

Travel Insurance

POLICY BOOKLET

Contact us

In a medical emergency, if **you** go into hospital or need to return **home** urgently, contact **our** 24 hour Emergency Assistance Service providers, as detailed below, immediately. They are available 24 hours a day, 365 days a year.

From anywhere in the world Phone	**+353 1 431 1205**
From Ireland Phone	**01 431 1205**

When calling please quote **your** AA Travel Insurance policy number which is shown on **your** policy certificate. Write it below for easy reference.

.....

My Policy Number

If **you** need to go into hospital, the doctor treating **you** may need to speak to **us** directly. Please give the doctor the contact numbers on this page together with **your** policy number

AA Travel Insurance
Customer Services & Renewals
61a South William Street, Dublin 2.
Tel + 353 (0)1 617 9950
Fax + 353 (0)1 617 9900
Email: mytravel@theaa.ie

All Clear Medical Screening
Phone 1890 456 250

Travel Claims
From **Ireland**: 01 431 1204
Outside of **Ireland**: +353 (1) 43 11204

AA Ireland Limited trading as AA Insurance is regulated by the Central Bank of Ireland. AA Ireland Limited registered office: 61a South William Street, Dublin 2. AA Insurance is tied to Inter Partner Assistance for the purposes of selling Travel Insurance. Registered in **Ireland**, number 389194.

Underwriter

Your Travel Insurance policy is underwritten by Inter Partner Assistance.

Contents

Contact us 2
Schedule of Benefits, Limits and Excesses 4
Foreword and About Us 7
Important Health Requirements – For All Insured Persons 17
Sports and Activities Cover 23
Section A – Cancellation or Curtailment Charges 24
Section B – Emergency Medical and Other Expenses 26
Section C – Hospital Benefit 29
Section D – Personal Accident 29
Section E – Baggage, Baggage Delay and Passport 30
Section F – Personal Money and Documents 32
Section G – Personal Liability 33
Section H – Delayed Departure 35
Section I – Holiday Abandonment 36
Section J – Missed Departure 37
Section K – Missed Connection 38
Section L – Catastrophe Cover 39
Section M – Mugging 40
Section N – Withdrawal of Services 40
Section O – Kennel/Cattery Fees 41
Section P – Hijack Benefit 41
Section Q – Third Party Supplier Insolvency 41
Section R – Overseas Legal Expenses and Assistance 42
Sections S1, S2, S3, S4 and S5 – Winter Sports 44
Section S1 – Ski Equipment 44
Section S2 – Hire of Ski Equipment 45
Section S3 – Ski Pack 46
Section S4 – Piste Closure 46
Section S5 – Avalanche Closure 47
Section T1, T2, T3 and T4 – Business Cover 47
Section T1 - Emergency Return Home 47
Section T2 – Business Equipment 48
Section T3 – Business Equipment Hire 50
Section T4 – Business Money 51
Sections U1, U2 and U3 – Golf Cover 52
Section U1 – Golf Equipment 52
Section U2 – Golf Equipment Hire 53
Section U3 – Non-refundable Golfing Fees 54
Section V – Wedding Cover 55
Sections W1, W2, W3 and W4 – Travel Disruption Cover 56
Section W1 – Extended Cancellation or Curtailment Charges 56
Section W2 - Extended Delayed Departure 57
Section W3 - Extended Holiday Abandonment 58
Section W4 - Accommodation Cover 59
General Conditions (applicable to the whole policy) 61
General Exclusions (applicable to the whole policy) 63
Claims Conditions 65
Cancellation of Your Policy 66
Complaints Procedure 67
Use of Your Personal Data 68
Frequently asked Questions? 70
Other AA services available 71

Schedule of Benefits, Limits and Excesses

Section	Description	Essential (Single Trip, Annual Multi Trip & Backpacker) Cover Limit	Excess per Insured person, each and every incident	Extra (Single Trip & Annual Multi Trip) Cover Limit	Excess per Insured person, each and every incident
A	Cancellation or **Curtailment**	Up to €3,500	€75 (€30 Loss of deposit)	Up to €6,000	€50 (€20 Loss of deposit)
B	Emergency Medical Expenses and other expenses	Up to €5,000,000	€75	Up to €10,000,000	€50
	Repatriation – included above				
	Infants born following **complications of pregnancy** (maximum per event) - trips to USA or Caribbean	Up to €200,000	€75	Up to €200,000	€50
	Infants born following **complications of pregnancy** (maximum per event) - rest of the world	Up to €75,000	€75	Up to €75,000	€50
	Emergency dental pain relief	Up to €200	€75	Up to €200	€50
	Funeral expenses	Up to €5,000	€75	up to €5,000	€50
C	**Hospital Benefit**	€20 per day up to €200	N/A	€25 per day up to €700	N/A
D	**Personal Accident**	Max Benefit up to €25,000	N/A	Max Benefit up to €40,000	N/A
	Loss of limbs or Loss of sight	€25,000	N/A	€40,000	N/A
	Permanent Total Disablement	€25,000	N/A	€40,000	N/A
	Death Benefit	€15,000	N/A	€25,000	N/A
	Death Benefit	€2,500 (Under 18 years or over 66 years)	N/A	€3,000 (Under 18 years or over 66 years)	N/A
E	**Baggage, Baggage Delay and Passport**	Up to €2,000	€75	Up to €3,000	€50
	Single Item Limit	€150	N/A	€350	N/A
	Valuables Limit in total	€250	N/A	€350	N/A
	Unreceipted Items Limit	Up to €150	N/A	Up to €300	N/A
	Unreceipted **Single Item** Limit	€50	N/A	€50	N/A
	Delayed **Baggage** (after 12 hours)	Up to €200 (€50 per day)	N/A	Up to €300 (€50 per day)	N/A
	Replacement of Passport	Up to €350	N/A	Up to €350	N/A
	Emergency Passport Travel	Up to €350	N/A	Up to €350	N/A

*available upon payment of an additional premium and shown in the travel insurance certificate

