

BROWN SHIPLEY & CO. VISA INFINITE - BENEFIT SCHEDULE

BENEFIT TABLE	
Section A – Travel Advice	
Travel Advice	Included
Section B – Travel Assistance	
Medical Assistance	Included
Legal Assistance	Included
Cash Advance	Included
Lost or Stolen Document Assistance	Included
Interpreter	Included
Message Relay	Included
Lost Luggage Assistance	Included
Section C – Cancellation or Curtailment Charges	
Cancellation or Curtailment or Abandonment	€ 10,000
Section D – Missed Departure/ Missed Connection	
Missed Departure/ Missed Connection	€ 2,500
Section E – Delayed Departure/ Abandonment	
Delayed Departure, maximum	€500
- per 4 hour period	€ 75
Section F - Involuntary Denial of Boarding	
Involuntary Denial of Boarding	€ 100
Extended Denial of Boarding	€ 500
Section G – Emergency Medical and Other Expenses – Please Note: The maximum age limit for benefits under this section is 65 years inclusive.	
Medical Expenses and Repatriation Expenses	€ 10,000,000
Emergency Dental Pain Relief	€ 1,000
Transportation to Hospital if not free	Included
Close Relative to travel out if hospitalised	€200 per day, max. 10 days + Economy Flight
Extended Stay of Companion, maximum, (per day)	€200 per day, max. 10 days
Extended Stay of Insured/ Companion	€200 per day, max. 10 days
Return Home of Children	€200 per day, max. 3 days + Economy Flight
Convalescence, maximum	€ 1,000
- per day	€ 100
Funeral Expenses	€ 2,500
Section H – Hospital Benefit Please Note: The maximum age limit for benefits under this section is 65 years inclusive.	
Hospital Benefit, maximum	€ 500
- per day	€ 50
Section I – Home Emergency Service	
Home Emergency Service	€ 500
Section J – Baggage, Baggage Delay, Extended Baggage Delay and Passport	
Baggage, maximum	€ 5,000
- Single Article Limit	€ 500
- Valuables Limit in Total	€ 750

Baggage Delay	€ 375
Extended Baggage Delay	€ 375
Lost or Stolen Passport	€ 1,000
Cruise Baggage, maximum	€ 10,000
- Single Article Limit	€ 750
- Valuables Limit in Total	€ 1,000
Section K – Travel Accident	
Travel Accident, maximum	€ 1,000,000
- Loss of Limbs or Sight (Aged < 66)	€ 1,000,000
- Permanent Total Disablement (< 66)	€ 1,000,000
- Death Benefit (Aged 18 to 65)	€ 300,000
- Death Benefit (Under 18 or 66yrs+)	€ 160,000
- All Benefits (66yrs+)	€ 160,000
Section L – Personal Liability	
Personal Liability	€ 5,000,000
Section M – Overseas Legal Expenses and Assistance	
Overseas Legal Expenses	€ 50,000
Section N – Catastrophe Benefit	
Catastrophe	€ 2,500
Section O – Hijack Benefit	
Hijack, maximum (per day)	€5,000 (€500)
Section P – Business Benefit	
Business Equipment (maximum)	€ 10,000
- Single Item Limit	€ 1,000
- Computer Equipment Single Item Limit	€ 2,000
- Samples Limit	€ 1,000
Business Colleague Replacement	Economy Flight
Section Q1 – Ski Equipment and Ski Equipment Hire	
Ski Equipment, maximum	€ 2,500
- Owned	€ 2,500
- Hired	€ 750
- Single Article Limit	€ 500
Ski Hire, maximum	€ 500
- per day	€ 50
Section Q2 – Ski Pack	
Ski Pack, maximum	€ 500
- per day	€ 50
Section Q3 – Piste Closure	
Piste Closure, maximum	€ 500
- per day	€ 50
Section Q4 – Avalanche Closure	
Avalanche Closure, maximum	€ 500
- per day	€ 50
Section R1 – Golf Benefit	
Golf Equipment	€ 5,000
- Single Article Limit	€ 400
Golf Liability	€ 2,500,000
Section R2 – Green Fees	
Green Fees	€ 250

Section R3 – Hole in One Benefit	
Hole in One Benefit	€ 250
Section S – Wedding Cover	
Wedding Cover, maximum	€ 10,000
- Single Item Limit	€ 2,000
- Wedding Video/ Photos	€ 1,000
Section T – ATM Theft/ Assault	
ATM Theft/ Assault, maximum per year	€ 600
- Per Event	€ 300
Section U – Purchase Protection	
- Limit per 365 day period	€ 7,500
- Limit per Incident	€ 1,500
- Single Article Limit	€ 750
- per Item Excess	€ 75

IMPORTANT INFORMATION

1. **Pre-existing medical conditions** are not covered.
2. The maximum age limit for medical benefits in Section G – Emergency Medical and Other Benefits and Section H – Hospital Benefit is 65 years inclusive.
3. Please do not **curtail** any **trip** without contacting **AXA Assistance**.
4. In order to be eligible to receive benefits under this Benefit Schedule **you** must charge the **eligible item** in Section U - Purchase Protection and the green fees in Section R3 - Hole In One Benefit, in full to **your** Brown Shipley & Co. Visa Infinite Card.
5. These benefits will be governed by the laws of England and Wales

INTRODUCTION

This document is not a contract of insurance but summarises the benefits provided to **you** by virtue of **you** holding a Visa Infinite card issued by the **policyholder**. The provision of those benefits is enabled by an insurance policy held by and issued to Brown Shipley & Co. by Inter Partner Assistance (policy number 5519101).

Brown Shipley & Co. is the only **policyholder** under the insurance policy and only it has direct rights under the policy against the insurer. This agreement does not give **you** direct rights under the policy of insurance. Strict compliance with the terms and conditions of this agreement is required if you are to receive its benefit.

ELIGIBILITY

The benefits summarised in this document are dependent upon **you** being a valid Brown Shipley & Co. Visa Infinite **Card Holder** at the time of any incident giving rise to a claim. Brown Shipley & Co. will give **you** notice if there are any material changes to the policy or if it is cancelled or expires without renewal on equivalent terms.

This is **your** benefit guide. It contains details of benefits, conditions and exclusions relating to Brown Shipley & Co. Visa Infinite **Card Holders** and is the basis on which all claims will be settled.

INSURER

This policy is underwritten by Inter Partner Assistance (IPA), whose registered branch office in Ireland is 10/11 Mary Street, Dublin 1, Ireland (company number 906006) and is regulated by the Central Bank of Ireland. IPA is a branch of Inter Partner Assistance SA, a Belgian firm of Avenue Louise, 166 bte1, 1050, Brussels, which is authorised by the National Bank of Belgium and is authorised and subject to limited regulation by the Financial Conduct Authority (FCA) in the United Kingdom. Details about the extent of the authorisation and regulation by the FCA

are available from **us** on request. Some of the services under the Policy will be provided by AXA Travel Insurance (company number 426087), of the same Ireland address. All companies are members of the AXA Assistance Group.

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DEFINITIONS

Any word or expression to which a specific meaning has been attached will bear the same meaning throughout this Benefit Schedule and is highlighted in bold print.

You/your/beneficiary(ies)

– the **Card Holder** and the spouse or legal partner of the **Card Holder**, their children, step children or foster children aged under

19, or age 19 to 21 if in full time education travelling on any **Trip**. Beneficiaries are covered for benefits when travelling independently of one another.

We/us/our

– Inter Partner Assistance, 10/11 Mary Street, Dublin 1, Ireland and/ or AXA Travel Insurance of the same Ireland address. All companies are members of the AXA Assistance Group.

AXA Assistance

– the service provider, arranged by AXA Travel Insurance 10/11 Mary Street, Dublin 1, Ireland (company number 426087).

Baggage

– luggage, clothing, personal effects, **valuables**, and other articles which belong to **you** and are worn, used or carried by **you** during any **trip**.

Benefit Table

– the table listing the benefit amounts on page 1.

Bodily injury

– an identifiable physical injury sustained by **you** due to a sudden, unexpected and specific event. Injury as a result of **your** unavoidable exposure to the elements shall be deemed to be a **bodily injury**.

Business equipment

– items used by **you** in support of **your** business activity including office equipment which is portable by design including, but not restricted to, personal computers, telephones and calculators.

Business associate

– any person whose absence from business for one or more complete days at the same time as **your** absence prevents the proper continuation of that business.

Business trip

– a **trip** taken wholly or in part for business purposes but excluding **manual work**.

Card Holder

– the holder of a VISA Infinite card issued by Brown Shipley & Co., the card being valid and the account in good standing at the time of the incident.

Close relative

– mother, father, sister, brother, wife, husband, daughter, son, grandparent, grandchild, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, step parent, step child, step sister, step brother, foster child, legal guardian, legal ward, partner or fiancé/ fiancée or common-law partner (any **couple**, including same-sex, in a common law relationship or who have co-habited for at least 6 months).

Couple

– the **Card Holder** and either their Fiancé(e), spouse/ partner who is normally resident at the same address.

Country of residence

– the country in which **you** legally reside and the country in which **your** card is issued.

Curtailed/ curtail

– abandoning the **trip** by direct return to **your country of residence** or by attending a hospital abroad for in excess of 48 hours as an in-patient and then being repatriated directly from the hospital to **your country of residence**.

Golf equipment

– golf clubs, golf balls, golf bag, golf trolley, and golf shoes forming part of **your baggage**.

Hole-in-One

– driving from the tee during a golf match and holing out in a single stroke.

