

**PRE-EXISTING MEDICAL CONDITION EXCLUSION WAIVER:**

The Pre-Existing Medical Condition Exclusion will be waived if the insurance is purchased within seven calendar days of the initial trip payment. (Day one is the initial trip payment date.) This exclusion applies to all coverages. It applies to the Insured and all the Family Members and Traveling Companions, whether or not they are traveling with the Insured. Please read it carefully.

**PRE-EXISTING MEDICAL CONDITION EXCLUSION:**

The Insurer will not pay for loss or expense incurred as the result of Injury or Sickness of an Insured or Family Member which manifests itself during the 180 days immediately preceding the effective date, unless the condition is controlled through the taking of prescription drugs or medication and remains controlled throughout the 180 day period. A Sickness has manifested itself when **medical care, treatment, or diagnosis** has been given.

The Insurer will waive this exclusion if the Insured meets the following conditions:

1. The Insured purchases the plan within 7 days of making his/her initial trip payment;
2. The amount of Trip Cancellation coverage purchased at that time equals the full cost of all non-refundable trip arrangements;
3. The trip cost per person is no more than \$10,000 and the total cost of the trip is no more than \$40,000. This waiver is not available for policies (for any benefit amounts) if the trip cost per person is greater than \$10,000 and the total cost of the trip is greater than \$40,000;
4. The booking for this trip must be the first and only booking for this travel period and destination;
5. The Insured must be medically able to travel when he/she pays his/her premium.

**24-Hour Emergency Assistance  
Telephone Numbers**

Continental USA.....1-800-549-9037

International.....1-715-345-0505

Livetravel 24-Hour Assistance.....1-800-826-8597

*Be sure to use the appropriate country and city codes when calling.*

**- KEEP THESE NUMBERS WITH YOU WHEN YOU TRAVEL -**

**Blanket Travel Accident Insurance**

This document describes the benefits and basic provisions of the Policy. Read it with care. The Policy is the only contract under which benefits are paid.

**PLEASE READ THIS DOCUMENT CAREFULLY!**

**Insurance Coverage**

Underwritten by the American Home Assurance Company, a New York insurance company, with its principal place of business at 70 Pine Street, New York, New York 10270. It is currently authorized to transact business in all states and the District of Columbia. NAIC No. 19380.

This is only a brief description of the insurance coverage(s) available under policy series Travel Guard Program Policies (TGP policies). The Policy contains reductions, limitations, exclusions, and termination provisions. Full details of the coverage are contained in the Policy. If there are any conflicts between this document and the Policy, the Policy shall govern.



# Protect Assist

## DESCRIPTION OF COVERAGE



## SCHEDULE OF BENEFITS

The benefits are described in detail under "Description of Coverages." All coverages are per person.

### DEFINITIONS

**"Actual Cash Value"** means purchase price less depreciation.

**"Baggage"** means luggage and personal possessions, whether owned, borrowed, or rented, taken by the Insured on the trip.

**"Common Carrier"** means a vehicle or service licensed to carry passengers for hire on a regularly scheduled basis.

**"Complication of Pregnancy"** means a condition whose diagnosis is distinct from pregnancy but adversely affected or caused by pregnancy. It does not include any condition associated with the management of a difficult pregnancy not consisting of a classifiable distinct Complication of Pregnancy.

**"Covered Trip"** means a period of round-trip travel away from Home to a destination outside the Insured's city of residence; the purpose of the trip is business or pleasure and is not to obtain health care or treatment of any kind; the trip has defined departure and return dates specified when the Insured applies; the trip does not exceed 365 days; and the Insured's destination is not to another Home; travel is primarily by Common Carrier and only incidentally by private conveyance. In this Policy, covered trip is also referred to as trip.

**"Default"** means any failure of a provider of travel related services (including any tour operator) to provide the bargained-for travel services or to refund money due the Insured.

**"Dependent"** means: (a) Insured's Spouse; and (b) an unmarried child of an Insured who is under age 25, lives with the Insured in a parent-child relationship and/or who relies on the Insured for financial support (includes natural, step, legally adopted children, and grandchildren traveling without a parent) who accompanies the Insured on the entire trip.

**"Destination"** means the place where the Insured expects to travel on his/her trip.

**"Doctor"** means a government-licensed practitioner of the healing arts including accredited Christian Science Practitioners, acting within the scope of his/her license. The treating Doctor may not be the Insured, "Family Member," or a Traveling Companion.

