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## Summary of cover

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The following is only a summary of the main cover limits. **You** should read the rest of this policy for the full terms and conditions.

Section / Cover	Limit (up to)	Excess
1 Emergency medical and associated expenses	£5 million	£65
2 Personal possessions	£200	£65
3 Personal money	£200	£65
<b>Optional covers</b>		
4 Cancellation or curtailment	£5,000	£65 (£25 deposit)
5 Personal liability	£2 million	£65

### Note

Some sections of cover also have extra sub limits, for example the **personal possessions** section has a single article and **valuables** limit.

## Important information

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Thank you for taking out Staysure.co.uk Basics travel insurance.

Your certificate shows the sections of the policy you have chosen, the people who are covered and any special terms or conditions that may apply.

It is very important that you read the whole of this policy before you travel and make sure you understand exactly what is and is not covered and what to do if you need to claim.

If you need to contact us, you should call Staysure.co.uk on 0845 508 9886 email [info@staysure.co.uk](mailto:info@staysure.co.uk) or write to Lakeview House, 53 Tanfield Lane, Rushmere, Northampton NN1 5RN.

### Insurer

Your Staysure.co.uk Basics travel insurance is underwritten by Mondial Assistance Europe N.V. and administered in the **United Kingdom** by Mondial Assistance (UK) Limited.

### How your policy works

Your policy and certificate is a contract between **you** and **us**. **We** will pay for any claim **you** make which is covered by this policy and happens during the **period of insurance**. Unless specifically mentioned the benefits and exclusions within each section, apply to each **person insured**. Your policy does not cover all possible events and expenses.

Certain words have a special meaning as shown under the heading 'Definition of words'. These words have been highlighted by the use of bold print throughout the policy document.

### Telling us about relevant facts

Before **you** travel **you** must tell **us** about anything that may affect **your** cover. If **you** are not sure whether something is relevant, **you** must tell **us** anyway. **You** should keep a record of any extra information **you** give **us**. If **you** do not tell **us** about something that may be relevant, **your** cover may be refused and **we** may not cover any related claims.

### Pre-existing medical conditions

Your policy contains restrictions regarding pre-existing medical problems concerning the health of the people travelling and of other people upon whose health **your journey** may depend. Please see section 'Health declaration and health exclusions' on pages 8 to 12 for more information.

### Cancellation rights

If **your** cover does not meet **your** requirements, please notify Staysure.co.uk within 14 days of receiving **your** certificate and return all **your** documents for a refund of **your** premium.

**You** can contact Staysure.co.uk at Lakeview House, 53 Tanfield Lane, Rushmere, Northampton NN1 5RN. Telephone **0845 508 9886**  
Email [info@staysure.co.uk](mailto:info@staysure.co.uk).

If during this 14 day period **you** have travelled, made a claim or intend to make a claim then **we** can recover all costs that **you** have used for those services.

Please note that **your** cancellation rights are no longer valid after this initial 14 day period.

### Policy excess

Under some sections of **your** policy, **you** will have to pay an **excess**. This means that **you** will be responsible for paying the first part of the claim for each **person-insured**, for each section for each incident. The amount **you** have to pay is the **excess**.

## Data protection

Information about **your** policy may be shared between Staysure.co.uk, Mondial Assistance (UK) Limited and Mondial Assistance Europe N.V. for underwriting purposes.

**You** should understand that the sensitive health and other information **you** provide will be used by **us, our** representatives (if appropriate), the **insurer**, other insurers and industry governing bodies and regulators to process **your** insurance, handle claims and prevent fraud. This may involve transferring information to other countries (some of which may have limited or no data protection laws). **We** have taken steps to ensure **your** information is held securely.

**Your** information will not be shared with third parties for marketing purposes. **You** have the right to access **your** personal records.

## Financial Services Compensation Scheme (FSCS)

For **your** added protection, the **insurer** is covered by the FSCS. **You** may be entitled to compensation from the scheme if **we** cannot meet **our** obligations. This depends on the type of business and the circumstances of the claim.

Insurance cover is limited up to 100% of the first £2,000 and 90% of the remainder of the claim, without any upper limit.

Further information about the compensation scheme arrangements is available from the FSCS, telephone number **020 7892 7300**, or by visiting their website at **www.fscs.org.uk**.

## Governing law

Unless agreed otherwise, English law will apply and all communications and documentation in relation to this policy will be in English. In the event of a dispute concerning this policy the English courts shall have exclusive jurisdiction.

## Contracts (Rights of Third Parties) Act 1999

**We**, the **insurer** and **you** do not intend any term of this contract to be enforceable by any third party pursuant to the Contract (Rights of Third Parties) Act 1999.

## Renewal of your insurance cover

If **you** have annual multi-trip cover, Staysure.co.uk Limited will send **you** a renewal notice prior to the expiry of the **period of insurance** as shown on **your** certificate.

The terms of **your** cover and the premium rates may be varied by **us** at the renewal date. **We** will give **you** at least 21 days written notice before the renewal date should this happen.

At renewal **you** must tell **us** about relevant facts and check to see that **you** still comply with the Health declaration (see pages 8 to 12) as this may affect the cover provided. If **you** do not comply with the Health declaration, this may invalidate **your** insurance.

## Definition of words

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When the following words and phrases appear in the policy document or certificate, they have the meanings given below. These words are highlighted by the use of bold print.

### Area of cover

**You** will not be covered if **you** travel outside the area **you** have chosen as shown on **your** certificate, unless the reason is for a stopover where **we** will allow a maximum of 24 hours.

- **UK**  
England, Scotland, Wales, Northern Ireland, the Channel Islands and the Isle of Man.
- **Europe**  
**UK**, Continental Europe, Mediterranean Islands, Morocco, Algeria, Tunisia, Libya, Egypt, Israel, Lebanon, Jordan, Syria, Turkey, Madeira, Canary Islands, the Azores, the Republic of Ireland, Iceland, Russia, Estonia, Latvia, Lithuania, Belarus, Ukraine, Moldova and Georgia.
- **Worldwide (excluding USA)**  
Worldwide, excluding United States of America, Canada and all Islands in the Caribbean Sea including the Bahamas.
- **Worldwide (including USA)**  
Any country.

### Business associate

Any person in the **UK** that **you** work closely with, whose absence from work means that the director of **your** business needs **you** to cancel or curtail **your journey**.