Section	Description	Essential (Single Trip, Annual Multi Trip & Backpacker) Cover Limit	Excess per Insured person, each and every incident	Extra (Single Trip & Annual Multi Trip) Cover Limit	Excess per Insured person, each and every incident
F	**Personal Money and Documents**	Up to €500	€75	Up to €700	€50
	Cash Limit	€200	€75	€350	€50
	Cash (aged under 18)	€50	€75	€100	€50
	Documents Limit	€200	€75	€350	€50
G	**Personal Liability**	Up to €2,000,000	€350	Up to €3,000,000	€250
H	**Delayed Departure**	€30 per 12 hour period Up to €300	N/A	€50 per 12 hour period Up to €1,000	N/A
I	**Holiday Abandonment**	Up to €3,500 (after 24 hrs)	€75	Up to €6,000 (after 24 hrs)	€50
J	**Missed Departure**	Up to €800	€75	Up to €1,000	€50
K	**Missed Connection**	Up to €750*	€75*	Up to €1,000	€50
L	**Catastrophe**	Up to €750	€75	Up to €1,000	€50
M	**Mugging Benefit**	€40 per day up to €400	N/A	€50 per day up to €500	N/A
N	**Withdrawal of Services**	€50 per day up to €250	N/A	€50 per day up to €500	N/A
O	**Kennel/Cattery Fees**	€20 per day up to €100	N/A	€20 per day up to €200	N/A
P	**Hijack**	€50 per day up to €500	N/A	€100 per day up to €1,000	N/A
Q	**Third Party Supplier Insolvency**	Up to €2,000	€75	Up to €2,000	€50
R	**Overseas Legal Expenses and Assistance**	Up to €20,000	€350	Up to €30,000	€250
OPTIONAL SECTIONS					
Winter Sports cover (available upon payment of an additional premium and shown in the travel insurance certificate)					
S1	**Ski Equipment**				
	Owned	Up to €1,000	€75	Up to €1,000	€75
	Hired	Up to €600	€75	Up to €600	€75
	Single Item Limit	€250	€75	€250	€75
	Unreceipted Items Limit	Up to €300	€75	Up to €300	€75
	Unreceipted **Single Item** Limit	€75	€75	€75	€75
S2	**Ski Hire**	€30 per day up to €600	N/A	€30 per day up to €600	N/A
S3	**Ski Pack Ski Pass**	€50 per day up to €600	N/A	€50 per day up to €600	N/A

Section	Description	Essential (Single Trip, Annual Multi Trip & Backpacker) Cover Limit	Excess per Insured person, each and every incident	Extra (Single Trip & Annual Multi Trip) Cover Limit	Excess per Insured person, each and every incident
S4	**Piste Closure**	€30 per day up to €600	N/A	€30 per day up to €600	N/A
S5	**Avalanche Closure**	Up to €600	€75	Up to €600	€75
Business cover (available upon payment of an additional premium and shown in the travel insurance certificate)					
T1	**Emergency Return Home**	Up to €3,500	€75	Up to €6,000	€50
T2	**Business Equipment**	Up to €2,000	€75	Up to €2,000	€75
	Single Item Limit	€750	N/A	€750	N/A
	Computer Equipment **Single Item** Limit	€1,500	N/A	€1,500	N/A
	Samples Limit	€500	N/A	€500	N/A
	Unreceipted Items Limit	Up to €300	N/A	Up to €300	N/A
	Unreceipted **Single Item** Limit	€75	N/A	€75	N/A
	Delayed **Business Equipment**	€100 per day up to €300	N/A	€100 per day up to €300	N/A
	Emergency Courier of Essential **Business Equipment**	Up to €500	N/A	Up to €500	N/A
T3	**Business Equipment Hire**	€150 per day up to €750	N/A	€150 per day up to €750	N/A
T4	**Business Money**	Up to €1,000	€75	Up to €1,000	€75
	Cash Limit	€500	€75	€500	€75
Golf cover (available upon payment of an additional premium and shown in the travel insurance certificate)					
U1	**Golf Equipment**	Up to €1,000	€75	Up to €1,000	€75
	Single Item Limit	€250	€75	€250	€75
	Unreceipted Items Limit	Up to €300	€75	Up to €300	€75
	Unreceipted **Single Item Limit**	€75	€75	€75	€75
U2	**Golf Equipment Hire**	€30 per day up to €300	N/A	€30 per day up to €300	N/A
U3	**Non Refundable Golfing Fees**	€75 per day up to €300	N/A	€75 per day up to €300	N/A
Wedding cover (available upon payment of an additional premium and shown in the travel insurance certificate)					
V	**Wedding Rings**	€250	€75	€500	€50
	Wedding Attire	€750	€75	€1,000	€50
	Wedding Gifts	€750	€75	€1,000	€50
	Wedding Gifts	€100 (Cash)	€75	€150 (Cash)	€50
	Wedding Photographs or Video Recordings	€500	€75	€750	€50

Section	Description	Essential (Single Trip, Annual Multi Trip & Backpacker) Cover Limit	Excess per Insured person, each and every incident	Extra (Single Trip & Annual Multi Trip) Cover Limit	Excess per Insured person, each and every incident
Travel Disruption cover (available upon payment of an additional premium and shown in the travel insurance certificate)					
W1	**Extended Cancellation**	€1,000	€75	€1,000	€50
	Rebooking fees	€200	€75	€200	€50
W2	**Extended Delayed Departure**	€20 for the first 5 hours delay and €20 for each 12 hours thereafter up to €200	N/A	€20 for the first 5 hours delay and €20 for each 12 hours thereafter up to €200	N/A
W3	**Extended Holiday Abandonment**	€1,000	€75	€1,000	€50
W4	**Additional travel and accommodation**	€500	€75	€500	€50

Foreword and About Us

Welcome to AA Travel Insurance

A warm welcome and thank **you** for choosing to insure **your** travel through us. Our aim at AA Travel Insurance is to combine value for money with peace of mind, making travel insurance as straightforward as possible.

