers are shown it applies to the whole section.

### WHEN YOUR COVER STARTS AND ENDS

The cover under **your** policy starts at the beginning of **your trip** as shown on **your** Insurance Schedule and ends on **your** return **home** or expiry of the policy, or where **your** contract of employment with **your** employer is terminated (applicable only where **your** insurance premium for this policy has been paid by **your** employer to Fogg Travel), whichever is the first. No further **trips** are covered by this policy.

### EXTENSION OF PERIOD

1. In the event of **your** death, injury or illness, **you** are unable to complete the **trip** before the expiry of this policy the cover will be automatically extended without additional premium for the additional days necessary for **you** to complete the **trip**.
2. In the event of delay to any vehicle, vessel or aircraft in which **you** are travelling as a ticket holder **you** are unable to complete the **trip** before the expiry of this policy the cover will be automatically extended without additional premium up to **14** days for **you** to complete the **trip**.

### IMPORTANT ADVICE

1. Whilst skiing is fun, there are still rules and regulations which apply - **you** can be prosecuted for behaving in a reckless or dangerous manner. The guidelines are the FIS rules - **you** should read and understand them before **you** ski - following them will help **your** enjoyment.
2. If **you** do not need to ski with an instructor or guide, check that the area and the snow **you** wish to ski is suitable for a skier at **your** level - get advice from the local ski school. Never ski in closed areas - it may be there is an avalanche around the corner - or perhaps the mountain just comes to an end!
3. Whilst skis left outside bars and the like are covered in the event of theft, 'mix 'n match' them - thieves only take pairs! Do not leave other property **unattended** except in **your** hotel room.

### OFF PISTE COVER

Off piste skiing is included provided **you** act reasonably and do not ski in a closed or avalanche risk area. If not skiing with a guide or instructor, always check that the area is suitable for a skier at **your** level.

### USE AN EHIC - NIL EXCESS IF MEDICAL COSTS ARE REDUCED

Avoid paying the excess - travellers to European countries, including Norway and Switzerland should obtain the European Health Insurance Card (EHIC). Applications for the EHIC can be made online at [www.ehic.org.uk](http://www.ehic.org.uk) - the quickest route, or by Telephone on **0845 606 2030**, or by post – so please allow sufficient time prior to **your** departure date.

This will entitle **you** to benefit from the reciprocal health arrangements which exist between European Union countries. In other countries where reciprocal health arrangements exist all reasonable steps should be made to utilise them. Please see Section 1.

### FOGG TRAVEL MEDI-CARD

**Medical claims** - Production of **your** Fogg Travel MEDI-CARD will mean that any rescue, transport or medical service in Europe, subscribing to the scheme, will make no charge to **you** for their service but will bill us direct - the policy excess is, however, payable to the doctor at the time of treatment. In the event of difficulty **you** should contact the emergency medical assistance service immediately. **You** will be given a form by the medical/rescue service whenever the Fogg Travel MEDI-CARD is used - this form should be sent to Fogg Travel Insurance Services together with any ancillary pharmaceutical bills and the like at the end of **your trip** to obtain reimbursement of those costs incurred – less the policy excess amount - where **you** have made payment.

Otherwise, and in particular outside Europe, production of **your** Fogg Travel MEDI-CARD will be of assistance in confirming **your** travel insurance details to rescue, transport or medical service providers.

### IF YOU NEED EMERGENCY MEDICAL ASSISTANCE ABROAD:

Contact the 24 hour emergency medical assistance service:

### FOGG ASSIST

on **+44 (0)845 658 9899**

quoting your scheme name **FOGG TRAVEL - MEDI-CARD**  
and your **Fogg Travel MEDI-CARD** number

- If **you** are admitted to a hospital or clinic as an in-patient, or repatriation is necessary, or where costs are likely to exceed **£500**, **our** emergency medical assistance service must be notified as soon as it is practical to do so, and at the latest within **24** hours.
- Repatriation to **your home** will be arranged when this is considered to be medically necessary in the opinion of the doctor in attendance and **our** medical advisers.
- In the event of **your** injury or illness requiring additional treatment as an out-patient or as an in-patient following the initial medical treatment, or requires **you** to have more than **1** follow up consultation and/or treatment, and/or more than **3** sessions of physiotherapy treatment, **our** emergency assistance service must be notified for prior agreement. **Your** failure to do this may mean the additional treatment will not be paid for by **your** insurance.
- In the event of **your** injury or illness requiring follow up consultations or treatment, **we** reserve the right to minimise any potential loss by repatriating **you home** before the end of **your trip**.

