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Following payment of premium and receipt thereof by **Us** or an Agent appointed by **Us**, **We** will insure **You** for the benefits subject to the terms, conditions, exclusions and **Limits of Liability** as detailed in this policy and **Schedule of Insurance** whilst on an **International Journey**. The **Schedule of Insurance** and policy wording must be read together as one document. Benefits are limited to the amount as shown in **Your Schedule of Insurance**. **We** have the option to either arrange direct settlement with the service provider, reimburse **You**, replace or repair (or any combination of these) when compensating **You**. In respect of an International Journey Cancellation (Section 04, Sub Section 04.1) cover commences on the date of issue of **Your** policy but no earlier than six months prior to **Your** departure.

#### GENERAL EXCLUSIONS APPLYING TO THE ENTIRE POLICY

**We** will not pay for any claim arising from:

- a. **Your** participation in motorcycling except as a driver or passenger of a motorcycle with an engine capacity of 500cc or less, provided that **You** or the driver hold a current legal motor cycle driver licence. If **You** are the driver of the motorcycle and carrying a passenger, **You** must hold a valid motorcycle drivers licence. If **You** are not carrying a passenger, **You** must hold either a valid motorcycle learners licence or a motorcycle drivers licence;
- b. **Your** participation in quad biking as a driver or passenger of a quad bike with an engine capacity of over 500cc;
- c. **Your** participation in underwater diving involving the use of any artificial breathing apparatus, unless **You** hold a valid open water diving certificate or are diving under the supervision of a qualified instructor;
- d. **Your** participation in any **Hazardous, Competitive or Professional Sport or Activity**, other than activities listed on the Sports Annexure Part II where **You** have paid an additional premium;
- e. search and rescue;
- f. consequential loss, loss of enjoyment or financial loss or expense not specifically and expressly covered in this policy;
- g. **You** travelling against medical advice or **You** travelling with the intention of obtaining medical treatment abroad;
- h. psychiatric, psychological or emotional illness of any kind, suicide, attempted suicide, deliberate self-injury, insanity, depression, stress, the effect of excessive use of alcohol or drugs or any similar syndrome;
- i. the following conditions if **You** are Human Immunodeficiency Virus (H.I.V.) positive or have Acquired Immune Deficiency Syndrome (A.I.D.S.):
  - Kaposi's Sarcoma
  - PneumoCystis Jirovecii
  - Tuberculosis
  - Cytomegalovirus (C.M.V.)
  - Cryptococcal Meningitis
  - Disseminated Herpes and/or Shingles Human
- j. flying or air travel of any kind other than
  - i. on a flight arranged by the **Assistance Company** or;
  - ii. flying as a passenger in any fully licensed passenger carrying aircraft, but not as a member of the crew during the course of **Your** employment, and not for the purpose of undertaking any trade or technical operation therein;
- k. any child born whilst on an **International Journey**;
- l. **Manual Labour** work in connection with a business or a trade, including any person who is contracted or employed to drive a **Commercial Vehicle**;
- m. any unlawful conduct committed by **You** or **You** not being honest and frank with all answers, statements and submissions made in connection with any claim or the purchase of this policy;
- n. **Your** wilful exposure to or active participation in war, invasion, act of foreign enemy, hostilities (whether war be declared or not), **Riot, Civil Commotion**, civil war, rebellion, revolution, insurrection, military or usurped power or any foreseeable act of any person acting on behalf of or in connection with any organisation with activities towards the overthrow by force of any Government (whether with legal authority or not) or any foreseeable act of **Terrorism** or violence;
- o. loss or destruction of, or damage to, any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss or other loss directly or indirectly caused by or contributed to or arising from ionising radiation or contamination by radio activity from nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exclusion only, combustion shall include any self-sustaining process of nuclear fission;
- p. or in any way caused or contributed to by an act of war or **Terrorism** involving the use or release or the threat thereof of any nuclear weapon or device or chemical or biological agent;
- q. **You** travelling with the intention of emigrating;
- r. **You** engaging in or taking part in armed forces service or operations;
- s. **Your** deliberate exposure to exceptional danger (except in an attempt to save human life);
- t. non-admittance into any country by the authorities;



- u. interest accrued on any indemnity payable under this policy;

## GENERAL CONDITIONS APPLYING TO THE ENTIRE POLICY

It is a condition precedent to liability that:

- a. **You** are healthy and fit to travel;
- b. if **You** are travelling on a sea faring vessel the **Assistance Company** will endeavour to provide emergency services from the nearest port or harbour;
- c. if **You** are riding a motorcycle or quadbike, **You** must wear a motorcycle helmet;
- d. the sport activities listed on the Sports Annexure Part I are automatically included in **Your** policy and the activities listed in Part II are covered when **You** pay an additional premium;
- e. claims must be notified promptly and submitted no later than 60 days along with the requested supporting documentation after return to **Your Country of Residence**. The costs of submitting claims and obtaining supporting documentation as **We** may require shall be borne by **You**;
- f. all claims other than Emergency Medical and Related Expenses (Section 01) are only payable in the Republic of South Africa in South African Rand on **Your** return to **Your Country of Residence**;
- g. if **You** are Human Immunodeficiency Virus (H.I.V.) positive or have Acquired Immune Deficiency Syndrome (A.I.D.S.), **Your** medical related expenses are restricted to an overall indemnity limit of R500 000;
- h. **You** must observe all of the policy conditions insofar as they relate to anything to be done by **You**;
- i. the Double Premium includes cover for **You**, **Your Travel Companion** and / or **Accompanied Children**;
- j. the policyholders on the Double Policy must have the same departure and return dates;
- k. **Accompanied Children** share in the **Limit of Liability** of their parent/s however the maximum liability per insured person shall not exceed the relevant **Limit of Liability** stated in the **Schedule of Insurance**;
- l. **We** may at **Our** expense and in **Your** name, pursue any actions available to obtain a claim recovery and **You** must provide **Us** with relevant details of any other applicable insurance or cover;
- m. whilst this policy operates on a first response basis, if any claim under this policy is covered by any other policy or policies of insurance or credit card insurance or statutory insurance or medical aid scheme or medical insurance, the cover provided by this policy will be deemed to be in excess of the cover already provided by any of the afore mentioned policies or benefits. This condition does not apply to Accidental Death and Permanent Total Disablement claims (Section 03);
- n. **We** reserve the right to commence or take legal proceedings in **Your** name for the settlement or defence of any claim or to prosecute any other party to recover compensation (including legal costs) in respect of any cover provided by this insurance. Any amount recovered shall belong to **Us**;
- o. where **You** are insured by more than one policy issued by **Us**, **Our** maximum payment will never be more than the maximum **Limit of Liability** as stated on the policy with the highest benefits;
- p. under no circumstance will any payment on the policy exceed the **Limit of Liability** in respect of the particular benefit as stated in the **Schedule of Insurance**;
- q. in all cases the monetary limits shown in the policy are deemed to be South African Rand;
- r. **You** reimburse **Us** within 30 days of receiving a written request to defray any expense for which **We** are not responsible;
- s. this insurance shall be governed by the Laws of the Republic of South Africa. South African courts shall have sole jurisdiction in any dispute and/or legal matter arising hereunder;
- t. any summons, notice or process to be served upon **Us** for the purpose of instituting any legal proceedings against **Us** in connection with this insurance must be served upon Travel Insurance Consultants, The Pavilion, The Wanderers Office Park, 52 Corlett Drive, Illovo, Gauteng, South Africa;
- u. **You** are a resident of Angola, Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and/or Zimbabwe;
- v. **You** are insured for travel in the **Covered Area** as stated on **Your Schedule of Insurance**. The United States of America is excluded unless otherwise stated on **Your Schedule of Insurance**;
- w. **Your International Journey** commences and ends in **Your Country of Residence**;
- x. prior to the issue of the policy **We** reserve the right to increase the excess, charge an additional amount or decline cover at **Our** discretion;
- y. **You** are not aware of any reason why the **International Journey** should be cancelled or abandoned;
- z. the policy must be issued prior to the date of departure from **Your Country of Residence**;
- aa. the excess as shown in the **Schedule of Insurance** is applied to each and every claim;
- bb. cover cannot be granted for a period in excess of 365 days (12 months) per **International Journey**;
- cc. **You** may extend the cover period of **Your** policy, up to the maximum cover period noted in Condition "bb", if no claim has been registered against **Your** policy. **Your** policy must be extended prior to expiry;



