



# Single Trip Travel Insurance

Underwritten by  
**UNION REISEVERSICHERUNG AG**

Arranged by  
**Fogg Travel Insurance Services Limited**

Crow Hill Drive, Mansfield, Notts. NG19 7AE Tel: 01623 631331 Fax: 01623 420450  
Email: sales@foggtravelinsurance.com

Master policy number  
RTZIS40073-03 A & B

**Valid for issue between 1<sup>st</sup> March 2018 to 28<sup>th</sup> February 2019  
in respect of departures between 1<sup>st</sup> March 2018 and 28<sup>th</sup> February 2020**

**For this insurance to be valid it must be attached to a valid Fogg Travel Insurance Schedule with a Certificate Number prefixed FTS for SINGLE TRIP cover.**

**PLEASE READ YOUR POLICY AND INSURANCE SCHEDULE CAREFULLY. FAILURE TO OBSERVE THE TERMS AND CONDITIONS SET OUT WITHIN THESE DOCUMENTS MAY PREJUDICE ANY CLAIM.**

**KEEP YOUR POLICY AND ALL INSURANCE DOCUMENTS IN A SAFE PLACE.**

## Age Limit

This insurance is not valid for persons aged 85 years and over at the date of departure or 65 years and over at the date of departure if travelling for more than 31 days.

## Summary Of Cover

Your Insurance Schedule details which cover You have chosen.

The maximum benefit limits shall apply to the level of policy cover – Premier or Economy - as stated on Your Insurance Schedule.

Section Cover Levels -	Maximum Benefits		Excess	Excess
	Premier	Economy	Premier	Economy
1. CANCELLATION / LOSS OF DEPOSIT	£5,000	£750	£75 (£20 Area 1)/£25	£100 (£20 Area 1)/£25
2. MEDICAL AND EMERGENCY EXPENSES	£5,000,000	£1,000,000	£75 (£20 Area 1)	£100 (£20 Area 1)
3. STATE HOSPITAL EXPENSES	£600	£300	Nil	Nil
4. ABANDONMENT	£5,000	£750	£75 (£20 Area 1)	£100 (£20 Area 1)
5. PERSONAL ACCIDENT	£25,000	£5,000	Nil	Nil
Death limit	£15,000	£5,000		
6. PERSONAL BAGGAGE	£1,500	£1,000	£75 (£20 Area 1)	£100 (£20 Area 1)
Single item limit / <b>Valuables</b> limit	£250/£350	£100/£100		
Emergency Baggage	£100	£50	Nil	Nil
Loss of Passport	£150	£150	£75	£100
7. PERSONAL MONEY	£500	£250	£75 (£20 Area 1)	£100 (£20 Area 1)
Cash limit	£250	£100		
8. PERSONAL LIABILITY	£2,000,000	£1,000,000	Nil / £100*	Nil / £100*
9. a) TRAVEL DELAY	£100	£60	Nil	Nil
b) CANCELLATION	£5,000	£750	£75	£100
10. MISSED DEPARTURE	£1,000	£300	£75	£100
11. LEGAL EXPENSES	£15,000	£5,000	£100	£100
12. HIJACK	£1,000	Nil	Nil	Nil
13. MUGGING	£1,000	Nil	Nil	Nil
<b>Winter Sports</b> (only applicable if Ski Cover is stated on <b>Your Insurance Schedule</b> and the appropriate premium has been paid)				
14. PISTE CLOSURE	£300	£300	Nil	Nil
15. SKI EQUIPMENT	£500	£500	£75	£100
16. UNUSED SKI PACK	£300	£300	Nil	Nil
17. SKI EQUIPMENT HIRE	£200	£200	Nil	Nil
18. WEATHER EXTENSION	£150	£150	Nil	Nil

\*excess in respect of any claim relating to damage or loss to temporary holiday accommodation.

## Geographical Areas

**Area 1** United Kingdom (United Kingdom residents only).

**Area 2** The **Channel Islands** and the Republic of Ireland (but excluding **your home country**).

**Area 3** Europe - Albania, Algeria, Andorra, Armenia, Austria, Azerbaijan, the Azores, Balearics, Belarus, Belgium, Bosnia-Herzegovina, Bulgaria, the Canary Islands, the **Channel Islands**, Corfu, Corsica, Crete, Croatia, Cyprus, Czech Republic, Denmark, Egypt, Estonia, Faroe Islands, Finland, France, Georgia, Germany, Gibraltar, Greece, Holland (Netherlands), Hungary, Iceland, Isle of Man, Italy, KOS (Greek Island), Kosovo, Latvia, Liechtenstein, Lithuania, Luxembourg, Macedonia, Madeira, Malta, Moldova, Monaco, Montenegro, Morocco, Northern Ireland, Norway, Poland, Portugal, Republic of Ireland, Rhodes, Romania, Russia, San Marino, Sardinia, Serbia, Slovakia, Slovenia, Spain, Sweden, and, Switzerland, Tunisia, Turkey, Ukraine, Vatican City, Mediterranean islands (not listed here), and the **United Kingdom** (but excluding **Your Home Country**).

**Area 4** Australia including the Territory of Cocos (Keeling) Islands, The Territory of Christmas Island, Norfolk Island and Lord How Island), and New Zealand including the Cook Islands, Niue and Tokelau.

**Area 5** World-wide excluding USA/Canada.

**Area 6** World-wide including USA/Canada.

## Important

**Your** insurance is covered under master policy number **RTZIS40073-03 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 stated on the Insurance Schedule issued as Insured.

This insurance is sold on the understanding that **you** are travelling with the intention to return to **your home country** within **your trip** dates.

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 this policy, **Your** Insurance Schedule and alternative insurance policy to Fogg Travel within **14** days of receipt for a refund to be considered.

Please read **Your** policy in full before **You** travel making sure **You** understand exactly what **We** will and will not pay for under each section. Please check that the information **You** have given to **Us** is accurate and notify **Us** as soon as practicable of any inaccuracies and/or in the case of any change of information. **Your** particular attention is drawn to the heading "**Your Duty**" and "**Change of Risk**" and section "**Conditions which apply to the whole policy**".

If the **Single Parent** box is ticked only one parent or grandparent aged under 65 years is allowed to accompany children less than 18 years of age at the date of travel.

If the **Family** box is ticked this insurance is valid only for 2 parents or grandparents aged under 65 years and accompanying children less than 18 years of age at the date of travel.

This insurance is sold on the understanding that **You** are travelling with the intention to return to **Your Home Country** within **Your** journey travel dates.

## Claims

If **You** require a claim form please visit:- [www.foggtravelinsurance.com](http://www.foggtravelinsurance.com)

and click on claim forms – **You** can print the relevant claim form required online or contact Fogg Travel by email: [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 or telephone: **01623 631331**

in all circumstances **You** should quote **FOGG SINGLE TRIP** scheme, advising the section under which **You** wish to claim. When returning the claim form please enclose **Your Insurance Schedule** and a copy of this policy together with the tour operator's confirmation of booking invoice and if the claim is for cancellation, the tour operator's cancellation invoice.

## What Is Not Covered

Any payment which **You** would normally have made during **Your** travels if nothing had gone wrong.

## Period Of Insurance

The Period of Insurance under the Cancellation Section commences from the date of issue of the **Insurance Schedule** attached to this policy and terminates on the commencement of the planned journey or trip. All other sections shall commence at the time of leaving **Your Home Address** or the normal place of business in the European Union (whichever is the later) and shall terminate on return to **Your Home Address** on completion of the journey or trip as specified in the itinerary but shall not exceed the period stated on the **Insurance Schedule**. In any event cover will commence no more than 24 hours prior to the booked departure time from **Your Home Address** and will cease no more than 24 hours after the booked return to **Your Home Address**.

The cover operates only where all of the following conditions are satisfied:-

1. all of the persons entitled to benefit under this insurance are normally resident in the European Union at the date of issue of this insurance; and
2. the trip is a conventional holiday or a business trip of a commercial nature; and
3. it is a round trip commencing in and returning to the European Union during the Period of Insurance; and
4. this insurance is issued in the **United Kingdom**.

## Extension Of Period Of Insurance

If the homeward journey cannot be completed before the expiry of the Period of Insurance this policy shall remain in force without additional premium as follows:-

1. Up to 14 days in the case of delay to any vehicle, vessel or aircraft in which **You** are travelling as a ticket holding passenger.
2. Up to 30 days if the intended return journey is prevented due to **Your** bodily injury or illness. In this event **We** will also continue to pay medical treatment under Item 1 of the Medical Expenses Section (up to the sum insured provided by the policy) for this period or the extension of period as is medically certified as being necessary.