**"Exotic Vehicle"** means Alfa Romeo, Aston Martin, Auburn, Avanti, Bentley, Bertone, BMC/Leyland, BMW M Series, Bradley, Bricklin, Cosworth, Citroen, Clenet, De Lorean, Excalibre, Ferrari, Fiat, Iso, Jaguar, Jensen, Jensen Healy, Lamborghini, Lancia, Lotus, Maserati, MG, Morgan, Opel, Pantera, Panther, Pininfarina, Rolls Royce, Stutz, Sterling, Triumph, TVR, and Yugo. The Insured must contact Travel Guard customer service at 1-800-549-9037 before renting to

confirm whether the vehicle is covered.

**"Family Member"** means a Traveling Companion(s), and the Insured's or Traveling Companion's Spouse, child, Spouse's child, daughter-in-law, son-in-law, brother, sister, mother, father, grandparents, grandchild, step-brother, step-sister, step-parents, parents-in-law, brother-in-law, sister-in-law, aunt, uncle, niece, nephew, legal guardian, or legal ward. It also means the Insured's business partner. (**"Business Partner"** means someone who is a majority stockholder, managing officer, or majority owner of the company.)

**"Financial Default"** means either (i) the complete suspension of operations due to financial circumstances, whether or not a bankruptcy petition is filed; or (ii) a partial suspension of the operations following a filing of a bankruptcy petition.

**"Home"** means the Insured's principle or secondary place of residence.

**"Hospital"** means a place that: (a) holds a valid license; (b) is run mainly for the care and treatment of sick or injured persons as inpatients; (c) has a staff of one or more Doctors available at all times; (d) provides 24-hour nursing service and has at least one registered nurse on duty at all times; (e) has organized diagnostic and surgical facilities, either on the premises or on a contract basis with another hospital; and (f) is not mainly a clinic, or facility for nursing, rest or convalescence, or a place for the aged, drug addicts, alcoholics or persons with mental or nervous disorders.

**"Initial Trip Payment"** means the date the first deposit is made to the Insured's travel agent toward the cost of his/her trip.

**"Injury"** means a bodily injury, caused by an Accident and resulting directly and independently of all other causes in loss covered by the policy. The Accident must happen while the Insured is covered under this policy. Also requires treatment by a Doctor.

**"Insured"** means the person named on the individual enrollment form.

**"Insurer"** means American Home Assurance Company.

**"Medical Expenses"** means Reasonable and Necessary Expenses of treatment for Injury or Sickness which are provided by a Doctor, dentist, or professional nurse on an emergency or urgent basis which are actually incurred by the Insured.

**"Reasonable and Necessary Expenses"** means the prevailing charge made by most providers of a given service in the geographic area where the service is received. In no event will the Reasonable and Necessary Expenses exceed the actual amount charged.

**"Return Destination"** means the place to which the Insured expects to return from his/her trip.

**"Sickness"** means an illness or disease which requires treatment by a Doctor.

**"Spouse"** means a person to whom the Insured is married, or with whom the Insured lives in a spousal relationship.

**"Strike"** means a stoppage of work (a) announced, organized, and sanctioned by a Labor Union and (b) which interferes with the normal departure and arrival of a common carrier. Included in the definition of Strike is work slowdowns and sickouts.

**"Terrorist Incident"** means an act of violence, other than civil disorder or riot, (that is not an act of war, declared or undeclared) that results in loss of life or major damage to property, by any person acting on behalf of or in connection with any organization which is generally recognized as having the intent to overthrow or influence the control of any government.

**"Travel Agent"** means the Travel Agent, tour operator, or other entity from which the Insured purchases his/her coverage or travel arrangements, and includes all officers, employees, and affiliates of the Travel Agent or tour operator.

**"Traveling Companion"** means a person whose name appears with the Insured on the same Trip arrangement and who, during the entire Trip will share accommodations with the Insured in the same room, cabin, condominium unit, apartment unit, or other lodging.

**"Trip Completion Date"** means the date on which the Insured is scheduled to return to the point where the trip started, or to a different specified Return Destination.

**"Trip Departure Date"** means the date on which the Insured is originally scheduled to leave on his/her trip.

**"Unforeseen"** means not anticipated or expected and occurring after the effective date of the policy.

## INDIVIDUAL INSURANCE

Persons eligible for insurance under the policy are any traveler(s) who purchases his/her insurance through or from a properly licensed agent/agency located in the U.S., who makes enrollment for coverage and pays the premium, providing he/she has not already departed on his/her trip.