Home

– **your** normal place of residence in **your country of residence**.

Medical condition(s)

– any disease, illness or injury.

Medical practitioner

– a qualified, registered practising member of the medical profession who is not related to **you** or any person with whom **you** are travelling.

Period of cover

– any **trip** not exceeding 30 days. In the case of one way travel cover is limited to 7 days. Cover begins for any **trip** commencing on or after the date your Brown Shipley & Co. VISA Infinite card is active.

Under Section C – Cancellation cover shall be operative from the time **you** pay for the **trip** and ceases upon commencement of **your trip**. For all other sections of the Benefit Schedule, the benefits commence when **you** leave **your home** or hotel, or **your** place of business (whichever is the later) to commence the **trip** and terminates at the time **you** return to **your home**, hotel or place of business (whichever is the earlier) on completion of the **trip**. **You** must claim against **your** private health insurer first for any inpatient medical expenses abroad up to **your** benefit limit.

The **period of cover** is automatically extended for the period of the delay in the event that **your** return to **your country of residence** is unavoidably delayed due to an event covered by this Benefit Schedule.

Personal belongings

– **baggage, personal money, business equipment, ski equipment, golf equipment, wedding gifts and/ or wedding attire**.

Personal money

– bank notes currency notes and coins in current use, travellers' and other cheques, postal or money orders, pre-paid coupons or vouchers, travel tickets, hotel vouchers and passport, all held for private purposes.

Policyholder

– Brown Shipley & Co., Founders Court, Lothbury, London, EC2R 7HE, United Kingdom.

Pre-existing medical condition(s)

– any medical or mental condition existing prior to **your trip** and/ or causing **you** pain or physical distress or severely restricting **your** normal mobility, including (but not limited to):

1. a condition for which **you** are on a waiting list for or have knowledge of the need for surgery, in-patient treatment or investigation at a hospital, clinic or nursing home;
2. a condition referred to a medical specialist or the cause of in-patient treatment within one year prior to **your trip**;
3. any mental condition including fear of flying or other travel phobia;
4. a condition for which **you** have not had a diagnosis;
5. a condition for which a **medical practitioner** has provided a terminal prognosis;
6. any circumstances **you** are aware of that could reasonably be expected to give rise to a claim on this Benefit Schedule.

Public transport

– any publicly licensed aircraft, sea vessel, train or coach on which **you** are booked to travel.

Ski equipment

– skis (including bindings), ski boots, ski poles, snow boards and helmets.

Sports and activities

– the activities listed on under the **Sports and Activities** section for which **your** participation in during **your trip** is not the sole or main reason for **your trip**.

Territorial limits

– worldwide, excluding the **country of residence** for Medical Benefits in Section G – Emergency Medical and Other Benefits and Section H – Hospital Benefit and Section T - ATM Theft. Any **trip** solely within the **country of residence** is only covered where **you** have pre - booked at least two nights' accommodation in a hotel, motel, holiday camp, bed and breakfast, holiday cottage or similar accommodation rented for a fee.

Terrorism

– an act, including but not limited to the use of force or violence and/ or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisations(s) or governments, committed for political, religious, ideological or similar purposes including the intention to influence any government and/ or to put the public, or any section of the public, in fear.

Trip

– any holiday, or journey for business or pleasure made by **you** within the **territorial limits** during the **period of cover**. Any **trip** solely within the **country of residence** is only covered where **you** have pre - booked at least two nights' accommodation in a hotel, motel, holiday camp, bed and breakfast, holiday cottage or similar accommodation rented for a fee.

Unattended

– when **you** are not in full view of and not in a position to prevent unauthorised interference with **your** property or vehicle.

Valuables

– jewellery, gold, silver, precious metal or precious or semiprecious stone articles, watches, furs, leather goods, cameras, camcorders, photographic- audio- video- computer-television- and telecommunications equipment (including CD's, DVD's, tapes, films, cassettes, cartridges and headphones), computer games and associated equipment, telescopes, binoculars, portable DVD players, tablets, notebooks, ipods, ipads, MP3/4 players.

Wedding attire

– dress, shoes and other accessories bought specially for the wedding and make-up, hair styling and flowers paid for and purchased for the wedding forming part of **your baggage**.

Winter sports

– guided cross country skiing (Nordic skiing), mono skiing, off piste skiing or snow boarding only when accompanied by a locally qualified guide, recreational racing, skiing, snow boarding and snow sledging.

GENERAL CONDITIONS

These conditions apply throughout the Benefit Schedule. **You** must comply with the following conditions to have the full protection of the Benefit Schedule. If **you** do not comply **we** may at **our** option refuse to deal with **your** claim, or reduce the amount of any claim payment.

1. DUAL INSURANCE

If at the time of any incident which results in a claim under this Benefit Schedule, there is another insurance covering the same loss, damage, expense or liability **we** will not pay more than **our**

proportional share (not applicable to Section K – Travel Accident). Under Section G – Emergency Medical and Other Expenses – **your** private health insurer must pay the first amount as stated in their policy and **we** will commence cover once that limit has been reached.

You must claim against **your** private health insurer, state health provider and/ or other travel insurer first for any in-patient medical expenses abroad up to all applicable limits.

Not covered is any claim where **you** are entitled to Indemnity under any other insurance, including any amounts recoverable from any other source, except in respect of any excess beyond the amount which would have been covered under such other insurance, or any amount recoverable from any other source, had these benefits herein not been effected.

2. REASONABLE PRECAUTIONS

You must take and cause to be taken all reasonable precautions to avoid injury, illness, disease, loss, theft or damage and take and cause to be taken all practicable steps to safeguard **your** property from loss or damage and to recover property lost or stolen.

3. MAXIMUM AGE LIMIT

The maximum age limit for medical benefits in Section G – Emergency Medical and Other Benefits and Section H – Hospital Benefit is 65 years inclusive.

4. CURTAILMENT ASSISTANCE

In the event of **curtailment** necessitating **your** early return **home** **you** must contact **AXA Assistance**. The service is available to **you** and operates 24 hours a day, 365 days a year for advice and assistance with **your** return **home**. **AXA Assistance** will arrange transport **home** when **you** have notice of serious illness, imminent demise, or death of a **close relative at home**.

SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS

1. **You** must report all incidences of loss, theft, or attempted theft of **personal belongings** to the local police within 24 hours of discovery and obtain a written report. A Holiday Representatives Report is not sufficient.
2. For items damaged whilst on **your trip** **you** must obtain an official report from an appropriate local authority.
3. If **personal belongings** are lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **you** must report to them, in writing, details of the loss, theft or damage and obtain an official report from an appropriate local authority. If **personal belongings** are lost, stolen or damaged whilst in the care of an airline **you** must:
 - a) obtain a Property Irregularity Report from the airline.
 - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
 - c) retain all travel tickets and tags for submission if a claim is to be made under the Benefit Schedule.
3. **You** must provide an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your** claim.
4. Receipts for items lost, stolen or damaged must be retained as these will help **you** to substantiate **your** claim.

CLAIMS CONDITIONS

These conditions apply throughout your policy. **You** must comply with the following conditions to have the full protection of the policy. If you do not comply **we** may at our option refuse to deal with your claim, or reduce the amount of any claim payment.

The first thing you should do:

We recommend that you check your cover. Please read the appropriate section in the policy to see exactly what is, and is not covered, noting any conditions, limitations and exclusions.

If bodily injury, illness, loss, theft or damage happens you should immediately:

1. Call AXA Assistance to report a medical emergency, request repatriation, report any loss, theft or damage.
2. Inform a local police station in the country where the incident occurred and obtain a crime or lost property irregularity report.
3. Take all reasonable steps to recover missing property.
4. Take all reasonable steps to prevent a further incident.

What you must do after making a claim:

1. Tell us and provide full details in writing immediately if someone is holding you responsible for damage to their property or bodily injury to them. **You** must also immediately send us any writ or summons, letter of claim or other document.
2. If we ask, you must send us written details of your claim within 31 days.
3. **You** or your legal representatives must supply at your own expense all information, evidence, details of household insurance, medical certificates and assistance that may be needed.
4. **You** must supply all of your original invoices, receipts and reports etc. **We** have listed claims evidence that will help you substantiate your claim at the end of this policy wording.

What you must not do:

1. Admit or deny any claim made by someone else against you or make any arrangement with them.
2. Abandon any property for us to deal with.
3. Dispose of any damaged items as we may need to see them.

We are entitled to take over any rights in the defence or settlement of any claim in your name for our benefit against any other party. **We** are entitled to take possession of the property insured and deal with any salvage. **We** may also pursue any claim to recover any amount due from a third party in the name of anyone claiming cover under this policy.

We reserve the right to require you to undergo an independent medical examination at our expense. **We** may also request and will pay for a post-mortem examination.

We may refuse to reimburse you for any expenses for which you cannot provide receipts or bills.

FRAUD

You must not act in a fraudulent manner. If you or anyone acting for you:

1. make a claim under the policy knowing the claim to be false or fraudulently exaggerated in any respect or
2. make a statement in support of a claim knowing the statement to be false in any respect or
3. submit a document in support of a claim knowing the document to be forged or false in any respect or
4. make a claim in respect of any loss or damage caused by your willful act or with your connivance

Then

- a) we shall not pay the claim
- b) we shall not pay any other claim which has been or will be made under the policy
- c) we may at our option declare the policy void
- d) we shall be entitled to recover from you the amount of any claim already paid under the policy
- e) we may inform the police of the circumstances
- f) we shall not make any return of premium.