### IN CASE OF SERIOUS EMERGENCY

First call an ambulance using the local equivalent of a **999** call. While **you** wait for the ambulance contact **our** emergency medical assistance service which is open **24** hours a day and **7** days a week to offer **you** advice in this emergency situation. **We** strongly suggest **you** put **FOGG ASSIST's** telephone number **+44 (0)845 658 9899** into **your** mobile phone before **you** travel so that it is to hand should **you** need it. Speak to the ambulance driver and get details of the hospital **you** are being taken to so that **our** emergency medical assistance service's doctor will be able to obtain a medical report at the earliest possible opportunity.

### WHAT THE MEDICAL ASSISTANCE COMPANY NEEDS FROM YOU

When **you** call **our** emergency medical assistance service in an emergency **you** need to have some basic information for them to hand:

- **your** telephone number so **you** can be contacted on in case **you** are cut off
- the name and age of the patient and as much information about the medical situation as **you** are able to provide
- the name of the hospital, the ward, the treating doctor and the telephone numbers if **you** have them
- tell them that **you** insured under the scheme **FOGG TRAVEL - MEDI-CARD** scheme through URV, your medi-card number, and **your** travel dates
- the patient's **home country** GP details, name, address and phone number, in case they need to obtain information on current medical conditions and treatment.

### HOW TO PAY FOR YOUR TREATMENT

Outpatient bills for less than **£500** should be paid at the time and claimed on **your** return. It is very important to obtain an itemised receipt for any monies paid for medical treatment.

If **you** are admitted to a medical facility then **you** may need to pay the policy excess locally and ask the hospital or doctor to send the rest of their bills to Fogg Travel Insurance Services Limited, Crow Hill Drive, Mansfield, Notts, NG19 7AE, England. **Our** emergency medical assistance service will explain this procedure to them and provide them with a faxed guarantee if necessary, once the validity of **your** claim has been established.

In European Countries, including Norway and Switzerland **you** should utilise **your** EHIC card for in-patient and/or out-patient treatment to obtain a reduction in medical costs where possible, and if costs are minimised the policy excess will be reduced to **NIL**.

If **you** are not sure whether **your** particular circumstances are included in the cover then call **Fogg Travel** on **+44 (0)1623 631331** (Claims Department option) between **9.00** am and **5.00** pm UK time for advice.

### POLICY EXCESSES APPLICABLE TO THIS POLICY

**Applicable to section 1 - Emergency medical expenses and Section 2 - Personal liability.**

An excess is the amount **you** have to pay towards each claim.

Each section of the policy listed carries an excess. All excesses shown for this policy are payable by each insured-person, for each incident giving rise to a separate claim. The policy excess under section 1 may be increased to include **pre-existing health conditions** confirmed in writing by Fogg Travel. The increased excess will apply to all persons insured under **your** policy.

### POLICY CONDITIONS APPLICABLE TO THIS POLICY

At all times **we** will act in good faith in **our** dealings with **you**. The payments for all claims following events that occur in **your** selected geographical area during the period of cover are dependent on **you**:

#### 1. OBSERVING THE FOLLOWING:

**In respect of all sections of the policy**

- (a) being a **resident** of the **United Kingdom** or the **Channel Islands**.
- (b) taking all possible care to safeguard against accident, injury, loss or damage as if **you** had no insurance cover.
- (c) producing **your** Insurance Schedule confirming **you** are insured before a claim is admitted.
- (d) giving **us** full details in writing of any incident that may result in a claim under any section of the policy at the earliest possible time.
- (e) notifying **us** immediately of any changes in **your** health or medication after **you** buy the policy.
- (f) passing on to **us** immediately every writ, summons, legal process or other communication in connection with the claim.
- (g) providing all necessary information and assistance **we** may require at **your** own expense (including where necessary medical certification and details of **your** National Health number or equivalent and Private Medical Insurance).