**Effective Date:** After premium is paid by the Insured and the Enrollment form is completed and signed, TRIP CANCELLATION BENEFIT will be effective: (a) at 12:01 a.m. on the date after the Enrollment form is postmarked to TRAVEL GUARD® if coverage is purchased by mail; (b) at 12:01 a.m. on the day after the Enrollment form is phoned in to TRAVEL GUARD® if coverage is purchased via phone; (c) at 12:01 a.m. on the day after the Enrollment form is faxed to TRAVEL GUARD® if coverage is purchased by facsimile; or (d) at 12:01 a.m. on the day after the online purchase confirmation date. All other coverages will begin on the later of: (a) the date and time the Insured starts his/her trip, or (b) the scheduled

Trip Departure Date shown on the Enrollment form.

**Termination Date:** All coverage ends on the earlier of: (a) the date the trip is completed; (b) the scheduled Trip Completion Date; (c) the Insured's arrival at the Return Destination on a round trip, or the destination on a one-way trip; or (d) cancellation of the trip covered by the policy.

The policy covers trips up to 365 days in length.

**Extension of Coverage:** All coverage under the policy will be extended, if: (a) the Insured's entire trip is covered by the policy; and (b) the Insured's return is delayed by unforeseeable circumstances beyond his/her control.

If coverage is extended for the above reasons, coverage will end on the earlier of: (a) the date the Insured reaches his/her Return Destination; or (b) seven days after the date the trip was scheduled to be completed.

## GENERAL EXCLUSIONS

These exclusions apply to all benefits. In addition to any exclusions which apply to a particular benefit (called "Additional Exclusions"), this policy does not cover loss caused by:

- (a) intentionally self-inflicted Injury, suicide, or attempted suicide while sane or insane;
- (b) pregnancy or childbirth, or elective abortion, other than the Complications of Pregnancy;
- (c) participation in professional athletic events, motor sport or motor racing including training or practice for the same;
- (d) mountain climbing;
- (e) war or act of war, whether declared or not, civil disturbance or insurrection;
- (f) military duty or service;
- (g) operating or learning to operate any aircraft, as student, pilot, or crew;
- (h) air travel on any air-supported device, other than a regularly scheduled airline or air charter company;
- (i) loss or damage caused by detention, confiscation, or destruction by customs;
- (j) any unlawful acts, committed by the Insured, Family Member, or a Traveling Companion, whether insured or not;
- (k) nuclear reaction, radiation, or radioactive contamination;
- (l) civil disorder or riot;
- (m) if the Trip Departure Date and Trip Completion Date does not reflect the Insured's intent to start and end his/her trip on those dates;
- (n) if the Insured's tickets do not contain specific travel dates (open tickets);
- (o) use of drugs, narcotics or alcohol, unless administered upon the advice of a Doctor; or
- (p) mental, psychological or nervous disorders including

anxiety, depression, neurosis or psychosis.

**MAXIMUM LIMIT OF LIABILITY:** All limits are applied per trip. The Insurer's maximum limit of liability resulting from the same occurrence will be \$10,000,000 under the Travel Guard Program Policies (TGP Policies). If loss for all Insureds from such an occurrence exceeds \$10,000,000 the Insurer will pay each Insured that proportion of the Benefits stated which \$10,000,000 bears to the total loss of all persons the Insurer insures under all travel and flight insurance in force, under the TGP policies. The Insurer will pay no more than \$250,000 per occurrence, under the TGP policies, to or on account of any person insured under the TGP policies.

### **TRIP CANCELLATION AND INTERRUPTION**

The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits. If a trip is delayed, canceled or interrupted for the Insured due to any of the following Unforeseen circumstances: (a) Sickness (see definition), Injury or death of an Insured or Family Member. Injury or Sickness must be so disabling as to reasonably cause a trip to be delayed, canceled or interrupted. If the Insured must cancel or interrupt his/her trip due to Injury or Sickness of a Family Member, it must be because their condition is life-threatening, or because the Family Member requires the Insured's care. Cancellations due to the death of a Family Member or Traveling Companion are covered; (b) Financial Default of an airline, cruiseline, or tour operator resulting in the complete cessation of services. Excluded is the organization from which the Insured purchased his/her trip or this coverage. Financial Default occurring on or before the effective date or less than fourteen days after the effective date (day one is the effective date) will not be covered. **This coverage applies only if insurance was purchased within seven calendar days of initial trip payment.** (Day one is the initial trip payment date.); (c) weather conditions causing delay or cancellation of travel; (d) Strike resulting in complete cessation of travel services; (e) the Insured's home or destination being made uninhabitable by fire, flood, vandalism, or natural disaster; (f) the Insured, or a Traveling Companion being subpoenaed, required to serve on a jury, hijacked or quarantined; or (g) a Terrorist Incident in a City listed on the Insured's itinerary within 30 days of the Insured's scheduled arrival. "**City**" means an incorporated municipality having defined borders and does not include the high seas, uninhabited areas or airspace.