EMERGENCY AND MEDICAL SERVICE

Contact **AXA Assistance** on telephone: +44 20 8914 8040

In the event of a serious illness or accident which may lead to in-patient hospital treatment, or before any arrangements are made for repatriation or in the event of curtailment necessitating **your** early return **home** or in the event of an emergency **you** must contact **AXA Assistance** (any minor illness or injury costs must

be paid for by **you** and reclaimed). The service is available 24 hours a day, 365 days a year for advice, assistance, making arrangements for hospital admission, repatriation and authorisation of medical expenses. If this is not possible because the condition requires immediate emergency treatment **you** must contact **AXA Assistance** as soon as possible. Private medical treatment is not covered unless authorised specifically by **AXA Assistance**.

MEDICAL ASSISTANCE ABROAD

AXA Assistance has the medical expertise, contacts and facilities to help should **you** be injured in an accident or fall ill. **AXA Assistance** will also arrange transport **home** when this is considered to be medically necessary, or when **you** have notice of serious illness or death of a **close relative at home**.

PAYMENT FOR MEDICAL TREATMENT ABROAD

If **you** are admitted to a hospital/ clinic while outside **your country of residence**, **AXA Assistance** will arrange for medical expenses covered by the Benefit Schedule to be paid direct to the hospital/ clinic. To take advantage of this benefit someone must contact **AXA Assistance** for **you** as soon as possible.

For simple out-patient treatment, **you** should pay the hospital/ clinic yourself and claim back medical expenses from **us** on **your** return to **your country of residence**. Beware of requests for **you** to sign for excessive treatment or charges. If in doubt regarding any such requests, please call **AXA Assistance** for guidance.

RECIPROCAL HEALTH AGREEMENTS

EUROPEAN UNION (EU), EUROPEAN ECONOMIC AREA (EEA) AND SWITZERLAND

Before travelling to a European Union (EU) country, the European Economic Area (EEA) or Switzerland, we recommend that **you** apply for a European Health Insurance Card (EHIC) via **your** local Post Office or online <https://www.ehic.org.uk/Internet/home.do>. This card entitles **you** to certain free or reduced cost health cover arrangements in the EU, EEA or Switzerland.

AUSTRALIA

If **you** require medical treatment in Australia **you** must enrol with a local MEDICARE office. **You** do not need to enrol on arrival but **you** must do this after the first occasion **you** receive treatment. In-patient and out-patient treatment at a public hospital is then available free of charge. If **you** are admitted to hospital contact must be made with the **AXA Assistance** immediately and their authority obtained in respect of any treatment not available under MEDICARE.

For more information you should contact: Health Insurance Commission, PO Box 1001, Tuggeranong, ACT 2901, Australia or visit their website at: <http://www.humanservices.gov.au>

GENERAL EXCLUSIONS

These exclusions apply throughout your Benefit Schedule. **We** will not pay for claims arising directly or indirectly from:

1. War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, **terrorism**, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power but this exclusion shall not apply to losses under Section G – Emergency Medical and Other Expenses, Section H – Hospital Benefit and Section K – Travel Accident unless such losses are caused by nuclear, chemical or biological attack, or the disturbances were already taking place at the beginning of any **trip**.
2. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste, from combustion of nuclear fuel, the radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly.

3. Loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.
 4. **Your** participation in or practice of any sport or activity unless it is shown as covered in the list of **Sports and Activities or winter sports**.
 5. **Your** engagement in or practice of: manual work involving the use of dangerous equipment in connection with a profession business or trade, flying except as a fare paying passenger in a fully-licensed passenger-carrying aircraft, the use of motorised two or three wheeled vehicles unless a full driving licence issued in **your country of residence** is held permitting the use of such vehicles, professional entertaining, professional sports, racing (other than on foot), motor rallies and motor competitions, or any tests for speed or endurance.
 6. **Your** pursuit of the following winter sports; Off piste skiing without a guide, skiing against local authoritative warning or advice, ski stunting, free-style skiing, Nordic skiing, ice hockey, bobbing, tobogganing, heli skiing, ski acrobatics, ski flying, ski jumping, ski mountaineering, glacier skiing, snow cat skiing, snow carting or the use of bob sleighs, luges or skeletons.
 7. **Your** wilfully, self-inflicted injury or illness, suicide or attempted suicide, sexually transmitted diseases, solvent abuse, alcohol abuse, the use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a **medical practitioner**, but not for the treatment of drug addiction), self exposure to needless peril (except in an attempt to save human life).
 8. A condition **you** have in respect of which a **medical practitioner** has advised **you** not to travel or would have done so had **you** sought his/ her advice.
 9. A condition for which **you** are travelling with the intention of obtaining medical treatment (including surgery or investigation) or advice outside of **your country of residence**.
 10. A condition for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**.
 11. **Your** travel against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider.
 12. **Your** own unlawful action or any criminal proceedings against **you**.
 13. Unless **we** provide cover under these benefits, any other loss, damage or additional expense following on from the event for which **you** are claiming. Examples of such loss, damage or additional expenses would be the cost of replacing locks after losing keys, cost incurred in preparing a claim or loss of earnings following bodily injury or illness.
 14. Operational duties as a member of the Armed Forces.
 15. **Your** travel to a country or specific area or event to which a government agency in the **country of residence** or the World Health Organisation has advised the public not to travel, or which are officially under embargo by the United Nations.
- passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a police report.
4. Loss or damage due to delay, confiscation or detention by customs or other authority.
 5. Loss, theft of or damage to cheques other than travellers cheques, money, postal or money orders, pre-paid coupons or vouchers, travel tickets, credit/ debit or charge cards.
 6. Loss, theft of or damage to unset precious stones, contact or corneal lenses, eye glasses, hearing aids, dental or medical fittings, cosmetics, antiques, musical instruments, deeds, manuscripts, securities, perishable goods, bicycles and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).
 7. Loss or damage due to cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or accident to the aircraft, sea vessel, train or vehicle in which they are being carried.
 8. Loss or damage due to breakage of sports equipment or damage to sports clothing whilst in use.
 9. Claims which are not supported by the original receipt, proof of ownership or insurance valuation (obtained prior to the loss) of the items lost, stolen or damaged.
 10. Loss, theft of or damage to tools of trade, motor accessories and other items used in connection with **your** business, trade, profession or occupation.
 11. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown or liquid damage.
 12. Loss or damage due to depreciation in value, variations in exchange rates or shortages due to error or omission.
 13. Claims arising from loss or theft from **your** accommodation unless there is evidence of forced entry which is confirmed by a police report.
 14. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **baggage**.
 15. Claims arising from loss, theft or damage of **personal belongings** shipped as freight or under a bill of lading.

SPORTS AND ACTIVITIES

You are covered under Section G – Emergency Medical and Other Expenses for the following activities automatically at no additional charge, for which **your** participation in during **your trip** is not the sole or main reason for **your trip**.

- Archery (amateur)
- Badminton (amateur)
- Baseball (amateur)
- Basketball (amateur)
- Beach Games
- Bungee Jump (1)
- Camel/ Elephant Riding (incidental)
- Canoeing (Up to Grade 3)
- Clay Pigeon Shooting
- Cricket (amateur)
- Cycling (other than specified)
- Dinghy Sailing
- Fell Walking
- Fencing
- Fishing
- Football (amateur)
- GAA Football (amateur)
- Golf (amateur)
- Hiking (under 2,000 meters altitude)
- Hockey (amateur)
- Horse Riding (up to 7 days)
- Jet Boating
- Jet Skiing
- Jogging

SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS

1. Payment will be made based on the value of the property at the time it was damaged, lost or stolen. A deduction will be made for wear, tear and loss of value depending on the age of the property.
2. Loss, theft of or damage to **valuables** or **personal money** left **unattended** at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe or locked safety deposit box.
3. Loss, theft of or damage to **personal belongings** contained in an **unattended** vehicle:
 - a) overnight between 9pm and 8am (local time) or
 - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the

- Manual Work - bar and restaurant, waitress, waiter, chalet, maids, au pair and nanny's and occasional light manual work at ground level including retail work and fruit picking but excluding the use of power tools and machinery
- Marathon Running (amateur)
- Motorcycling up to 50cc
- Netball (amateur)
- Non manual work (Including professional, administrative or clerical duties only)
- Orienteering
- Outwardbound Pursuits
- Paintballing
- Parascending (over water)
- Pony Trekking
- Racquetball
- River Canoeing (Up to Grade 3)
- Roller Skating
- Roller Blading
- Rounders
- Rowing
- Running – sprint/ long distance (amateur)
- Sail Boarding
- Sailing within territorial waters
- Scuba Diving* Up to 30 metres if adequately supervised with qualified instructor (see notes below)
- Skate Boarding
- Snorkelling
- Squash (amateur)
- Surfing (amateur, under 14 days)
- Tennis (amateur)
- Tour Operator Safari
- Track Events
- Trekking (under 2,000 metres altitude)
- Volleyball (amateur)
- War Games
- Water Polo (amateur)
- Water skiing (amateur)
- White Water Rafting (Grade 1 to 3)
- Windsurfing (amateur)
- Yachting (racing/ crewing inside territorial waters)

* Scuba diving – scuba diving to the following depths, when you hold the following qualifications, and are diving under the direction of an accredited dive marshal, instructor or guide and within the guidelines of the relevant diving or training agency or organisation:

- PADI Open Water – 18 metres
- PADI Advanced Open Water – 30 metres
- BSAC Ocean Diver – 20 metres
- BSAC Sports Diver – 35 metres
- BSAC Dive Leader – 50 metres

We must agree with any equivalent qualification. If **you** do not hold a qualification, **we** will only cover **you** to dive to a depth of 18 metres.