## Health

Although this insurance does not contain a health warranty it does **exclude** any claim caused by or arising from:-

1. Failure to fulfil **Your** duty to provide **Us** with full and accurate information either when **You** purchased this insurance or up to the date of **Your** journey or trip and which are not declared to the Fogg Travel - Health Referrals Helpline.
2. Any claims arising if at the time of buying this insurance **You** or a **Travelling Companion** or where **You** are aware that **Your Immediate Relative** or **Close Relative** or **Close Business Associate** (whether travelling with **You** or not, on whose state of health **Your** decision to cancel or **Abandon** the journey or trip may depend):-
  - a) have had or are currently suffering from a Heart related condition, High Blood Pressure/Hypertension, Arterial Disease, Kidney Disease, Malignant Disease (cancer), Lung and/or a Respiratory Disease (including Asthma where you have received in-patient hospital treatment), Diabetes, or had a Stroke, cancerous, cardio-vascular, cerebro-vascular, renal condition, any Psychological or psychiatric disorder, eating disorder, mental instability, anxiety, stress or depression
  - b) have had any other medical condition which is under the supervision of a hospital or a consultant or doctor, or has required any hospital admission or treatment in the previous 6 months
  - c) have been taking continuous medication and have had any change in medication or increase in dosage in the last 6 months resulting from a deterioration in the condition being treated
  - d) are on a hospital or specialists waiting list for in patient or out patient treatment or investigation
  - e) are awaiting the results of any tests or investigations
  - f) have been advised of a terminal prognosis.

However, the **Insurer** may agree not to apply exclusions 1. or 2. a) to g) or the **Insurer** may impose special terms if the **Insured** applies to the Fogg Travel – Health Referrals Helpline with details of the condition and this insurance is suitably endorsed. Cover for any pre-existing medical condition(s) will only be provided following **Our** acceptance. Unless reported and agreed by the Fogg Travel – Health Referrals Helpline in writing any claims caused by or related to or where the pre-existing medical condition is a risk factor will be excluded.

Please contact the Fogg Travel - Health Referrals Helpline on 01623 635 958 (during normal working hours - 9am to 5pm, Monday to Friday) quoting scheme name **FOGG SINGLE TRIP**. **Your** enquiry will be handled confidentially and **You** will be advised of the extent of cover that can be provided. **You** will be given a Helpline reference which should be inserted in the space provided on the **Insurance Schedule**. In the case of any medical emergency abroad the Helpline reference **MUST** be given to the **Assistance Company** together with the Certificate Number at the top of the **Insurance Schedule**.

When calling please have details of **Your** condition(s) and the number of medication **You** are taking for each condition.

## 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** Fogg Travel – Health Referrals quoting **FOGG SINGLE TRIP** on **+44 (0)1623 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.

## Your Duty

**You** have a duty to take reasonable care to provide **Us** with full and accurate information in relation to taking out this Insurance. Failure to fulfil this duty may impact any claim made on this insurance.

**Your** duty, includes but is not limited to:

**Your** medical history or that of a **Travelling Companion**, or where **You** are aware of any medical condition of any **Immediate Relative** or **Close Relative** or **Close Business Associate** or other person on whose state of health a decision by **You** to cancel or **Abandon Your** journey or trip depends, and includes any new medical history or changes in health between purchasing this insurance and **Your** date of travel. or where **You** are aware of any circumstances which could reasonably be expected to give rise to a claim under this insurance.

**You** must tell **Us** and **We** reserve the right to impose special terms. If **You** are in doubt **You** should contact the Fogg Travel – Health Referrals Helpline on 01623 635 958 (during normal working hours - 9am to 5pm, Monday to Friday) quoting scheme name **FOGG SINGLE TRIP** as soon as possible so **We** can advise **You** if **We** are able to insure the additional risk and any terms **We** may require. If **You** do not this may result in **Your** claim not being paid.

**Your** enquiry will be handled confidentially and **You** will be advised in writing of the extent of cover that can be provided. **You** will also be given a Helpline Reference.

**CHANGE IN RISK** - **You** will immediately advise **Us** of any changed circumstance which become apparent after the date of issue of this insurance and before the commencement of the journey or trip which **You** could reasonably foresee as likely to give rise to a claim under the policy. **We** reserve the right to alter the terms of the insurance in the light of the changed circumstances. **We** will, subject to the terms, conditions and exclusions of the policy, pay **You** under the Cancellation Section in respect of holiday deposits or charges which **You** have necessarily incurred up to the date of advice to **Us** of the changed circumstances.

## 24 Hour Worldwide Emergency Medical Service

The cost of the Medical Emergency Service may be met under this insurance. The operation and availability of the service will be governed by the terms, conditions and exclusions contained in this policy and will be operated by:-

## FOGG ASSIST - Tel. + 44 (0)20 7118 1444

An experienced Assistance Co-ordinator will deal with **Your** enquiry and will then ensure:-

1. where necessary hospitals are contacted
2. necessary medical fees are guaranteed
3. medical advisers are consulted
4. where medically necessary in the opinion of **Our** medical advisers arrangements are made for repatriation to **Your Home Address** and the best method of transportation adopted. If **You** need help please phone advising that **You** are insured under **FOGG SINGLE TRIP** scheme.

**SPECIAL CONDITION:** Where any illness or injury necessitates admittance to a hospital or repatriation to **Your Home Address** or **Abandon Your** journey or trip, it is imperative that the **Assistance Company** is contacted first prior to making any arrangements. If this is not possible because the condition is life, limb or organ threatening the **Assistance Company** must be contacted as soon as possible thereafter and at the latest within 48 hours before incurring expenses in excess of **£500**. Failure to do so will affect the assessment of **your** claim.

**NOTE TO TREATING DOCTOR:** **Fogg Assist** must be contacted prior to treatment with full medical details. Failure to do this will mean medical expenses incurred cannot be guaranteed.

This is not a general health insurance. It only covers **You** in the case of any sudden and unexpected accident or the onset of sickness or illness and does not cover **ELECTIVE** (non-emergency) treatment.

## This Is Not A Private Medical Insurance Policy

**We** will pay for private treatment only if there is no appropriate reciprocal health agreement in existence and no public service available and **We** reserve the right to organise a transfer from a private medical facility to a public medical facility where appropriate. If medical treatment becomes necessary for which reimbursement will be sought, **We** or **Our** representatives will require unrestricted access to all **Your** medical records and information.

## Reciprocal Health Agreement

Travellers to European Union countries, Iceland, Liechtenstein, Norway and Switzerland (the European Economic Area (EEA)) should apply for and obtain the European Health Insurance Card (EHIC). Applications for the EHIC can be made online [www.nhs.uk/NHSEngland/Healthcareabroad/EHIC](http://www.nhs.uk/NHSEngland/Healthcareabroad/EHIC) – full details are given online. 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.

If you are travelling outside the EEA then there are some countries that have reciprocal agreements with the **UK** and the **Channel Islands** and these can be found on

<http://www.nhs.uk/NHSEngland/Healthcareabroad/countryguide/NonEEAcountries/Pages/Non-EEAcountries.aspx>

If **you** make use of these arrangements or any other world-wide reciprocal health arrangement and **your claim** under **Section 2** is reduced, **you** will not have to pay any excess. This does not apply where special excess terms have been imposed.

Please note residents of the Isle of Man or Channel Islands are not eligible for and EHIC.

## 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 is not listed below or is not a sport 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 sports and activities covered during the period of insurance with no additional premium on a non-professional and non-competitive basis (unless otherwise stated):

Abseiling, Aerobics, Amateur Athletic Field/track Events, Angling, Animal Sanctuary/Refuge Work, Archery, Athletics, Badminton, Bamboo Rafting, Banana Boating, Bar Work (excluding Personal Liability), Baseball, Basketball, Beach Games, Biathlon, Billiards, Bird Watching, Body/Boogie Boarding, Bowling, Bowls, Boxing Training, Bridge, Bridge Swinging, Bungee Jumping, Camel Riding/Trekking, Camping, Canoeing (up to grade 3 rivers only), Caravanning (excluding Personal Liability), Catamaran Sailing (In-shore) (excluding Personal Liability), Chess, Clay Pigeon Shooting, Climbing (climbing wall, with use of ropes or guides), Cricket, Croquet, Curling, Cycle Touring, Cycling, Dancing, Darts, Deep Sea Fishing, Diving, Elephant Riding/Trekking, Fell Running, Fell Walking, Fencing, Fishing, Fives, Flag football, Flying as passenger (private/small aircraft), Flying (excluding crew/pilot), Football (amateur), Football - Beach Kick Around, Fresh Water/Sea Fishing, Frisbee, Fruit or Vegetable Picking (excluding Personal Liability), Glass Bottom Boats, Gliding (learning, non competition), Golf, Gorilla Trekking, Gymnastics, Highland games, Hiking up to 3,000m, Hill Walking up to 3,000m, Historical Research, Horse Riding (no eventing), Hot Air Ballooning (passenger only), Indoor Skating, Jet Boating (excluding Personal Liability), Jet Skiing (excluding Personal Liability), Jogging, Kayaking (up to grade 2 rivers only), Keepfit, Kiting, Korfball,

Low Ropes,

**Manual 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), Marathons, Model Flying, Motorcycling with appropriate UK licence (excluding Personal Liability), Motor homing (excluding Personal Liability), Mountain Biking (mountain paths/trails and roads),

Netball,

Orienteering,

Petanque, Pigeon racing, Pony Trekking, Pool, Power lifting,

Quoits,

Rackets, Rafting, Rambling up to 3,000m, Rap Running/Jumping, Raquet Ball, Re-Enactment, Restaurant Work (excluding Personal Liability), Rifle Range, Ringos, River Walking, Rock Scrambling (under 4,000m), Rounders, Rowing, Running,

Safari (UK Organised), Safari Trekking, Sail Boarding, Sailing, Sailing/Yachting inshore (recreational) (excluding Personal Liability), Scuba 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), Sea Fishing, Shinty, Shooting, Shooting (target range-not hunting), Small Bore Target Shooting, Snooker, Snorkelling, Softball, Sprint/Long Distance, Squash (amateur), Surfing (amateur), Swim Trekking, Swimming, Swimming with Dolphins, Sydney Harbour Bridge,

Table Tennis, Team Games, Ten Pin Bowling, Tennis, Trekking up to 3,000m, Triathlon, Tubing, Tug of War,

Volleyball,

Walking up to 3,000m, Water Skiing (amateur), Weight Lifting, Whale Watching, White Water Rafting (grade 1 to 3), Windsurfing, Working (excluding Personal Liability) (excluding **Manual Labour**),

Yachting (inland and coastal waters) (excluding Personal Liability), Yoga.