**Trip Cancellation Benefits:** The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits

for trips that are delayed or canceled before the scheduled Trip Departure Date due to the reasons shown at the beginning of this section.

The Insurer will pay for the following: (a) forfeited, non-refundable prepaid deposits or payments, or unused prepaid payments or deposits. If the Insured's claim is covered due to the Pre-Existing Medical Conditions Exclusion Waiver, the Insurer will not pay any cancellation penalties to which the Insured was subject to prior to the purchase of this coverage. If the Insured fails to notify the appropriate travel supplier(s) of his/her cancellation within 72 hours of becoming aware of the need to cancel, the Insurer will pay only the cancellation penalties the Insured was subject to at the time of becoming aware of the need to cancel. If the Insured is medically unable to notify the appropriate travel supplier with 72 hours, he/she must notify them as soon as medically possible; (b) the charge for a single supplement if the Insured's Traveling Companion or traveling Family Member's Trip is cancelled but the Insured's is not.

**Trip Interruption Benefits:** The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits for trips that have been interrupted due to the reasons shown at the beginning of this section.

The Insurer will pay for the following:

- (a) forfeited, non-refundable, unused prepaid payments or arrangements for the Insured's trip if the Insured's trip is interrupted; or
- (b) additional transportation expenses incurred by the Insured, either (i) to the Return Destination; or (ii) from the place that the Insured left the trip to the place that the Insured may rejoin the trip; or
- (c) additional transportation expenses incurred by the Insured to reach the original Trip Destination if the Insured is delayed, and leaves after the Trip Departure Date.

However, the benefit payable under (b) and (c) above will not exceed the cost of economy airfare (or first class if the Insured's original tickets were first class) by the most direct route, less any refunds paid or payable;

- (d) the Insured's additional cost as a result of a change in the per-person occupancy rate for prepaid travel arrangements if a Traveling Companion's trip is interrupted, and the Insured's trip is continued.

**The Insured Must:** Contact Livetravel (1-800-826-8597) as soon as he/she knows the trip is going to be cancelled or interrupted. Failure to do so may affect coverage.

**In addition to the General Exclusions, coverage is not provided for losses caused by or as a result of:**

- (i) carrier-caused delays including an announced, organized, sanctioned union labor Strike that affects public

transportation, unless the policy effective date is prior to when the Strike is foreseeable. A Strike is foreseeable on the date labor union members vote to approve a Strike, except as provided elsewhere in this certificate; (ii) travel arrangements cancelled by an airline, cruise line, or tour operator, except as provided elsewhere in this certificate; (iii) changes by the Insured, a Family Member, or Traveling Companion, for any reason; (iv) financial circumstances of the Insured, a Family Member, or a Traveling Companion; (v) any business or contractual obligations of the Insured, a Family Member, or Traveling Companion; (vi) Default by the person, agency, or tour operator from whom the Insured bought his/her coverage or purchased his/her travel arrangements; (vii) any government regulation or prohibition; (viii) an event which occurs prior to the Effective Date, whether known to the Insured or not; (ix) failure of any tour operator, Common Carrier, person or agency to provide the bargained-for travel arrangements.

**The Insured's Duties in the Event of Loss:**

The Insured must provide the Insurer documentation of the cancellation, interruption or delay and proof of the expenses incurred. The Insured must provide proof of payment for the trip such as cancelled check or credit card statements, proof of refunds received, copies of applicable tour operator or Common Carrier cancellation policies, and any other information reasonably required to prove the loss. Claims involving loss due to Sickness, Injury or death require signed patient (or next of kin) authorization to release medical information and an attending physician's statement. The Insured must provide the Insurer with all unused air, rail, cruise, or other tickets if he/she is claiming the value of those unused tickets.

**TRAVEL DELAY**

The Insurer will reimburse up to \$100 a day to the Maximum Limit shown on the Schedule of Benefits if the Insured's trip is delayed for more than 12 hours for reasonable, additional accommodation and traveling expenses until travel becomes possible. Incurred expenses must be accompanied by receipts. This benefit is payable for only one delay for all Insureds. Travel Delay must be caused by: (a) the Insured being delayed by a traffic accident while en route to a departure; or (b) carrier-caused delay; (c) lost or stolen passports, travel documents, or money; or (d) quarantine; (e) being hijacked; (f) unannounced Strike; (g) inclement weather which prohibits common carrier departure; or (h) natural disaster. Payments for additional accommodation expenses will not exceed \$100 per day per individual, up to the Maximum Limit of Coverage.