- (h) not admitting liability for any event or offering to make any payment without our prior written consent.
- (i) accepting that **your** policy cannot be extended once it has expired.
- (j) accepting that no alterations and/or additions to the printed terms and conditions of **your** policy be valid unless initialled by **us**.

**In respect of sections 1 - Emergency medical expenses only.**

- (k) checking with **your** doctor on the advisability of making the **trip** if **you** have any existing medical condition, taking into account **your** chosen destination, the climatic conditions, the stability of **your** condition, the effect of any additional drugs or vaccines necessary and the standard of the medical services available. Cover will not be given if travel is against the advice of **your** doctor.
- (l) not travelling specifically to receive medical treatment during **your trip** or in the knowledge that **you** are likely to need treatment.
- (m) not requiring insurance for any health condition where a terminal prognosis has been given by a registered doctor before buying this policy.
- (n) not requiring insurance for any health condition that is being investigated or for which **you** are awaiting or receiving treatment in hospital at the time of buying this policy.
- (o) disclosing all relevant information as soon as possible after the policy is issued.
- (p) obtaining any recommended vaccines, inoculations or medications prior to **your trip**.

**2. RECOGNISING OUR RIGHTS TO:**

- (a) make **your** policy void where a false declaration is made or any claim is found to be fraudulent.
- (b) take over and deal with in **your** name the defence or settlement of any claim made under the policy.
- (c) subrogate against the responsible party and take proceedings in **your** name but at **our** expense to recover for **our** benefit the amount of any payment made under the policy.
- (d) give **7** days notice of cancellation of this policy by recorded delivery to **you** at **your** last known address. In this case **we** will refund to **you** the pro-rata proportion of any unexpired premium **you** have paid.
- (e) obtain information from **your** medical records (with **your** permission) for the purpose of dealing with any medical claims. No personal information will be disclosed to any outside person or organisation without **your** prior approval.
- (f) cancel all benefits provided by **your** policy without refund of premium when a payment has been made for cancellation or curtailment of the **trip**.
- (g) not to refund the policy premium after the policy has been issued, unless after receipt of the document **you** find that the terms and conditions do not meet **your** requirements, in which case the policy and any other relevant documents must be returned to the point of sale within **14** days of receipt for any refund to be considered.
- (h) not make any payment under sections **1** and **2** for any event that is covered by another insurance policy.
- (i) settle all claims under the Law of the country that **you** live in within the **United Kingdom** or the **Channel Islands** unless **we** agree otherwise with **you**.
- (j) maintain **your** personal details in connection with an anti-fraud claims checking system.

**GENERAL EXCEPTIONS APPLICABLE TO THIS POLICY**

**A. This insurance will not pay for:**

any deterioration of or loss or damage to property or any delay, legal liability, injury, illness, death or expense directly or indirectly due to, contributed to or caused by:

- (1) war, terrorism, biological or chemical warfare, invasion, act of foreign enemy, hostilities (whether war has been declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.
- (2) participation in a **hazardous activity** except where shown to be covered under the **sports and activities cover** section or where an additional premium has been paid and the policy endorsed.
- (3) any **pre-existing health condition** or health condition that has been diagnosed, been in existence or for which **you** have received treatment from a hospital or specialist consultant during the last **2** years or for which **you** are awaiting or receiving treatment or under investigation unless **we** have agreed cover in writing and any additional premium has been paid.
- (4) any payments made or charges levied after the date of diagnosis of any change in **your** health or medication after the policy was bought unless this has been advised to **us** and any revised terms or conditions have been confirmed in writing.
- (5) delay, confiscation, detention, requisition, damage, destruction or any prohibitive regulations by Customs or other government officials or authorities of any country.
- (6) **you** being under the influence of drugs (except those prescribed by **your** registered doctor but not when prescribed for treatment of drug addiction).
- (7) **your** abuse or prior abuse of solvents or alcohol.
- (8) any claim arising from any relevant information known by **you** at the time of buying this policy or which occurs between booking and travel unless it has been disclosed to **us** and **we** have agreed in writing any terms applicable.
- (9) any deliberate or criminal act by an **insured-person**.
- (10) **manual labour** of any kind other than as part of your ski representative and/or chalet staff duties.
- (11) **you** travelling against the advice or recommendations published by the Foreign and Commonwealth Office and applicable at the time of **your** departure.