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 / semi-professional / paid / sponsored racing, training for professional or competition levels, display events, photo shoots, etc.) will not be covered under this policy, unless otherwise stated. If **You** are unsure please do not hesitate to contact Fogg Travel, telephone +44 (0)1623 631331 (retail option) or email to [queries@foggtravelinsurance.com](mailto:queries@foggtravelinsurance.com) (Mon to Fri 9am to 5pm) quoting **FOGG SINGLE TRIP** and **We** can discuss **Your** individual requirements.

The activities are covered on the basis that **Your** chosen activity is not the sole purpose of **Your** trip (with the exception of **Winter Sports** (provided the appropriate premium has been paid and shown to be covered on **Your Insurance Schedule**) which will be covered for the entire duration of **Your** trip – please see page 14 for **Winter Sports** activities included only where **Winter Sports** cover is included on **Your** policy).

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.

### Definitions Which Apply To The Whole Policy

The following words or expressions carry the meaning shown below whenever they appear in **bold** print within the policy wording.

“**Abandonment/Abandon**” means returning to **Your Home Address** or **Your** repatriation to a hospital or nursing home in **Your Home Country** prior to the scheduled return date in which case a proportionate refund will be made of **Your** irrecoverable pre-paid charges. The refund for accommodation will be based on each full day **You** have lost from the day **You** are repatriated but a proportionate refund of travel expenses will be paid only if **You** cannot use **Your** return ticket.

All **Abandonment** claims will need authorisation from Fogg Assist or **Us** in advance.

“**Assistance Company**” means Fogg Assist.

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

“**Close Business Associate**” means an associate of **You** in the same employment as **You** whose absence from work or place of employment necessitates the cancellation or **Abandonment** of the journey or trip as certified by a Senior Director of the company.

“**Close Relative**” means wife or husband or civil partner or fiancé(e) living at the same address, mother, father, sister, brother, daughter, son, grandparent, grandchild, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, step-parent, step-child, foster-child, step-sister, step-brother, aunt, uncle.

“**Family**” means up to **2** parents or grandparents aged under **65** years and their children or grandchildren (including step-children, adopted children and foster children) aged under **18** years at the date of departure.

“**Hazardous Activity**” means any activity that requires skill and involves increased risk of injury **except** where the **Hazardous Activity** is listed under the sports and activities cover section on pages 4 and 5 of this policy and are covered for free under this insurance, together with **Winter Sports** activities listed on page 14 that are covered **provided that** the appropriate **Winter Sports** premium has been paid. If **You** are taking part in any sport or activity not listed please contact Fogg Travel, telephone + **44 (0)1623 631331** (retail option) or email to [queries@foggtravelinsurance.com](mailto:queries@foggtravelinsurance.com) (Mon to Fri 9am to 5pm) quoting **FOGG SINGLE TRIP**, to ensure **You** are covered. An additional premium may apply for those activities which are not free or where the **Winter Sports** premium has been paid but for which cover is available.

“**Hijack**” means the unlawful seizure or wrongful exercise of control of the aircraft or ship [or the crew thereof] in which **You** are travelling as a fare paying passenger.

“**Home Address**” means **Your** permanent place of residence within the European Union including British Forces Posted Overseas (BFPO).

“**Home Country**” means the country **You** live in within the European Union including British Forces Posted Overseas (BFPO).

“**Immediate Relative**” means mother, father, sister, brother, wife, husband, civil partner, fiancé(e), daughter or son.

“**Insurance Schedule**” means the Fogg Travel **Insurance Schedule** issued.

“**Loss of Limbs**” means loss by physical severance at or above the wrist or ankle or the total and permanent loss of use of an entire hand, arm, foot or leg.

“**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.

“**Mugging**” means the violent and threatening attack necessitating **Your** medical treatment.

“**Pair or set**” - means two or more items of **personal possessions** that are complementary, purchased as **1** item or used or worn together.

“**Personal Money**” - means bank and currency notes, cash, cheques, postal and money orders, current postage stamps, travellers’ cheques, coupons or vouchers that have a monetary value and travel tickets, driving licence, green cards, lift passes (provided that the appropriate **Winter Sports** premium has been paid and is stated as covered on **Your** Insurance Schedule), passports, all of which are held by **You** and are for **Your** private use.

“**Personal Baggage**” - means each of **Your** suitcases and containers of a similar nature and their contents and articles **You** are wearing or carrying including **Your valuables** (as defined below).

“**Permanent Total Disablement**” means permanent and total disablement from engaging in or attending to any kind of profession or occupation.

“**Public Transport**” means buses, coaches, internal flights or trains that run to a published scheduled timetable.

“**Ski Equipment**” means skis, snowboards, sticks, bindings, boots, helmets.

“**Terrorist Action**” means the actual or threatened:-

1. use of force or violence against persons or property, or
2. commission of an act dangerous to human life or property, or
3. commission of an act that interferes with or disrupts an electronic or communications system undertaken by any person or group, whether or not acting on behalf of or in connection with any organisation, government, power, authority or military force, when any of the following applies:
  - a) the apparent intent or effect is to intimidate or coerce a government or business, or to disrupt any segment of the economy;
  - b) the apparent intent or effect is to cause alarm, fright, fear of danger or apprehension of public safety in one or more distinct segments of the general public, or to intimidate or coerce one or more of the segments;
  - c) the reasonably apparent intent or effect is to further political, ideological, religious or cultural objectives, or to express support for (or opposition to) a philosophy, ideology, religion or culture.

“**Total Loss of Sight**” means complete and irrecoverable loss of sight.

“**Travelling Companion**” means an accompanying person without whom the journey or trip cannot commence or continue.

“**United Kingdom**” means England, Wales, Scotland, Northern Ireland and the Isle of Man.

“**Valuables**” means cameras, photographic equipment, camcorders, video, satellite navigation equipment, television and telecommunications equipment, radios, cassette players, CD players, ipods, MP3 players, audio equipment, computers, laptops, mac or web books, computer games machines, ipads, tablets, Kindles, e-book readers, drones, binoculars, telescopes, antiques, jewellery, watches, smart watches, clothing or articles made of leather or suede, furs, precious or semi-precious stones, articles made of or containing gold silver or other precious metals, films, tapes, cassettes, cartridges, discs or Compact Discs, flash drives, hard drives, dongles,.

“**We/Us/Our/Insurer**” means Union Reiseversicherung AG.

“**Winter Sports**” means skiing, snow boarding and ice skating.

“**You/Your/Insured**” means the person or persons named in the **Insurance Schedule**.

**Subject to the terms of this insurance Insurers will cover You, during the Period of Insurance for which We have accepted Your premium, up to the sums insured provided in respect of:-**

### Section 1 - Cancellation

Refund of deposits which are not recoverable and any other amount which **You** are legally obliged to pay in respect of unused travel and accommodation costs or charges and pre-paid excursions booked in **Your Home Country** prior to the start of **Your** journey up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule** for each **Insured** (purchased prior to the date of departure from **Your Home Address** and prior to any occurrence giving rise to a claim) in the case of unavoidable cancellation of the journey or trip as a result of any of the following occurring after the date of issue of this insurance:-

1. a) The accidental bodily injury to or illness or quarantine or death of **You** or **Your Travelling Companion** or of any person with whom **You** have arranged to stay.
- b) The accidental bodily injury to or serious illness or death:-
  - i. of any **Close Relative** in **Your Home Country**
  - ii. of any **Immediate Relative** elsewhere in the World
  - iii. of **Your** fiancé(e)
  - iv. of any **Close Business Associate** in **Your Home Country** of any **Insured** under this insurance.

**IMPORTANT** All claims resulting from accidental bodily injury, illness, quarantine or death must be supported by medical report(s) and/or death certificate as applicable.

2. **You or Your Travelling Companion** being summoned for Jury Service or called as a witness in a Court of Law during the Period of insurance.
3. **You** being made redundant and certified by the Employment Service.
4. The requirements of H. M. Forces.
5. a) **Your** home becoming uninhabitable following fire, storm or flood.  
b) **Your** presence being required by the Police following burglary at **Your** home or place of business.

#### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

#### WHAT IS NOT COVERED

Exclusions are listed after Section 5 and under the General Exclusions or Conditions sections which apply to the whole policy.

### Section 2 - Medical And Emergency 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 using the local equivalent of a 999 number, or alternatively by dialling 112 within Europe, and notify the emergency medical assistance service as soon as you are able.
- If you are admitted to a hospital or you may have to come home early or extend Your journey because of illness or accident 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 '24 hour Worldwide Emergency Medical Service' section of this policy for details and also special outpatient arrangements.

1. Expenses itemised below if **You** suffer accidental bodily injury, illness or death during the Period of Insurance.
  - a) Emergency medical, surgical or hospital treatment (including rescue services to take **You** to hospital).
  - b) Emergency dental treatment for the immediate relief of pain up to a limit of £250.
  - c) Costs of burial or cremation in the country abroad where **Your** death occurred plus the cost of conveying the ashes to **Your Home Address** up to a limit of £3,000.
  - d) Costs to transport **Your** body to **Your Home Address**.
  - e) Where medically necessary reasonable additional charges for accommodation of a similar standard to the accommodation which was enjoyed for the duration of the journey or trip if available if it is necessary for **You** to stay beyond the intended return date and travel expenses which **You** have to pay to get back to **Your Home Address** if **You** cannot use **Your** return ticket.
2. Expenses incurred in the repatriation of **You** to **Your Home Address** if it is medically necessary following accidental bodily injury or illness during the Period of Insurance.

Items 1.e) and 2. include the expense of any one relative or friend who is required on medical advice to travel to, remain with or accompany You.

#### LIMIT OF AMOUNT PAYABLE

1. **Area 1:** Payment of costs incurred under 1.d), 1.e) and 2. during the Period of Insurance up to a total of £10,000 for each **Insured**.
2. **Areas 2, 3, 4, 5 & 6:** The total amount payable in respect of each **Insured** shall not exceed the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**. In respect of Item 1.a), 1.b) and 1.c) **We** shall only pay for costs incurred while **You** are abroad and outside **Your Home Country** during the Period of Insurance unless **Your** homeward journey cannot be completed before the expiry of the Period of Insurance, in which case the Extension of Period of Insurance clause automatically applies.

#### SPECIAL CONDITIONS

1. Immediate notice must be given to the **Assistance Company**, but if this is not possible due to the nature of emergency then as soon as it is possible to do so, of any illness or injury which necessitate admittance to a hospital as an in-patient or before any arrangements are made for repatriation or where costs are likely to exceed £500.
2. Repatriation to **Your Home Address** will be arranged when this is considered to be medically necessary in the opinion of the doctor in attendance and the **Insurer's** medical advisers. In the case of injury or illness which results in a claim under this insurance the **Insurer** reserves the right to minimise any potential loss by repatriating **You** back to **Your Home Address** before or after the end of the Period of Insurance.

#### WHAT IS NOT COVERED

Exclusions are listed after Section 5 and under the General Exclusions or Conditions sections which apply to the whole policy.

**FOR PRACTICAL ASSISTANCE IN A MEDICAL EMERGENCY CONTACT: FOGG ASSIST ON +44 (0)20 7118 1444**

#### NOTES:

1. If travelling within Europe you should carry an EHIC, and use this 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.

### Section 3 – State Hospital Expenses

If **You** are admitted as an in-patient to a state hospital licensed for surgery abroad due to accidental bodily injury or illness sustained during the Period of Insurance an amount for incidental expenses will be paid in addition to any medical expenses covered under Section 2.

#### LIMIT OF AMOUNT PAYABLE

We will pay an amount of £10 per complete 24 hours up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule** per each **Insured** for every complete 24 hour period **You** are hospitalised.

#### WHAT IS NOT COVERED

Exclusions are listed after Section 5 and under the General Exclusions or Conditions sections which apply to the whole policy.

### Section 4 - Abandonment

1. Proportionate refund of unused travel and accommodation costs and pre-paid excursions booked in **Your Home Country** prior to the start of **Your** journey or up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule** for each **Insured** (purchased prior to the date of departure from **Your Home Address** and prior to any occurrence giving rise to a claim) in the case of unavoidable **Abandonment** of the journey or trip as a result of any of the following occurring after the commencement of the journey or trip:-

- a) The accidental bodily injury, illness, quarantine or death of **You** or **Your Travelling Companion** or of any person with whom **You** have arranged to stay.
- b) The accidental bodily injury to or serious illness or death:-
  - i. of any **Close Relative** in **Your Home Country**
  - ii. of any **Immediate Relative** elsewhere in the World
  - iii. of **Your** fiancé(e)
  - iv. of any **Close Business Associate** in **Your Home Country** of any **Insured** under this insurance.

**IMPORTANT** All claims resulting from accidental bodily injury, illness, quarantine or death must be supported by medical report(s) and/or death certificate as applicable.

2. Reasonable additional travel and accommodation expenses which **You** incur if it is necessary for **You** to return to **Your Home Address** (and **You** cannot use **Your** return ticket) due to the accidental bodily injury to or serious illness or death of any **Immediate Relative** or **Close Relative**, **Your** fiancé(e) or **Close Business Associate** not travelling with **You** (or of a **Travelling Companion**) and resident in the European Union.

3. a) **Your** home becoming uninhabitable following fire, storm or flood.

b) **Your** presence being required by the Police following burglary at **Your Home Address** or place of business.

Item 2. includes the expense of any one relative or friend who is required on medical advice to travel to, remain with or accompany **You**.

**PLEASE NOTE:** This insurance does not cover **You** to resume **Your Trip** once **You** Abandon. There is no further cover once **you** have returned to **your home country**.

#### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

#### WHAT IS NOT COVERED

Exclusions are listed after Section 5 and under the General Exclusions or Conditions sections which apply to the whole policy.

### Section 5 - Personal Accident

Bodily injury suffered by **You** during the Period of Insurance caused by an accident resulting solely and independently of other causes in death, loss of sight or loss of limb or **Permanent Total Disablement**. The benefit shown below will be paid to **You** or **Your** legal personal representative.

#### ECONOMY ONLY COVER BENEFITS

	Up to Age 17 years inclusive	Age 18 years to 64 years	Age 65 years to 84 years
Item 1 Death	£1,000	£5,000	£1,000
Item 2 Loss of one or more limbs and/or <b>Total Loss of Sight</b> in one or both eyes	£5,000	£5,000	£5,000
Item 3 <b>Permanent Total Disablement</b> after 104 weeks except when compensation is paid under Item 2	£5,000	£5,000	NIL

#### PREMIER COVER BENEFITS

Item 1 Death	£2,500	£15,000	£15,000
Item 2 Loss of one or more limbs and/or <b>Total Loss of Sight</b> in one or both eyes	£25,000	£25,000	£25,000
Item 3 <b>Permanent Total Disablement</b> after 104 weeks except when compensation is paid under Item 2	£25,000	£25,000	NIL

#### SPECIAL CONDITIONS

1. Death, loss of sight or loss of limb or **Permanent Total Disablement** must occur within one year of the injury.
2. Benefit shall not be payable under more than one item and any payment shall end this section of the policy in respect of **You**.

#### WHAT IS NOT COVERED

Exclusions are listed below and under General Exclusions or Conditions sections which apply to the whole policy.



## Exclusions Applicable To Sections 1, 2, 3, 4 & 5

1. **We** shall not make any payment in respect of a medical condition of any **Insured** for:-
  - a) any expenses or fees for any in-patient treatment or repatriation or **Abandonment** which have not been notified to and authorised by the **Insurer** or the **Assistance Company**
  - b) the cost of any elective (non-emergency) treatment or surgery, including exploratory tests, which are not related to the illness or injury which necessitated **Your** admittance into hospital, or dental work
  - c) any form of cosmetic surgery and surgery or treatment which in the opinion of the Doctor in attendance and the **Insurer's** medical advisers can reasonably be delayed until **Your** return to **Your Home Address**
  - d) any dental work involving precious material
  - e) the provision of dentures, crowns or veneers.
  - f) medication, which at the time of departure is known to be required or to be continued outside **Your Home Country**
  - g) any additional costs arising from single or private room accommodation
  - h) treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre
  - i) charges levied for services rendered or treatment received after 12 months from the date of any incident giving rise to a claim.
2. **We** shall not make any payment in respect of a medical condition of any **Insured** for which (at the time of purchasing insurance) You:-
  - a) are receiving in-patient treatment
  - b) are on a waiting list for in-patient treatment
  - c) have received a terminal prognosis
  - d) are intending to travel against the advice of a qualified medical practitioner, or
  - e) are advised that continuation of medical treatment will be required during the Period of Insurance.
3. **We** shall not make any payment in respect of any claim arising out of **Your** failure to fulfil **Your** duty to provide **Us** with full and accurate information either when **You** purchased this insurance or up to the date of **Your** journey or trip and which are not declared to the Fogg Travel - Health Referrals Helpline.
4. **We** shall not make any payment for any claims arising if at the time of buying this insurance **You** or a **Travelling Companion** or where **You** are aware that **Your Immediate Relative** or **Close Relative** or **Close Business Associate** (whether travelling with **You** or not, on whose state of health **Your** decision to cancel or **Abandon** the journey or trip may depend):-
  - a) have had a Heart related condition, High Blood Pressure/Hypertension, Arterial Disease, Kidney Disease, Malignant Disease (cancer), Lung and/or a Respiratory Disease (including Asthma where you have received in-patient hospital treatment), Diabetes, or had a Stroke, cancerous, cardio-vascular, cerebro-vascular, renal, cancerous, cardio-vascular, cerebro-vascular, renal condition any psychological or psychiatric disorder, eating disorder, mental instability, anxiety, stress or depression
  - b) have had any other medical condition which is under the supervision of a hospital or a consultant or doctor or has required any hospital admission or treatment in the previous 6 months
  - c) have been taking continuous medication and have had any change in medication or increase in dosage in the last 6 months resulting from a deterioration in the condition being treated
  - d) are on a hospital or specialists waiting list for in patient or out patient treatment or investigation
  - e) are awaiting the results of any tests or investigations
  - f) have been advised of a terminal prognosis.However, the **Insurer** may agree not to apply exclusions 3. or 4. a) to g) or the **Insurer** may impose special terms if the **Insured** applies to the Fogg Travel – Health Referrals Helpline with details of the condition and this policy is suitably endorsed.