**The Insured Must:** Contact Livetravel (1-800-826-8597) as soon as he/she knows his/her trip is going to be delayed more

than 12 hours. Failure to do so may affect coverage.

**LOSS OF BAGGAGE AND TRAVEL DOCUMENTS**

The Insurer will reimburse this benefit, up to the maximum Limit shown on the Schedule of Benefits. The Insurer will pay all direct loss due to Accident to the Insured's Baggage, passports and visas during the Insured's trip. There is a maximum of \$4,000 per traveling group.

**Continuation of Coverage:** If the covered Baggage, passports and visas are in the charge of a charter or Common Carrier, and delivery is delayed, this coverage will continue until such property is delivered to the Insured. This coverage does not include loss caused by the delay.

**Property Not Covered:** The Insurer will not pay for damage or loss of:

- (a) animals;
- (b) bicycles (except when checked with a Common Carrier);
- (c) motor vehicles, aircraft, and other conveyances;
- (d) artificial limbs, false teeth, any type of eyeglasses, sunglasses or contact lenses, hearing aids;
- (e) tickets, keys, money, notes, securities, accounts, bills, currency, deeds, food stamps or other evidences of debt, credit cards and other travel documents (except passports and visas);
- (f) money, stamps, stocks and bonds, postal or money orders;
- (g) property shipped as freight, or shipped prior to the Trip Departure Date; or
- (h) contraband.

**Special Limitation:** The Insurer will not pay more than \$500 for the first item and thereafter, no more than \$250 per item up to the limit of coverage as defined on the Schedule of Benefits. The Insurer will not pay more than \$500 aggregate on all losses to: jewelry, watches, gems, furs, cameras and camera equipment, camcorders, sporting equipment, computers, radios, and other electronic items. Items over \$150 must be accompanied by original receipts. If receipts are not provided, benefits will be reduced.

**Additional Exclusions:** In addition to the General Exclusions, the Insurer will not pay this loss due to: (a) defective materials or craftsmanship; (b) normal wear and tear; (c) deterioration; or (d) rodents, animals or insects.

**Payment of Loss:** The Insured Must: (a) Report theft losses to police or other local authorities as soon as possible; (b) take reasonable steps to protect his/her Baggage from further damage and make necessary and reasonable temporary repairs. The Insurer will reimburse the Insured for those expenses. The Insurer will not pay for further damage if the

Insured fails to protect his/her Baggage; (c) allow the Insurer to examine the damaged baggage and/or the Insurer may require the damaged item to be sent in the event of payment; (d) send sworn proof of loss as soon as possible from date of loss, providing amount of loss, date, time, and cause of loss, and a complete list of damaged/lost items; or (e) in the event of theft or unauthorized use of the Insured's credit cards, the Insured must notify the credit card company immediately to reduce his/her loss. Any items \$150 or more must be accompanied by the original receipt.

### **BAGGAGE DELAY**

The Insurer will reimburse up to the Maximum Limit shown on the Schedule of Benefits for the cost of reasonable, additional clothing and personal articles purchased by the Insured during the trip, if the Insured's Baggage is delayed for more than 24 hours. Incurred expenses must be accompanied by receipts. This does not apply if baggage is delayed after the Insured reaches his/her return destination. The Insurer will also pay the reasonable cost to return the Insured's Baggage to his/her home, up to his/her limit of coverage.

**Payment of Loss:** The Insured must provide documentation of the delay or misdirection of baggage by the Common Carrier and receipts for the emergency purchases.

### **MEDICAL EXPENSE BENEFIT**

The Insurer will pay this benefit, up to the Maximum Limit shown on the Schedule of Benefits. The Insurer will pay for Reasonable and Necessary medical and surgical expenses incurred by the Insured within one year from the date of Injury or Sickness provided initial treatment was received during the trip. The Injury must occur or Sickness must begin while the Insured is covered by the policy.

**Covered Expenses:** The Insurer will pay emergency dental treatment only during a trip. Payment for dental expenses are limited to \$500. Dental coverage does not apply if treatment or expenses are incurred after the Insured has reached his/her return destination regardless of the reason. The treatment must be given by a Doctor or dentist. The Insurer will pay for professional nursing, Hospital charges, X-ray, and ambulance services and prosthetic devices. Physical therapy will be covered up to 90 days after the Insured reaches his/her Return Destination. Benefits payable will not exceed Reasonable and Necessary Expenses for similar services in the geographic area in which the services were rendered.