### Couple

Two adults who have been permanently living together at the same address for more than six months and who will be travelling together.

### Doctor

A legally qualified doctor holding the necessary certification in the country in which they are currently practising, other than **you** or a **relative**.

### Excess

The amount **we** will deduct for each **person insured**, for each section, for each claim incident. For example a **couple** that both have **personal possessions** stolen from their bag and both incur a medical expense during the same **journey**, will have a total of four excesses deducted.

### Family

Two adults and all of their children (including foster children) aged 17 and under if in full time education. All persons must live at the same address. For annual multi-trip cover, each adult can travel independently, however, all insured children must travel with at least one of the insured adults.

### Hazardous activity

The following activities are automatically covered:

- banana boating, cricket, cycling, deep sea fishing, fell walking, glacier walking, golf, hiking, horse riding (not competitions, show jumping, hunting, eventing, polo or rodeo), jet skiing, marathon running, mountain biking, netball, orienteering, parasailing over water, ringos, running, safari trekking in a vehicle (must be an organised tour), scuba diving to a depth of 30 metres (if **you** hold a certificate of proficiency or **you** are diving with a qualified instructor), snorkelling, surfing, swimming, trekking, wakeboarding, walking, water skiing, windsurfing and zorbing.

There is no cover for:

- any professional sporting activity; or
- any kind of racing except racing on foot; or
- any kind of manual work (other than voluntary manual work not involving the use, installation, assembly, maintenance or repair of heavy electrical, mechanical or hydraulic equipment or working at heights over 3 metres).

**We** may be able to cover **you** for other activities that are not listed. Please contact Staysure.co.uk travel insurance on **0845 508 9886** email **info@staysure.co.uk**. An extra premium may need to be paid.

## Home

**Your** usual place of residence in the **UK**.

## Insurer

Mondial Assistance Europe N.V.

## Journey

A trip that takes place during the **period of insurance** which begins when **you** leave **home** and ends when **you** get back **home** or to a hospital or nursing home in the **UK**, whichever is earlier.

- For single trip cover
  - any other trip which begins after **you** get back is not covered.
  - if **you** are aged 75 or under at the date **your** policy was issued **you** will only be covered for trips that are booked to last no longer than 100 days.
  - if **you** are aged between 76 and 85 inclusive at the date **your** policy was issued **you** will only be covered for trips that are booked to last no longer than 31 days.
- For annual multi-trip cover
  - if **you** are aged 65 or under at the start date of **your** policy **you** will only be covered for trips that are booked to last no longer than 50 days (100 days where the extra premium has been paid and this is shown on **your** certificate).
  - if **you** are aged between 66 and 80 inclusive at the start date of **your** policy **you** will only be covered for trips that are booked to last no longer than 35 days.
  - trips within the **UK** must be for at least 2 nights and have:
    - i pre-booked transport or accommodation; or
    - ii be more than 25 miles from **your home** (unless it involves a sea crossing).
  - **you** will be covered for taking part in **winter sports** activities for up to 17 days in total during the **period of insurance**. This can be extended for up to 31 days in total when extra premium has been paid and this is shown on **your** certificate.
- For long stay cover
  - the following trip limits apply depending on **your** age and destination:

Destination	Age under 65	Age 66-70	Age 71-75
<b>Europe</b>	550 days	366 days	366 days
<b>Worldwide (excl USA)</b>	550 days	276 days	184 days
<b>Worldwide (incl USA)</b>	550 days	184 days	123 days

## Pair or set

A number of items of **personal possessions** that belong together or can be used together.

## Period of Insurance

- For single trip and long stay cover  
Where the option has been chosen, cancellation cover begins from the issue date shown on **your** certificate and ends at the beginning of **your journey**. The cover for all other sections that have been chosen start at the beginning of **your journey** and finishes at the end of **your journey**.
- For annual multi-trip cover  
Where the option has been chosen, cancellation cover begins on the start date shown on **your** certificate or the date **you** booked **your journey**, whichever is the later and ends at the beginning of **your journey**. The cover for all other sections starts at the beginning of **your journey** and finishes at the end of **your journey**.
- For single trip, long stay and annual multi-trip cover  
All cover ends on the expiry date shown on **your** certificate, unless **you** cannot finish **your journey** as planned because of death, injury or illness or there is a delay to the public transport system that cannot be avoided. In these circumstances **we** will extend cover free of charge until **you** can reasonably finish that **journey**.

## Personal money

Cash, cheques, postal and money orders, current postage stamps, travellers' cheques, coupons or vouchers which have a monetary value, admission tickets and travel tickets, all held for private and not business purposes.

## Personal possessions

Each of **your** suitcases, trunks and similar containers (including their contents) and articles worn or carried by **you** (including **your valuables** and passport).

## Redundancy

Loss of permanent paid employment (except voluntary redundancy), after a continuous working period of two years if **you** are aged 18 and over or 65 and under.

## Relative

**Your** mother (in-law), father (in-law), step parent (in-law), sister (in-law), brother (in-law), wife, husband, son (in-law), daughter (in-law), step child, foster child, grandparent, grandchild, uncle, aunt, nephew, niece, cousin, partner (including common law and civil partnerships) or fiancé(e).

## Resident

A person who has their main **home** in the **UK** and has not spent more than six months abroad during the year before the policy was issued.

## Single parent family

One adult and all of their children (including foster children) aged 17 under if in full time education. All persons must live at the same address. For annual multi-trip cover, the adult can travel independently, however, all insured children must travel with the insured adult.

## Travelling companion

Any person that has booked to travel with **you** on **your journey**.

## United Kingdom (UK)

England, Scotland, Wales, Northern Ireland, the Channel Islands and the Isle of Man.

## Valuables

Jewellery, watches, items made of or containing precious metals or semi-precious stones, furs, binoculars, telescopes, computer games, any kind of photographic, audio, video, computer, television, fax and phone equipment (including mobile phones), MP3 players, PDAs, electronic games, TVs and CDs, mini discs, DVDs, cartridges, video and audio tapes.

## We, our, us

Mondial Assistance (UK) Limited which administers the insurance on behalf of the **insurer**.

## You, your, person insured

Each person shown on the certificate, for whom the appropriate insurance premium has been paid.