SECTION A – TRAVEL ADVICE

WHAT IS COVERED

Before and during **your trip we** will provide **you** with information on:

1. current visa and entry requirements for all countries. If **you** hold a passport from a country other than the **country of residence, we** may need to refer **you** to the embassy or consulate of the country concerned.
2. current vaccination requirements for all countries and information on current World Health Organisation warnings.
3. weather forecasts abroad.
4. specific languages spoken at the travel destination.
5. time zones and time differences.
6. opening hours of major banks including information and advice on the acceptability of various currencies and the main currency in use at the travel destination.

SECTION B – TRAVEL ASSISTANCE

WHAT IS COVERED

During **your trip we** will:

1. assist **you** with the procurement of a lawyer and/ or interpreter and or the advance of any legal or interpreter's fees if **you** are arrested or threatened with arrest while travelling, or are required to deal with any public authority.
2. relay messages to **your** close relatives, business colleagues or friends in **your country of residence**.
3. assist in locating **your** lost luggage and provide **you** with regular updates on the current situation.
4. provide an advance if **your** cash, traveller's cheques or credit cards are lost or stolen and there are no other means for **you** to obtain funds. All advances and delivery fees will be charged to **your** Visa Infinite Card account unless other accepted means of repayment to **us** are made in advance.
5. assist in obtaining replacement travel documents if the documents required for the return journey are lost or stolen. **We** will not pay the charges payable for issuing new documents. In the event that travel tickets for the return journey are lost or stolen, an advance shall be paid to enable purchase of a replacement ticket. All advances and delivery fees will be charged to **your** Infinite Visa Card account unless other accepted means of repayment to **us** are made in advance.

WHAT IS NOT COVERED

1. The cost of any advance or delivery fee.
2. Anything mentioned in **GENERAL EXCLUSIONS**.

SECTION C – CANCELLATION OR CURTAILMENT CHARGES

YOU SHOULD ALWAYS CONTACT AXA ASSISTANCE BEFORE CURTAILMENT Telephone Number +44 20 8914 8040

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**, for any irrecoverable unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay together with any reasonable additional travel expenses incurred if

- a) cancellation of the **trip** is necessary and unavoidable or
 - b) the **trip** is **curtailed** before completion
- as a result of any of the following events occurring:
1. The death, **bodily injury** or illness of:
 - a) **you**
 - b) any person with whom **you** are travelling or have arranged to travel with
 - c) any person with whom **you** have arranged to reside temporarily
 - d) **your close relative**
 - e) a **business associate**
 2. Compulsory quarantine, jury service attendance or being called as a witness at a Court of Law of **you** or any person with whom **you** are travelling or have arranged to travel with.
 3. Redundancy (which qualifies for payment under the current redundancy payment legislation in the **country of residence** and at the time of booking the **trip** there was no reason to believe anyone would be made redundant) of **you** or any person with whom **you** are travelling or have arranged to travel with.
 4. The withdrawal of leave for members of the armed forces, police, fire, nursing or ambulance services or employees of a government department, provided that such cancellation or **curtailment** could not reasonably have been expected at the time of receiving these benefits or booking **your trip** (whichever is the later).
 5. The police requesting **you**, within 7 days of **your** departure date, to remain at or subsequently return to **your home** due to serious damage to **your home** caused by fire, aircraft, explosion, storm, flood, subsidence, malicious persons or theft.

SPECIAL CONDITIONS

1. **You** must obtain a medical certificate from **your** treating **medical practitioner** and prior approval of **AXA Assistance** to confirm the necessity to return **home** prior to **curtailment** of the **trip** due to death, **bodily injury** or illness.
2. If **you** delay or fail to notify the travel agent, tour operator or provider of transport/ accommodation, at the time it is found necessary to cancel the **trip**, **our** liability shall be restricted to the cancellation charges that would have applied had failure or delay not occurred.
3. If **you** cancel the **trip** due to **bodily injury** or illness **you** must provide a medical certificate from the **medical practitioner** treating the injured/ ill person, stating that this necessarily and reasonably prevented **you** from travelling.
4. If the car in which **you** intended to use for the **trip** is stolen or damaged within 7 days of the departure date then the costs of a hire car will be covered and no cancellation costs will be paid.
5. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. **Pre-existing medical conditions** of **you** or anyone under WHAT IS COVERED 1.
2. The cost of recoverable airport charges and levies.
3. Any claims arising directly or indirectly from:
 - a) Redundancy caused by or resulting from misconduct leading to dismissal or from resignation or voluntary redundancy or where a warning or notification of redundancy was given prior to the date these benefits became effective or the time of booking any **trip** (whichever is the earlier).
 - b) Circumstances known to **you** prior to the date these benefits became effective or the time of booking any **trip** (whichever is the earlier) which could reasonably have been expected to give rise to cancellation or **curtailment** of the **trip**.
4. Travel tickets paid for using any airline mileage reward scheme, for example Air Miles, or any card bonus point schemes.
5. Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
6. Normal pregnancy, without any **accompanying bodily injury**, illness, disease or complication. This section is designed to provide cover for unforeseen events, accidents, illnesses and diseases and normal childbirth would not constitute an unforeseen event.
7. Anything mentioned in GENERAL EXCLUSIONS.

SECTION D – MISSED DEPARTURE/ MISSED CONNECTION

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**, for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** overseas destination, connecting flights outside the **country of residence** or returning to the **country of residence** if **you** fail to arrive at the international departure point in time to board the scheduled **public transport** on which **you** are booked to travel on the initial international journey of the **trip** as a result of:

1. the failure of other scheduled **public transport** or
2. an accident to or breakdown of the vehicle in which **you** are travelling or
3. strike, industrial action or adverse weather conditions

SPECIAL CONDITIONS

1. **You** must allow sufficient time for the scheduled **public transport** or other transport to arrive on schedule and to deliver **you** to the departure point.
2. **You** must obtain a written report from the carrier confirming the delay and cause.

3. **You** must obtain a written report from the police or attending emergency service if the vehicle **you** are travelling in breaks down or is involved in an accident.
4. **You** may claim only once under Section E – Delayed Departure/ Abandonment or once under Section D – Missed Departure/ Missed Connection or once under Section F – Involuntary Denial of Boarding for the same event, not twice or all.
5. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Claims arising directly or indirectly from:
 - a) Strike or industrial action existing or declared publicly on or before the time that **you** booked **your trip** or **your** cover commenced.
 - b) An accident to or breakdown of the vehicle in which **you** are travelling for which a professional repairers report is not provided.
 - c) Breakdown of any vehicle in which **you** are travelling if the vehicle is owned by **you** and has not been serviced properly and maintained in accordance with manufacturer's instructions.
2. Additional expenses where the scheduled **public transport** operator has offered reasonable alternative travel arrangements.
3. Missed departure when less than a minimum connection time of 2 hours between connecting flights at an international point of departure has been arranged or longer if flight reservations systems require longer periods for connections.
4. Anything mentioned in GENERAL EXCLUSIONS.

SECTION E – DELAYED DEPARTURE/ ABANDONMENT

WHAT IS COVERED

If departure of the scheduled **public transport** on which **you** are booked to travel is delayed at the final departure point from or to the **country of residence** for at least 4 hours from the scheduled time of departure due to:

- a) strike or
- b) industrial action or
- c) adverse weather conditions or
- d) mechanical breakdown of or a technical fault occurring in the scheduled **public transport** on which **you** are booked to travel

we will pay **you**, either:

1. up to the amount shown in the **Benefit Table** for each completed 4 hours delay up to a maximum of the amount shown in the **Benefit Table**, or
2. up to the amount as shown in the **Benefit Table** for Section C - Cancellation for any irrecoverable unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay if after a minimum of 24 hours delay has elapsed for a trip booked 1-7 days and a minimum of 36 hours delay has elapsed for a trip booked over 8 days, **you** choose to cancel **your trip**.

SPECIAL CONDITIONS

1. **You** must check in according to the itinerary supplied to **you**.
2. **You** must obtain confirmation from the carriers (or their handling agents) in writing of the number of hours of delay and the reason for the delay.
3. **You** must comply with the terms of contract of the travel agent, tour operator or provider of transport.
4. **You** may claim only once under Section E – Delayed Departure/ Abandonment or once under Section D – Missed Departure/ Missed Connection or once under Section F – Involuntary Denial of Boarding for the same event, not twice or all.
5. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Claims arising directly or indirectly from:

- a) Strike or industrial action or air traffic control delay existing or publicly declared by the date these benefits became effective or **you** booked **your trip** (whichever is the earlier).
 - b) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Aviation Authority or a Port Authority or any similar body in any country.
2. Anything mentioned in GENERAL EXCLUSIONS.

SECTION F – INVOLUNTARY DENIAL OF BOARDING

WHAT IS COVERED **DENIAL OF BOARDING**

If **you** have checked-in, or attempted to check in, for a confirmed scheduled flight, within the published check-in times, and **you** are involuntarily denied boarding as a result of overbooking, **we** will pay **your** costs incurred in respect of restaurant meals and refreshments consumed between the original scheduled flight departure time and **your** actual departure time, up to the amount shown in the **Benefit Table**.

EXTENDED DENIAL OF BOARDING

If **you** are delayed for more than six hours, **we** will pay up to the amount shown in the **Benefit Table** for **your** costs incurred in respect of hotel accommodation used and restaurant meals and refreshments consumed, within 30 hours of the original scheduled flight departure time, and before **your** actual departure.