If the Insured is covered by any other group, blanket health, accident insurance, or assistance plan, and would, as a result, receive total benefits in excess of the expenses actually incurred, the benefits the Insurer will pay will be reduced by

such excess. The Insurer also will not pay for amounts paid or payable under any workers' compensation, disability benefit or similar law, or any services provided by the Insured or a Family Member.

**Additional Exclusions:** In addition to the General Exclusions, coverage is not provided for: (a) routine physical examinations; (b) mental health care; (c) hearing aids, eye glasses, contact lenses, sunglasses, and artificial teeth; (d) routine dental care; (e) treatment arising from alcohol or substance abuse; (f) cosmetic surgery, other than reconstructive surgery when necessary due to an Injury as a result of an Accident which occurs while coverage is in effect; (g) any service provided by the Insured, a Family Member or Traveling Companion.

**Payment of Loss:** The Insured must provide the Insurer with: (a) all medical bills and reports for Medical Expenses claimed; and (b) a signed patient authorization to release medical information to the Insurer.

The Insured Must: Contact TRAVEL GUARD® (1-800-549-9037 or 1-715-345-0505) prior to seeking medical treatment. Failure to do so may affect coverage.

### **EMERGENCY MEDICAL TRANSPORTATION**

The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits. The Insurer will arrange for emergency medical transportation services required by the Insured as the result of any Injury or Sickness during a trip.

**Covered Expenses:** The Insurer will arrange and pay: (a) Reasonable and Customary Expenses required for evacuation to the nearest adequate medical facility or home if medically required. This service will be arranged only if the Insured's Doctor determines that adequate medical treatment is not locally available; (b) up to \$5,000 for Reasonable and Customary escort expenses required by the Insured, if the Insured is disabled during a trip and an escort is recommended, in writing, by a Doctor; (c) Reasonable and Customary services for transportation of the Insured's remains to his/her place of residence if he/she dies during a trip.

Service must be provided by a provider designated by the Insurer. Timely notification by the Insured to the Insurer's designated provider is required.

The insurance provided under this benefit shall be excess of all other valid and collectible insurance or indemnity and shall apply only when such other benefits are exhausted.

**Additional Benefit:** In addition to the above covered expenses, if the Insurer has previously evacuated an Insured to a medical facility, the Insurer will pay his/her airfare costs from that facility to the Insured's Return Destination, within

one year from the Insured's original Trip Completion Date, less refunds from the Insured's unused transportation tickets. Airfare costs will be economy, or first class if the Insured's original tickets are first class. This benefit is available only if it is not provided under another coverage in this policy.

The Insured Must: Contact TRAVEL GUARD® (1-800-549-9037 or 1-715-345-0505) prior to arranging emergency medical transportation. Failure to do so may affect coverage.

### FLIGHT GUARD – FLIGHT ACCIDENT BENEFIT

The Insurer will pay for covered accidental loss of life, hand, foot, or sight within 365 days of an accident while riding as a passenger on or boarding or alighting from a certified passenger Aircraft on any regularly scheduled flight or charter. The amount of this benefit is shown below.

Loss:	Percentage of Principal Sum Payable
Life . . . . .	100%
Both hands or feet, or sight of both eyes . . . . .	100%
One hand and one foot . . . . .	100%
One hand or one foot and sight of one eye . . . . .	100%
One hand . . . . .	50%
One foot . . . . .	50%
Sight of one eye . . . . .	50%

In no event will the Insurer pay more than the Maximum benefit shown on the Schedule of Coverages for all losses due to the same accident. The Insurer may require autopsy where lawful.

If the Insured suffers more than one loss from an Accident, The Insurer will pay only for the loss with the larger benefit.

Loss of a hand or foot means complete severance at or above the wrist or ankle joint. Loss of sight of an eye means complete and irrecoverable loss of sight.

### COLLISION DAMAGE WAIVER

The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits. Coverage does not apply in countries or states where the sale of this insurance is prohibited by law.

If the Insured rents a car while on his/her trip, and the car is damaged due to collision, theft, vandalism, windstorm, fire, hail, flood, or any cause not within the Insured's control while in his/her possession, or the car is stolen while in the Insured's possession and not recovered, the Insurer will pay the lesser of: (a) the cost of repairs and rental charges imposed by the rental company while the car is being repaired; or (b) the actual cash value of the car.

Coverage is provided to the Insured and his/her Traveling Companion, providing the Insured and his/her Traveling Companion are licensed drivers, and are listed on the rental

agreement. This coverage is primary to other forms of insurance or indemnity.