- dd. if **You** return to **Your Country of Residence**, prior to the return date stated in the **Schedule of Insurance**, **We** will refund **You** the pro-rata premium according to **Our** premium tranches, for the unexpired portion of **Your International Journey**, calculated from **Your** actual date of return to the return date as stated in **Your Schedule of Insurance**. No refunds will be considered if **You** have registered a claim against **Your** policy. Proof of early return must be submitted with **Your** request for a refund of premium;
- ee. **You** may cancel **Your** policy prior to the departure date of **Your International Journey**. No refund of premium will be considered if **You** have registered a claim against **Your** policy;
- ff. **Our** liability is limited to 365 days from the date of a valid claim in the Period of Insurance;
- gg. the maximum age limit is 69 years inclusive.

## SECTION 01: EMERGENCY MEDICAL AND RELATED EXPENSES

If **You** require emergency medical treatment as a result of accidental bodily injury, illness or disease, **We** will insure **You** for **Reasonable and Customary Medical Expenses** incurred, including hospital and out-patient treatment and prescription medication.

If **You** require emergency dental treatment **We** will insure **You** for **Reasonable and Customary Dental Expenses** up to a limit of R5 000, unless preauthorisation is given by the **Assistance Company**, for the immediate relief of pain and / or emergency repair to restore dental function.

If **You** require medical treatment as a result of malaria, which can reasonably be attributed to being contracted whilst on **Your International Journey**, and manifests itself within 21 days after **Your** return to **Your Country of Residence**, **We** will insure **You** for **Reasonable and Customary Expenses** up to a limit of R5,000.

### 01.1 RELATED EXPENSES

#### 01.1.1 MEDICAL TRANSPORTATION, REPATRIATION AND EVACUATION

If **You** require medical transportation as determined, agreed and arranged by the **Assistance Company**, **We** will pay for **Your** transfer to the nearest most appropriate medical facility to obtain necessary treatment and / or repatriation to **Your Country of Residence**.

#### 01.1.2 COMPASSIONATE EMERGENCY VISIT

If **You** are travelling alone and are hospitalised **We** will pay for reasonable additional travelling and accommodation expenses (three star accommodation and economy class travel expenses but excluding telephone calls, meals, taxis and beverages) necessarily incurred by a family member who on the advice of a medical practitioner appointed by **Us** travels to and remains with **You** until **You** are fit to resume the **International Journey** or return to **Your Country of Residence**, whichever occurs first.

#### 01.1.3 REPATRIATION OF CHILDREN

If **Your Accompanied Children** are left stranded in the event of **Your** hospitalisation, repatriation or death, **We** will arrange and pay for their transportation back to their **Country of Residence** with a qualified escort if necessary.

#### 01.1.4 REPATRIATION OF TRAVEL COMPANION

If **Your Travel Companion** is left stranded in the event of **Your** hospitalisation, repatriation or death, **We** will arrange and pay for their transportation back to their **Country of Residence** with a qualified escort if necessary provided they are also insured by **Us**.

#### 01.1.5 BURIAL, CREMATION OR RETURN OF MORTAL REMAINS

In the event of **Your** death, **We** will pay the reasonable costs in respect of funeral, burial or cremation in the country where **Your** death occurred and/or the reasonable costs of returning **Your** body or ashes to **Your Country of Residence**.

#### 01.1.6 EMERGENCY MEDICAL AS A RESULT OF A SPORTING ACTIVITY

If **You** require emergency medical treatment as a result of accidental bodily injury whilst participating in a sporting activity, **We** will insure **You** for **Reasonable and Customary Medical Expenses** incurred, including hospital and out-patient treatment and prescription medication.

This section applies to the sport activities listed on the Sports Annexure. "Part I" includes activities that are automatically included

at no additional premium. "Part II" includes the activities that are included when an additional premium is paid.

#### 01.1.7 FOLLOW UP TREATMENT IN YOUR COUNTRY OF RESIDENCE

If **You** incur medical expenses whilst on **Your International Journey** and a claim is reported to **Our Assistance Company** prior to **Your** return to **Your Country of Residence**, **We** will reimburse **You** for continuing **Reasonable and Customary Medical Expenses** incurred within 30 consecutive days after **Your** return to **Your Country of Residence**. (Please refer to Section 01: Condition d.)

#### 01.1.8 DAILY HOSPITAL CASH BENEFIT

If whilst on an **International Journey** **You** are hospitalised for 24 consecutive hours or more, **We** will pay **You** the daily inconvenience benefit for each complete 24 consecutive hours **You** remain in hospital.