Your policy booklet and travel insurance certificate include everything **you** need to know about **your** travel insurance cover. **You** should read them very carefully and, in the event **you** do not understand something, **you** should contact our experienced customer service team on 01 617 9988 who are there to help **you** with all **your** travel insurance needs.

The AA also offers more than just travel insurance. If **you** want more information on our other products and services, please call us on 01 617 9950 or visit our website at theAA.ie.

Introduction

This is **your** travel insurance policy. It contains details of cover, conditions and exclusions relating to each **insured person** and is the basis on which all claims will be settled. It is validated by the issue of the travel insurance certificate which must be attached to the policy.

In return for having accepted **your** premium **we** will in the event of **bodily injury**, death, illness, disease, loss, theft, damage, legal liability or other specified events happening within the **period of insurance** provide insurance in accordance with the operative sections of **your** policy as referred to in **your** travel insurance certificate.

The travel insurance certificate and any endorsements are all part of the policy. **Your** policy is evidence of the contract of insurance.

Policy Information

1. This policy is only available to **you** if **you** permanently reside in **Ireland** and have been for the past six months, prior to date of issue of **your** policy.
2. If there are any changes in **your** health or prescribed medication **you** must notify **us** and update **your Medical Health Declaration** prior to booking any **trip** or departing on any **trip.** All changes must be declared to **us** and accepted in writing before cover can continue. Failure to declare **pre-existing medical conditions** that are relevant to this insurance may invalidate **your** claim.
3. There is no cover for mobile phones under this policy.
4. If **you** are an **AA Member**, and have purchased an Extra policy; no limit will apply to claims made under Section B - Emergency Medical and Other Expenses, and no **excess** will apply to any claim under any section.
5. **Your** policy will be governed by the law of Republic of Ireland unless **we** have specifically agreed otherwise.
6. The appropriate stamp duty has been or will be paid by **us** to the Revenue Commissioner in accordance with the provisions of the composition agreement entered into with them under section 5 of the Stamp Duties Consolidation Act 1999. All monies which may become due or payable by **us** shall be payable from **our** offices in the Republic of Ireland to **you** at the address **you** have notified to **us** in **Ireland.**
7. This evidence of insurance is to confirm those persons who have paid the appropriate premium are insured under the Master Certificate Number AV/DRA/AAROIV01/2011.
8. Please carry this policy with **you** and contact the Emergency Assistance helpline on +353 1 431 1205 in the event of an emergency.
9. This document only constitutes a valid evidence of insurance when it is issued in conjunction with a travel insurance certificate.

Eligibility

Please note, this policy is only available to residents of the Republic of Ireland**.** No person who is over the age of 79 at the commencement of the **period of insurance** will be covered under Essential; No person who is over the age of 45 at the commencement of the **period of insurance** will be covered under a Backpacker policy.

If there are any changes in **your** health or prescribed medication **you** must notify **us** and update **your Medical Health Declaration** prior to booking any **trip** or departing on any **trip.** All changes must be declared to **us** and accepted in writing before cover can continue.

Failure to declare **pre-existing medical conditions** that are relevant to this insurance may invalidate **your** claim. To declare a **pre-existing medical condition** or to update **your Medical Health Declaration** following a change in **your** "state of health or prescribed medication", **you** should telephone: 1890 456 250.

Medical Screening Lines Opening Hours: Monday to Friday 9am to 5pm and Saturday 10am to 3pm. Reference: AA Ireland Travel Insurance. **You** should also refer to the General Exclusions.

Family cover is for up to two adults and up to 5 of their children, step children or foster children who are unmarried and aged under 18 (or under 24 years if living at **home** and in full time education), accompanying the parents or legal guardian insured on the same policy travelling on any **trip** to the same destination. Under annual multi **trip** cover each adult is also insured to travel on their own but children must always travel with one of the adults named on the travel insurance certificate.

Underwriter

Benefits under this Policy are 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 for conduct of business rules. 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. Some of the services under this policy will be provided by IPA's' agent, AXA Travel Insurance (company number 426087), of the same **Ireland** address. All companies are members of the AXA Assistance Group.

Important Requirements - For Insured Persons with Private Health Insurance

If **you** have confirmed that **you** have Private Health Insurance which includes cover for overseas in-patient medical treatment for a minimum of €55,000, this will be shown on **your** travel insurance certificate. **Your** confirmation that **you** have Private Health Insurance in place means that **you** agree to the following:

1. **You** have a Private Health Insurance policy in place for the entire **period of insurance** of this policy.
2. **Your** Private Health Insurance policy covers each **insured person** on this policy for overseas inpatient medical treatment for a minimum of €55,000.
3. **You** understand that if **you** are admitted into hospital abroad as an inpatient **you** must first claim against **your** Private Health Insurer up to **your** overseas benefit limit, before cover under Section B- Emergency Medical and Other Expenses of this policy will come into effect.

You have received a discount when **you** purchased this policy, therefore in the event of a claim for overseas in-patient medical treatment; there is no benefit payable until either **you** have reached the benefit limit of **your** Private Health Insurance policy or after €55,000, whichever is the highest.

If **you** currently hold Private Health Insurance **you** must notify the relevant private medical insurance assistance company at the time of claiming. Here are some of the common insurers contact details noted below:

VHI Assistance:	**+353 1 448 2442**
VHI Assistance USA:	**1-800 364 9022**
Laya Healthcare Assistance:	**+353 21 422 2204**
Aviva Health Assistance:	**+353 1 481 7840**

Definitions

Any word or expression to which a specific meaning has been attached will bear the same meaning and are noted in bold throughout this policy.

AA Member
An AA customer currently paying for Roadside Rescue cover at the time of the inception of this policy or the last renewal.

Adverse weather conditions
Rain, wind, fog, thunder or lightning storm, flood, snow, sleet, hail, hurricane, cyclone, tornado or tropical storm which is not caused by or has not originated from a geological or catastrophic event — such as, but not limited to, an earthquake, volcano or tsunami.

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.