To declare a medical condition please refer to 'Health' and **Your** Duty sections on the second page of this policy.
5. **We** shall not make any payment resulting from or arising from:-
  - a) **Your** carrier's refusal to allow **You** to travel for whatever reason
  - b) **Your** failure to obtain the required passport, visa or ESTA
  - c) the failure of any transport or accommodation provider, their agent or anybody who is acting as **Your** agent.
  - d) the cancellation or **Abandonment** of **Your** journey by the tour operator.
  - e) the failure of **Your** travel agent or tour operator.
  - f) the cancellation of any conference or business trip onto which **Your** journey or trip was to be an add-on.
  - g) financial circumstances.
  - h) **Your** disinclination to travel.
  - i) **Your** loss of enjoyment of the journey however caused.
  - j) death or illness of any pets or animals.
  - k) cancellation or **Abandonment** due to the fear of an epidemic or pandemic.
  - l) any payment or part payment made using frequent flyer vouchers, Air Miles/Avios vouchers or other vouchers that have no financial face value.
  - m) flying or other aerial activities except while travelling in a properly licensed passenger carrying aircraft being operated by a licensed commercial air carrier
  - n) motor cycling as a driver or passenger:-
    - i. on machines exceeding 125 cc engine capacity hired outside **Your Home Country** and/or
    - ii. motorcycling as either a driver or passenger unless the person driving the motorcycle holds a current valid full motorcycle license or appropriate qualifications permitting them to drive the motorcycle in **Your Home Country**.
    - iii. **You** riding on a motorcycle without wearing a crash helmet, whether legally required locally or not.
  - o) any event that is due to **you** participating 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.

p) engaging in or practising for speed or time trials, sprint or racing of any kind.

q) **Manual Work** of any kind.

Exclusions 5. m) to q) do not apply to Cancellation, and in respect of **Abandonment**, they apply only to You.

6. **We** shall not make any payment for Cancellation arising from unemployment caused by or resulting from gross misconduct on the part of **You** leading to dismissal or from resignation or voluntary redundancy or where a warning or notification of redundancy was given prior to the application for insurance.
7. **We** shall not make any payment for Cancellation of the journey or trip on the advice or recommendations published by the Foreign and Commonwealth Office and applicable at the time of departure.
8. **We** shall not pay the first £100 in respect of Economy Cover or reduced to £75 in respect of Premier Cover or reduced to £20 **Area 1** of each claim per section per **Insured** in respect of Cancellation, **Abandonment**, and Medical and Emergency Expenses, reducing to £25 in respect of Loss of Deposit.
9. **We** shall not make any payment for **Your** disinclination to travel or for **Your** loss of enjoyment during the journey or trip.
10. Failure to advise **Your** Tour Operator and/or Travel Agent in writing of **Your** need to cancel immediately that **You** are aware that cancellation of the journey or trip is necessary.
11. We will not cover any claim relating to the requirement of the H. M. Forces where **you** have not obtained prior authority to take leave or where leave has been cancelled on disciplinary grounds.
12. **We** will not cover items listed within the General Exclusions or Conditions sections which apply to the whole policy.

## Section 6 – Personal Baggage

1. Loss or theft of or damage during the Period of Insurance to **Personal Baggage** taken or owned by **You**. The **Insurer** will have the option to repair, reinstate or replace or provide a cash settlement.
2. If **Your Personal Baggage** is temporarily lost in transit on the outward journey from **Your Home Country** and not restored to **You** within 12 hours **We** will pay for the emergency purchase of essential replacement items, and supported by receipts, up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule** per each **Insured** in any one Period of Insurance. **You** must obtain written confirmation from the carrier of the number of hours delay. If **Your Personal Baggage** proves to be permanently lost the overall **Personal Baggage** sum insured shall apply and any amount paid shall be deducted from the final claim settlement under 1.
3. Loss or theft of **Your** Passport while abroad during the Period of Insurance. **We** will pay reasonable additional travel and accommodation expenses necessarily incurred abroad in obtaining a replacement passport including the cost of the temporary replacement passport itself.

**PROVIDED THAT** Any amount so paid under 2. above will be deducted from any payment made under 1. above of this policy in respect of the same incident.

### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule** with the inner limits for any single article, pair or set of articles, loss of passport and in respect of **Valuables** for each **Insured**.

### SPECIAL CONDITIONS

1. **You** must, at all times take reasonable precautions to ensure the safety and supervision of **Your** property. If it is lost or damaged whilst in the care of a transport company, authority or hotel **You** must report to them, in writing details of the loss or damage and obtain written confirmation. If **Personal Baggage** is lost or damaged by the airline **You** must:-
  - a) Obtain a Property Irregularity Report
  - b) Give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (and retain a copy)
  - c) Keep all travel tickets and tags for submission if a claim is to be made under this policy.
2. Reasonable precautions must, at all times, be taken to ensure the safety and supervision of **Your Personal Baggage** and **You** should take all practical steps to recover **Personal Baggage** lost or stolen.

### WHAT IS NOT COVERED

Exclusions are listed after Section 7 and under the General Exclusions or Conditions sections which apply to the whole policy.

## Section 7 - Personal Money

Loss or theft of **Personal Money** during the Period of Insurance.

### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**, with an inner limit applying in respect of cash.

### SPECIAL CONDITION

Reasonable precautions must, at all times be taken to ensure the safety and supervision of **Your Personal Money** and **You** should take all practicable steps to recover **Personal Money** lost or stolen.

### WHAT IS NOT COVERED

Exclusions are listed below and under the General Exclusions or Conditions sections which apply to the whole policy.

## Exclusions Applicable To Sections 6, 7 & 15

**We** shall not pay for:-

1. Cracking, scratching or breakage of glass (other than lenses in cameras, binoculars, telescopes and spectacles), china or similar fragile articles.

2. Pedal cycles or contact lenses, artificial limbs, mobile phones, SIM cards, mobile telephone prepayment cards, lost or stolen mobile telephone call charges or mobile telephone accessories.
3. The cost of replacing or repairing dentures.
4. Any claim that is the result of a domestic dispute.
5. Wear and tear, depreciation, deterioration or damage by moth, vermin or by any process of cleaning, repairing or restoring.
6. Loss or theft of **Personal Baggage**, Passport, **Valuables**, **Ski Equipment** and **Personal Money** not reported to the Police within 24 hours of discovery and a written police report obtained.
7. Sports equipment including drones (unmanned aerial vehicles) whilst in use other than **Ski Equipment** if Ski Cover has been stated on the **Insurance Schedule**.
8. Household goods, car keys and anything shipped as freight.
9. Delay, detention, seizure or confiscation by Customs or other officials.
10. Items used in connection with **Your** employment or occupation, bonds, securities or documents of any kind.
11. **Valuables** and **Personal Money** carried in any suitcases, trunks or similar containers while in transit or unattended and outside of **Your** control (other than in **Your** personal holiday accommodation). Safety deposit boxes, where available, must be used for **Personal Money** and **Valuables**.
12. Loss or theft of **Personal Baggage** left unattended away from **Your** personal holiday accommodation.
13. Loss or theft of **Personal Baggage** from an unattended vehicle unless:-
  - a) secured in the locked boot of the locked vehicle or
  - b) contained in the luggage space at the rear of a locked Estate car or locked hatchback under its top cover out of view.
12. Loss of **Valuables**, **Ski Equipment** and/or **Personal Money** from an unattended vehicle.
13. Any claim where **You** are unable to provide the damaged items on request or to prove the existence or prove the ownership of any item with an insured value in excess of £50.
14. Loss or theft of, or damage to, property that does not belong to **You** or any member of **Your** family.
15. Shortages due to error omission or depreciation.
16. The first £100 in respect of Economy Cover or reduced to £75 in respect of Premier Cover or reduced to £20 in respect of **Area 1** of each claim separately per **Insured** for **Personal Baggage** (but not including Emergency Baggage) and **Personal Money**.
17. The first £100 in respect of Economy Cover or reduced to £75 in respect of Premier Cover of each claim separately per **Insured** for **Ski Equipment** and Loss of Passport.
18. Electrical or mechanical breakdown or derangement.
19. Business goods or samples.
20. Loss or theft of travellers' cheques where the bank provides a replacement service.
21. Any financial loss suffered as a result of **your** debit/credit card being lost or stolen.
22. Loss of, or damage to skis:-
  - more than 60% of the original purchase price for skis over 6 months old and less than 1 year old.
  - more than 50% of the original purchase price for skis over 1 year old and less than 2 years old.
  - more than 40% of the original purchase price for skis over 2 years old and less than 3 years old.
  - more than 25% of the original purchase price for skis over 3 years old and less than 5 years old.
  - any skis more than 5 years old.
21. Loss or damage due to dents or defacement of **Ski Equipment**.
22. Items listed within the General Exclusions or Conditions sections which apply to the whole policy.