### SECTION 01: EXCLUSIONS

**We** will not pay for any claim arising from:

- a. pregnancy or childbirth from the 1<sup>st</sup> day of the 26<sup>th</sup> week of pregnancy;
- b. **Pre-Existing Medical Conditions** other than the cover provided under Pre-Existing Emergency Medical and Related Expenses (Section 02);
- c. treatment that **You** or **Your** medical advisors are aware will arise during the **International Journey** or where a medical advisor has advised against travel;
- d. procedures relating to oral hygiene;
- e. investigatory treatment that is not specified by a medical practitioner appointed by **Us** as immediately necessary;
- f. physiotherapy exceeding R2 000 unless treatment is received whilst **You** are hospitalised.

### SECTION 01: CONDITIONS

- a. **You** must obtain **Our** or the **Assistance Company's** prior authorisation before incurring any expenses over R10 000 as soon as reasonably possible. If prior authorisation is not obtained, cover will be limited to what **We** would have paid had **We** been able to instruct **Our** preferred suppliers.
- b. Should the **Assistance Company** determine that **You** are capable of being repatriated to **Your Country of Residence** and **You** choose not to be repatriated then all expenses from that date onwards, will be for **Your** own account.
- c. Should **You** be repatriated or evacuated to **Your Country of Residence**, cover will cease upon hand over to the local medical facility. Expenses incurred in **Your Country of Residence** will be for **Your** own account, with the exception of cover provided under Follow Up Treatment in Your Country of Residence (Sub Section 01.1.7).
- d. In the event of any transport or repatriation arranged by **Us**, **We** reserve the right to utilise **Your** original travel tickets and any refund from unused tickets belongs to **Us**.
- e. Reimbursement for cover in respect of Follow Up Treatment in Your Country of Residence (Sub Section 01.1.7), is in excess of any amount for which **Your** Medical Aid Fund or Medical Insurer is liable. Where **You** do not have a Medical Aid Fund or Medical Insurer, **We** will not pay the first R1 000 of each and every claim.
- f. If **You** cannot return to **Your Country of Residence** on the date stated in **Your Schedule of Insurance** due to a valid claim under Emergency Medical and Related Expenses (Section 01) and **Your** policy expires, **We** will automatically extend **Your** policy until such time that **You** are medically fit to return to **Your Country of Residence** as determined by the **Assistance Company**.

### SECTION 02: PRE-EXISTING EMERGENCY MEDICAL AND RELATED EXPENSES

If as a sudden and unexpected and/or acute onset of a pre-existing illness or disease **You** require emergency medical treatment, **We** will insure **You** for **Reasonable and Customary Medical Expenses** incurred as an **Inpatient** whilst in hospital.

#### 02.1 RELATED EXPENSES

##### 02.1.1 MEDICAL TRANSPORTATION, REPATRIATION AND EVACUATION

If **You** require medical transportation as determined, agreed and arranged by the **Assistance Company**, **We** will pay for **Your** transfer to the nearest most appropriate medical facility to obtain necessary treatment and / or repatriation to **Your Country of Residence**.

##### 02.1.2 COMPASSIONATE EMERGENCY VISIT

If **You** are travelling alone and are hospitalised **We** will pay for reasonable additional travelling and accommodation expenses (three star accommodation and economy class travel expenses but excluding telephone calls, meals, taxis and beverages)



necessarily incurred by a family member who on the advice of a medical practitioner appointed by **Us** travels to and remains with **You** until **You** are fit to resume the **International Journey** or return to **Your Country of Residence**, whichever occurs first.

### 02.1.3 REPATRIATION OF CHILDREN

If **Your Accompanied Children** are left stranded in the event of **Your** hospitalisation, repatriation or death, **We** will arrange and pay for their transportation back to their **Country of Residence** with a qualified escort if necessary.

### 02.1.4 REPATRIATION OF TRAVEL COMPANION

If **Your Travel Companion** is left stranded in the event of **Your** hospitalisation, repatriation or death, **We** will arrange and pay for their transportation back to their **Country of Residence** with a qualified escort if necessary provided they are also insured by **Us**.

### 02.1.5 BURIAL, CREMATION OR RETURN OF MORTAL REMAINS

In the event of **Your** death, **We** will pay the reasonable costs in respect of funeral, burial or cremation expenses in the country where **Your** death occurred and/or the reasonable costs of returning **Your** body or ashes to **Your Country of Residence**.

## SECTION 02: EXCLUSIONS

**We** will not pay for any claim arising from:

- a. pregnancy or childbirth from the 1<sup>st</sup> day of the 26<sup>th</sup> week of pregnancy;
- b. treatment that **You** or **Your** medical advisors are aware will arise during the **International Journey** or where a medical advisor has advised against travel;
- c. investigatory treatment that is not specified by a medical practitioner appointed by **Us** as immediately necessary;
- d. expenses **We** are prohibited by law from paying in terms of any current legislation;
- e. a **Terminal Prognosis** diagnosed as such prior to the departure of **Your International Journey**.

## SECTION 02: CONDITIONS

- a. **You** must obtain **Our** or the **Assistance Company's** prior authorisation before incurring any expenses over R10 000 as soon as reasonably possible. If prior authorisation is not obtained, cover will be limited to what **We** would have paid had **We** been able to instruct **Our** preferred suppliers.
- b. Should the **Assistance Company** determine that **You** are capable of being repatriated to **Your Country of Residence** and **You** choose not to be repatriated then all expenses from that date onwards, will be for **Your** own account.
- c. Should **You** be repatriated or evacuated to **Your Country of Residence**, cover will cease upon hand over to the local medical facility. Expenses incurred in **Your Country of Residence** will be for **Your** own account.
- d. In the event of any transport or repatriation arranged by **Us**, **We** reserve the right to utilise **Your** original travel tickets and any refund from unused tickets belongs to **Us**.
- e. **You** must be admitted to hospital as an **Inpatient** in order to claim under this section. A hospital admission note must be issued when **You** are admitted to the hospital or medical facility and a discharge note must be issued when **You** leave the hospital or medical facility.
- f. If **You** are Human Immunodeficiency Virus (H.I.V.) positive or have Acquired Immune Deficiency Syndrome (A.I.D.S.), **Your** medical related expenses are restricted to an overall indemnity limit of R500 000.
- g. Pre-Existing Emergency Medical and Related Expenses Cover (Section 02) is in excess of the cover already provided by other policies of insurance, Credit Card Insurance, Statutory Insurance or Medical Aid Schemes or Medical Insurance.