Baggage
Luggage, clothing, personal effects (excluding **ski equipment** and **valuables**) and other articles which belong to **you** (or for which **you** are legally responsible) which are worn, used or carried by **you** during any **trip.**

Bodily injury
An identifiable physical injury sustained by **you** due to a sudden, violent, external, unexpected and specific event. Injury as a result of **your** unavoidable exposure to the elements shall be deemed to have been caused by **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 money
Bank notes, currency notes and coins in current use, travellers' and other cheques and travel tickets all held for business purposes and belonging to **your** employer or **you** if **you** are self employed.

Business trip
A **trip** taken wholly or in part for business purposes but excluding **manual work**.

Close business associate
A business partner, director or employee.

Close relative
Mother, father, sister, brother, spouse, partner or fiancé/fiancée or civil partner (any couple, including same-sex, in a common law relationship and who have co-habited for at least 6 months), 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.

Complications of pregnancy
The following unforeseen **complications of pregnancy** as certified by a **medical practitioner**: toxaemia; gestational hypertension; pre-eclampsia; ectopic pregnancy; hydatidiform mole (molar pregnancy); hyperemesis gravidarum; ante partum haemorrhage; placental abruption; placenta praevia; post partum haemorrhage; retained placenta membrane; miscarriage; stillbirths; medically necessary emergency Caesarean sections/medically necessary termination; and any premature births or threatened early labour more than 8 weeks (or 16 weeks in the case of a multiple pregnancy) prior to the expected delivery date.

Curtailment / curtail
Either:

- abandoning or cutting short the **trip** by immediate direct early return to **Ireland** due to an emergency authorised by **us**, in which case claims will be calculated from the day **you** returned to **Ireland** and based on the number of complete days of **your trip you** have not used, or

- by attending a hospital abroad as an in-patient or being confined to **your** accommodation abroad due to compulsory quarantine or on the orders of a **medical practitioner**, in either case for a period in excess of 48 hours. Claims will be calculated from the day **you** were admitted to hospital or confined to **your** accommodation and based on the number of complete days for which **you** were hospitalised, quarantined or confined to **your** accommodation.

Excess
The first amount as shown in the **Schedule of Benefits**, **Limits and Excesses** for each **insured person** under **your** policy, for every incident of loss applying to each Section of cover under which a claim is made unless **you** have purchased the **excess** waiver and is shown on the travel insurance certificate. This means that if **you** claim for something under a Section of the policy for which an **excess** is to be deducted, **you** will personally be financially responsible for the first amount as shown in the **Schedule of Benefits**, **Limits and Excesses** for each **insured person**'s claim.

Excess waiver does not apply to **sports and activities**.

Golf equipment
Golf clubs, golf balls, golf bag, golf shoes and non-motorised golf trolley.

Home
Your normal place of residence in **Ireland.**

Incidental
Happening on a casual or occasional basis.

Ireland
The Republic of Ireland**.**

Loss of limb
Loss by physical severance, or the total and irrecoverable permanent loss of use or function of, an arm at or above the wrist joint, or a leg at or above the ankle joint.

Loss of sight
Total and irrecoverable **loss of sight** in one or both eye(s); this is considered to have occurred if the degree of sight remaining after correction is 3/60 or less on the Snellen scale. (This means being able to see at three feet or less what **you** should see at 60 feet.)

Manual work
Any work above ground level; work using cutting tools, power tools and machinery; work involving hands-on involvement with the installation, assembly, maintenance or repair of electrical, mechanical or hydraulic plant; undertaking work of a plumber, electrician, lighting or sound technician, carpenter, painter/decorator or builder, or manual labour of any kind, with the exception of bar and restaurant work, wait staff, chalet, maid, au pair and child care, and occasional light **manual work** at ground level including retail work and fruit picking.

Medical condition
Medical or psychological disease, sickness, condition, illness or injury.

Medical Health Declaration
Medical information that needs to be declared to **us** by any **insured person** who has suffered from a **pre-existing medical condition**.

Medical practitioner
A legally licensed member of the medical profession, recognised by the law of the country where treatment is provided and who, in rendering such treatment is practising within the scope of his/her licence and training, and who is not related to **you** or any **travelling companion**.

Mugging
A violent, threatening attack by an unknown third party causing actual bodily harm.

Pair or set
A number of **baggage** items associated as being similar, complementary or used together.

Period of insurance
If **you** have selected annual multi **trip** cover:

- The period for which **we** have accepted the premium as stated in the travel insurance certificate. During this period any **trip** not exceeding 45 days for Essential and 60 days for Extra is covered.
- **Winter sports** cover is limited to 17 days in total in each **period of insurance** (if **you** have paid the appropriate **winter sports** premium to include this cover).

- Section A – Cancellation cover commences on the start date of the policy stated on the travel insurance certificate or the time of booking any **trip** (whichever is the later) and terminates on commencement of any **trip.**

If **you** have selected Single **trip** / Backpacker cover cover:

- The period of the **trip** and terminating upon its completion, but not in any case exceeding the period shown on the travel insurance certificate.
- Section A – Cancellation cover shall be operative from the time **you** pay the premium or the time of booking the **trip** (whichever is the later) and terminates on commencement of any **trip.**
- Backpacker cover also entitles **you** to a maximum of two return visits to **your home** before **your** intended return date (as specified on **your** travel insurance certificate) for up to a maximum duration of 14 days excluding any return for which a claim is being made as a result of emergency medical, repatriation or **curtailment**. Cover is suspended from the time **you** arrive at **your** departure point to **your home** and starts again when **you** exit the airport at **your** overseas destination. During this period no cover is provided by the policy.

All policy types

- Whichever cover is selected, the insurance under all Sections of the policy other than Section A – Cancellation cover commences when **you** leave **your home** or in respect of a **business trip your** place of business in **Ireland** (whichever is the later) to commence the **trip** and terminates at the time of **your** return to **your home** or place of business in **Ireland** (whichever is the earlier) on completion of the **trip.**
- Any **trip** that had already begun when **you** purchased this insurance will not be covered, except where **you** renew an existing annual multi **trip** policy which fell due for renewal during the **trip** and there is no gap in cover.
- The **period of insurance** is automatically extended for the period of the delay in the event that **your** return to **Ireland** is unavoidably delayed due to an event insured by this policy.