## 24-hour emergency medical assistance

Please tell **us** immediately about any serious illness or accident abroad where **you** have to go into hospital or **you** may have to return **home** early or extend **your** stay because of any illness or injury. If **you** are unable to do this because the condition is life, limb, sight or organ threatening, **you** should contact **us** as soon as **you** can. **You** must also tell **us** if **your** medical expenses are over **£250**. If **you** are claiming for a minor illness or accident **you** should, where possible, pay the costs and reclaim the money from **us** when **you** return. **You** can call 24 hours a day 365 days a year or email.

From outside the UK phone **+44 20 8666 9305**  
Fax **+44 20 8603 0204** Textphone **+44 20 8666 9562**

From within the UK phone **020 8666 9305**  
Fax **020 8603 0204** Textphone **020 8666 9562**

email **international\_dept@mondial-assistance.co.uk**

Please give **us your** age and **your** policy number. Say that **you** are insured with Staysure.co.uk Basics travel insurance.

Below are some of the ways the 24-hour emergency medical assistance service can help.

## Confirmation of payment

**We** will contact hospitals or **doctors** abroad and guarantee to pay their fees, providing **you** have a valid claim.

## Repatriation

If **our** medical advisers think it would be in **your** medical interests to bring **you** back to **your home** or to a hospital or nursing home in the **UK**, **you** will normally be transferred by regular airline or road ambulance. Where medically necessary in very serious or urgent cases, **we** will use an air ambulance. **We** will consult the treating **doctor** and **our** medical advisers first. If **you** need to go home early, the treating **doctor** must provide a certificate confirming that **you** are fit to travel. Without this the airline can refuse to carry any sick or injured person.

**You** can contact **us** at any time day or night. **You** will be answered by one of **our** experienced assistance co-ordinators who **you** should give all relevant information to. Please make sure **you** have details of **your** policy before **you** phone.

## Reciprocal health arrangements

### European Health Insurance Card (EHIC) - the replacement for the E111

- The EHIC entitles **you** to reduced-cost, sometimes free, medical treatment that becomes necessary while **you** are in a European Economic Area (EEA) country or Switzerland. The EEA consists of the European Union (EU) countries plus Iceland, Liechtenstein and Norway.
- The card gives access to state-provided medical treatment only. Remember, this might not cover all the things **you** would expect to get free of charge from the NHS in the **UK**. **You** may have to make a contribution to the cost of **your** care.
- **You** may apply for an EHIC online at [www.dh.gov.uk/travellers](http://www.dh.gov.uk/travellers) or by calling **0845 606 2030**. Application forms are also available from the Post Office.

### Australia

- If **you** are travelling to Australia **you** can enrol in Medicare which will entitle **you** to subsidised hospital treatments and medicines. **You** can do this by contacting a local Medicare office in Australia.
- All claims for refunds under the Medicare scheme must be made before **you** leave Australia. For more information on Medicare visit: [www.medicareaustralia.gov.au](http://www.medicareaustralia.gov.au) or email: [medicare@medicareaustralia.gov.au](mailto:medicare@medicareaustralia.gov.au).

If **you** make use of these arrangements or any other worldwide reciprocal health arrangement which reduces **your** medical expenses, **you** will not have to pay an **excess**.

## Health declaration and health exclusions

These apply to the Cancellation or curtailment charges (when the option has been chosen) and Emergency medical and associated expenses sections.

**It is very important that you read and understand the following and if necessary declare any existing medical conditions to us.**

- 1 You** will not be covered for any directly or indirectly related claims arising from the following if at the time of taking out this insurance, **you**:
- a are being prescribed regular medication;
  - b have received treatment for or had a consultation with a **doctor** or hospital specialist in the past 6 months;
  - c are being referred to, treated by or under the care of a **doctor** or a hospital specialist;
  - d are awaiting treatment or the results of any tests or investigations.

### Unless

**You** have completed full medical screening (via the link on the medical declaration page) necessitating the disclosure of every pre-existing condition, and have been accepted subject to the payment of any extra premium.

### Or

**You** are aged 80 and under, the condition(s) are listed below, you have been fully discharged from any post operative follow ups and shown as being accepted by **us** in writing on **your** certificate.

- Abnormal Smear Test
- Achilles Tendon Injury
- Acne
- Acronyx (Ingrown Toe-nail)
- Adenoids
- ADHD (Attention Deficit Hyperactivity Disorder)
- Allergic Rhinitis
- Allergies
- Alopecia
- Anal Fissure/Fistula
- Appendectomy
- Astigmatism
- Athlete's Foot (Tinea Pedis)
- Autism
- Bell's Palsy (Facial Paralysis)
- Benign Prostatic Enlargement
- Bladder - Cystitis
- Bladder Infection
- Blepharitis
- Blindness
- Blocked Tear Ducts
- BPPV (vertigo)
- Breast - Fibroadenoma
- Breast Cyst(s)
- Breast Enlargement
- Breast Reduction
- Broken Bones (not head or spine)
- Bunion (Hallux Valgus)
- Bursitis
- Caesarean Section
- Candidiasis (oral)
- Carpal Tunnel Syndrome
- Cartilage Injury
- Cataracts
- Cervical Erosion
- Cervicitis
- Chalazion
- Chest Infection
- Chicken Pox
- Chlamydia
- Cholecystectomy
- Chronic fatigue syndrome (if only symptom is fatigue)
- Club Foot (Talipes)
- Coeliac Disease
- Cold Sore (Herpes Simplex)
- Colitis (simple)
- Common Cold(s)
- Conjunctivitis
- Constipation
- Corneal Graft
- Cosmetic Surgery
- Cyst - Breast
- Cyst - Testicular
- Cystitis
- Cystocoele
- D & C
- Deaf Mutism
- Deafness
- Dental Surgery
- Dermatitis
- Deviated Nasal Septum
- Diarrhoea and/or Vomiting (resolved)
- Dilatation and Curettage
- Dislocated Hip
- Dislocations
- Dry Eye Syndrome
- Dupuytren's Contracture
- Dwarfism
- Dyspepsia
- Ear Infections (resolved - must be all clear prior to travel if flying)
- Eczema
- Endocervical Polyp
- Endocervicitis
- Endometrial Polyp
- Enoresis
- Epididymitis
- Epiphora (Watery Eye)
- Epispadias
- Epistaxis (Nosebleed)
- Erectile Dysfunction
- Erythema Multiform or Nodosum
- Essential Tremor
- Facial Neuritis (Trigeminal Neuralgia)
- Facial Paralysis (Bell's Palsy)
- Favus
- Femoral Hernia
- Fibroadenoma
- Fibroid - Uterine
- Fibromyalgia
- Fibromyositis
- Fibrositis
- Fistula-in-Ano
- Frigberg's Disease
- Frozen Shoulder
- Gall Bladder Removal
- Ganglion
- Gastric Reflux
- Gastro-oesophageal Reflux
- Genital Herpes (Herpes Genitalis)
- Glandular Fever
- Glaucoma
- Glue Ear (resolved - must be all clear prior to travel if flying)
- Goitre
- Gout
- Grave's Disease
- Grommet(s) inserted (Glue Ear)
- Gynaecomastia
- Haematoma (external)
- Haemorrhoidectomy
- Haemorrhoids (Piles)
- Hallux Valgus (Bunion)
- Hammer Toe
- Hashimoto's Thyroiditis
- Hay Fever
- Hernia (not Hiatus)
- Herpes Genitalis (Genital Herpes)
- Herpes Simplex (Cold Sore)
- Herpes Zoster (Shingles)
- Hip Replacement
- Hives (Nettle Rash)
- Housemaid's Knee (Bursitis)