We will pay **you** up to the amount shown in the **Benefit Table** for each full 6 hour waiting period **you** experience until **your** next available flight to the same pre-booked destination following **your** involuntary inability to travel on a publicly licensed scheduled aircraft on which **you** have reserved a seat due to the airline over booking. In the event **you** receive compensation from the airline, the amount **we** will pay **you** will be reduced by the compensation **you** have already or are due to receive.

SPECIAL CONDITIONS

1. **You** may claim only once under Section E – Delayed Departure/ Abandonment or once under Section D – Missed Departure/ Missed Connection or once under Section F – Involuntary Denial of Boarding for the same event, not twice or all.
2. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Any costs or charges for which the airline will compensate **you**;
2. Any costs or charges incurred where seat bumping was not involuntary and/ or on a mandatory basis;
3. Any claims where written proof from the airline is not obtained confirming **your** inability to travel through over-booking and the period of delay until **your** next available flight is confirmed.
4. Anything mentioned in GENERAL EXCLUSIONS.

SECTION G – EMERGENCY MEDICAL AND OTHER EXPENSES

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**, for the following expenses which are necessarily incurred outside of the **country of residence** as a result of **your** suffering **bodily injury** or a **medical condition** and/ or compulsory quarantine:

1. Emergency medical, surgical, hospital, ambulance and nursing fees and charges incurred outside of the **country of residence**.
2. Emergency dental treatment for the immediate relief of pain (to natural teeth only) up to the limit in the **Benefit Table** incurred outside of the **country of residence**.

3. In the event of **your** death outside of the **country of residence** the reasonable additional cost of funeral expenses abroad up to a maximum of €2,500 plus the reasonable cost of conveying **your** ashes to **your home**, or the additional costs of returning **your** remains to **your home**.
4. Up to €200 per night for 10 nights for reasonable accommodation expenses incurred, up to the standard of **your** original booking, if it is medically necessary for **you** to stay beyond **your** scheduled return date. This includes, with the prior authorisation of **AXA Assistance**, up to €200 per night for reasonable additional accommodation expenses for a friend or **close relative** to remain with **you** and escort **you home**. If **you** and **your** friend or **close relative** are unable to use the original return ticket, **AXA Assistance** will provide additional travel expenses up to the standard of **your** original booking to return **you** to **your home**.
5. Economy class transport and up to €200 per night for 10 nights' accommodation expenses for a **close relative** from the **country of residence** to visit **you** or escort **you** to **your home** if **you** are travelling alone and if **you** are hospitalised as an in-patient for more than 10 days, with the prior authorisation of **AXA Assistance**.
6. With the prior authorisation of **AXA Assistance**, the additional costs incurred in the use of air transport or other suitable means, including qualified attendants, to repatriate **you** to **your home** if it is medically necessary. Repatriation expenses will be in respect only of the identical class of travel utilised on the outward journey unless **AXA Assistance** agree otherwise.
7. Economy class transport and up to €200 per night for 3 nights' accommodation expenses for a friend or **close relative** to travel from the **country of residence** to escort **beneficiaries** under the age of 16 to **your home** in the **country of residence** if **you** are physically unable to take care of them. If **you** cannot nominate a person **we** will then select a competent person.
8. If **we** have repatriated **you** to **your country of residence** with a medical escort **we** will pay for **your** accommodation, food and nursing costs for up to 10 days up to the amounts listed in the **Benefit Table** while **you** are convalescing in a Nursing Home registered in accordance with the legislation in the **country of residence**. The convalescence must immediately follow **your** repatriation and be agreed to by **our** senior medical officer in consultation with the registered **medical practitioner** treating **you**.

SPECIAL CONDITIONS

1. **You** must give notice as soon as possible to **AXA Assistance** of any **bodily injury** or **medical condition** which necessitates **your** admittance to hospital as an in-patient or before any arrangements are made for **your** repatriation.
2. **You** must contact **AXA Assistance** as soon as possible in the event of **you** incurring medical expenses in excess of €500 relating to any one incident.
3. In the event of **your bodily injury** or **medical condition** **we** reserve the right to relocate **you** from one hospital to another and arrange for **your** repatriation to the **country of residence** at any time during the **trip**. **We** will do this if in the opinion of the **medical practitioner** in attendance or **AXA Assistance** **you** can be moved safely and/ or travel safely to the **country of residence** to continue treatment.
4. **You** must always contact **AXA Assistance** before curtailing **your trip**.
5. **You** must claim against **your** state or private health insurer first for any in-patient medical expenses abroad up to **your** policy limit. In the event of a claim under this section **you** must advise **us** of any other insurance policy **you** hold or benefit from which may provide cover.
6. Anything mentioned in GENERAL EXCLUSIONS.

WHAT IS NOT COVERED

1. **Pre-existing medical conditions**
2. Any claims arising directly or indirectly in respect of:

- a) Costs of telephone calls, other than calls to **AXA Assistance** notifying them of the problem for which **you** are able to provide a receipt or other evidence to show the cost of the call and the number telephoned.
 - b) The cost of treatment or surgery, including exploratory tests, which are not directly related to the **bodily injury** or **medical condition** which necessitated **your** admittance into hospital.
 - c) Any expenses which are not usual, reasonable or customary to treat **your bodily injury** or **medical condition**.
 - d) Any form of treatment or surgery which in the opinion of the **medical practitioner** in attendance and **AXA Assistance** can be delayed reasonably until **your** return to the **country of residence**.
 - e) Expenses incurred in obtaining or replacing medication, which at the time of departure is known to be required or to be continued outside the **country of residence**.
 - f) Additional costs arising from single or private room accommodation.
 - g) Treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre unless agreed by **AXA Assistance**.
 - h) Any expenses incurred after **you** have returned to the **country of residence** unless previously agreed to by **AXA Assistance**.
 - i) Expenses incurred as a result of a tropical disease where **you** have not had the recommended inoculations and/ or taken the recommended medication.
 - j) **Your** decision not to be repatriated after the date when in the opinion of **AXA Assistance** it is safe to do so.
3. Anything mentioned in GENERAL EXCLUSIONS.

SECTION H – HOSPITAL BENEFIT

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**, for every complete 24 hours **you** have to stay in hospital as an in-patient outside the **country of residence** as a result of **bodily injury** or **medical condition** **you** sustain. **We** will pay the amount in the **Benefit Table** in addition to any amount payable under Section G – Emergency Medical and Other Expenses.

SPECIAL CONDITIONS

1. **You** must give notice as soon as possible to **AXA Assistance** of any **bodily injury** or **medical condition** which necessitates **your** admittance to hospital as an in-patient.
2. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Any claims arising directly or indirectly from:
 - a) Any additional period of hospitalisation relating to treatment or surgery, including exploratory tests, which are not directly related to the **bodily injury** or **medical condition** which necessitated **your** admittance into hospital.
 - b) Hospitalisation relating to any form of treatment or surgery which in the opinion of the **medical practitioner** in attendance and **AXA Assistance** can be delayed reasonably until **your** return to the **country of residence**.
 - c) Any additional period of hospitalisation relating to treatment or services provided by a convalescent or nursing home or any rehabilitation centre.
 - d) Hospitalisation as a result of a tropical disease where **you** have not had the recommended inoculations and/ or taken the recommended medication.
 - e) Any additional period of hospitalisation following **your** decision not to be repatriated after the date when in the opinion of **AXA Assistance** it is safe to do so.
2. **Pre-existing medical conditions**
3. Anything mentioned in GENERAL EXCLUSIONS.

SECTION I – HOME EMERGENCY SERVICE

WHAT IS COVERED

HOME REPAIR

We will arrange for one of **our** approved tradesmen to contact **you** to arrange for the emergency repair to **your** domestic gas or electricity supply, fixed heating system, domestic plumbing or drainage system, doors, windows, external locks or roofing, if any of them suffer damage during **your trip**, or up to 3 days upon **your** return **home** after a **trip**. **We** will pay for the call out charge and two man-hour's time. **We** will also pay for any parts or materials used to make the repair up to a maximum total of €150 (including VAT) per **trip**.

WHAT IS NOT COVERED

1. More than two man hour's labour charge.
2. Costs of more than € 150 (including VAT) for parts and materials used to make the repair.
3. Blockage of toilet units not caused by sudden breakage or mechanical failure.
4. Failure of the central heating system unless there is the danger of frost damage to **your home**.
5. Emergencies caused by leaking water hoses or water appliances.
6. Leaking overflows or gradual seepage from defective seal joints, any claim involving a septic tank, descaling or work relating to hard water scale deposit removal.
7. Damage made by the tradesman while gaining necessary access to **your home**.
8. Damage to any contents of **your home**.
9. Any costs which were not authorised by **us** first.
10. Anything mentioned in GENERAL CONDITIONS.
11. Anything mentioned in GENERAL EXCLUSIONS.

SECTION J – BAGGAGE, PERSONAL MONEY, BAGGAGE DELAY, EXTENDED BAGGAGE DELAY AND PASSPORT

WHAT IS COVERED

BAGGAGE

We will pay **you**, up to the amount shown in the **Benefit Table**, for the accidental loss of, theft of or damage to **baggage**. The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (or **we** may at **our** option replace, reinstate or repair the lost or damaged **baggage**). The maximum **we** will pay for any one article, pair or set of articles is equal to the Single Item Limit shown in the **Benefit Table**. The maximum **we** will pay for all **valuables** in total is equal to the **valuables** Limit shown in the **Benefit Table**. If **you** are on a cruise **we** will pay **you**, up to the amount shown in the **Benefit Table** for cruise baggage

PERSONAL MONEY

We will pay **you** up to the amounts shown in the **Benefit Table** for the accidental loss of, theft of or damage to **personal money**.