## Section 8 - Personal Liability

All sums which **You** become personally legally liable to pay in the case of:-

1. Death or bodily injury of any person.
2. Loss or damage to property arising from an accident occurring during the Period of Insurance.

### LIMIT OF AMOUNT PAYABLE

The total amount payable for all claims made against **You** arising from any one occurrence is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**. **We** will also pay any extra costs and expenses awarded against **You** or incurred by **You** with **Our** written consent.

### WHAT IS NOT COVERED

1. Punitive and exemplary damages.
2. Liability arising from:-
  - a) Death or bodily injury or illness or disease of **Your** employees or of a **Close Relative** or **Immediate Relative**
  - b) Loss of or damage to property which belongs to **You** or under the control of **You** or a member of **Your** family or household or a person employed by **You**
  - c) **Your** trade, business or profession or that of any member of **Your** family
  - d) The ownership or occupation of any land or building (other than occupation only of any temporary holiday accommodation, in which case the first £100 of each claim is excluded)
  - e) The ownership, possession or use of animals (other than domestic animals), firearms, incendiary devices, mechanically propelled vehicles and any trailers attached to them, vessels (other than manually propelled watercraft) or aircraft of any description
  - f) any event that is due to **you** participating 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.
  - g) engaging in or practising for speed or time trials, sprints or racing of any kind.
3. **We** will not cover items listed within the General Exclusions or Conditions sections which apply to the whole policy.

## Section 9 – Travel Delay

Delay in departure of the coach, ship or aircraft in which **You** are booked to travel. **We** will:-

1. pay the sum of £20 for the first full 12 hours of delay and £20 for each subsequent full 12 hours of delay subject to a maximum payment up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule** per each **Insured** if **You** are delayed in departing from **Your Home Address** on **Your** outward journey or if delay occurs at the point of departure on the initial leg of **Your** return journey to **Your Home Address** or
2. refund non-recoverable deposits and other pre-paid holiday charges up to the maximum amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule** per each **Insured** if after 24 hours delayed departure of the outward journey from **Your Home Address** **You** choose to cancel the journey or trip.

The period of delay will be calculated from the date and time of departure of the coach, ship or aircraft specified in **Your** itinerary. **You** must check in according to the itinerary and obtain written confirmation from the carrier or their handling agents stating the actual date and time of departure and reason for the delay.

**PROVIDED THAT** Compensation is only payable if no claim is made under Section 10 – Missed Departure.

### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

### WHAT IS NOT COVERED

**We** shall not make any payment:-

1. In respect of strike or industrial action existing or notified by declaration of intent at or prior to the date this insurance is purchased.
3. Under more than one item of this section.
4. The cost of any accommodation, food, drink, telephone calls or faxes.
5. Any compensation unless **You** have checked in **Your** baggage and obtained written confirmation from **Your** airline, railway company, shipping line or their handling agents that shows the reason for the delay, the scheduled departure time and the actual departure time of **Your** flight, international train or sailing.
6. Any claim that is due to the failure of any transport or accommodation provider, their agent or anybody who is acting as **Your** agent.
7. Any compensation where the airline, railway company or shipping line or their handling agents provide alternative transport that departs within **12** hours of the booked departure time
8. Any compensation when **Your** tour operator has rescheduled **Your** flight itinerary.
9. Any claim where **You** have not pre-booked, where **You** have a stand-by ticket and do not have confirmed space or that is due to the aircraft being overbooked.
10. Under item 2. in respect of the first £100 in respect of Economy Cover or reduced to £75 in respect of Premier cover of each claim per **Insured** for delay cancellation.
11. Any claim for an incident already notified under Section 10 – Missed Departure.
12. For items listed within the General Exclusions or Conditions sections which apply to the whole policy.

## Section 10 - Missed Departure

Additional accommodation and travel expenses necessarily incurred in reaching **Your** overseas destination or returning to **Your Home Address** should **You** fail to arrive at the international port, international rail terminal, or airport in time to board the vessel or aircraft in which **You** are booked to travel on the initial international leg of the journey or trip as a result of:-

1. failure of **Public Transport**, or
2. the vehicle in which **You** are travelling being subject of an accident or breakdown.

**PROVIDED THAT** Compensation is only payable if no claim is made under Section 9 – Travel Delay.

### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

### SPECIAL CONDITIONS

1. **You** must take all reasonable steps to arrive in time at the departure port, rail terminal or airport as specified in the itinerary.
2. **You** must supply a repairers report in the case of an accident or breakdown to the vehicle in which **You** are travelling.

### WHAT IS NOT COVERED

**We** shall not make payment for:-

1. Claims arising from strike, riot, industrial action or civil commotion in respect of which a warning has been given prior to the commencement of the planned journey or trip.
2. The cost of any food, drink, telephone calls or faxes.
3. The first £100 in respect of Economy Cover or reduced to £75 in respect of Premier Cover of each claim per **Insured**.
4. Failure to service the vehicle in accordance with the manufacturers instructions.
5. Failure to allow sufficient time for **Your** journey to arrive at the international port, rail terminal, airport to check-in by the time shown on **Your** travel itinerary.
4. Any claim for an incident already notified under Section 9 – Travel Delay.
5. Items listed within the General Exclusions or Conditions sections which apply to the whole policy.

## Section 11 – Legal Expenses

**We** will pay for legal costs and expenses incurred in pursuing claims for compensation and damages due to **Your** death or personal injury whilst on the journey or trip provided **We** always have complete control over the legal proceedings and the selection, appointment and control of lawyers and where a claim occurs **You** will supply any reports or information and proof to **Us** and the claims office as may be required.

### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**

### WHAT IS NOT COVERED:

1. Any costs to pursue a claim against a travel agent, tour operator, tour organiser, the insurers or their agents or the claims office.
2. Any legal action where the estimated amount that will be recovered is less than **£500**.
3. Any legal expenses where **We** consider **You** are unlikely to obtain a reasonable settlement.
4. Any costs that can be considered under an arbitration scheme or a complaints procedure.
5. Any legal expenses incurred without **our** prior authorisation or that of the claims office.
6. Any claim made by **You** against another **Insured** or member of **Your** family.
7. Any claim for damage to a motor vehicle.
8. The first **£75** in respect of each and every event that causes a claim.
9. Items listed within the General Exclusions or Conditions sections which apply to the whole policy.

### SPECIFIC CONDITIONS

1. **We** will not pay legal expenses to bring proceedings in more than one country in respect of the same event.
2. If **You** are awarded compensation and receive payment then all sums paid out by **Us** shall be paid out of that compensation.

### HOW TO OBTAIN LEGAL ADVICE:

Should **you** have an accident abroad and require legal advice **you** should telephone:

**Slater & Gordon LLP,  
58 Moseley Street, Manchester, M2 3HZ, United Kingdom**

They will arrange for up to thirty minutes of advice to be given to **You** by a lawyer.

To obtain this service **You** should telephone:

**+44 (0)161 228 3851** or fax: **+44 (0)161 909 4444**.

## Section 12 – Hijack

If **You** are prevented from reaching **Your** scheduled destination as a result of **Hijack** of the aircraft or ship in which **You** are travelling, **We** will pay **You** £50 for the first full 24 hours of delay and £50 for each subsequent full 24 hours of delay up to the maximum stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

### PROVIDED THAT:-

1. Compensation is only payable if no claim is made under Section 1 – Cancellation or Section 9 - Travel Delay.
2. **You** must produce independent evidence in writing in support of any claim.

### WHAT IS NOT COVERED

**We** shall not make payment for items listed within the General Exclusions or Conditions sections which apply to the whole policy.

## Section 13 – Mugging

If **You** sustain actual bodily injury as a result of a **Mugging** attack during the Period of Insurance resulting in medical treatment necessitating admission to an overseas hospital, **We** will pay **You** a benefit of £50 per complete 24 hours **You** are hospitalised up to a maximum stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

### PROVIDED THAT

1. The incident was reported to the nearest Police Authority within 12 hours of the incident occurring.
2. **You** produce independent evidence in writing in support of any claim.