- HRT (Hormone Replacement Therapy)
- Hydrocele (Testicle)
- Hyperthyroidism / Hypothyroidism (Overactive / Underactive Thyroid)
- Hypospadias
- Hysterectomy (provided no malignancy)
- IBS
- Ichthyosis Simplex
- Impetigo
- Impotence
- Incontinence (bladder)
- Indigestion
- Influenza
- Ingrown Toe-nail (Acronyx)
- Inguinal Hernia
- Insomnia
- Intercostal Neuralgia
- Intertrigo
- Iron Deficiency Anaemia
- Irritable Bowel Syndrome (IBS)
- Juvenile Epiphysitis
- Keinboeck's Disease
- Keratoconus
- Knee Injury- Collateral/cruciate ligaments
- Knee Replacement
- Kohlers Disease
- Labyrinthitis
- Laryngitis
- Learning Difficulties
- Leptothrix
- Leucoderma
- Lichen Planus
- Ligaments (injury)
- Lipoma
- Macular Degeneration
- Mastitis
- Mastoidectomy (resolved - must be all clear prior to travel if flying)
- ME (Myalgic Encephalomyelitis)
- Meibomian Cyst
- Meniere's Disease
- Menopause
- Menorrhagia
- Migraine (provided this is a definite diagnosis and there are no ongoing investigations)
- Miscarriage
- Mole(s)
- Molluscum Contagiosum
- Myalgia (Muscular Rheumatism)
- Myxoedema
- Nasal Infection
- Nasal Polyp(s)
- Nettle Rash (Hives)
- Neuralgia, Neuritis
- Nosebleed(s)
- Nut Allergy
- Nystagmus
- Obstructive Sleep Apnoea
- Osgood-schlatter's Disease
- Osteochondritis
- Otosclerosis
- Overactive Thyroid
- Parametritis
- Pediculosis
- Pelvic Inflammatory Disease
- Photodermatitis
- Piles
- Pityriasis Rosea
- Polymorphic Light Eruption
- Post Viral Fatigue Syndrome
- Pre-menstrual Syndrome
- Prickly Heat
- Prolapsed Uterus (womb)
- Pruritis
- Psoriasis
- Reflux Oesophagitis
- Repetitive Strain Injury
- Retinitis Pigmentosa
- Rheumatism
- Rhinitis (Allergic)
- Rosacea
- Royal Free Disease (if the only symptom is fatigue)
- Ruptured Tendons
- Salpingitis
- Salpingo-oophoritis
- Scabies
- Scalp Ringworm (Tinea Capitis)
- Scheuermann's Disease
- Sebaceous Cyst
- Shingles (herpes Zoster)
- Shoulder Injury
- Sinusitis
- Sjogren's Syndrome
- Skin Ringworm (Tinea Corporis)
- Sleep Apnoea
- Sore Throat
- Sprains
- Stigmatism
- Stomach Bug (resolved)
- Strabismus (squint)
- Stress Incontinence
- Synovitis
- Talipes (Club Foot)
- Tendon Injury
- Tennis Elbow
- Tenosynovitis
- Termination of Pregnancy
- Testicles – Epididymitis
- Testicles – Hydrocele
- Testicles - Variocele
- Testicular Cyst
- Testicular Torsion (Twisted Testicle)
- Throat Infection(s)
- Thrush
- Thyroid – Overactive
- Thyroid Deficiency)
- Tinea Capitis (Scalp Ringworm)
- Tinea Corporis (Skin Ringworm)
- Tinea Pedis (Athlete's Foot)
- Tinnitus
- Tonsillitis
- Tooth Extraction
- Toothache
- Torn Ligament
- Torticollis (Wry Neck)
- Trichomycosis
- Trigeminal Neuralgia
- Turner's Syndrome
- Twisted Testicle
- Umbilical Hernia
- Underactive Thyroid
- Undescended Testicle
- Urethritis
- URTI (Upper Respiratory Tract Infection)
- Urticaria
- Uterine Polyp(s)
- Uterine Prolapse
- Varicocele
- Varicose Veins - legs only (if GP has confirmed that client is fit to travel)
- Vasectomy
- Verruca
- Vertigo - provided no disabling episodes
- Visual Impairment
- Vitiligo
- Warts (benign)
- Womb Prolapse (uterus)
- Wry Neck (torticollis)

**You** should call [Staysure.co.uk](http://Staysure.co.uk) on **0845 508 9886** if:

- **you** need to declare a medical condition;
- **you** develop a medical condition after **your** policy was issued;
- **your** existing condition changes after **your** policy was issued;
- **you** are unsure whether a medical condition needs to be declared or not.

The confidential helpline will be able to confirm if cover can be provided for **your** medical conditions. If **you** need to make a claim arising from a medical condition that has not been declared and accepted by **us**, it is unlikely that **your** claim will be paid.

If **we** are unable to cover a medical condition, this will mean that any other **person insured by us** will not be able to make a claim arising from the medical condition(s). This may even apply if the person with the medical condition(s) purchases cover from another provider.

Each **person insured by us** would still be covered for any unrelated medical condition(s) and other sections of cover subject to the terms and conditions of this policy.