We will pay **you** up to the amounts shown in the **Benefit Table** for cash limit for bank notes, currency notes and coins and up to the Cash Limit for under 16's if **you** are under the age of 16.

BAGGAGE DELAY

We will pay **you** up to the amount shown in the **Benefit Table** for Baggage Delay for the emergency replacement of clothing, medication and toiletries if the checked in **baggage** is temporarily lost in transit during the outward journey and not returned to **you** within 6 hours of **your** arrival.

EXTENDED BAGGAGE DELAY

We will pay **you** up to the amount shown in the **Benefit Table** for Extended Baggage Delay if the checked in **baggage** has still not arrived at **your** destination airport within 48 hours of **your** arrival.

If the loss is permanent the amount paid will be deducted from the final amount to be paid under this section.

PASSPORT

We will pay you up to the amount shown in the **Benefit Table** for reasonable additional travel and accommodation expenses incurred necessarily abroad to obtain a replacement of your lost or stolen passport. We will only pay the pro-rata value of the lost passport.

SPECIAL CONDITIONS

1. Written confirmation must be obtained from the carrier, confirming the number of hours the **baggage** was delayed.
2. All receipts must be retained.
3. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS.
4. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS.
2. Anything mentioned in GENERAL EXCLUSIONS.

SECTION K – TRAVEL ACCIDENT

DEFINITIONS - Applicable to this section

Loss of limb

– loss by permanent severance of an entire hand or foot or the total and permanent loss of use of an entire hand or foot.

Loss of sight

– total and irrecoverable loss of sight in both eyes.

Permanent total disablement

– disablement which, having lasted for a period of at least 12 consecutive months from the date of occurrence will, in the opinion of an independent qualified specialist, prevents you from engaging in, or giving any attention to, any business or occupation for the remainder of your life.

WHAT IS COVERED

We will pay you, up to the amount shown in the **Benefit Table**, if you sustain **bodily injury** whilst on **public transport** on a trip which shall solely and independently of any other cause, result within one year in your death, **loss of limb**, **loss of sight** or **permanent total disablement**.

SPECIAL CONDITIONS

1. Our **medical practitioner** may examine you as often as they deem necessary in the event of a claim.
2. The benefit is not payable under **permanent total disablement**, until one year after the date you sustain **bodily injury**.
3. The benefit is not payable to you under more than one of the items shown in the **Benefit Table**.
4. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Any claim arising directly or indirectly from any **pre-existing medical conditions**
2. Anything mentioned in GENERAL EXCLUSIONS.

SECTION L – PERSONAL LIABILITY

WHAT IS COVERED

We will pay up to the amount shown in the **Benefit Table**, (inclusive of legal costs and expenses up to the amount shown in the **Benefit Table**) against any amount you become legally liable to pay as compensation for any claim or series of claims arising from any event occurring during a **trip** outside of the **country of residence** in respect of accidental:

1. **Bodily injury**, death, illness or disease to any person who is not in your employment or who is not a **close relative** or member of your household.
2. Loss of or damage to property that does not belong to and is neither in the charge of or under the control of you, a **close relative**, anyone in your employment or any member of your

household other than any temporary holiday accommodation occupied (but not owned) by you.

In the event of an incident related to golfing, we will pay up to the amount shown in the **Benefit Table** for Golfing Liability.

SPECIAL CONDITIONS

1. You must give us written notice as soon as possible of any incident, which may give rise to a claim.
2. You must forward every letter, writ, summons and process to us as soon as you receive it.
3. You must not admit any liability or pay, offer to pay, promise to pay or negotiate any claim without our written consent.
4. We will be entitled if we so desire to take over and conduct in your name the defence of any claims for indemnity or damages or otherwise against any third party. We shall have full discretion in the conduct of any negotiation or proceedings or in the settlement of any claim and you shall give us all necessary information and assistance which we may require.
5. In the event of your death, your legal representative(s) will have the protection of the Benefit Schedule provided that such representative(s) comply(ies) with the terms and conditions outlined in this document.
6. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Compensation or legal costs arising directly or indirectly from:
 - a) Liability which has been assumed by you which would not apply had you not agreed to take on the liability.
 - b) Pursuit of any business, trade, profession or occupation or the supply of goods or services.
 - c) Ownership, possession or use of vehicles, aircraft or watercraft (other than surfboards or manually propelled row boats, punts, canoes).
 - d) The transmission of any communicable disease or virus.
 - e) Ownership or occupation of land or buildings (other than occupation only of any temporary holiday accommodation where we will not pay for the first £250 of each and every claim arising from the same incident).
 - f) Your criminal, malicious or deliberate acts.
2. Anything mentioned in the GENERAL EXCLUSIONS.

SECTION M – OVERSEAS LEGAL EXPENSES AND ASSISTANCE

DEFINITIONS - Applicable to this section

Adviser

– specialist solicitors or their agents.

Adviser's costs

– reasonable fees and disbursements incurred by the adviser with our prior written authority. Legal and accounting expenses shall be assessed on the standard basis and third party costs shall be covered if awarded against you and paid on the standard basis of assessment.

Panel

– our panel of advisers who may be appointed by us to act for you.

WHAT IS COVERED

We will pay up to the amount shown in the **Policy Schedule** for legal costs to pursue a civil action for compensation if someone else causes you **bodily injury**, **medical conditions** or death during your trip. We will also pay reasonable costs for an interpreter we selected for court proceedings.

HOW WE SETTLE LEGAL EXPENSES CLAIMS:

We will appoint a member of our panel to handle your case. However, should you choose to appoint an adviser to act on your behalf, you must notify us immediately to that effect. We will, upon receipt of your notice, advise you of any conditions concerning such appointment.

SPECIAL CONDITIONS

1. **You** must notify **us** of claims as soon as reasonably possible and in any event within 30 days of **you** becoming aware of an incident which may generate a claim.
2. **We** will provide **you** with a claim form which must be returned promptly with all information **we** require. **You** must supply at **your** own expense all of the information which **we** require to decide whether a claim may be accepted.
3. **We** will only authorise a legal adviser if there is a reasonable prospect of success.
4. **We** will only be liable for **adviser's costs** for work expressly authorised by **us** in advance in writing and undertaken where there are reasonable prospects of success. In the event that **you** instruct an **adviser** of **your** own choice instead of the **panel adviser** appointed by **us**, **your adviser's costs** will be covered to the extent that they do not exceed **our standard panel adviser's costs**.
5. **We** will not initiate legal proceedings in more than one country for the same occurrence.
6. **We** may choose to conduct legal proceedings in the United States of America or Canada under the contingency fee system operating in those countries.
7. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Any claim where **we** think there is not a reasonable chance of **you** winning the case or achieving a reasonable settlement.
2. Costs or expenses incurred before **we** accept **your** claim in writing.
3. Claims not notified to **AXA Assistance** within 90 days of the incident or as soon as reasonably possible.
4. Claims against a carrier, the travel or holiday agent or tour operator arranging any **trip**, **us**, Inter Partner Assistance, AXA Travel Insurance, **your** employer, **AXA Assistance** or their agents.
5. Claims against someone **you** were travelling with or another **insured person** or any other person covered under any AXA Travel Insurance policy.
6. Legal action where in **our** opinion the estimated amount of compensation is less than € 750 or where **you** do not have a reasonable chance of success.
7. Actions undertaken in more than one country.
8. Lawyers' fees incurred on the condition that **your** action is successful.
9. Penalties or fines which a Court awards against **you**.
10. Claims by **you** other than in **your** private capacity.
11. Claims occurring within the **country of residence**.
12. Anything mentioned in GENERAL EXCLUSIONS.

SECTION N – CATASTROPHE BENEFIT

WHAT IS COVERED

We will pay **you** up to the amounts shown in the **Benefit Table** in the event that **you** are forced to move from the pre-booked accommodation as a result of fire, lightning, explosion, earthquake, storm, tempest, hurricane, flood, medical epidemic or local Government directive which is confirmed in writing by local or national authority for irrecoverable travel or accommodation costs necessarily incurred to continue with the **trip** or, if the **trip** cannot be continued for **your** return home.

SPECIAL CONDITIONS

1. **You** must obtain a report from local or national authority stating that it was not acceptable for **you** to remain in **your** pre-booked accommodation.
2. If **you** receive any compensation from the tour operator, booking agent or any third party, any claim under this section will be reduced by the amount of compensation received.
3. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Claims where the tour company is responsible.
2. Anything mentioned in GENERAL EXCLUSIONS.

SECTION O – HIJACK BENEFIT

WHAT IS COVERED

We will pay **you** up to the amounts shown in the **Benefit Table** for each 24 hours **you** are detained in the event that the aircraft or sea vessel in which **you** are travelling as a fare paying passenger is hijacked.

WHAT IS NOT COVERED

Anything mentioned in GENERAL EXCLUSIONS.

SECTION P – BUSINESS BENEFIT

WHAT IS COVERED

Business Equipment

We will pay **you** up to the amount shown in the **Benefit Table**, for accidental loss, theft of or damage to **your business equipment**. The maximum **we** will pay for any **single item**, computer equipment or business samples is as shown in the **Benefit Table**.