**B. This insurance will not cover:**

- (1) loss of earnings, additional hotel costs, additional car hire, additional parking fees, kennel fees or any other loss unless it is specified in the policy.
- (2) any loss due to currency exchanges of any and every description.
- (3) any loss unless it is specified in the policy.
- (4) **your** carrier's refusal to allow **you** to travel for whatever reason.
- (5) cruises (where a pleasure ship voyage is more than **72** hours in duration sailing on seas or oceans and includes stops at various ports).
- (6) any trip of more than **31** days duration where **you** are aged **65** and under **75** at the date of departure.
- (7) any trip of more than **24** days duration where **you** are aged **75** and under **85** at the date of departure.
- (8) **you** if **you** are aged **85** or over.

**SECTION 1 - EMERGENCY MEDICAL AND ASSOCIATED EXPENSES**

**PLEASE NOTE:**

- If it seems likely that you will require treatment at a hospital please contact our emergency medical assistance service who will help you to locate the most appropriate local state/public facility for your particular medical problem.
- In case of extreme urgency please call the local ambulance service and notify the emergency medical assistance service as soon as you are able.
- If you are admitted to a hospital this must be reported to our appointed emergency medical assistance service as soon as it is practically possible and at the latest within **24** hours.
- If your medical bills are likely to exceed **£500** you must contact the emergency medical assistance service within **24** hours.

Please see the 'what to do in case of a medical emergency abroad' section of this insurance certificate for details and also special outpatient arrangements.

**For each insured-person this insurance will pay:**

to **you** or **your** legal representatives the following *necessary* emergency expenses that are payable within six months of the event that causes the claim that results from **your** death, injury or illness:

- (a) up to **£5,000,000** for reasonable:
  - (i) fees or charges to be paid outside **your home country** for medical, surgical, hospital nursing home or nursing services.
  - (ii) additional transport and accommodation costs and repatriation costs to be made for or by **you** and for any *one other person who is required for medical reasons* to stay with **you**, to travel to **you** or to travel with **you**
  - (iii) *either* (a) up to **£2,500** to cover charges following **your** death outside **your home country** for **your** burial or cremation in the locality where **your** death occurs and the cost of returning **your** ashes to **your home country** or
    - (b) the cost of returning **your** body to **your home** when arranged by **us**.
- (b) up to **£200** to cover emergency dental treatment only to cure sudden pain.

**For each insured-person this insurance will not cover:**

- the first **£75** of each and every incident giving rise to a claim except when **you** have used the European Health Insurance Card (EHIC) or other mutual agreement between countries to obtain a reduction in medical costs, when this is reduced to **NIL**.
- any elective or pre-arranged treatment.
- any routine non-emergency tests or treatment.
- any treatment or hospitalisation which can be reasonably expected.
- any claim that is caused by:
  - **you** travelling in an aircraft (other than as a passenger in a fully licensed passenger carrying aircraft and for no other purpose).
  - **you** driving a motorcycle for which **you** do not hold a full licence to ride in **your home country**.
  - **you** riding on a motorcycle without wearing a crash helmet, whether legally required locally or not.
  - **your** suicide, self-injury or wilful act of self exposure to peril (except where it is to save human life).
  - **your** participation in a **hazardous activity** except where shown to be covered under the **sports and activities cover** section or where an additional premium has been paid and the policy endorsed.
- the cost of private treatment where adequate state facilities are available.
- the cost of replenishing supplies of any medication **you** were using at the start of the **trip**, or further treatment for any condition **you** had at the start of **your trip**.
- the cost of taxi fares for anyone other than the patient, telephone calls, faxes or any expenses for food or drink.
- the cost of repatriation where necessary medical treatment is available locally in a facility considered acceptable by the Chief Medical Officer of the emergency assistance service.
- the cost associated with the diversion of an aircraft due to **your** death injury or illness
- repatriation that has not been notified to and authorised by the emergency assistance service.
- more than **1** follow up consultation or treatment that has not been notified to and agreed by the emergency assistance service.
- more than **3** physiotherapy sessions confirmed as medically necessary by the treating doctor and where **you** have incurred fees or charges for medical, surgical, hospital treatment for **your** injury unless specifically authorised by the emergency assistance company.
- (a)(i), & (b) any services or treatment received by **you** within **your home country**.
  - any services or treatment received by **you**, including any form of cosmetic surgery **OR** any treatment that in the opinion of the emergency medical assistance service, in consultation with **your** treating doctor, can reasonably wait until **you** return to **your home country**.
  - any services or treatment received by **you** after the date on which in the opinion of the emergency medical assistance service, **you** can safely return **home**, that would exceed the cost of **your** repatriation.
  - repairs to or for the provision of dentures, artificial limbs or hearing aids.
  - any dental work involving the use of precious metals.
  - in-patient treatment that has not been notified to and agreed by the emergency medical assistance service.
  - any extra costs for single or private accommodation in a hospital or nursing home.
  - any costs for treatment, including exploratory tests, that has no relationship with the illness or injury on which the claim is being made.