### WHAT IS NOT COVERED

Claims arising from:-

1. **You** being under the influence of intoxicating liquor or of a drug or drugs, or of substance or solvent abuse.
2. **Your** intentional self-injury or **Your** wilful exposure to risk or **Your** deliberate acts.
3. Items listed within the General Exclusions or Conditions sections which apply to the whole policy.

## Additional Cover For Winter Sports

(only applicable if Ski Cover is stated as covered on Your Insurance Schedule at time of issue and appropriate additional premium paid).

### IMPORTANT ADVICE

1. We recommend when participating in **winter sports** that the appropriate clothing including helmets should be worn, and activities undertaken to match the level of experience you have in that activity
2. 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.
3. If **you** are not skiing 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 comes to a dangerous cliff edge or sheer drop!
4. 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.

### Fogg Travel Medicard - Winter Sports Only

**Medical Claims** - Production of **Your** Fogg Travel MEDICARD 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 case of difficulty **You** should contact the **Assistance Company** immediately. **You** will be given a form by the medical/rescue service whenever the Fogg Travel MEDICARD 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** journey or trip to obtain reimbursement of those costs incurred 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** insurance details to rescue, transport or medical service providers.

### Sports And Activities Cover – Winter Sports Only

The following is a list of Winter Sports activities covered on a non-professional, amateur and non-competitive basis PROVIDED THAT the appropriate Winter Sports premium has been paid and 'Ski' is stated as covered on your Insurance Schedule.

Big Foot Skiing, Blade Skating,  
Cat Skiing/Snowboarding, Cross Country Skiing,  
Dry Slope Skiing/Snowboarding/ Snowdome,  
Glacier Walking,  
Heliskiing (provided helicopter lands at a designated site to allow you to disembark), Husky Dog Sledding,  
Ice Hockey with Full Body Protection, Ice Skating (official licensed ice rinks indoor or outdoor),  
Kick Sledding, Land Skiing, Langlauf,  
Mono Skiing, Nordic Skiing,  
Off-piste Skiing/Snowboarding, Passenger Sledge,  
Ski Boarding, Ski Dooing, Skiing, Sledging, Sleigh Riding (reindeer, horses, dogs), Snow/Ski Biking, Snow Blading, Snowboarding, Snow/Ski Bobbing, Snowcat Driving (excluding Personal Liability), Snow Mobiles/Ski Doos (excluding Personal Liability), Snow Parascending, Snow Scooting, Snow Shoe Walking, Snow Tubing, Speed Skating,  
Telemarking, Tobogganing.

#### Additional sports and activities (provided that the appropriate Winter Sports premium is paid):-

Adventure Racing (up to 12 hours), Airsoft, American Football,  
Breathing Observation Bubble (BOB),  
Canoeing (white water, up to grade 6), Canyoning, Cross Country Running,  
Dragon Boat Racing, Equestrian,  
Falconry, Flying Helicopter (pilot) (excluding Personal Liability),  
Gaelic Football, Go-Karting (excluding Personal Liability), Gorge Walking (no ropes), Gliding,  
Handball, Harness Racing, High Diving (swimming pool), Hobie Catting (in-shore), Hockey, Horse Jumping (no Polo, Hunting), Hydro Zorbing,  
Iron Man, Jousting, Judo,  
Karate, Kayaking (up to grade 3 rivers only), Kayaking (inland waters), Kendo, Kite Boarding,  
Lacrosse, Land Yachting,  
Martial Arts (Training only), Modern Pentathlon, Mountain Boarding, Mountaineering up to 1,000m (with use of ropes and guides, no solo climbing, excluding snow, glacier, ice),  
Off Road Motorcycling (up to 250cc) (excluding Personal Liability),  
Paint Balling, Parasailing (over water), Parascending (Over water), Polo Cross, Power Boating (excluding Personal Liability), Professional Entertaining,  
Quad Bikes (excluding Personal Liability),  
River Tubing, Rock Climbing (under 2,000m) with trained guide and use of ropes and guides only, all safety equipment and clothing to be used (excludes solo climbing, free climbing, climbing without trained guide), Rodeo, Roller Blading (Line Skating/Skate Boarding), Roller Hockey, Roller Skating, Rugby, Rugby (training), Rugby League, Rugby Union,  
Safari, Sand Boarding, Sand Dune Surfing/Skiing, Sand Yachting, Sea Canoeing/Kayaking, Shark Cage Diving,

Skateboarding, Soccer, Speed Sailing, Speed Trials/Time Trials, Sphering, Street Hockey, Summer Tobogganing/Luge, Taw Kwon Do, Trampoline, Tree Top Canopy Walking (harnessed), Under 17 Driving (not public roads) (excluding Personal Liability), War Games/Paint Balling, Water Polo, Water Ski Jumping, White Water Rafting (grade 1 to 6), Wrestling,

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 / semi-professional / paid / sponsored racing, training for professional or competition levels, display events, photo shoots, etc.) will not be covered under this policy, unless otherwise stated.

The activities are covered on the basis that **Your** chosen activity is not the sole purpose of **Your** trip (with the exception of **Winter Sports** which will be covered for the entire duration of **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.

If the **winter sport** activity **You** are participating in is not listed below or is not a sport please contact Fogg Travel (contact details can be found below or under the **Hazardous Activity** definition) to ensure **You** are covered.

## 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.

### Section 14 - Piste Closure

**Only Valid for trips outside of the United Kingdom between 1<sup>st</sup> January and 1<sup>st</sup> April**

If due to lack of snow there is a total closure of skiing facilities in the resort to which **You** have pre-booked to travel (other than facilities for cross country skiing which is excluded from this section) and it is not possible to ski, **We** agree to pay:-

- a) the cost of transfer to an alternative ski area up to a maximum of £10 per day each full day of the total closure of skiing facilities during the period of **Your** journey or trip at the resort plus up to £5 per day for the purchase of a lift pass or if no alternative ski areas are available
- b) compensation at the rate of £20 per day for each full day of total closure of skiing facilities during the period of **Your** journey or trip at the resort.

#### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

#### WHAT IS NOT COVERED

**We** shall not make payment for items listed within the General Exclusions or Conditions sections which apply to the whole policy.

### Section 15 - Ski Equipment

Permanent loss or damage to **Ski Equipment** being **Your** property taken, sent in advance or purchased on **Your** journey or trip by **You** for the intrinsic value or cost of repairs (whichever is the lesser).

#### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

#### WHAT IS NOT COVERED

Exclusions are listed after Section 7 and under the General Exclusions or Conditions sections which apply to the whole policy.

#### NOTE

This policy does not provide cover on a "new for old" basis.

### Section 16 - Unused Ski Pack

Proportional return of the irrecoverable pre-booked cost of the lift pass, ski school or equipment hire following **Your** injury or illness occurring during the Period of Insurance, and which prevents **You** from participating in skiing activities for each full day for the period medically certified.

#### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

#### WHAT IS NOT COVERED

1. Any claim that does not follow a claim under the Medical and Emergency Expenses Section of the policy or the **Abandonment** section of the policy.
2. The day the injury or illness was first medically certified.
3. Items listed within the General Exclusions or Conditions sections which apply to the whole policy.

## Section 17 - Ski Equipment Hire

If You:-

1. are deprived of **Ski Equipment** for at least 12 hours from the time of arrival at the booked destination due to delay or misdirection by the carrier, or
2. sustain a loss of **Ski Equipment** for which **You** may claim under Section 15 – Ski Equipment of this policy.

**We** will pay an amount up to £100 for the purchase of essential items of ski clothing and/or the hire of **Ski Equipment** subject to certification by a representative of the carrier or tour operator. If under 1. **Your Ski Equipment** is still not restored to **You** after 36 hours **We** will pay an additional £100 for the purchase of essential items of ski clothing and/or the hire of **Ski Equipment** subject to certification by a representative of the carrier or tour operator.

**PROVIDED THAT:** Any amount so paid under this section will be deducted from any payment made under Section 15 – Ski Equipment of this policy in respect of the same incident.

**You** must submit to the **Insurer** receipts for all items purchased.

It is a condition of this policy that the non-arrival of **Ski Equipment** must be reported immediately to the carrier and a written report obtained.

### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

### WHAT IS NOT COVERED

**We** shall not make payment for items listed within the General Exclusions or Conditions sections which apply to the whole policy.

## Section 18 - Weather Extension

Additional travel and accommodation expenses necessarily and unavoidably incurred due to delay in the outward or return flight or **You** being prevented from reaching the airport of departure prior to the flight leaving resort or being unable to reach the resort caused by adverse weather conditions, or delayed arrival in the resort caused by adverse weather conditions. This insurance is limited to £50 for each full period of 24 hours delay up to a maximum of £150 in all each **Insured**.

### LIMIT OF AMOUNT PAYABLE

The total amount payable in respect of each **Insured** is up to the amount stated in the Summary of Cover and limited to the level of policy cover purchased as stated on **Your Insurance Schedule**.