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, prevent **you** from engaging in, or giving any attention to, any business or occupation for the remainder of **your** life.

Personal belongings

Baggage, **valuables**, **ski equipment** and **golf equipment**.

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 and hotel vouchers, all held for private purposes.

Pre-existing medical condition(s)

1. Any past or current **medical condition** that has given rise to symptoms or for which any form of treatment or prescribed medication, medical consultation, investigation or follow-up/ check-up has been required or received during the 2 years prior to the commencement of cover under this policy and/or prior to any **trip**: and
2. any cardiovascular or circulatory condition (e.g. heart condition, hypertension, blood clots, raised cholesterol, stroke, aneurysm) that has occurred at any time prior to the commencement of cover under this policy and/or prior to any **trip.**

Public transport

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

Schedule of Benefits, Limits and Excesses/Schedule of Benefits

The details of cover as outlined on page 4, 5 & 6 of this document.

Single item

Any one article **pair or set** of articles (including golf clubs) or collection which are used or worn together. The **single item** limit applies except when the additional **golf equipment** Section is purchased and shown in the travel insurance certificate then the **single item** limit applies to each individual golf club and not the set as a whole.

Ski equipment

Skis (including bindings), ski boots, ski poles, snowboards, snowboard bindings and snowboard boots.

Sports and Activities

The activities listed under the **sports and activities** Cover of this policy, when **your** participation is on an **incidental**, non-competitive and non-professional basis.

Strike or industrial action

Any form of industrial action which is carried out with the intention of stopping, restricting or interfering with the production of goods or provision of services.

Territorial limits

Area 1: The Republic of Ireland**.**

Area 2: The United Kingdom (means England, Scotland, Wales and Northern Ireland).

Area 3: Europe: Albania, Andorra, Austria, Belarus, Belgium, Bosnia and Herzegovina, Bulgaria, Channel Islands (Bailiwicks of Guernsey and Jersey, Sark and Herm) Croatia, Cyprus, Czech Republic, Denmark, Egypt, Estonia, Finland, France, Georgia, Germany, Greece, Hungary, Iceland, Republic of Ireland, Isle of Man, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, FYR

Macedonia, Malta, Moldova, Monaco, Netherlands, Norway, Poland, Portugal, Romania, Russia west of the Ural mountains, San Marino, Serbia and Montenegro, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey, Ukraine, United Kingdom and Vatican City.

Area 4: Australia and New Zealand (applicable to backpacker only).

Area 5: Worldwide (excluding the United States of America, Canada and the Caribbean).

Area 6: Worldwide (including the United States of America, Canada and the Caribbean).

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.

Travelling companion

A person(s) with whom **you** have booked to travel on the same travel itinerary and without whom **your** travel plans would not be possible.

Trip

Any holiday, or journey for business or pleasure made by **you** within the **territorial limits** shown in the travel insurance certificate which begins and ends in **Ireland** during the **period of insurance** unless the **trip** is a one way **trip** or journey as defined under **period of insurance**.

If annual multi **trip** cover is selected any such **trip** not exceeding 45 days for Essential and 60 days for Extra is covered. In any event **winter sports** cover is limited to 17 days in total in each **period of insurance** (if **you** have paid the appropriate **winter sports** premium to include this cover).

Any **trip** solely within **Ireland** 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.

Each **trip** under annual multi **trip** cover is deemed to be a separate insurance, each being subject to the terms, definitions, exclusions and conditions contained in this policy.

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, precious metals or precious stones or items made from precious metals or precious

stones, watches, furs, leather articles, photographic- audio- video- computer- television- and games- equipment (including CDs, DVDs, tapes/cassettes, films, cartridges, memory devices and headphones), telescopes, binoculars, MP3/4 players and any one item with a purchase price of €1,500 or more.

We/us/our
Inter Partner Assistance, 10/11 Mary Street, Dublin 1, **Ireland** and/ or Inter Partner Assistance SA (IPA), Avenue Louise, 166 bte1, 1050, Brussels, Belgium and/ or AXA Travel Insurance of the same Irish address. All companies are members of the AXA Assistance Group.

Winter sports
Guided cross country skiing (Nordic skiing), glacier skiing, mono skiing, snowblading, snowmobiling, off piste skiing or snowboarding where an avalanche warning of 2 or less is in place, recreational racing, on pis te skiing, on piste snowboarding and snow sledging.

You/your/insured person(s)
Each person travelling on a **trip** whose name appears in the travel insurance certificate.
Please note no person who has reached the age of 80 at the commencement of the **period of insurance** will be covered under Essential. No person who has reached the age of 46 at the commencement of the **period of insurance** will be covered under a Backpacker policy.

Important Health Requirements – For All Insured Persons

You must comply with the following conditions in order to have full protection under this policy. If **you** do not comply **we** may refuse to deal with **your** claim or reduce the amount of any claim payment.
This insurance will not cover **you** if **you**:

1. are travelling against the advice of a **medical practitioner** (or would be travelling against the advice of a **medical practitioner** had **you** sought his/her advice);

2. are travelling with the intention of obtaining medical treatment or consultation abroad;

3. have any undiagnosed symptoms that require attention or investigation in the future (that is symptoms for which **you** are awaiting investigations/consultations, or awaiting results of investigations, where the underlying cause has not been established);

4. are not a permanent resident of, and registered with a General Practitioner in, the Republic of Ireland**.**

No claim arising directly or indirectly from any **pre-existing medical condition** affecting **you** will be covered unless:

- **You** have declared ALL **pre-existing medical conditions** to **us**; and
- **You** have declared any changes in **your** health or prescribed medication; and
- **We** have accepted the condition(s) for insurance in writing.