In addition to the General Exclusions, coverage is not provided for loss due to:

- (a) any obligation the Insured or his/her Traveling Companion assume under any agreement (except insurance collision deductible);
- (b) rentals of trucks, campers, trailers, off-road or four wheel drive vehicles, motor bikes, motorcycles, recreational vehicles, or Exotic Vehicles;
- (c) any loss which occurs if the Insured or his/her Traveling Companion are in violation of the rental agreement;
- (d) failure to report the loss to the proper local authorities and the rental car company; or
- (e) damage to any other vehicle, structure, or person as a result of a covered loss.

**The Insured's Duties in the Event of Loss:** The Insured must: take all reasonable, necessary steps to protect the vehicle and prevent further damage to it; report the loss to the appropriate local authorities and the rental company as soon as possible; obtain all information on any other party involved in an Accident, such as name, address, insurance information, and driver's license number; and provide the Insurer all documentation such as rental agreement, police report, and damage estimate.

### PAYMENT OF CLAIMS

**Claim Procedures: Notice of Claim:** The Insured must call the Insurer as soon as reasonably possible, and be prepared with what coverage the loss was under (i.e., Medical Expense), the name of the company that arranged the trip (i.e., tour operator, cruise line, or charter operator), the trip dates, and the amount that the Insured paid. The Insurer will complete the claim form and send it to the Insured for his/her review/signature. This completed form should be returned to Travel Guard Group, Inc., 1145 Clark Street, Stevens Point, Wisconsin 54481. (Telephone 1-715-345-0505 or 1-800-826-7791) Insurer will then send the Insured claim forms.

**Claim Procedures: Proof of Loss:** The claim forms must be sent back to Insurer no more than 90 days after a covered loss occurs or ends, or as soon after that as is reasonably possible. All claims under this certificate must be submitted to Travel Guard no later than one year after the date of loss or insured occurrence or as soon as reasonably possible. If Insurer has not provided claim forms within 15 days after the notice of claim, other proofs of loss should be sent to Insurer by the date claim forms would be due. This proof of loss should include written proof of occurrence, type, and amount of loss.

**Payment of Claims: To Whom Paid:** Benefits paid on account of an Insured's death will be paid to the beneficiary he/she has chosen. This choice must be in writing and filed with the Insurer,

or filed with the Insured or Insured's administrator if Insurer has agreed in advance. If the Insured has not chosen a beneficiary, or if there is no beneficiary alive when he/she dies, Insurer will pay this benefit:

- (1) To his/her spouse, if living.
- (2) If there are none, in equal shares to his/her living children.
- (3) If there are none, in equal shares to his/her living parents.
- (4) If there are none, in equal shares to his/her living brothers and sisters.
- (5) If there are none, to his/her estate.

If a benefit is payable to the Insured's estate, or to a minor or other person who is incapable of giving a valid release, Insurer may pay up to \$500 to a relative or other person who has assumed care or custody of the Insured. Any payment Insurer makes in good faith fully discharges Insurer to the extent of that payment. All other benefits will be payable to the Insured. However, if he/she has assigned his/her benefits, Insurer will honor the assignment, if Insurer has a signed copy of the assignment. A payment made pursuant to such an assignment shall discharge Insurer from further liability under this certificate to the extent of such payment. Under no circumstances shall Insurer be responsible for the validity or sufficiency of any such assignment.

**Payment of Claims: When Paid:** Claims will be paid as soon as Insurer receives complete proof of loss (and verification of age).

**Payment of Claims: To Whom Paid:** Benefits for Medical Expense/Emergency Medical Transportation services may be payable directly to the provider of the services. However, the provider: (a) must comply with the statutory provision for direct payment, and (b) must not have been paid from any other sources. Problems with the insurance? If so, do not hesitate to contact the insurance company or agent to resolve your problem at 1145 Clark Street; Stevens Point, WI 54481 or call at 1-800-826-1300.

## GENERAL PROVISIONS

**Acts of Agents** - No agent or any person or entity has authority to accept service of the required proof of loss or demand arbitration on the Insurer's behalf nor to alter, modify or waive any of the provisions of this policy.

**Choice of Law** - The terms, conditions, and provisions of this policy are governed by the substantive law of the State of Wisconsin, and all disputes hereunder shall be governed and determined by the law of the State of Wisconsin.

**Concealment or Fraud** - The Insurer does not provide coverage for the Insured if the Insured has intentionally concealed or misrepresented any material fact or circumstance relating to this policy or claim.