#### But

If **you** are aged 80 and under and have one (and only one) medical condition and it is listed below, there is no need to declare it. Should **you** need to make a claim arising from that condition, **your doctor** must confirm in writing the date of diagnosis, that the condition was stable prior to travel and that there was no foreseeable reason why **you** should need to claim on this policy:

- Acid reflux
- Arthritis
- Asthma (if well controlled by using inhalers only)
- Diabetes (if well controlled and no associated conditions e.g. Glaucoma or other eye problems, kidney problems or peripheral vascular disease)
- Hiatus Hernia
- Hypertension (high blood pressure)

#### Note

**You** do not have to declare minor ailments e.g. hay fever, tonsillitis, ear infections, colds / flu, skin irritations, chiroprody, dental treatment etc if **you**:

- were only prescribed short term antibiotics, non-prescription pain killers, creams / ointments;
- have had no further problems since; or
- have been advised by **your doctor** that it is safe to travel.

- 2 **You** will not be covered for any claim arising from a medical condition of someone **you** were going to stay with, a **travelling companion**, a **relative** or a **business associate** if **you** are aware of the medical condition at the time **your** policy was issued.
- 3 **You** will not be covered if **you** travel against the advice of a **doctor** or where **you** would have been if **you** had sought their advice before beginning **your journey**.
- 4 **You** will not be covered if **you** know **you** will need medical treatment or consultation at any medical facility during **your journey** or **you** are travelling specifically to get medical treatment.
- 5 **You** will not be covered for any directly or indirectly related claim if, before **your journey**, a **doctor** diagnosed that **you** have a terminal condition.
- 6 **You** will not be covered if **you** were waiting for medical treatment or consultation at any medical facility as an hospital in-patient or were under investigation for a medical condition when **your** policy was issued.
- 7 **You** will not be covered if **you** are travelling specifically for the purpose of obtaining and / or receiving any elective surgery, procedure or hospital treatment.

#### Note

This is not a private medical insurance policy and only gives cover for emergency medical treatment in the event of accident or unexpected illness occurring during **your journey**.

## General exclusions

The following exclusions apply to the whole of **your** policy:

**We** will not cover **you** for any claim arising from, or relating to, the following:

- 1 A relevant fact that **you** knew about before **you** travelled, unless **we** agreed to it in writing.
- 2 War, invasion, act of foreign enemy, hostilities (whether war is declared or not) civil war, civil commotion, rebellion, revolution, insurrection, military force, coup d'état, terrorism, weapons of mass destruction.
- 3 Any epidemic or pandemic.
- 4 **You** not following any suggestions or recommendations made by any government or other official authority including the Foreign and Commonwealth Office during the **period of insurance**.
- 5 **Your** property being held, taken, destroyed or damaged under the order of any government or customs officials.
- 6 Ionising radiation or radioactive contamination from nuclear fuel or nuclear waste or any risk from nuclear equipment.
- 7 Any currency exchange rate changes.
- 8 The failure or fear of failure or inability of any equipment or any computer program, whether or not **you** own it, to recognise or to correctly interpret or process any date as the true or correct date, or to continue to function correctly beyond that date (except under the Emergency medical and associated expenses section).
- 9 **You** acting in an illegal or malicious way.
- 10 **You** not enjoying **your journey** or not wanting to travel.
- 11 Any loss caused as a direct or indirect result of anything **you** are claiming for, for example loss of earnings, unless it says differently in the policy.

## Conditions

The following conditions apply to the whole of **your** policy. Please read these carefully as **we** can only pay **your** claim if **you** meet these:

- 1 **You** are a **resident of the UK**.
- 2 **You** take reasonable care to protect yourself and **your** property against accident, injury, loss and damage and act as if **you** are not insured and to minimise any potential claim.
- 3 **You** have a valid certificate.
- 4 **You** accept that **we** will not extend the **period of insurance**:
  - for single trip cover if the original policy plus any extensions have either ended, been in force for longer than 100 days (31 days if **you** are aged between 76 and 80 years) or **you** know **you** will be making a claim.
  - for annual multi-trip cover beyond the expiry of **your** policy.
  - for long stay cover if the original policy plus any extensions have either ended, been in force for longer than appropriate period shown on table within the definition of '**journey**' on page 6, or **you** know **you** will be making a claim.
- 5 **You** contact **us** as soon as possible with full details of anything which may result in a claim and give **us** all the information **we** ask for. Please see section 'Making a claim' on pages 14-15 for more information.
- 6 **You** accept that no alterations to the terms and conditions of the policy apply, unless **we** confirm them in writing to **you**.
- 7 **You** are not aged:
  - 86 or over at the date **your** policy was issued for single trip cover.
  - 80 or over at the start date of **your** policy for annual multi-trip cover.
  - 75 or over at the date **your** policy was issued for long stay cover.

### We have the right to do the following

- 1 Cancel the policy if **you** do not tell **us** about a relevant fact or if **you** tell **us** something that is not true, which influences **our** decision as to whether cover can be offered or not. A full premium refund will be given and depending on the circumstances **we** may report the matter to the police.
- 2 Cancel the policy and make no payment if **you** make a fraudulent claim. **We** may in these instances report the matter to the police.
- 3 Only cover **you** for the whole of **your journey** and not issue a policy if **you** have started **your journey**.
- 4 Take over and deal with, in **your** name, any claim **you** make under this policy.
- 5 Take legal action in **your** name (but at our expense) and ask **you** to give **us** details and fill in any forms (including Department of Social Security forms), which will help **us** to recover any payment **we** have made under this policy.
- 6 With **your** permission, get information from **your** medical records to help **us** or **our** representatives deal with any claim. This could include a request for **you** to be medically examined or for a post mortem to be carried out in the event of **your** death. **We** will not give personal information about **you** to any other organisation without **your** specific agreement.
- 7 Send **you home** at any time during **your journey** if **you** are taken ill or injured. **We** will only do this if the **doctor** treating **you** and **our** medical advisers agree. If there is a dispute, **we** will ask for an independent medical opinion.
- 8 Not accept liability for costs incurred after the date the treating **doctor** and **our** medical advisers agree **you** should return to the **UK**, if **you** refuse to be repatriated.
- 9 Only refund or transfer **your** premium if **you** decide that the policy does not meet **your** needs and **you** have contacted **us** within 14 days from the date **you** receive **your** policy and certificate. **We** can recover all costs that **you** have used if **you** have travelled or made a claim or intend to make a claim.
- 10 Not to pay any claim on this policy (except under the Personal accident section) for any amounts covered by another insurance. In these circumstances **we** will only pay **our** share of the claim.