Each **insured person** who has a **pre-existing medical condition** must make a **Medical Health Declaration.**

We will assess the medical information supplied to **us** and advise if **we** can cover the **pre-existing medical condition(s)**, if certain exclusions or restrictions should be imposed, or if cover can be offered subject to the payment of an additional premium. If the cover is subject to the payment of an additional premium, cover will not commence until full payment has been received by **us** and written confirmation has been provided by **us**.

If there are any changes in **your** health or prescribed medication **you** must notify **us** and update **your Medical Health Declaration** prior to booking any **trip** or departing on any **trip.** All changes must be declared to **us** and accepted in writing before cover can continue. Failure to declare **pre-existing medical conditions** that are relevant to this insurance may invalidate **your** claim.

To declare a **pre-existing medical condition** or to update **your Medical Health Declaration** following a change in **your** state of health or prescribed medication, **you** should telephone: **1890 456 250**

Medical Screening Lines Opening Hours: Monday to Friday 9am to 5pm and Saturday 10am to 3pm. Reference: AA **Ireland** Travel Insurance

You should also refer to the General Exclusions.

Waived Conditions

The following **medical conditions** are covered FREE of charge and subject to the normal terms and conditions of this insurance, provided:

1. the **insured person** is not awaiting surgery for the condition; and
2. the **insured person** has been fully discharged from any post-operative follow-up.

You do not need to declare any of these conditions to **us** provided ALL criteria are met.

- Abnormal Smear Test
- Achilles Tendon Injury
- Acne
- Acronyx (Ingrowing Toe-nail)
- Adenoids
- Allergic Rhinitis
- Alopecia
- Anal Fissure/Fistula
- Appendectomy
- Astigmatism
- Athlete's Foot (Tinea Pedis)
- Attention Deficit Hyperactivity Disorder
- Bell's Palsy (Facial Paralysis)
- Benign Prostatic Enlargement
- Bladder Infection (no ongoing treatment, no hospital admissions)
- Blepharitis
- Blindness
- Blocked Tear Ducts
- Breast - Fibroadenoma
- Breast Cyst(s)
- Breast Enlargement/ Reduction
- Broken Bones (other than head or spine) – (no longer in plaster)
- Bunion (Hallux Valgus)
- Bursitis
- Caesarean Section
- Candidiasis (oral or vaginal)
- Carpal Tunnel Syndrome
- Cartilage Injury
- Cataracts
- Cervical Erosion
- Cervicitis
- Chalazion
- Chicken Pox (fully resolved)
- Cholecystectomy
- Chronic fatigue syndrome (if only symptom is fatigue and no hospital admissions)
- Coeliac Disease
- Cold Sore (Herpes Simplex)
- Common Cold(s)
- Conjunctivitis
- Constipation
- Corneal Graft
- Cosmetic Surgery
- Cyst - Breast
- Cyst - Testicular
- Cystitis (no ongoing treatment, no hospital admissions)
- Cystocele (fully recovered, no hospital admissions)
- D & C
- Deaf Mutism
- Deafness
- Dental Surgery
- Dermatitis (no hospital admissions or consultations)
- Deviated Nasal Septum
- Diarrhoea and/or Vomiting (resolved)
- Dilatation and Curettage
- Dislocations (no joint replacement or hospital admissions)
- Dry Eye Syndrome
- Dyspepsia
- Ear Infections (resolved - must be all clear prior to travel if flying)
- Eczema (no hospital admissions/ consultations)
- Endocervical Polyp
- Endocervicitis
- Endometrial Polyp
- Epididymitis
- Epiphora (Watery Eye)
- Epispadias
- Epistaxis (Nosebleed)
- Erythema Nodosum
- Essential Tremor
- Facial Neuritis (Trigeminal Neuralgia)
- Facial Paralysis (Bell's Palsy)
- Femoral Hernia
- Fibroadenoma
- Fibroid - Uterine
- Fibromyalgia
- Fibromyositis
- Frozen Shoulder
- Gall Bladder Removal
- Ganglion
- Glandular Fever (full recovery made)
- Glaucoma
- Glue Ear (resolved - must be all clear prior to travel if flying)
- Goitre
- Gout
- Grave's Disease
- Grommet(s) inserted (Glue Ear)
- Gynaecomastia
- Haematoma (external)
- Haemorrhoidectomy
- Haemorrhoids (Piles)
- Hallux Valgus (Bunion)
- Hammer Toe
- Hay Fever
- Hernia (not Hiatus)
- Herpes Simplex (Cold Sore)
- Herpes Zoster (Shingles)
- Hip Replacement (no subsequent arthritis and never any dislocation of a joint replacement)
- Hives (Nettle Rash)

- Housemaid's Knee (Bursitis)
- HRT (Hormone Replacement Therapy)
- Hyperthyroidism (Overactive Thyroid)
- Hypospadias
- Hypothyroidism (Underactive Thyroid)
- Hysterectomy (provided no malignancy)
- Impetigo
- Indigestion
- Influenza (full recovery made)
- Ingrowing Toe-nail (Acronyx)
- Inguinal Hernia
- Insomnia
- Intercostal Neuralgia (no admissions)
- Intertrigo
- Irritable Bowel Syndrome (IBS) (provided definite diagnosis made and no ongoing investigations)
- Keinboeck's Disease
- Keratoconus
- Knee Injury - Collateral/ cruciate ligaments
- Knee Replacement (no subsequent arthritis and never any dislocation of a joint replacement)
- Kohlers Disease
- Labyrinthitis
- Laryngitis
- Learning Difficulties
- Leptothrix
- Leucoderma
- Lichen Planus
- Ligaments (injury)
- Lipoma
- Macular Degeneration
- Mastitis
- Mastoidectomy (resolved - must be all clear prior to travel if flying)
- Menopause
- Menorrhagia
- Migraine (provided definite diagnosis made and no ongoing investigations)
- Miscarriage
- Mole(s)
- Molluscum Contagiosum
- Myalgic Encephalomyelitis (ME) (if the only symptom is fatigue and no hospital admissions)
- Myxoedema
- Nasal Infection
- Nasal Polyp(s)
- Nettle Rash (Hives)
- Neuralgia (no hospital admissions)
- Nosebleed(s)
- Nystagmus
- Osgood-schlatter's Disease
- Osteochondritis
- Otosclerosis
- Overactive Thyroid
- Parametritis
- Pediculosis
- Pelvic Inflammatory Disease
- Photodermatosis
- Piles
- Pityriasis Rosea
- Post Viral Fatigue Syndrome (if the only symptom is fatigue and no admissions)
- Pregnancy (provided no complications)
- Prickly Heat
- Prolapsed Uterus (womb)
- Pruritus
- Psoriasis (no hospital admissions or consultations)
- Repetitive Strain Injury
- Retinitis Pigmentosa
- Rhinitis (Allergic)
- Rosacea
- Ruptured Tendons
- Salpingo-oophoritis
- Scabies
- Scalp Ringworm (Tinea Capitis)
- Scheuermann's Disease (provided no respiratory issues)
- Sebaceous Cyst
- Shingles (Herpes Zoster)
- Sinusitis
- Skin Ringworm (Tinea Corporis)
- Sleep Apnoea (no machine used to assist breathing)
- Sore Throat
- Sprains
- Stigmatism
- Stomach Bug (resolved)
- Strabismus (Squint)
- Stress Incontinence (no urinary infections)
- Talipes (Club Foot)
- Tendon Injury
- Tennis Elbow
- Tenosynovitis
- Termination of Pregnancy
- Testicles - Epididymitis
- Testicles - Hydrocele
- Testicles - Varicocele
- Testicular Cyst
- Testicular Torsion (Twisted Testicle)