## SECTION 03: ACCIDENTAL DEATH AND PERMANENT TOTAL DISABLEMENT

If **You** suffer bodily injury by accidental, external, violent and visible means which directly and independently of any other cause, results within twelve months in Death or **Permanent Total Disablement** (as detailed in the schedule below) **We** will pay the appropriate compensation to **You**, **Your** estate or nominated beneficiary in accordance with the Schedule of Benefits below.

If **You** suffer an injury or die as a direct result of exposure to the elements, resulting from a mishap to the conveyance in which **You** are travelling, **We** will pay the appropriate compensation to **You**, **Your** estate or nominated beneficiary.

If **You** disappear and it is reasonable for **Us** to believe that **You** may have died due to accidental bodily injury, **We** will pay the appropriate compensation to **Your** estate or nominated beneficiary. Payment is conditional upon a waiting period of 12 months and receipt of a Presumption of Death order from the Court and the person/s to whom such sum is to be paid have signed an

undertaking to refund such sum to **Us** if **You** are subsequently found to be alive.

## SCHEDULE OF BENEFITS

Percentage of **Limit of Liability**

1. Death 100%
2. **Permanent Total Disablement:**  
Scale of **Permanent Total Disablement:**
  - 2.1.1 Loss by physical separation or permanent total loss of use at or above the wrist or ankle of one or more limbs -100%
  - 2.1.2 Total, permanent and irrecoverable loss of hearing in one ear - 50%
  - 2.1.3 Total, permanent and irrecoverable loss of hearing in both ears - 100%
  - 2.1.4 Total, permanent and irrecoverable loss of sight in one eye - 50%
  - 2.1.5 Total, permanent and irrecoverable loss of sight in both eyes - 100%
  - 2.1.6 Permanent and total loss of speech - 100%

## SECTION 03: EXCLUSIONS

**We** will not pay for any claim resulting from:

- a. travel in any single engine aircraft;
- b. travel in any helicopter unless when utilised as a connecting flight by a scheduled airline.

## SECTION 03: CONDITIONS

- a. In the event of compensation becoming payable under more than one benefit, the total amount payable shall not exceed 100% of the **Limit of Liability** for each Insured person.
- b. In the event of travel in any chartered aircraft with more than 20 seats, the **Limit of Liability** is restricted to 25% in respect of each Insured person.
- c. In the event of the death of a minor child, the limit of compensation is subject to the amount legislated by law at the time of the death.

## SECTION 04: INTERNATIONAL JOURNEY CANCELLATION, INTERNATIONAL JOURNEY CURTAILMENT, INTERNATIONAL JOURNEY EXTENSION, MISSED CONNECTION, REPLACEMENT AIRFARE, TRAVEL DELAY, WEATHER CONDITIONS, TRAVEL SUPPLIER INSOLVENCY and DENIED VISA

### SECTION 04.1: INTERNATIONAL JOURNEY CANCELLATION

**We** will pay for or reimburse **You** the non-refundable portions of travel or accommodation arrangements or for which **You** are legally liable, if it is necessary for **You** to cancel **Your International Journey** prior to departure as a result of one of the following:

1. Unforeseen, unexpected and sudden death, illness or injury of **You, Your Travel Companion, Your Immediate Family, Business Associate** or the person with whom **You** intended to stay with abroad. Medical reasons for cancellation must not be relating to a **Pre-Existing Medical Condition**.
2. **Hijack, Riot, Strike** or **Civil Commotion** causing direct cancellation and/or delayed departure of **Your** transport.
3. **Traumatic Event** that occurs within 14 days of your departure.
4. Retrenchment or redundancy.
5. Accidental damage or burglary to **Your** main residence resulting in a loss in excess of R100 000 within 30 days prior to departure.
6. Theft or loss of **Your** or **Your Travel Companions** travel documentation causing unavoidable cancellation.
7. A **Terrorist** incident within 14 days of **Your** departure, in the same city noted on **Your** prepaid itinerary.

### SECTION 04.1.1: UNSPECIFIED EVENTS

**We** will pay for or reimburse **You** the non-refundable portions of travel or accommodation arrangements or for which **You** are legally liable, for any other cause outside **Your** control that is not specified above in Section 04.1, which requires **You** to cancel **Your International Journey** 48 hours or more prior to departure. **Your** policy must be purchased within 48 hours of making full or part payment of **Your** travel bookings.

This benefit will only appear on **Your Schedule of Insurance**, if **You** qualify as per the terms above.

**You** must provide proof of payment when making a claim under this Section.





## SECTION 04.2: INTERNATIONAL JOURNEY CURTAILMENT

If it is necessary for **You** to curtail **Your International Journey** as a result of one of the following, **We** will pay for or reimburse **You** the non-refundable portions of travel or accommodation arrangements or for which **You** are legally liable and the reasonable additional travel and accommodation expenses (3 star accommodation and economy class travel expenses) incurred by **You** to return to **Your Country of Residence**:

1. Unforeseen, unexpected and sudden death, illness or injury of **You**, **Your Travel Companion**, **Your Immediate Family**, **Business Associate** or the person with whom **You** intended to stay with abroad. Medical reasons must not be relating to a **Pre-Existing Medical Condition**.
2. **Hijack, Riot, Strike** or **Civil Commotion** causing direct cancellation and/or delayed departure of **Your** transport.
3. A **Traumatic Event** whilst **You** are on **Your International Journey**.
4. Retrenchment or redundancy.
5. Accidental damage or burglary to **Your** main residence resulting in a loss in excess of R100 000.
6. Theft or loss of **Your** or **Your Travel Companions** travel documentation causing unavoidable curtailment.
7. A **Terrorist** incident occurring whilst **You** are on **Your International Journey** in the same city noted on **Your** prepaid itinerary.

### SECTION 04.2.1: UNSPECIFIED EVENTS

**We** will pay for or reimburse **You** the non-refundable portions of travel or accommodation arrangements or for which **You** are legally liable, for any other cause outside **Your** control that is not specified above, in Section 04.2, which requires **You** to curtail **Your International Journey** 48 hours or more prior to departure. **Your** policy must be purchased within 48 hours of making full or part payment of **Your** travel bookings.

This benefit will only appear on **Your Schedule of Insurance**, if **You** qualify as per the terms above.