(a)(iii) **your** burial or cremation in **your home country**.

(b) emergency dental work costing more than **£200**.

**FOR PRACTICAL ASSISTANCE IN A MEDICAL EMERGENCY CONTACT:  
FOGG ASSIST ON +44 (0)845 658 9899**

**NOTES:**

- 1. If travelling within Europe you should carry an EHIC and use this at state registered doctors and state hospitals to save costs.
- 2. If travelling in Australia you should register with Medicare on arrival. There is a Medicare office in all major towns and cities in Australia. Registration is free and this will entitle you to reduced medical charges from doctors, reduced prescription charges and access to Medicare hospitals.

#### What you need to do if you wish to make a claim under this section of the policy:

- emergency medical assistance see under 'If **you** need emergency medical assistance abroad' and details given separately above.
- for non-emergency cases, visits to doctors, hospital outpatients, or pharmacy costs **you** incur **you** must keep all receipts accounts and medical certificates. In the event you require more than 1 follow up consultation or treatment and/or more than 3 physiotherapy sessions following your initial injury or illness see under 'If **you** need emergency medical assistance abroad' and details given separately above.
- Production of **your** Fogg Travel MEDI-CARD in Europe will mean that any rescue, transport or medical service subscribing to the scheme will make no charge to **you** for their service but will bill Fogg Travel direct - the policy excess is, however, payable to the doctor at the time of treatment. In the event of difficulty **you** should contact the emergency medical assistance service immediately. **You** will be given a form by the medical/rescue service whenever the Fogg Travel MEDI-CARD is used - this form should be sent to Fogg Travel Insurance Services Limited together with any ancillary pharmaceutical bills and the like and policy excess receipt at the end of **your** trip to obtain reimbursement of those costs incurred (less the policy excess) where **you** have made payment. Please see "what to do in the case of a medical emergency abroad" section for cases involving more than simple outpatient treatment.

### SECTION 2 - PERSONAL LIABILITY

#### For each insured-person this insurance will pay:

up to **£2,000,000**, plus costs agreed between us in writing, for any event occurring during the period of this insurance that **you** are legally liable to pay that relate to an incident caused by **you** and that results in:

- (a) injury, illness or disease of any person.
- (b) loss of, or damage to, property that does not belong to **you** and is neither in **your** charge or control.
- (c) loss of, or damage to trip accommodation which does not belong to **you**.

#### For each insured-person this insurance will not cover:

- any liability for loss of or damage to property or injury, illness or disease:-
  - where an indemnity is provided under any other insurance.
  - that is suffered by anyone who is under a contract of service with **you** and is caused by the work **you** employ anyone to do.
  - that is caused by any deliberate act or omission by **you**.
  - that is caused by **your** own employment, profession or business.
  - that is caused by **your** ownership, care, custody or control of any animal.
  - that falls on **you** by agreement and would not have done if such agreement did not exist.
- any liability for injury, illness or disease suffered by **you**.
- compensation or any other costs caused by accidents involving **your** ownership, possession or control of any:
  - land or building or their use either by or on **your** behalf other than **your** temporary trip accommodation.
  - mechanically propelled vehicles and any trailers attached to them.
  - aircraft, motorised skis, motorised waterborne craft or sailing vessel.
  - firearms or incendiary devices.