Important Limitations under Section A – Cancellation or Curtailment Charges

Claims under Section A - Cancellation or **Curtailment** Charges are not covered for incidents arising directly or indirectly from any **pre-existing medical condition** known to **you** prior to booking any **trip** affecting any **close relative**, **travelling companion** who is not insured under this policy, or any person with whom **you** have arranged to reside temporarily whilst on **your trip** if:

1. a terminal diagnosis had been received prior to booking any **trip**; or

2. they were on a waiting list for or had knowledge of the need for, surgery, in-patient treatment or investigation at any hospital or clinic at the time of booking any **trip**; or

3. during the 90 days immediately prior to booking any **trip** they had required surgery, in- patient treatment or hospital consultations.

Reciprocal health agreements

As an Irish resident **you** are entitled to health care through the public system in countries of the European Union (EU), European Economic Area (EEA) and Switzerland if **you** become ill or injured while on a temporary stay there.

If **you** are travelling to another EU/EEA country or Switzerland, **we** strongly recommend **you** apply for and obtain a European Health Insurance card for yourself and/or family and make sure that any medical treatment is provided at hospitals or by doctors working within the terms of the reciprocal health care agreement, unless AXA Assistance agree otherwise. If **you** are admitted to a private clinic **you** may be transferred to a public hospital as soon as the transfer can be arranged safely. If **you** are travelling to Great Britain or Northern Ireland **you** do not require a European Health Insurance card to obtain the necessary healthcare but need to provide proof that **you** are ordinarily resident in **Ireland** (in practice this means a driving licence, passport or similar document).

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. Details of how to enrol and the free treatment available can be obtained by the

Australian embassy in **Ireland** by contacting 01 664 5300 or www.australianembassy.ie. If **you** are visiting Australia on a student visa **you** are not covered by MEDICARE. Alternatively please call AXA Assistance for guidance.
If **you** are admitted to hospital contact must be made with AXA Assistance as soon as possible and their authority obtained in respect of any treatment NOT available under MEDICARE. Contact AXA Assistance on **+ 353 1 431205**.

Emergency Assistance

Contact AXA Assistance on **+ 353 1 431 1205**
Ref: AA Ireland Travel Insurance
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 **you** incurring medical expenses in excess of €350, **you** must contact AXA Assistance. If this is not possible because the condition requires immediate emergency treatment **you** must contact AXA Assistance as soon as possible. The service is available to **you** and operates 24 hours a day, 365 days a year for advice, assistance, making arrangements for hospital admission, repatriation and authorisation of medical expenses. 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.

Payment for medical treatment abroad

If **you** are admitted to a hospital/clinic while abroad, AXA Assistance will arrange for medical expenses covered by the policy 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 up to €350, **you** should pay the hospital/clinic yourself and claim back medical expenses covered by the policy from **us** on **your** return **home**. 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.

Sports and Activities Cover

Your policy covers many **sports and activities** as standard. **Sports and activities** are only covered on an **incidental**, non-competitive and non-professional basis.

The following **sports and activities** will automatically be covered under **your** policy:

- Abseiling*
- Archery*
- Badminton
- Baseball
- Basketball
- Bowling
- Camel riding
- Canoeing (up to class 2,3 & 4)*
- Clay pigeon shooting *
- Cricket
- Elephant riding
- Fell running *
- Fencing *
- Fishing
- Football
- Go-karting *
- Golf
- Hockey
- Horse trekking*
- Horse riding *
- Hot air ballooning *
- Jet biking *
- Jet skiing *
- Kitesurfing
- Motorcycling under 125cc(no racing and as a means of transport only)
- Mountain bicycling on tarmac *
- Netball
- Orienteering
- Paintball *
- Pony trekking
- Racquetball
- Roller skating
- Rounders
- Running
- Sailing (within 20 nautical Miles of the coastline)
- Sailing (outside 20 nautical Miles of the coastline) *
- Scuba diving (Unqualified and above 18 meters)
- Scuba diving (qualified and above 40 meters) *
- Squash
- Surfing
- Table tennis
- Tennis
- Trampolining
- Trekking (up to 4000 meters without the use of climbing equipment)
- Volleyball
- War games *
- Water polo
- Water skiing
- Wind surfing
- Yachting (within 20 nautical Miles of the coastline)
- Yachting (outside 20 nautical Miles of the coastline) *

Any **sports and activities** marked with * will be covered, but no cover will be available for Section (D) Personal Accident or Section (G) Personal Liability and Section (B) Emergency Medical and Other Expenses will be subject to a policy **excess** of €200 per **insured person**, each and every incident. Under no circumstances will any claims arising from any unlisted activities be covered.