**You** must provide proof of payment when making a claim under this Section.

## SECTION 04.3: INTERNATIONAL JOURNEY EXTENSION

If it is necessary for **You** to extend **Your International Journey** as a result of one of the following, **We** will pay for or reimburse **You** the non-refundable portions of travel or accommodation arrangements or for which **You** are legally liable and the reasonable additional travel and accommodation expenses (3 star accommodation and economy class travel expenses) incurred by **You** to return to **Your Country of Residence**:

1. Unforeseen, unexpected and sudden death, illness or injury of **You**, **Your Travel Companion**, **Your Immediate Family**, **Business Associate** or the person with whom **You** intended to stay with abroad. Medical reasons for cancellation must not be relating to a **Pre-Existing Medical Condition**.
2. **Hijack, Riot, Strike** or **Civil Commotion** causing direct cancellation and/or delayed departure of **Your** transport.
3. A **Traumatic Event** occurring whilst **You** are on **Your International Journey**.
4. Theft or loss of **Your** or **Your Travel Companions** travel documentation causing unavoidable extension.
5. A **Terrorist** incident occurring whilst **You** are on **Your International Journey** in the same city noted on **Your** prepaid itinerary.

### SECTION 04.3.1: UNSPECIFIED EVENTS

**We** will pay for or reimburse **You** the non-refundable portions of travel or accommodation arrangements or for which **You** are legally liable, for any other cause outside **Your** control that is not specified above, in Section 04.3, which requires **You** to extend **Your International Journey** 48 hours or more prior to departure. **Your** policy must be purchased within 48 hours of making full or part payment of **Your** travel bookings.

This benefit will only appear on **Your Schedule of Insurance**, if **You** qualify as per the terms above.

**You** must provide proof of payment when making a claim under this Section.

## 04.4 MISSED CONNECTION

**We** will pay the extra cost of economy class transportation to continue with **Your** original itinerary if **You** miss **Your** connecting scheduled transportation. **We** will only pay these costs if there are 3 hours or more allowed between **Your** original scheduled arrival time and the scheduled departure time of **Your** connecting transportation in **Your** original itinerary.



#### SECTION 04.4: EXCLUSION

We will not pay for any claim arising from:

- a. missed connection if the carrier is liable or makes alternative arrangements at their cost.

#### 04.5 REPLACEMENT AIRFARE

If as a result of accidental bodily injury, illness or disease and as determined, agreed and arranged by the **Assistance Company**, We repatriate **You** back to **Your Country of Residence** with more than 50% of **Your International Journey** outstanding or 5 days whichever is greater, or if **You** are hospitalised for more than 50% of **Your International Journey** or 5 days whichever is greater, then We will reimburse **You** the cost of an economy class airfare up to the value of **Your** original tickets, for **You** to undertake a new **International Journey**.

#### 04.6 TRAVEL DELAY

If **Your** scheduled **Public Conveyance** transport is delayed for at least 6 hours, We will reimburse **You** for reasonable additional expenses incurred for meals, drinks, travel costs, accommodation and the like if **Your** carrier does not provide them. This excludes prepaid accommodation and travel expenses.

This is not a cash benefit and **You** must therefore provide **Us** with receipts for all purchases when making a claim under this Section.

#### 04.7 WEATHER CONDITIONS

If **Your** scheduled **Public Conveyance** transport is cancelled and/or **Your** pre-paid accommodation is damaged to an uninhabitable extent as a direct result of **Weather Conditions**, We will reimburse **You** the non-refundable portions of travel and/or accommodation arrangements paid by **You** or for which **You** are legally liable and the reasonable additional travel and accommodation expenses (three star accommodation and economy class travel expenses) incurred by **You**.

This is not a cash benefit and **You** must provide **Us** with receipts for all purchases when making a claim under this Section.

#### 04.7: CONDITIONS

- a. A written statement must be obtained from the appropriate authority confirming the reason for the **Public Conveyance** transport being cancelled.
- b. Written confirmation must be obtained from the appropriate authority confirming that the accommodation is uninhabitable;
- c. Any claim will be deemed to be in excess of the cover provided by the transport and/or accommodation provider.

#### 04.8 TRAVEL SUPPLIER INSOLVENCY

We will reimburse **You** the **Irrecoverable Loss** if **Your International Journey** is cancelled prior to departure or the additional costs for **You** to return to **Your Country of Residence** if **Your International Journey** is curtailed, as a direct result of:

- a. **Bankruptcy** and/or **Financial Default** of the **Travel Supplier** through whom **You** booked and purchased **Your Travel Arrangements**, resulting in the complete cessation of services and if no alternative **Travel Arrangements** is provided.

#### 04.8 EXCLUSIONS

We will not pay for any claim arising from:

- a. cancellation or curtailment of **Your International Journey** arising directly or indirectly from circumstances known to **You** or **Your** agent prior to the booking of **Your International Journey** or purchasing **Your** travel insurance policy;
- b. additional costs incurred if **You** fail to notify **Us** immediately of the cancellation or curtailment of **Your International Journey**;
- c. expenses if **Your Travel Arrangements** forms part of a tour operator package and/or an inclusive package.

#### 04.8: CONDITIONS

- a. If **Your Travel Arrangements** were paid via an agent and not directly to the **Travel Supplier** who is in **Financial Default** and/or **Bankruptcy**, the agent must prove that the full costs were paid on **Your** behalf to the **Travel Supplier**.
- b. **Your Travel Arrangements** must have been booked within Angola, Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia or Zimbabwe prior to **Your** departure.
- c. There was no public warning 14 days before the purchase of this policy that this was likely to occur.
- d. Any claim will be deemed to be in excess of the cover provided by any other policy or policies of insurance or credit card



or statutory insurance.

#### 04.9: DENIED VISA

If **You** visa is denied resulting in **Your International Journey** being cancelled, **We** will pay for or reimburse **You** the non-refundable portions of travel or accommodation arrangements for which **You** are legally liable.

#### 04.9: EXCLUSIONS

**We** will not pay for any claim arising from:

- a. the costs of **Your** visa application and all associated costs.

#### 04.9: CONDITIONS

- a. **You** are a South African passport holder or a citizen or resident of or have a work permit for South Africa.
- b. **Your** passport is valid for 6 months after the last day of **Your International Journey**.
- c. **Your** passport must have at least 2 blank adjacent pages, for visa stamps.
- d. It is applicable to applications for tourist and/or business visas only.
- e. All **Your** documents must be in order as per the Embassy specific requirements.
- f. **You** must not have a criminal record.
- g. **Your** application must be made timeously, within the minimum number of days as stipulated by the Embassy.
- h. **Your** travel insurance policy must be purchased prior to **Your** visa application to the Embassy.