(a) & (b) the first **£75** in respect of each and every event that causes a claim.

(c) the first **£250** in respect of each and every event that causes a claim.

#### What you need to do if you wish to make a claim under this section of the policy:

- never admit responsibility to anyone and do not agree to pay for any damage, repair costs or compensation.
- keep notes of any circumstances that may become a claim so these can be supplied to us along with any supporting evidence we may require

### OUR PLEDGE TO YOU

It is **our** aim to give a high standard of service and to meet any claims covered by this policy honestly, fairly and promptly. **We** occasionally get complaints and these are usually through a misunderstanding or insufficient information. Any complaint will be investigated at once and the matter resolved as quickly as possible.

### YOUR RIGHT TO COMPLAIN

**We** sincerely hope **you** will not need to complain about **your** insurance policy or claims settlement.

1. If **your** complaint is regarding the selling of **your** policy please forward details of **your** complaint in the first instance as follows: Managing Director, Fogg Travel Insurance Services Ltd, Crow Hill Drive, Mansfield, Notts. NG19 7AE
2. Or if, **your** complaint is about the outcome of **your** claim or assistance provided please forward details of **your** complaint in the first instance as follows: Write to the Branch Manager, URV, Oast Business Centre, North Frith Farm, Ashes Lane, Hadlow, Kent, TN11 9QU who will review the claims office decision.
3. If **you** are still not satisfied with the outcome **you** may ask the Financial Ombudsman Service (FOS) to review your case. Their address is Exchange Tower, London, E14 9SR, telephone advice line is 0845 080 1800.

URV, Branch Office of Union Reiseversicherung AG for the United Kingdom and the Republic of Ireland. Registered in England & Wales. Company No. FC024381.

Branch No. BR006943. A public body corporate with limited liability.

Registered Office: Maximilianstrasse 53, D-80530 Munich, Germany.

Registered with Amtsgericht Munich, Germany. Registered Number: HRB 137918.

URV are authorised in Germany with BaFin and regulated in the United Kingdom by

the Financial Conduct Authority and in the Republic of Ireland by the Insurance

Regulator. Union Reiseversicherung AG are members of the Financial Services

Compensation Scheme. The URV Branch office is administered in the United

Kingdom and Ireland by Travel Insurance Facilities plc.

Registered Office: 10 Victoria Road South, Southsea, Hampshire, PO5 2DA.

Registered in England. Registered Number: 3220410.

Travel Insurance Facilities plc are authorised and regulated by the Financial Conduct Authority.

Fogg Travel Insurance Services Limited is authorised and regulated by the Financial Conduct Authority. Our FCA Register reference is 307304.

This can be checked on the financial services register held on the FCA's website ([www.fca.org.uk](http://www.fca.org.uk)).

### SPORTS AND ACTIVITIES COVER

Unlike other policies we cover many **hazardous activities** as standard with no additional premium required. If the sport or activity **you** are participating in or where it forms part of **your** duties for **your** employer is not listed below please contact Fogg Travel (contact details can be found below or under the **hazardous activity** definition) to ensure **you** are covered.

The following is a list of **winter sports** activities covered during the period of insurance with no additional premium on a non-professional, amateur and non-competitive basis:

**B**ig Foot Skiing, **B**lade Skating, **C**at Skiing/Snowboarding, **C**ross Country Skiing, **D**ry Slope Skiing/Snowboarding/ Snowdome, **G**lacier Walking, **H**eliskiing (provided helicopter lands at a designated site to allow you to disembark), **H**usky Dog Sledding, **I**ce Hockey with Full Body Protection, **I**ce Skating (official licensed ice rinks indoor or outdoor), **K**ick Sledging, **L**and Skiing, **L**anglauf, **M**ono Skiing, **N**ordic Skiing, **O**ff-piste Skiing/Snowboarding, **P**assenger Sledge, **S**ki Boarding, **S**ki Dooing, **S**kiing, **S**ledging, **S**leigh Riding (reindeer, horses, dogs), **S**now Biking, **S**now Blading, **S**nowboarding, **S**now/Ski Bobbing, **S**nowcat Driving (excluding Personal Liability), **S**now Mobiles/Ski Doos (excluding Personal Liability), **S**now Parascending, **S**now Scooting, **S**now Shoe Walking, **S**now Tubing, **S**peed Skating, **T**elemarking, **T**obogganing.