#### 11 If **you** cancel or cut short **your journey**:

- All cover provided on **your** single trip or long stay policy will be cancelled without refunding **your** premium.
- All cover provided on **your** annual multi-trip policy for that **journey** will be cancelled without refunding **your** premium.

#### 12 Ask **you** to pay **us** back any amounts that **we** have paid to **you** which are not covered by this policy.

## Making a claim

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To claim, Phone **020 8666 9306**, Textphone **020 8666 9562** and ask for a claim form or write to: Mondial Assistance (UK) Ltd travel claims department, PO Box 1900, Croydon CR90 9BA.

**You** should fill in the form and send it to **us** as soon as possible with all the information and documents **we** ask for. It is essential that **you** provide **us** with as much detail as possible to enable **us** to handle **your** claim quickly. Please keep photocopies of all information **you** send **us**.

**You** will need to obtain some information about **your** claim while **you** are away. Below is a list of the documents **we** will need in order to deal with **your** claim.

#### For all claims

- **Your** original **journey** booking invoice(s) and travel documents showing the dates and times of travel.
- Original receipts and accounts for all out of pocket expenses **you** have to pay.
- Original bills or invoices **you** are asked to pay.
- Details of any other insurance **you** may have that may cover the same loss, such as household or private medical.
- As much evidence as possible to support **your** claim.

#### Medical expenses

- Always contact **our** 24-hour emergency medical service when **you** are hospitalised, require repatriation or where medical fees are likely to exceed **£250**.
- Medical evidence from the treating **doctor** to confirm the illness or injury and treatment given including hospital admission and discharge dates, if this applies.
- If **you** are advised by a **doctor** at **your** resort that **you** cannot go on **your** pre-booked excursions because of medical reasons, **you** should obtain a medical certificate from them confirming this.

#### Personal possessions and Personal money

- Report the theft, damage or loss to the police within 24 hours of discovery and ask them for a written police report.
- If appropriate, **you** should also report the theft, damage or loss to **your** courier or hotel / apartment manager and ask for a written report.
- Original receipts, vouchers or other suitable evidence of purchase / ownership / value for lost, stolen or damaged **personal possessions**.
- Confirmation, such as foreign exchange receipts and withdrawal slips, from **your** bank or bureau de change for issuing foreign currency, or suitable evidence for Sterling.
- Keep any damaged items as **we** may need to inspect them. If **we** make a payment, or **we** replace an item, the item will then belong to **us**.
- Obtain an estimate for repair for all damaged items.

#### For loss or damage of possessions in transit claims

- Please obtain a Property Irregularity Report (PIR) from the airline or a carriers' report from the rail company, shipping line or their handling agent. This should be done within 7 days of the delay / loss / damage. **You** have 21 days to write to the airline confirming details of essential replacement items purchased.

#### Cancellation or curtailment

- If **you** need to curtail **your journey** call within the **UK 020 8666 9305** textphone **020 8666 9562**, outside the **UK + 44 20 8666 9305**, Textphone **+ 44 20 8666 9562** immediately to get **our** prior agreement.
- Original cancellation invoice(s) detailing all cancellation charges incurred.
- For claims relating to illness or injury a medical certificate will need to be completed by the treating **doctor**. A certified copy of the death certificate is required in the event of death.
- If **your** claim results from any other circumstances, please provide evidence of these circumstances.
- A certified copy of the death certificate if this applies.

#### Personal liability

- A detailed account of the circumstances surrounding the claim (including, photographs and video evidence if this applies).
- Any writ, summons or other correspondence received from any third party. Please note that **you** should not admit liability, offer to make any payment or correspond with any third party without **our** written consent.
- Full details of any witnesses, providing written statements where available.

## Making a complaint

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**We** aim to provide **you** with a first class policy and service. However, there may be times when **you** feel **we** have not done so. If this is the case, please tell **us** about it so that **we** can do **our** best to solve the problem. If **you** make a complaint **your** legal rights will not be affected.

In the first instance, please contact:

The Quality Standards Manager, Mondial Assistance (UK) Limited, Mondial House, 102 George Street, Croydon, CR9 1AJ

Please supply **us** with **your** name, address, policy number and claim number where applicable and enclose copies of relevant correspondence as this will help **us** to deal with **your** complaint, in the shortest possible time.

If **you** are not satisfied with **our** final response **you** can refer the matter to the Financial Ombudsman Service.

## Emergency medical and associated expenses - Section 1

If **you** are taken into hospital or **you** think **you** may have to come **home** early or extend **your journey** because of illness, injury or accident, or if **your** medical expenses are over **£250** **we** must be told immediately - see under the heading '24-hour emergency medical assistance' on pages 7 to 8 for more information.

### WHAT YOU ARE COVERED FOR

**We** will pay **you** or **your** Personal Representatives for the following necessary and unforeseen emergency expenses if **you** die, are injured, have an accident or taken ill during **your journey**.

#### 1 Overseas cover

Up to **£5 million** in total for reasonable fees or charges **you** incur for:

- **Treatment**  
medical, surgical, medication costs, hospital, nursing home or nursing services.
- **Transport and accommodation**  
reasonable extra transport and accommodation costs for **you** and any one other person who stays or travels with **you** or to **you** from the **UK** on medical advice.
- **Funeral expenses**  
the reasonable cost of transporting **your** body or ashes to **your home** or **we** will pay up to **£1,500** for **your** funeral expenses, in the place where **you** die outside the **UK**.
- **Search and rescue**  
mountain search and rescue services when deemed medically necessary.

**We** will also pay:

- **Dental**  
Up to **£200** for emergency dental treatment to relieve sudden pain or, in the instance of dentures or orthodontic appliances, to relieve distress in eating.
- **Excursions**  
Up to **£150** in total for **your** excursions that have been paid for before **your journey** began and that cannot be recovered from anywhere else, if **you** get written advice from a **doctor** that **you** cannot go on them, because of an injury or illness during **your journey**.

#### 2 UK cover

Up to **£1,000** for:

- **Transport and accommodation**  
Reasonable extra transport and accommodation costs for **you** and any one other person who stays or travels with **you** or to **you** from within the **UK** on medical advice; and the reasonable cost of transporting **your** ashes or body **home**.