### SECTION 04: EXCLUSIONS

**We** will not pay for any claim arising from:

- a. **Your** disinclination to travel or **Your** financial circumstances;
- b. the inability of any tour operator or wholesaler to complete arrangements for a group due to a deficiency in the number of persons required to commence or complete any part of the tour;
- c. default of any transport, or accommodation provider, travel agency or tour operator, or any person acting as an agent of **Yours**, with the exception of cover provided under Travel Supplier Insolvency (Section 04.8);
- d. consequential loss;
- e. pregnancy or childbirth from the 1st day of the 26th week of pregnancy;
- f. costs of resuming the **International Journey** other than the costs allowed for under Replacement Airfare (Section 04.5);
- g. vascular, cardiovascular or cerebrovascular conditions if **You, Your Travel Companion**, a member of **Your Immediate Family, Business Associate** or the persons with whom **You** had intended to stay are over the age of 69 years. This exclusion does not apply to Section 04.1.1, 04.2.1 and 04.3.1;
- h. the cancellation of the **International Journey** on request of **Your Spouse**, parent or employer;
- i. government prohibition or **You** not having the required and/or valid and/or correct travel documents or visas;
- j. any omission to comply with health requirements of any country to be visited by **You**;
- k. **Your** failure to check-in or board at the correct prescribed time for **Your** scheduled transport services;
- l. **Hijack, Riot, Strike or Civil Commotion** for which there was a public warning 14 days or more prior to purchasing **Your** policy;
- m. retrenchment or redundancy if **You** are self-employed or if **You** take voluntary retrenchment;
- n. a **Terrorist** incident that occurs in the same city within 60 days;
- o. cancellation or curtailment for medical reasons not deemed necessary by a medical practitioner;
- p. any expenses incurred if **You** were aware at the time of applying for **Your** policy of any reason why the **International Journey** should be cancelled or curtailed;
- q. any expenses incurred when an **International Journey** is booked or undertaken against the advice of a medical practitioner or where the purpose of the **International Journey** is to receive medical treatment or advice.

### SECTION 05: PERSONAL LIABILITY

If **You** become legally liable for accidental death, accidental bodily injury or illness of any person or loss or damage to property, **We** will pay for claims made against **You**. This amount includes any legal costs recoverable from **You** by the claimant/s and other expenses incurred with **Our** consent but shall never exceed the **Limit of Liability** stated in the **Schedule of Insurance**.

#### SECTION 05: EXCLUSIONS

**We** will not pay for any claim arising from:

- a. liability arising from **Your** wilful, malicious or criminal activity;



- b. liability for damage to property which is in **You** care, custody or control;
- c. any liability where indemnity is provided under any other insurance;
- d. liability for death, bodily injury or illness of any member of **Your Immediate Family, Travelling Companion, Business Associate** or an employee (or deemed by law to be an employee) of **You** or **Your** business;
- e. liability arising from the conduct by **You** of any profession, trade or business or the use or ownership by **You** of any mechanically propelled vehicle, aircraft or waterborne craft;
- f. liability that arises under a contract or agreement entered into by **You**, but not excluding liability which would have attached in the absence of such an agreement;
- g. liability for fines, penalties or punitive damages.

#### SECTION 05: CONDITIONS

- a. No admission, offer, promise or payment shall be made by **You** without **Our** written consent.
- b. **We** shall be entitled, if **We** so desire, to take over and conduct in **Your** name, the defence and/or settlement of any claim, or to prosecute in **Your** name, for **Our** own benefit, any claim for indemnity or damages or otherwise against any person and shall have full discretion in conducting such proceedings or in settling any claim.
- c. **We** may at any stage of the proceedings pay to **You** the full amount of **Our** liability under this policy in respect of any claim and shall thereupon not be responsible for any loss alleged to have been sustained in consequence conduct in connection with the prosecution of such claims or proceedings and shall have no further liability to **You** under this section.

#### SECTION 06: HIJACK AND HOSTAGE OR WRONGFUL DETENTION

If the transport in which **You** are travelling is **Hijacked** and **You** are held hostage or if **You** are wrongfully detained **We** will pay **You** the daily inconvenience benefit.

#### SECTION 06: EXCLUSION

**We** will not pay for any claim arising from:

- a. **You** being held hostage or being wrongfully detained by any member of **Your Immediate Family, Relative, Travel Companion, Business Associate**, employer or employee.

#### SECTION 07: LEGAL EXPENSES

If **You** are imprisoned or threatened with imprisonment, **We** will assist **You** in locating and appointing legal counsel and pay for legal expenses incurred by **You**.

#### SECTION 07: EXCLUSIONS

**We** will not pay for any claim arising from:

- a. legal practitioners not licensed or authorised to provide counsel;
- b. the pursuit of a claim against a tour operator, travel agent, **Assistance Company**, conveyance carrier, **Us** or any agent of **Ours** or **Our Assistance Company**;
- c. legal advice or expenses incurred as a result of a legal action brought against **You** or **Us**, by a **Spouse, Accompanied Children, Relative, Business Associate** or employee of **Yours**;
- d. any criminal or illegal act intentionally committed by **You**.

#### SECTION 08: LUGGAGE, CASH AND TRAVEL DOCUMENTS

##### 08.1 LUGGAGE

If **Your** luggage, clothing or **Personal Effects** are accidentally lost, stolen or damaged **We** will indemnify **You** by payment, replacement or repair (at **Our** option) subject to the following:

1. there is a limit of 25% of the insured sum for any single item of luggage or **Personal Effects**, unless otherwise stated. If additional luggage cover has been purchased, the single item limit will apply to the original insured benefit;
2. a camera, its lenses and fittings and the camera case shall be deemed to be a single item;
3. a mobile phone / satellite phone and its fittings (including photographic fittings) shall be deemed to be a single item and is limited to R2 000;
4. spectacles, sunglasses, contact lenses are limited to R1 500 per pair;



5. golf clubs and golf equipment shall be deemed to be a single item;
6. jewellery and its attachment shall be deemed a single item and a valuation certificate or proof of purchase must be provided. If a valuation certificate or proof of purchase is not provided, **You** will be limited to R2 500;
7. a laptop and accessories, including but not limited to battery charger, adapter and case, shall be deemed to be a single item;
8. a Tablet Personal Computer and accessories, including but not limited to battery charger, adapter, external keyboard and case, shall be deemed to be a single item.