The following is a list of sports and activities covered during the period of insurance with no additional premium on a non-professional and non-competitive basis (unless otherwise stated):

**A**bscailing, **A**dventure Racing (up to 12 hours), **A**erobics, **A**irsoft, **A**thletic Field/track Events, **A**ngling, **A**merican Football, **A**nimal Sanctuary/Refuge Work, **A**rchery, **A**thletics, **B**adminton, **B**amboo Rafting, **B**anana Boating, **B**ar Work (excluding Personal Liability), **B**aseball, **B**asketball, **B**each Games, **B**iathlon, **B**illiards, **B**ird Watching, **B**ody/Boogie Boarding, **B**owling, **B**owls, **B**oxing Training, **B**reathing Observation Bubble (BOB), **B**ridge, **B**ridge Swinging, **B**ungee Jumping, **C**amel Riding/Trekking, **C**amping, **C**anoeing (white water, up to grade 6), **C**anyoning, **C**aravanning (excluding Personal Liability), **C**atamaran Sailing (In-shore) (excluding Personal Liability), **C**hess, **C**lay Pigeon Shooting, **C**limbing (climbing wall, with use of ropes or guides), **C**ricket, **C**ross Country Running, **C**roquet, **C**urling, **C**ycle Touring, **C**ycling, **D**ancing, **D**arts, **D**eep Sea Fishing, **D**iving, **D**ragon Boat Racing, **E**lephant Riding/Trekking, **E**questrian, **F**alconry, **F**ell Running, **F**ell Walking, **F**encing, **F**ishing, **F**ives, **F**lag football, **F**lying as passenger (private/small aircraft), **F**lying (crew/pilot) (excluding Personal Liability), **F**lying Helicopter (pilot) (excluding Personal Liability), **F**ootball, **F**ootball - Beach Kick Around, **F**resh Water/Sea Fishing, **F**risbee, **F**ruit or Vegetable Picking (excluding Personal Liability), **G**aelic Football, **G**lass Bottom Boats, **G**liding, **G**o-Karting (excluding Personal Liability), **G**olf, **G**orge Walking (no ropes), **G**orilla Trekking, **G**ymnastics, **H**andball, **H**arness Racing, **H**igh Diving (swimming pool), **H**ighland games, **H**iking up to 3,000m, **H**ill Walking up to 3,000m, **H**istorical Research, **H**obie Catting (in-shore), **H**ockey, **H**orse Riding (no eventing), **H**orse Jumping (no Polo, Hunting), **H**ot Air Ballooning (passenger only), **H**ydro Zorbing, **I**ndoor Skating, **I**ron Man, **J**et Boating (excluding Personal Liability), **J**et Skiing (excluding Personal Liability), **J**et Skiing (non-incident) (excluding Personal Liability), **J**ogging, **J**ousting, **J**udo, **K**arate, **K**ayaking (up to grade 3 rivers only), **K**ayaking (inland waters), **K**eeffit, **K**endo, **K**ite Boarding, **K**iting, **K**orfball, **L**acrosse, **L**and Yachting, **L**ow Ropes, **M**anual Labour involving the lifting or carrying of heavy items of no more than 25 kg, work at no more than 2 storeys high (excluding any form of work underground) (excluding Personal Liability), **M**arathons, **M**artial Arts (Training only), **M**odel Flying, **M**odern Pentathlon, **M**otorcycling with appropriate UK licence (excluding Personal Liability), **M**otor homing (excluding Personal Liability), **M**ountain Biking (mountain paths/trails and roads), **M**ountain Boarding, **M**ountain Walking up to 3,000m, **M**ountaineering up to 1,000m (with use of ropes and guides, no solo climbing, excluding snow, glacier, ice), **N**etball, **O**ff Road Motorcycling (up to 250cc) (excluding Personal Liability), **O**rienteering, **P**aint Balling, **P**arasailing (over water) incidental, **P**arascending (Over water), **P**arascending (over water, non