**Examination Under Oath** - As often as the Insurer may require, the Insured must submit to examinations under oath,

and provide us with receipts, proofs of purchases, or other records.

**Insurer's Recovery Rights** - In the event of a payment under this policy, the Insurer is entitled to all rights of recovery that the Insured, or the person to whom payment was made, has against another. The Insured must sign and deliver to the Insurer any legal papers relating to that recovery, do whatever is necessary to help the Insurer exercise those rights, and do nothing after the loss to harm our rights. When an Insured has been paid benefits under this policy but also recovers from another policy, the amount recovered from the other policy shall be held in trust for the Insurer by the Insured and reimbursed to the Insurer the extent of the Insurer's payment. This provision does not apply in North Carolina.

**Legal Actions** - No one may sue for benefits less than 60 days after due proof of loss is submitted, nor more than 12 months (or the minimum period of time permitted by state law, if greater) after the date claim forms are due.

**Payment of Premium** - Coverage is not effective unless all premium due has been paid to Travel Guard prior to a date of loss or insured occurrence.

**Satisfaction Guaranteed** - The Insurer is committed to providing products and services that will exceed expectations. If the Insured is not completely satisfied, he/she can receive a refund. Requests must be submitted to Travel Guard in writing within three days of the receipt of the policy, provided it is not past the original departure date.

**Termination of the Policy** - Termination of the policy will not affect a claim for loss which occurs while the policy is in force.

**Transfer of Coverage** - Coverage under the policy cannot be transferred by the Insured to anyone else without prior written consent.



## TRAVEL GUARD® ASSISTANCE

All other benefits provided are service benefits, not financial benefits. Any costs associated with benefits not purchased will be paid by the named Insured.

### 24-HOUR MEDICAL ASSISTANCE

**24-Hour Medical Monitoring:** Physicians monitor the Insured's condition by maintaining close contact with the attending physicians, his/her family Doctor, and Family Members.

**Medical Evacuation:** Arrangements for any and all means necessary to transport the Insured back home when medically necessary.

**Emergency Medical Payments:** If a hospital demands a cash deposit or settlement prior to leaving, Travel Guard will assist in arranging the advancement of funds to cover on-site medical expenses.

**Prescription Assistance:** Replacement of lost or stolen medication, through a local pharmacy or special courier.

**Transportation of Dependents:** In the event of hospitalization, arrangements will be made for unattended minors traveling with the Insured to be flown home.

**Family Visit:** If the Insured is hospitalized for ten or more days, Travel Guard will arrange transportation for a Family Member or close friend to visit the Insured.

**Transportation of Mortal Remains:** In the event of death while traveling, arrangements for the return of remains to the place of burial.

### 24-HOUR LEGAL ASSISTANCE

In a legal emergency, referral to a local legal advisor and advance of funds for bail and legal fees.

### 24-HOUR TRAVEL ASSISTANCE

**Travel Documents Assistance:** Travel Guard will help retrieve, report, and reissue lost or stolen travel documents.

**Emergency Cash Transfer:** Travel Guard will facilitate the transfer of funds from the Insured's U.S. bank or credit card or from the account or credit card of a family member.

**Emergency Message Center:** Transmission of emergency messages to family and business associates.

**Interpretation Services:** Travel Guard provides emergency language support or referral to the appropriate local services.

## LIVETRAVEL

Provides 24-hour assistance for emergency travel needs. Allows the Insured to make emergency travel changes such as rebooking flights, making hotel reservations, tracking lost luggage and replacing lost credit cards. Call 1-800-826-8597 for assistance.

## LIVE MESSAGING

Relay of any e-mail or phone message to family, friends, or business associates.

## EMERGENCY CASH TRANSFER

Assistance in coordinating an emergency cash advance.

## PRE-TRIP TRAVEL ADVICE

Around-the-clock access to passport, visa, inoculation, and vaccine requirements; travel advisories; embassy and consulate contacts; travel health advisories; weather and currency information – all for the Insured's planned destination.

Non-insurance services through Travel Guard® Assistance are provided by Travel Guard®.

**Notice to California residents:** This plan contains disability insurance benefits or health insurance benefits, or both, that only apply during your covered trip. You may have coverage from other sources that already provides you with these benefits. You should review your existing policies. If you have any questions about your current coverage, call your insurer or health plan.

**Notice to Florida residents:** The benefits of the policy providing the Insured's coverage is governed by the law of a state other than Florida.

**Notice to Texas residents:** This policy may provide a duplication of coverage already provided by the Insured's personal auto insurance, homeowner's, personal liability policy, or other source of coverage.