## 08.2 CASH AND TRAVEL DOCUMENTS

**We** will reimburse **You** in respect of accidental loss of or damage to personal cash (meaning bank and currency notes and coins), and non-refundable accommodation vouchers, prepaid and non-refundable entertainment tickets, the reissuing cost of existing travel tickets, traveller's cheques, credit cards, visas, passports and vouchers.

## SECTION 08: EXCLUSIONS

**We** will not pay for any claim arising from:

- a. delay, detention, destruction or confiscation by customs officials or other authorities;
- b. **Your** contractual obligations resulting from a mobile or satellite phone;
- c. loss or damage to a mobile or satellite phone and its fittings unless personally carried with **You**;
- d. wear and tear, mildew, rust or corrosion, the action of insects, moth or vermin, or clothing or **Personal Effects** being cleaned, dry cleaned, dyed, altered or repaired;
- e. loss or damage to fragile or brittle articles unless caused by fire or accident to the transport in which they are being carried;
- f. theft from an unattended vehicle unless such property is securely contained in a compartment of the vehicle that is not visible to passers-by and entry to the vehicle is gained by visible, forcible and violent means;
- g. mechanical or electrical breakdown or derangement;
- h. loss or damage to bonds, stamps, negotiable instruments, manuscripts, deeds, securities of any kind or bullion;
- i. loss or damage to sporting equipment or tools of trade whilst in use;
- j. loss or damage to unaccompanied luggage.

## SECTION 08: CONDITIONS

- a. **You** must always exercise reasonable care for the safety, security and supervision of property at all times and must not leave property in an unattended public place, unlocked building or unattended unlocked vehicle;
- b. **You** must take all reasonable precautions to minimise any loss and not abandon any damaged property;
- c. **You** must always attempt to make a recovery from the transport carrier and never leave an airport or station with a damaged suitcase and/or one that has been tampered with and/or had items removed or damaged, unless it has been reported to the carrier and a written report obtained;
- d. Any claim will be deemed to be in excess of cover provided by the transport carrier;
- e. **You** must report all losses within 48 hours to the local police authorities in the area where the loss occurred and provide **Us** with a written acknowledgement of the report contained;
- f. All jewellery, cash and documents must be carried on **You** or locked in a safety deposit box;
- g. Any electronic equipment (including but not limited to cameras, cellular phones, satellite phones, navigation systems, laptops, tablet personal computers and/or eReaders) must accompany **You** as hand / cabin luggage.

## SECTION 09: LUGGAGE DELAY

If **Your** luggage has been delayed, misdirected or temporarily misplaced for a period in excess of the period stated in **Your Schedule of Insurance**, **We** will reimburse the cost of purchasing emergency essential items of clothing and **Personal Effects**.

Written proof of delay from the transport provider must be submitted with any claim along with receipts in support of the purchase of emergency, essential items of clothing and **Personal Effects**. This is not a cash benefit.

## SECTION 09: EXCLUSIONS

**We** will not pay for any claim arising from:

- a. **Your** omission for any reason to check in according to the scheduled times;
- b. delay, detention, destruction or confiscation by customs officials or other authorities;



- c. delayed luggage on return to **Your Country of Residence**.

## SECTION 10: HOME CARETAKER SERVICE - (Applicable to residents of the Republic of South Africa only)

In the event of an emergency at home whilst **You** are on an **International Journey**, the **Assistance Company** can be called at any time to provide immediate access to locksmiths, glaziers, electricians, plumbers or any other emergency service providers to secure and effect essential repairs.

## SECTION 11: EMERGENCY SERVICES

- a. **Medical Referral**  
The **Assistance Company** will endeavour to arrange for medical attention and hospitalisation if necessary.
- b. **Medical Monitoring**  
The **Assistance Company** will endeavour to provide continued medical monitoring of **Your** condition if necessary.
- c. **Emergency Medicine**  
If special medicines are unobtainable locally, the **Assistance Company** will endeavour to assist **You** with obtaining and despatching these medicines.
- d. **Evacuation**  
When medical facilities are not available locally, the **Assistance Company** will endeavour to arrange emergency evacuation under constant medical supervision by whatever means necessary to the nearest facility capable of providing the required care.
- e. **Repatriation**  
In the event of **Your** repatriation home, the **Assistance Company** will endeavour to make all necessary arrangements.
- f. **Return of Mortal Remains**  
In the event of death, the **Assistance Company** will endeavour to assist in obtaining clearances and arrangements for the return of the remains.
- g. **Transmission of Urgent Messages**  
The **Assistance Company** will endeavour to transmit urgent messages on behalf of or to **You** in the event of a medical or travel problem.
- h. **Embassy Referral**  
The **Assistance Company** will endeavour to provide **You** with relevant details of diplomatic representatives wherever possible.
- i. **Emergency Travel and Accommodation Arrangements**  
The **Assistance Company** will endeavour to provide all reasonable, possible and practical assistance in arranging for emergency alternative accommodation and onward or return transportation if necessary.
- j. **Legal Assistance**  
The **Assistance Company** will endeavour to locate a source of legal counsel and if necessary an advance of funds for bail. The bail funds or bonds are **Your** responsibility.
- k. **Blood Care Foundation**  
The **Assistance Company** will facilitate obtaining screened blood from the Blood Care Foundation.

## DEFINITIONS

For the purpose of this policy the following definitions apply:

**Accompanied Children:-** **Your** dependent children who are not in full-time employment, and under the age of 21 years or under the age of 25 provided they are in full time education who are travelling with **You** on the **International Journey**.

**Assistance Company:-** The Company whom **We** have authorised to assist, coordinate and negotiate claims.

**Bankruptcy:-** The filing of a petition for voluntary or involuntary bankruptcy in a court of competent jurisdiction.

**Business Associate:-** A partner or director.

**Civil Commotion:-** An uprising amongst a mass of people whose wild or irregular action leads to a serious and prolonged disturbance to civil order and being more than a mere riot but not attaining the status of an actual insurrection.



**Commercial Vehicle:-** A vehicle used by an individual or a business to transport goods or people on public roads.

**Competitive Sport or Activity:-** A sporting activity where **You** have entered into an official, organised event, race or contest.