Replacement Business Colleague

We will pay up to the amount shown in the **Benefit Table** in arranging for a **business associate** to take **your** place on a pre-arranged **business trip** in the event that:

1. **You** die.
2. **You** are unable to make the **business trip** due to **you** being hospitalised or totally disabled as confirmed in writing by a **medical practitioner**.
3. **Your close relative** or **business associate** in the **country of residence** dies, is seriously injured or falls seriously ill.
4. **You** are unable to continue working on **your trip** following **your** return home after **your** covered treatment under Section E – Emergency Medical and Other Expenses.

SPECIAL CONDITIONS

1. **Our** liability for **business equipment** hired by **you** shall be further limited to **your** liability for such loss or damage.
2. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS.
3. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Claims arising for **business equipment** left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property at anytime.
2. Claims arising for computer equipment and **valuables** whilst in the custody of a carrier.
3. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **baggage**.
4. In respect of **replacement business colleague**:
 - a) Additional costs if **you** were totally disabled, hospitalised or **you** were on a waiting list to go into hospital at the time of arranging the **business trip**.
 - b) Additional costs if **you** were aware of circumstances at the time of arranging the **business trip** which could reasonably have been expected to give rise to disruption of the **business trip**.
5. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS.
6. Anything mentioned in GENERAL EXCLUSIONS.

SECTIONS Q1, Q2, Q3 and Q4 WINTERSPORTS

SECTION Q1 – SKI EQUIPMENT AND SKI

EQUIPMENT HIRE

WHAT IS COVERED

SKI EQUIPMENT

We will pay **you**, up to the amount shown in the **Benefit Table**, for the accidental loss of, theft of or damage to **your** own **ski equipment**, or for hired **ski equipment**. The amount payable will be the value at today's prices less a deduction for wear and tear and depreciation, (or **we** may at **our** option replace, re-instate or

repair the lost or damaged **ski equipment**). The maximum **we** will pay for any one article, pair or set of articles is shown in the **Benefit Table**.

SKI EQUIPMENT HIRE

We will pay **you**, up to the amount shown in the **Benefit Table**, for the reasonable cost of hiring replacement **ski equipment** as a result of the accidental loss of, theft of or damage to or temporary loss in transit for more than 24 hours of **your own ski equipment**.

SPECIAL CONDITIONS

1. **Our** liability for **ski equipment** hired by **you** shall be further limited to **your** liability for such loss or damage.
2. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS.
3. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS.
2. Anything mentioned in the GENERAL EXCLUSIONS.

SECTION Q2 – SKI PACK

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**:

- a) For the unused portion of **your** ski pack (ski school fees, lift passes and hired **ski equipment**) following **your bodily injury** or illness.
- b) For the unused portion of **your** lift pass if lost.

SPECIAL CONDITIONS

1. **You** must provide written confirmation from a **medical practitioner** that such **bodily injury** or illness prevented **you** from using **your** ski pack.
2. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. **Pre-existing medical conditions**
2. Anything mentioned in the GENERAL EXCLUSIONS.

SECTION Q3 – PISTE CLOSURE

WHAT IS COVERED

If **you** are prevented from skiing at the pre-booked resort for more than 24 consecutive hours, because insufficient snow, strike or adverse weather causes a total closure of the lift system (other than baby drags and lifts used for transport within the resort by non-skiers), **we** will pay **you**, up to the amount shown in the **Benefit Table** for the cost of transport and lift pass charges for travel to and from an alternative site (excluding cross country skiing).

If no alternative sites are available **we** will pay **you** a cash benefit up to the amount shown in the **Benefit Table**.

SPECIAL CONDITIONS

1. The cover only applies to **trips** to resorts, taken during their published ski season, where **you** have pre-booked at least one nights' accommodation and for so long as such conditions prevail at the resort, but not exceeding the pre-booked period of **your trip**.
2. **You** must obtain written confirmation from the resort management of the piste conditions confirming the closure of facilities and the dates applicable.
3. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

Anything mentioned in the GENERAL EXCLUSIONS.

SECTION Q4 – AVALANCHE CLOSURE

WHAT IS COVERED

If access to and from the ski resort is blocked or scheduled public transport services are cancelled or curtailed following avalanches or landslides **we** will pay up to the amount as shown in the **Benefit Table** for reasonable extra accommodation and travel expenses.

SPECIAL CONDITIONS

1. The cover only applies to **trips** to resorts, taken during their published ski season, where **you** have pre-booked at least one nights' accommodation and for so long as such conditions prevail at the resort, but not exceeding the pre-booked period of **your trip**.
2. **You** must obtain written confirmation from the resort management of the piste conditions confirming the closure of facilities and the dates applicable.
3. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

Anything mentioned in the GENERAL EXCLUSIONS.

SECTIONS R1, R2 and R3 GOLF BENEFIT

SECTION R1 – GOLF EQUIPMENT

WHAT IS COVERED

We will pay **you** up to the amount as shown in the **Benefit Table** for loss, theft, or damage to **your own golf equipment**. The amount payable will be the value at the time of the loss, less a deduction for wear tear and depreciation, or **we** may at **our** option replace, reinstate or repair the lost or damaged **golf equipment**. The maximum payment for any **single item** is shown in the **Benefit Table**.

SPECIAL CONDITIONS

1. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS.
2. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Claims arising for **golf equipment** left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property at anytime.
2. Claims arising for loss, theft or damage of **golf equipment** carried on a vehicle roof rack.
3. Loss, theft of or damage to **golf equipment** over 5 years old.
4. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS.
5. Anything mentioned in GENERAL EXCLUSIONS.

SECTION R2 – GREEN FEES

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table** per **trip** to reimburse **your** pre-paid, irrecoverable Green Fees if:

1. **You** are ill or suffer a **bodily injury** during **your trip** and **you** are medically certified (by the treating registered **medical practitioner** at the resort or place of incident), as being unable to play golf for the remainder of **your trip**; or
2. **You** have to cancel or **curtail your trip** for any of the valid reasons listed under Section C – Cancellation or Curtailment.

SPECIAL CONDITIONS

1. **You** must provide written confirmation from a **medical practitioner** at the resort or place of incident that such **bodily injury** or illness prevented **you** from golfing.
 2. Anything mentioned in Section C - Cancellation or Curtailment
- #### WHAT IS NOT COVERED
3. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

Anything mentioned in GENERAL EXCLUSIONS.

SECTION R3 – HOLE IN ONE BENEFIT

WHAT IS COVERED

If **you** shoot a **Hole-in-One** during a golf game where green fees have been paid for with **your** Brown Shipley & Co. Visa Infinite card, **we** will pay up to €250 towards bar expenses.

SPECIAL CONDITIONS

1. **You** must provide a certified copy of **your** score card, signed by **you** and a witness and countersigned by the club professional, a dated Golf Club bar receipt and a dated charge slip for the greens fees.
2. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

Anything mentioned in GENERAL EXCLUSIONS.

SECTION S – WEDDING COVER

DEFINITIONS - Applicable to this section

You/your/beneficiary/wedding couple

– the **couple** travelling abroad to be married whose names appear on the marriage certificate

WHAT IS COVERED

1. **We** will pay up to the amount shown in the **Benefit Table** for the accidental loss of, theft of or damage to:
 - a) each wedding ring taken or purchased on the **trip** for each **beneficiary**
 - b) wedding gifts taken or purchased on the **trip** for the **wedding couple**.
 - c) **Your wedding attire** which is specifically worn by **you** on **your** wedding day.The amount payable will be the original purchase price less a deduction for wear, tear and depreciation, or **we** may at **our** option replace, reinstate or repair the lost or damaged **baggage**.

2. **We** will pay the **wedding couple** up to the amount shown in the **Benefit Table** for the reasonable additional costs incurred to reprint/make a copy of or retake the photographs/video recordings either at a later date during the **trip** or at a venue in the **country of residence** if:
 - a) The professional photographer who was booked to take the photographs/video on **your** wedding day is unable to fulfil such obligations due to **bodily injury**, illness or unavoidable and unforeseen transport problems, or
 - b) The photographs/video recordings of the wedding day taken by a professional photographer are lost, stolen or damaged within 14 days after the wedding day and **you** are still at the holiday/honeymoon location.

SPECIAL CONDITIONS

1. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS.
2. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS.
2. Anything mentioned in GENERAL EXCLUSIONS.

SECTION T – ATM THEFT/ ASSAULT

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table** if **you** are mugged or robbed and the cash that **you** have withdrawn from an ATM with **your** Brown Shipley & Co. Visa Infinite Card is taken from **you** within 500 meters of the ATM and within 1 hour of the withdrawal during a **trip**.

SPECIAL CONDITIONS

1. **You** must report the theft to the police within 4 hours of the attack/robbery.
2. **You** must report the incident to **AXA Assistance** within 72 hours of the attack/robbery.

3. **You** must obtain a written report from the police which includes an incident number.
4. **You** must provide proof of the amount, date and time of the covered withdrawal.
5. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. Any cash that is withdrawn before 1 hour of the time of the robbery and/or not withdrawn using the Brown Shipley & Co. Visa Infinite Card.
2. Anything mentioned in GENERAL EXCLUSIONS.

SECTION U – PURCHASE PROTECTION

DEFINITIONS - Applicable to this section

You/your

– the **Card Holder**.

Eligible item

– an item, purchased by the **Card Holder** solely for personal use (including gifts), which has been charged fully to the **Card Holders** Brown Shipley & Co. Visa Infinite Card account and is not listed under WHAT IS NOT COVERED in this section.