### WHAT YOU ARE NOT COVERED FOR

#### Under 1 Overseas cover except Excursions and under 2 UK cover

An **excess** of **£65** (increased to **£250** if injured doing voluntary manual labour), unless **your** claim is reduced because **you** used an European Health Insurance Card or any other reciprocal health arrangement (see 'Reciprocal health arrangements' on page 8 for more information). The cost of replacing any medication **you** were using when **you** began **your journey**.

#### Under 1 Overseas cover and under 2 UK cover

Any condition stated under Health declaration and health exclusions on pages 8-12.

Extra transport and accommodation costs which are of a higher standard to those already used on **your journey**, unless **we** agree.

Anything caused by:

- **you** travelling in an aircraft (except as a passenger in a fully-licensed, passenger-carrying aircraft);
- **you** suicide, self-injury or deliberately putting yourself at risk (unless **you** were trying to save another person's life);
- **you** being under the influence of drugs (except those prescribed by a **doctor** but not for the treatment of drug addiction);
- the direct or indirect effect of **you** using alcohol or solvents;
- **you** travelling on a motorcycle, unless the rider holds an appropriate valid licence and all **persons insured** are wearing crash helmets;
- **you** taking part in any **hazardous activity** or **winter sports** unless shown on **your** certificate.

Any costs incurred 12 months after the date of **your** death, injury or illness.

Any costs for taxi fares and telephone calls (including mobile calls) resulting from an incident claimed for under this section.

#### Under 1 Overseas cover - Treatment

Services or treatments **you** receive within the **UK**.

Services or treatments **you** receive which the **doctor** in attendance and **we** think can wait until **you** get back to the **UK**.

Medical costs over **£250**, in-patient treatment or repatriation which **we** have not authorised.

The extra costs of having a single or private room in a hospital or nursing home.

The cost of all treatment which is not directly related to the illness or injury that caused the claim.

#### Under 1 Overseas cover - Funeral expenses

**Your** burial or cremation within the **UK**

#### Under 1 Overseas cover - Dental

Replacing or repairing false teeth or artificial teeth, such as crowns, other than to relieve distress in eating.

Dental work involving the use of precious metals.

Please refer to Sections General exclusions,  
Conditions and Making a claim that also apply.

## Personal possessions - Section 2

### WHAT YOU ARE COVERED FOR

Up to **£200** in total for **your personal possessions** damaged, stolen, lost or destroyed on **your journey**.

The most **we** will pay for **valuables** is **£100** in total whether jointly owned or not. There is also a single article, **pair or set** limit of **£100** in total where **you** are able provide the original receipt, valuation or proof of ownership.

#### Note

It will be **our** decision to pay either:

- the cost of repairing **your** items;
- to replace **your** belongings with equivalent items; or
- the cost of replacing **your** items. An amount for wear, tear and loss of value will be deducted.

### WHAT YOU ARE NOT COVERED FOR

An **excess** of **£65**.

More than the part of the **pair or set** that is stolen, lost or destroyed.

No more than **£50** for a single article, **pair or set** if **you** cannot provide the original receipt, valuation or proof of ownership.

No more than **£50** in total for cigarettes and alcohol products.

No more than **£100** in total for sunglasses or spectacles.

Breakage of or damage to:

sports equipment while it is being used, fragile articles, audio, video, computer, television, fax and phone equipment.

Loss or damage due to the climate, wear and tear, loss in value, process of cleaning, moths or vermin.

The cost of replacing or repairing false teeth.

A claim for more than one mobile phone per **person insured**.

Loss or theft of, or damage to the following.

- Items for which **you** are unable to provide a receipt or other proof of purchase
- Films, tapes, cassettes, computer games, electronic games, mini-discs, DVDs, video and audio tapes, cartridges or discs, unless they were pre-recorded, in which case **we** will pay up to the replacement cost.
- Goods which deteriorate, bottles or cartons, and any damage caused by these items or their contents.
- **Valuables** left in a motor vehicle.
- **Valuables** carried in suitcases, trunks or similar containers unless they are on **your** person all the time.
- **Valuables** unless they are on **your** person or locked in a safe or safety deposit box (if one is available) or locked in the accommodation **you** are using on **your journey**.
- Contact or corneal lenses, unless following fire or theft.
- Bonds, share certificates, guarantees or documents of any kind.
- **Personal possessions** unless they are on **your** person, locked in the accommodation **you** are using on **your journey** or they are out of sight in the locked boot or covered luggage area of a locked motor vehicle (no cover for **valuables**).
- **Personal money** (please see section 3).

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

## Personal money - Section 3

### WHAT YOU ARE COVERED FOR

Up to **£200** for loss or theft of **your personal money**, but no more than **£200** (**£50** if **you** are aged 17 or under) in cash in total, whether jointly owned or not) while on **your journey**.

#### Lost credit cards

If **you** lose **your** credit cards while on **your** journey, **we** will assist by providing **you** with the contact telephone numbers of the appropriate credit card companies. To use this service please call our 24 hour helpline:

From within the **UK**

Phone **020 8666 9325** Textphone **020 8666 9562**

From outside the **UK**

Phone **+44 20 8666 9325** Textphone **+44 20 8666 9562**

### WHAT YOU ARE NOT COVERED FOR

An **excess** of **£65**.

Compensation unless **you** can provide receipts of the amount **you** had from the place where **you** got the currency.

Loss or theft of **personal money**, unless it is on **your** person, locked in a safe or safety deposit box (if one is available) or locked in the accommodation **you** are using on **your journey**.

Loss caused by a reduction in exchange rates or shortage caused by mistakes in exchanging currency.

Loss or theft of travellers' cheques if the place where **you** got them from provides a replacement service.

More than the minimum market value of equivalent travel tickets, if **your** travel tickets have been paid for using an airline mileage reward scheme.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

## Cancellation or curtailment charges - Section 4

This section is only in force if shown on your certificate.

If **you** think **you** may have to cut **your journey** short (curtail), **we** must be told immediately - see under the heading '24-hour emergency medical assistance' on pages 7 to 8 for more information.