Payment shall not be made under both this section and Sections 9 and 10 in respect of the same event.

### WHAT IS NOT COVERED

**We** shall not make payment for:

1. Any compensation where **Your** trip was booked and/or **Your** insurance was purchased within **14** days of travel.
2. Any costs where **your** tour operator, transport provider or accommodation provider arranges or is required to arrange alternative transport and/or accommodation.
3. Any claim for an incident already notified under Section 9 – Travel Delay or Section 10 – Missed Departure.
4. Items listed within the General Exclusions or Conditions sections which apply to the whole policy.



## General Exclusions Which Apply To The Whole Policy

1. a) war, invasion, acts of foreign enemies, hostilities (whether war be declared or not) civil war or any act condition or warlike operation incident to war  
b) warlike action by a regular or irregular military force or civilian agents, or any action taken by any government, sovereign or other authority to hinder or defend against an actual or expected attack  
c) insurrection, rebellion, revolution, attempt to usurp power, or popular uprising, or any action taken by government or martial authority in hindering or defending against any of these  
d) discharge, explosion, or use of a weapon of mass destruction whether or not employing nuclear fission or fusion, or chemical, biological, radioactive or similar agents, by any party at any time for any reason  
e) **Terrorist Action** or any action taken by anyone to prevent real or perceived imminent **Terrorist Action** or to address ongoing **Terrorist Action**.
2. Claims of whatever nature caused by:-
  - a) ionising radiation's or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel
  - b) the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component of that assembly
  - c) pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.
3. Claims of whatever nature caused by **You** travelling on, or in, a motorised vehicle for which **You** do not hold appropriate qualifications to operate in **Your Home Country** (Please note there is no cover under section 8 - Personal liability for any claim related to the use of motorised vehicles). **You** can visit the following link to the UK Government site for more information on appropriate licenses: <https://www.gov.uk/ride-motorcycle-moped/bike-categories-ages-and-licence-requirements>.
4. Any claim arising from any injury, illness, death, loss, expense or other liability attributable to HIV (Human Immune Deficiency Virus) and/or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or any mutant derivatives or variations thereof however caused.
5. Death, injury or illness resulting from suicide or attempted suicide or exposure of danger which is reasonably foreseeable (except in an attempt to save human life), venereal infection or the influence or effect of intoxicating liquor or drugs (other than drugs taken under medical supervision and not for the treatment of a drug addiction or as a result of a criminal act committed by **You**), abuse or prior abuse of solvents or alcohol.
6. Any loss other than as specified in the policy.
7. Any loss arising from or in any way connected with the fact that the performance or functionality of any computer hardware, operating system, application, software, computer chip or embedded control logic has been or may be affected by any date change or by any values used to represent the dates. This exclusion applies regardless of whether the loss was also caused or contributed to by any other cause or event. However this exclusion will not apply in respect of cover provided under the Medical and Emergency Expenses and Personal Accident Sections.
8. **You** travelling against the advice or recommendations published by the Foreign and Commonwealth Office and applicable at the time of **Your** departure.
9. Any journey or trip of more than **31** days duration where **you** are aged **65** and under **85** at the date of departure.
10. **You** if **you** are aged **85** or over.

## Conditions Which Apply To The Whole Policy

1. **You** are a **resident** of the European Union including British Forces Posted Overseas (BFPO).
2. **YOUR DUTY:-**
  - (a) **You** check with **Your** doctor on the advisability of making the journey if **You** have any pre-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. Cover will not be given for any pre-existing medical condition unless declared to **Us** and agreed by **Us** in writing prior to effecting this insurance, please refer to the 'Health' section of this policy
  - (b) **You** are not aware of any circumstances known at the time **You** purchase this insurance which are likely to cause cancellation or **Abandonment** of **Your** journey or trip. This includes where **You** are aware of any existing sickness or injury of any **Immediate Relative** and/or **Close Relative** and/or **Close Business Associate** which if this sickness or injury continued or deteriorated would mean **You** would have to cancel or **Abandon Your** journey or trip.
  - (c) **You** must provide **Us** with full and accurate information which is likely to influence **Us** in the assessment or acceptance of **Your** insurance. If **You** have any doubt about what **You** need to tell **Us** please contact the intermediary who arranged this insurance for **You** or **Us**
  - (d) **You** must at all times act in a reasonable manner to prevent or minimise a claim.
  - (e) obtain any recommended vaccines, inoculations or medications prior to **Your** journey or trip.
3. **CHANGE IN RISK** - **You** will immediately advise **Us** of any changed circumstance which become apparent after the date of issue of this insurance and before the commencement of the journey or trip which **You** could reasonably foresee as likely to give rise to a claim under the policy. **We** reserve the right to alter the terms of the Insurance in the light of the changed circumstances. **We** will, subject to the terms, conditions and exclusions of the policy, pay **You** under the Cancellation Section in respect of holiday deposits or charges which **You** have necessarily incurred up to the date of advice to **Us** of the changed circumstances.
4. **You** immediately or as reasonably possible notify the **Assistance Company** of any illness or injury which necessitate admittance to a hospital as an in-patient or before any arrangements are made for repatriation or **Your Abandonment**.

5. No refund of premium shall be allowed after 14 days from the date of issue of this insurance.
6. **You** must notify Fogg Travel Insurance Services Limited in writing as soon as possible after any bodily injury, illness, incident or unemployment or on discovery of any loss or damage which may give rise to a claim under this policy.
7. **You** must also inform **Us** if **You** are aware of any writ, summons or impending prosecution. Every communication relating to a claim must be sent to **Us** without delay.
8. You, or any person acting for You, must not negotiate, admit or repudiate any claim without **Our** written consent.
9. The expense of supplying all certificates, information and evidence which **We** may require will be borne by **You** or **Your** legal representative. When a claim for bodily injury or illness occurs, **We** may request and will pay for, any **Insured** to be medically examined on behalf of **Insurers**. **We** may also request and will pay for, a post mortem examination if any **Insured** dies.
10. **You** get a medical certificate from the doctor who treated **You** when a claim is made for medical reasons. If **You** die, Fogg Travel Insurance Services Limited need to see the death certificate, and any other necessary documents.
11. If at the time of any incident which results in a claim under this policy, there is any other insurance covering the same loss, damage, expense or liability, **We** will pay only **Our** proportionate share. This condition does not apply to the Personal Accident Section.
12. **You** give Fogg Travel Insurance Services Limited all the information, documents, evidence vouchers, receipts and bills **We** need (including details of **Your** household insurance under which **Your Valuables** may need to be insured separately depending on their value or of **Your** Private Medical Insurance). **You** must do this at **Your** own expense.
13. **We** are entitled to take over and conduct in **Your** name the defence or settlement of any Legal Action. **We** may also take proceedings at **Our** own expense and for **Our** own benefit, but in **Your** name, to recover any payment **We** have made under the policy to anyone else.
14. If **You** or any person acting on **Your** behalf makes a claim or statement knowing that it is false or fraudulent including the inflation or exaggeration of a claim or submitting forged or falsified documents then this insurance shall become void and all right to make a claim forfeited. **We** reserve the right to notify the Police of any said claim.

### Important Note

**You** are free to choose the law applicable to this insurance contract. Unless specifically agreed to the contrary this insurance shall be subject to English law.

### Complaints Procedure

**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:  
 General Manager, Fogg Travel Insurance Services Ltd, Crow Hill Drive, Mansfield, Notts. NG19 7AE United Kingdom  
 Telephone: +44 (0)1623 631331 Email: [complaints@foggravelinsurance.com](mailto:complaints@foggravelinsurance.com)  
**Please quote FOGG SINGLE TRIP to help your enquiry to be dealt with speedily.**
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  
 Quality and Improvements Manager, URV, 1 Tower View, Kings Hill, West Malling, ME19 4UY, United Kingdom,  
 Telephone +44 (0)20 3829 6604, who will review the claims office decision.
3. If **you** are still not satisfied with the outcome **you** may ask
  - i) UK residents : The Financial Ombudsman Service (FOS) to review your case. Their address is Exchange Tower, London, E14 9SR, United Kingdom, telephone advice line is +44 (0)800 023 4567 or
  - ii) Republic of Ireland residents: The Consumer Protection Codes, The Insurance Regulator, PO Box 9138, College Green, Dublin 2, telephone: lo-call 1890 777777 or (01) 410 4000 to review the claim.
 but only if **you** have already referred the matter to Fogg Travel Insurance Services Limited. **We** are bound by the Financial Ombudsman's decision, but **you** are not. It does not prejudice **your** legal rights.

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 subject to limited regulation in the United Kingdom by the Financial Conduct Authority. 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: 1 Tower View, Kings Hill, West Malling, ME19 4UY. 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** firm reference number 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)).

### Financial Services Compensation Scheme ("FSCS")

The maximum level of compensation **You** can receive from FSCS is 90% of the claim without any upper limit. The contact details for FSCS are: Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London, EC3A 7QU, United Kingdom Fax: +44 (0)20 7892 7301 Website: <http://www.fscs.org.uk>