Purchase price

– the lower of the amounts shown on either the Brown Shipley & Co. Visa Infinite Card billing statement or the store receipt for the **eligible item**.

WHAT IS COVERED

In the event of loss through theft, fire and accidental damage to an **eligible item** within 90 days of purchase, **We** will, at **our** option, replace or repair the **eligible item** or credit **your** Brown Shipley & Co. Visa Infinite Card account an amount not exceeding the **purchase price** of the **eligible item**, or the single item limit shown in the **Benefit Table** whichever is lower. **We** will not pay more than the amount shown in the **Benefit Table** for any one event, or more than the maximum amount shown in the **Benefit Table** in any one 365 day period.

SPECIAL CONDITIONS

1. Purchase Protection provides cover only for claims or portions of claims that are not covered by other applicable guarantees, warranties, insurance or indemnity policies, subject to the stated limits of liability
2. Claims for an **eligible item** belonging to a pair or set, will be paid up to the full **purchase price** of the pair or set, provided the items are not useable individually and cannot be replaced individually.
3. If **you** purchase the **eligible item** as a gift for someone else, **we** will if **you** wish, pay a valid claim to the recipient, subject to **you** making the claim.
4. **You** must exercise due diligence and do all things reasonably practicable to avoid any direct physical theft or damage to an **eligible item**.
5. **You** will need to transfer to **us**, on **our** request and at **your** expense, any damaged **eligible item** or part of a pair or set, and assign the legal rights to recover from the party responsible up to the amount **we** have paid.
6. **You** must document that the claim has not been sent to other insurance company.
7. **You** must provide **us** with the original sales receipt from store, original of card receipt, original of account showing the transaction and the police report.
8. Anything mentioned in GENERAL CONDITIONS.

WHAT IS NOT COVERED

1. The excess of €75, applying to each and every claim.
2. Lost items not connected to theft, fire or damage caused by accident.
3. Mysterious disappearance of items.
4. Theft or damage caused by fraud, mistreatment, carelessness or not following the manufacturer's manual.

5. Items which were used before purchase, second-hand, altered, or bought fraudulently by the **Card Holder**.
6. Damage to items caused by product defects.
7. Expenses due to repairs not performed by workshops approved by **AXA Assistance**.
8. Stolen items not reported to the police within 48 hours of discovery and a written report obtained.
9. Items left **unattended** in a place accessible to the public.
10. Loss or damage due to normal wear and tear of items or damage due to normal use or normal activity during sports and games (example golf - tennis balls, or other consumable items used for sport or games).
11. Motor vehicles, motorcycles, bicycles, boats, caravans, trailers, hovercraft, aircraft and their accessories.
12. Loss or damage due to radioactivity, water, damp, earthquake, unexplainable disappearance or error during production.
13. Theft, loss or damage when item is under supervision, control or taking care of, by third party other than allowed according to safety regulations.
14. Items not received by the **Card Holder** or other party pointed out by the **Card Holder**.
15. Losses from any item of any property, land or premises unless entry or exit to the property or premises was gained by the use of force, resulting in visible physical damage to the property or premises.
16. Direct physical theft or damage to items in a motor vehicle or as a result of the theft of said motor vehicle.
17. Loss caused by declared or undeclared war, confiscation by order of any government or public authority, or arising from illegal acts.
18. Loss of jewellery, watches, precious metals and gemstones in **baggage** unless carried by hand and under the **Card Holder's** personal supervision or under the supervision of a travelling companion previously known to the **Card Holder**.
19. Service, cash, travel checks, tickets, documents, currency, silver and gold.
20. Art, antiques, rare coins, stamps and collector's items.
21. Animals, living plants, consumables, perishable goods or permanent installations.
22. Electronic items and equipment, including but not limited to, personal stereos, MP3 players, computers or computer-related equipment whilst at **your** place of employment, items used for business purpose.
23. Riot and civil commotions, strikes, labour and political disturbances.
24. Any mail order items or items delivered by courier until item or items are received, checked for damage and accepted at the nominated delivery address.
25. Items purchased on the Internet unless it is from a local country registered site.
26. Theft or accidental damage to any item where there is any other insurance covering the same theft or accidental damage, or where the terms and conditions of such other insurance have been broken or for the reimbursement of any evident excess.
27. Anything mentioned in **GENERAL EXCLUSIONS**.

CLAIM NOTIFICATION

1. Please read the appropriate section in the benefits to see exactly what is, and is not covered, noting particularly any conditions, limitations and exclusions.
2. Making a claim.
 - a) In the event of an emergency you should first call AXA Assistance on telephone +44 20 8914 8040 (any minor illness or injury costs must be paid for by you and reclaimed).
 - b) For all other claims telephone our Claims Helpline on +44 20 8914 8040 (Monday – Friday 9:00 – 17:00) to obtain a claim form. You will need to give:
 - your name,
 - your covered card number,
 - brief details of your claim.

We ask that you notify us within 31 days of you becoming aware of an incident or loss leading to a claim or as soon as reasonably possible, and you return your completed claim form and any additional information to us as soon as possible.

3. Additional Information. You must supply all of your original invoices, receipts and reports etc. You should check the section under which you are claiming for any specific conditions and details of any supporting evidence that you must give us. It is always advisable to keep copies of all the documents that you send to us.

COMPLAINTS PROCEDURE

You can write to the Quality Manager, who will arrange an investigation on behalf of the General Manager, at: Inter Partner Assistance SA, The Quadrangle, 106-118 Station Road, Redhill, Surrey RH1 1PR, United Kingdom or telephone +44 (0)1737 815227.

If it is impossible to reach an agreement, you may have the right to make an appeal to the Financial Ombudsman Service by writing to:

Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London, E14 9SR, United Kingdom

Or you can phone 0800 023 4567 or 0300 123 9 123 from a mobile.

Website: www.financial-ombudsman.org.uk

These procedures do not affect **your** right to take legal action.

CANCELLATION OF THE COVER

These benefits are included with **your** Brown Shipley & Co. Visa Infinite card, the benefits cannot be cancelled separately. If **you** cancel the Infinite card the cover will end and all benefits will stop. Please see **your** Credit Card agreement for full details of how to cancel the Brown Shipley & Co. Visa Infinite.

FINANCIAL SERVICES COMPENSATION SCHEME (FSCS)

Inter Partner Assistance is a member of the Financial Services Compensation Scheme (FSCS). The FSCS is a safety net for customers of financial services firms should they not be able to meet their liabilities and **you** may be entitled to claim compensation in such event. Further information can be obtained from the FSCS.

Their contact details are Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU, United Kingdom

Call: 0800 678 1100 or 020 7741 4100,

Website: www.fscs.org.uk

USE OF YOUR PERSONAL DATA

Details of you, your insurance cover under this policy and claims will be held by **us** (acting as Data Controller) for underwriting, policy administration, claims handling, providing travel assistance, complaints handling, sanctions checking and fraud prevention, subject to the provisions of applicable data protection law and in accordance with the assurances contained in **our** website privacy notice (see below).

We collect and process these details as necessary for performance of **our** contract of insurance with **you** or complying with **our** legal obligations, or otherwise in **our** legitimate interests in managing **our** business and providing **our** products and services.

These activities may include:

- a. use of sensitive information about the health or vulnerability of **you** or others involved in your assistance guarantees, in order to provide the services described in

this policy, By using **our** services, **you** consent to **us** using such information for these purposes,

- b. disclosure of information about **you** and your insurance cover to companies within the AXA group of companies, to **our** service providers and agents in order to administer and service your insurance cover, to provide **you** with travel assistance, for fraud prevention, to collect payments, and otherwise as required or permitted by applicable law ;
- c. monitoring and/or recording of your telephone calls in relation to cover for the purposes of record-keeping, training and quality control;
- d. technical studies to analyze claims and premiums, adapt pricing, support subscription process and consolidate financial reporting (incl. regulatory); detailed analyses on claims/missions/calls to better monitor providers and operations; analyses of customer satisfaction and construction of customer segments to better adapt products to market needs;
- e. obtaining and storing any relevant and appropriate supporting evidence for your claim, for the purpose of providing services under this policy and validating your claim; and
- f. sending **you** feedback requests or surveys relating to **our** services, and other customer care communications.

We will separately seek your consent before using or disclosing your personal data to another party for the purpose of contacting **you** about other products or services (direct marketing). **You** may withdraw your consent to marketing at any time, or opt-out of feedback requests, by contacting the Data Protection Officer (see contact details below).

We carry out these activities within the UK, in and outside the European Economic Area, in relation to which processing the data protection laws and or agreements **We** have entered into with the receiving parties provide a similar level of protection of personal data

By purchasing this policy and using **our** services, **you** acknowledge that **We** may use your personal data, and consent to **our** use of sensitive information, both as described above. If **you** provide **us** with details of other individuals, **you** agree to inform them of **our** use of their data as described here and in **our** website privacy notice (see below).

You are entitled on request to a copy of the information **We** hold about you, and you have other rights in relation to how **We** use your data (as set out in **our** website privacy notice – see below). Please let **us** know if **you** think any information **We** hold about **you** is inaccurate, so that **We** can correct it.

If **you** want to know what information is held about **you** by AXA Travel Insurance Limited, or have other requests or concerns relating to **our** use of your data, please write to **us** at:

Data Protection Officer
AXA Travel Insurance Limited
106-108 Station Road
Redhill
RH1 1PR

Email: dataprotectionenquiries@axa-assistance.co.uk

Our full privacy notice is available at:
www.axa-assistance.com/en/privacypolicy
Alternatively, a hard copy is available from **us** on request.