incidental), **P**etanque, **P**igeon racing, **P**ony Trekking, **P**ool, **P**olo Cross, **P**ower Boating (excluding Personal Liability), **P**ower lifting, **P**rofessional Entertaining, **Q**uad Bikes (excluding Personal Liability), **Q**uoits, **R**ackets, **R**afting, **R**ambling up to 3,000m, **R**ap Running/Jumping, **R**aquet Ball, **R**e-Enactment, **R**estaurant Work (excluding Personal Liability), **R**ifle Range, **R**ingos, **R**iver Tubing, **R**iver Walking, **R**ock Scrambling (under 4,000m), **R**odeo, **R**oller Blading (Line Skating/Skate Boarding), **R**oller Hockey, **R**oller Skating, **R**ounders, **R**owing, **R**ugby, **R**ugby (training), **R**ugby League, **R**ugby Union, **R**unning, **S**afari, **S**afari Trekking, **S**ail Boarding, **S**ailing, **S**ailing/Yachting inshore (recreational) (excluding Personal Liability), **S**cuba Diving to 30m (PADI or BSAC qualified or diving with and under the direction a qualified instructor. No solo diving. **You** will not be covered under this policy if **you** travel by air within 24 hours of participating in scuba diving), **S**and Boarding, **S**and Dune Surfing/Skiing, **S**and Yachting, **S**ea Fishing, **S**ea Canoeing/Kayaking, **S**hark Cage Diving, **S**hifty, **S**hooting, **S**hooting (target range-not hunting), **S**kateboarding, **S**mall Bore Target Shooting, **S**nooker, **S**nokkelling, **S**occer, **S**oftball, **S**peed Sailing, **S**peed Trials/Time Trials, **S**phering, **S**print/Long Distance, **S**quash, **S**treet Hockey, **S**ummer Tobogganing/Luge, **S**urfing, **S**wim Trekking, **S**wimming, **S**wimming with Dolphins, **S**ydney Harbour Bridge, **T**able Tennis, **T**aw Kwon Do, **T**eam Games, **T**en Pin Bowling, **T**ennis, **T**rampolining, **T**ree Top Canopy Walking (harnessed), **T**rekking up to 3,000m, **T**riathlon, **T**ubing, **T**ug of War, **U**nder 17 Driving (not public roads) (excluding Personal Liability), **V**olleyball, **W**alking up to 3,000m, **W**ar Games/Paint Balling, **W**ater Polo, **W**ater Skiing, **W**ater Ski Jumping, **W**eight Lifting, **W**hale Watching, **W**hite Water Rafting (grade 1 to 6), **W**indsurfing, **W**orking (excluding Personal Liability) (excluding **manual labour**), **W**restling, **Y**achting (inland and coastal waters) (recreational crewing), (excluding Personal Liability), **Y**oga.

Any claims which arise whilst undertaking any of these activities for any purpose other than leisure (examples of non-leisure purposes include racing (other than on foot), timed events, professional, display events, photo shoots, etc.) will not be covered under this policy. If **you** are unsure please do not hesitate to contact Fogg Travel, telephone **01623 631331** (retail option) or email to [queries@foggtravelinsurance.com](mailto:queries@foggtravelinsurance.com) (Mon to Fri 9am to 5pm) quoting **FOGG TRAVEL – MEDI-CARD** and we can discuss **your** individual requirements.

Where a covered activity forms part of **your** duties for **your** employer, cover is provided on a non-incident basis which means that **your** participation in an activity is one of the primary purposes of **your** trip but shall exclude any form of Personal Liability whilst participating in the activity as part of **your** duties. Otherwise participation in an activity should be incidental only to **your** trip.

**Where necessary you must ensure that the covered sport or activity is adequately supervised and appropriate safety equipment and/or clothing is worn at all times.**