**Country of Residence:-** The country in which **You** live and which is regarded as **Your** permanent home. If **You** are a temporary resident in a country, that will be deemed to be **Your Country of Residence** for the purpose of this policy, if **You** have citizenship of or a work permit or have been resident in that country for longer than 12 consecutive months.

**Covered Area:-** The territory in which **You** are travelling.

**Financial Default:-** The complete suspension of operations of the **Travel Supplier** due to **Financial Insolvency**, whether or not a **Bankruptcy** petition is filed.

**Financial Insolvency:-** The total cessation or complete suspension of all operations of the **Travel Supplier** due to insolvency, in terms of the Insolvency Act No. 24 of 1936, with or without the filing of a **Bankruptcy** petition, or the total cessation or complete suspension of operations following the filing of a **Bankruptcy** petition, whether voluntary or involuntary, by a **Travel Supplier** which is duly licensed in South Africa. Cover is not extended to the total cessation or complete suspension of operations for losses caused by fraud or negligent misrepresentation by the **Travel Supplier**.

**Hazardous Sport or Activity:-** any pursuit or activity where it is recognised there is an increased risk of serious injury.

**Hijack/ed:-** Using force and violence to seize control of a vehicle, aircraft or sea vessel in transit, either to rob it and/or divert it to an alternative destination.

**Immediate Family:-** **Spouse**, parent, legal guardian, step parent, grandparent, grandchild, in-law (son, daughter or parent), natural or adopted child, brother, sister, step brother, step sister, half-brother or half-sister.

**Inpatient:-** **You** are admitted to a hospital or medical facility for emergency medical treatment that requires at least one overnight stay.

**International Journey:-** A trip during the Period of Insurance for the purpose of proceeding to the point of embarkation or road travel where **Your** destination is outside **Your Country of Residence** and begins when **You** depart from **Your** normal place of residence or place of employment, whichever occurs latest and continues until **You** return to **Your** normal place of residence or place of employment, whichever occurs first, up to a maximum of 365 days, (12 months) from the date of departure. **Your** policy enables **You** to make multiple **International Journeys** during the Period of Insurance as stated on **Your Schedule of Insurance**. The **Limits of Liability** are applicable to the entire period of insurance and not to each **International Journey**; and cover ceases on each return to **Your Country of Residence**. In the event of a medical repatriation or evacuation to **Your Country of Residence** under Section 01.1.1, **Your International Journey** will cease upon hand over to the medical facility in **Your Country of Residence**.

**Irrecoverable Loss:-** Airline ticket, car rental, hotel accommodation, cruise line, rail and coach operator costs, including deposits and charges, paid by **You** which are not recoverable by **You** from any other source, including but not limited to other insurance policies, financial bonds and guarantees provided by the **Travel Supplier** and/or another insurance company and/or a government agency and/or a travel agent and/or a credit card company.

**Limit/s of Liability:-** The maximum amount which **We** will pay **You** in respect of a benefit as stated in the **Schedule of Insurance**.

**Manual Labour:-** Unskilled, semi-skilled and/or skilled physical labour involving working with **Your** hands and/or operation of mechanical and/or non-mechanical and/or electrical machinery and/or equipment and/or tools.

**Permanent Total Disablement:-** Disablement which entirely prevents **You** from following **Your** usual occupation or any other occupation for which **You** are fitted by knowledge and training, which persists for 12 consecutive months and at the end of that period is beyond hope of improvement, and/or **You** being permanently bedridden as a direct result thereof.

**Personal Effects:-** Spectacles, dentures, purses, wallets, cosmetics and other personal effects normally worn or carried on the



person.

**Pre-Existing Medical Conditions:-** Any medical condition for which **You** are receiving treatment at the date of departure of **Your International Journey** or any recurring, or chronic or continuing illness or condition(s) for which **You** received treatment or advice or in respect of which **You** incurred any costs, during the 6 (six) months prior to the departure date of **Your International Journey**.

**Professional Sport or Activity:-** A sport activity where **You** receive monetary compensation as a means of livelihood.

**Public Conveyance:-** A scheduled or chartered conveyance licensed to carry passengers in which **You** are travelling as a fare-paying passenger but excluding any taxis, motorcycles, hired motor vehicles, single engine aircraft and/or helicopters.

**Reasonable and Customary Medical / Dental Expenses:** The charges which:

- a. are medically required for treatment of a covered illness or injury;
- b. do not exceed the charges normally levied for similar treatment, supplies or medical services in the locality where the expenses are incurred;
- c. do not exceed the charges for treatment that would have been made if no insurance existed.

**Relative:-** A person related to **You** by blood or through marriage.

**Riot:-** A form of civil disorder characterised by disorganised groups lashing out in a sudden and intense rash of violence, vandalism or other crime.

**Schedule of Insurance:-** The document detailing the benefits and **Limits of Liability** applicable under this policy.

**Spouse:-** **Your** husband or wife or life partner.

**Strike:-** A concerted cessation of work on the part of a body of workers for the purpose of obtaining some concession from the employer or employees.

**Terminal Prognosis:-** A medical practitioner has declared **You** terminally ill and given **You** a limited life expectancy.

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

**Traumatic Event:-** Serious personal trauma experienced by **You** or a member of **Your Immediate Family** involving kidnap, **Hijack**, rape, armed robbery or violent assault.

**Travel Arrangements:-** Airline ticket and/or car rental and/or cruise line, rail and/or coach transportation and/or hotel accommodation.

**Travel Companion:-** The person who is sharing travel and accommodation arrangements with **You**.

**Travel Supplier:-** A scheduled airline, excluding charter airlines, exiting Angola, Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia or Zimbabwe as well as connecting and/or onward flights forming part of **Your International Journey**, and/or cruise line, rail and/or coach operator and/or car rental company and/or hotel accommodation booked prior to **Your** departure from the afore mentioned countries. The **Travel Supplier** must be a lawful operator.

**Weather Conditions:-** Naturally occurring physical phenomena causing events which can be geophysical, hydrological, climatological or meteorological. Included but not limited to earthquakes, tsunamis, volcanic activity, floods, avalanches, hurricanes, tornados, floods, blizzards and cyclones.

**We, Us, Our, Insurer:-** Travel Insurance Consultants, a division of Santam Limited.





**You, Your:-** The individual named in the **Schedule of Insurance** including **Your Accompanied Children**

### **COMPLAINTS RESOLUTION PROCESS**

Travel Insurance Consultants (TIC) has in place a complaints resolution policy. Should **You** have a complaint a copy of this procedure can be obtained from TIC on + 27 11 521 4000