### WHAT YOU ARE COVERED FOR

**We** will pay up to **£5,000** in total (including up to **£150** in total for excursions), for **your** part of unused personal accommodation, transport charges and other travel expenses which have been paid or where there is a contract to pay that cannot be recovered from anywhere else. **We** will provide this cover in the following necessary and unavoidable circumstances:

#### Cancellation

If **you** cancel **your journey** before it begins because one of the following happens:

- The death, serious injury or serious illness of **you**, someone **you** were going to stay with, a **travelling companion**, or a **relative** or **business associate** of **you** or a **travelling companion**.
- **You** or a **travelling companion** is called for jury service in the **UK** or as a witness in a court in the **UK**.
- **You** or a **travelling companion** is needed by the police following a burglary, or damage caused by serious fire, storm, flood, explosion, subsidence, vandalism, fallen trees, impact by aircraft or vehicle at **your home** or their home or usual place of business in the **UK**.
- **You** or a **travelling companion** being advised not to travel by a **doctor** as a result of pregnancy.
- **Your redundancy**.
- The Foreign and Commonwealth Office issue a directive advising against travel to **your journey** destination because of an earthquake, fire, flood, or hurricane.

#### Curtailment

**You** cut **your journey** short (curtail) after it has begun because of one of the following:

- Anything mentioned in **Cancellation** except **redundancy**.
- **You** are injured or ill and are in hospital for the rest of **your** journey.

#### Note

**We** will calculate curtailment claims from the date it is necessary for **you** to return to the **UK** or the date **you** are hospitalised as an in-patient, for the rest of **your** journey. **We** will pay unused personal accommodation and other travel expenses based on each 24-hour period **you** have lost. If **you** need to be repatriated, **we** will not refund the cost of **your** unused return travel tickets. **We** will put the value of these tickets towards the extra transport costs **we** have to pay.

#### Journey interruption

**We** will also pay, as part of the overall limit on this section, for extra accommodation and transport charges needed for **you** to make a necessary unscheduled return **home** during **your journey** and where possible to return to **your** destination because of one of the following:

- The death, serious injury or serious illness of a **relative**.
- **You** are needed by the police following a burglary, or damage caused by serious fire, storm, flood, explosion, subsidence, vandalism, fallen trees, impact by aircraft or vehicle at **your home**.

## WHAT YOU ARE NOT COVERED FOR

### Under Cancellation, Curtailment and Journey interruption

An **excess** of **£65** (**£25** for deposit only claims).

Any condition stated under Health declaration and health exclusions on pages 8-12.

More than the minimum market value of equivalent travel tickets, if **your** travel tickets have been paid for using an airline mileage reward scheme.

Anything caused by:

- **you** not having the correct passport or visa;
- **your** carrier's refusal to allow **you** to travel for whatever reason;
- any restriction caused by the law of any country or people enforcing these laws;
- bankruptcy or liquidation of the company providing **your** transport or accommodation, their agents or any person acting for **you**;
- anything the company providing **your** transport or accommodation, their agents, any person acting for **you** or **your** conference organiser is responsible for;
- **your** vehicle being stolen or breaking down;
- **you** not wanting to travel or not enjoying **your journey**;
- riot, civil commotion, strike or lock-out;
- **you** travelling in an aircraft (except as a passenger in a fully-licensed, passenger-carrying aircraft);
- **your** suicide, self-injury or deliberately putting yourself at risk (unless **you** were trying to save another person's life);
- **you** being under the influence of drugs (except those prescribed by a **doctor** but not for the treatment of drug addiction);
- the direct or indirect effect of **you** using alcohol or solvents;
- the death of any pet or animal.

### Under Cancellation

Any extra cancellation charges, because **you** did not tell the company providing **your** transport or accommodation, their agents or any person acting for **you**, as soon as **you** knew **you** had to cancel.

Financial circumstances or unemployment, except caused by **redundancy** which **you** find out about after the date **your** policy or travel tickets for **your journey** were bought (whichever is the later).

### Under Curtailment

Cutting short **your journey** unless **we** have agreed.

Any costs when **you** do not get a medical certificate (from the **doctor** who treated **you** in the place where **you** were staying) which says it was necessary for **you** to come **home** because of death, injury or illness. **Our** medical advisers must have agreed with the reason and that **you** were fit to travel.

The cost of **your** original pre-booked tickets if **you** have not used them and **we** have paid extra transport costs.

**You** travelling on a motorcycle, unless the rider holds an appropriate valid licence and all **persons insured** are wearing crash helmets.

Anything caused by **you** taking part in a **hazardous activity** unless shown on **your** certificate.

### Under Journey interruption

Any costs unless **we** have agreed.

The cost of **your** unused personal accommodation, transport charges and other travel expenses (see curtailment).

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

## Personal liability - Section 5

This section is only in force if shown on your certificate.

If **you** are hiring a motorised or mechanical vehicle while on **your journey you** must make sure that **you** get the necessary insurance from the hire company. **We** do not cover this under **our** policy.

### WHAT YOU ARE COVERED FOR

**We** will pay up to **£2 million** plus any other costs **we** agree to in writing that relate to anything **you** cause during **your journey** for which **you** are legally liable and results in one of the following.

- Bodily injury of any person.
- Loss of or damage to property which **you** do not own and **you** or a **relative** have not hired, loaned or borrowed.
- Loss of or damage to the accommodation **you** are using on **your journey** that does not belong to **you** or a **relative**.

#### Note

Inform **us** as soon as **you** or **your** Personal Representatives are aware of a possible prosecution, inquest or fatal injury, which might lead to a claim under this section. Please do not negotiate, pay, settle, admit or deny any liability to any third party, without **our** written consent.

### WHAT YOU ARE NOT COVERED FOR

An **excess** of **£65**.

Any liability for bodily injury or loss of or damage to property that comes under any of the following categories.

- Something which is suffered by anyone employed by **you** or a **relative** and is caused by the work they are employed to do.
- Something which is caused by something **you** deliberately did or did not do.
- Something which is caused by **your** employment or employment of a **relative** (including voluntary manual labour).
- Something which is caused by **you** using any firearm or weapon.
- Something which is caused by any animal **you** own, look after or control.
- Something which **you** agree to take responsibility for which **you** would not otherwise have been responsible for.

Any contractual liabilities.

Any liability for bodily injury suffered by **you**, a **relative** or **travelling companion**.

Compensation or other costs caused by accidents arising from **your** ownership or possession of any of the following.

- The use of any land or building except for the accommodation **you** are using on **your journey**.
- Motorised or mechanical vehicles and any trailers attached to them.
- Aircraft, motorised water craft or sailing vessels.

**Please refer to Sections General exclusions, Conditions and Making a claim that also apply.**