Section A – Cancellation or Curtailment Charges

What IS Covered

We will pay **you** up to the amount shown in the **Schedule of Benefits** for any irrecoverable unused travel and accommodation costs (including excursions up to €250) which **you** have paid or are contracted to pay together with any reasonable additional travel expenses incurred if:

a) cancellation or rebooking of the **trip** is necessary and unavoidable; or

b) the **trip** is curtailed before completion

as a result of any of the following changes in circumstances, which is beyond **your** control, and of which **you** were unaware at the time **you** booked **your trip**:

1. Unforeseen illness, injury or death of **you,** a **close relative**, or any person with whom **you** are travelling or staying during **your trip.**
2. A complication of pregnancy involving **you**.
3. Compulsory quarantine, jury service attendance or being called as a witness at a Court of Law (other than in an advisory capacity) of **you** or **your travelling companion**.
4. Redundancy (which qualifies for payment under current Republic of Ireland redundancy payment legislation and at the time of booking the **trip** there was no reason to believe anyone would be made redundant) of **you** or **your travelling companion**.
5. **You** or any **travelling companion** are a member of the Armed Forces, Gardaí, Fire, Nursing or Ambulance Services or employees of a Government Department and have **your**/their authorised leave cancelled for operational reasons, provided that such cancellation or **curtailment** could not reasonably have been expected at the time when **you** purchased this insurance or at the time of booking any **trip** (whichever is the later).
6. The Gardaí requesting **you** to remain at or return to **your home** due to serious damage to **your home** caused by fire, aircraft, explosion, storm, flood, subsidence, malicious persons or theft.

Important Limitations

Claims under Section A - Cancellation or **Curtailment** Charges are not covered for incidents arising directly or indirectly from any **pre-existing medical condition** known to **you** prior to booking any **trip** affecting any **close relative**, **travelling companion** who is not insured under this policy, or any person with whom **you** have arranged to reside temporarily whilst on **your trip** if:

1. a terminal diagnosis had been received prior to booking any **trip;** or
2. they were on a waiting list for or had knowledge of the need for, surgery, in-patient treatment or investigation at any hospital or clinic at the time of booking any **trip;** or
3. during the 90 days immediately prior to booking any **trip** they had required surgery, in-patient treatment or hospital consultations.

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 immediately 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. In the event of a claim for **curtailment** claims will be calculated strictly from the date **you** return to **your home** in **Ireland.**
5. **You** must contact **us** to make necessary travel arrangements for **you**.
6. If the car which **you** intended to use for **your trip** is stolen, or is damaged and is unroadworthy, within seven days of the departure date, and repairs are unable to be completed by the day of departure, then the costs of an equivalent hire car will be covered and no cancellation costs will be paid.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits** for, **Limits and Excesses** per **insured person**, each and every incident.
2. Any claim arising directly or indirectly from any **pre-existing medical condition** affecting **you** unless **you** have declared ALL **pre-existing medical conditions** to **us** and **we** have written to **you** accepting them for insurance.
3. The cost of recoverable airport charges and levies.
4. Any claims arising directly or indirectly from circumstances known to **you** prior to the date this insurance is purchased by **you** 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.**
5. Any claim resulting from change of plans due to **your** financial circumstances except if **you** are made redundant and qualify for redundancy payment under current Republic of Ireland legislation.
6. Any claim arising from **complications of pregnancy** which:
    a) for cancellation or rebooking – first arise before booking or paying for the **trip,** whichever is the later; or
    b) for **curtailment** - first arise before departing on **your trip.**

Normal pregnancy or childbirth, or travelling when **your medical practitioner** has recorded **your** pregnancy as being at heightened risk of premature birth, would not constitute an unforeseen event.

7. Any costs incurred when **you** did not contact AXA Assistance as soon as reasonably practicable to make the necessary travel arrangements when **you** knew that **your trip** was to be **curtailed**.
8. Any claim resulting from the withdrawal from service of any **public transport** on the orders or recommendation of the regulatory authority in any country. **You** should refer any claim in this case to the transport operator involved.
9. Any claim resulting from the failure of the provider of any service forming part of **your** booked **trip** to provide any part of **your** booked **trip** (apart from excursions) including error, insolvency, omission or default.
10. **Your** inability to travel due to an **insured person's** failure to hold, obtain or produce a valid passport or any required visas.
11. Any claim resulting from the delay or amendment of **your** booked **trip** because of Government action or restrictive regulations.
12. Anything mentioned in the General Exclusions.

YOU MUST ALWAYS CONTACT AXA ASSISTANCE BEFORE CURTAILMENT

Section B – Emergency Medical and Other Expenses

To comply with the terms and conditions of the insurance, **you** must contact **us** if **you** are hospitalised as an in-patient, or before incurring any expenses whatsoever over €350, in order to obtain **our** prior authorisation, immediately **you** are physically able to do so. For the avoidance of any doubt – failure to contact **us** as required may result in **our** declining to pay **your** claim.

What IS Covered

We will pay **you** up to the amount shown in the **Schedule of Benefits** (or if **you** have confirmed that **you** have Private Health Insurance and it is shown on **your** travel insurance certificate, **we** will pay up to the amount shown in the **Schedule of Benefits** in excess of the amount payable by **your** Private Health Insurance or after €55,000, whichever is the highest) for the following costs if **you** suffer an unforeseen **bodily injury**, illness or die during a **trip** outside **Ireland**.

1. All reasonable and necessary expenses which arise as a result of a medical emergency (excluding search and rescue) or a complication of pregnancy involving **you**. This includes **medical practitioners'** fees, hospital expenses, medical treatment and all the costs of transporting **you** to the nearest suitable hospital, when deemed necessary by a recognised **medical practitioner**.
2. All reasonable and necessary emergency medical expenses for all infants born following **complications of pregnancy** during a **trip.** Claims involving multiple births are considered as one event.

3. Emergency dental treatment for the immediate relief of pain and/or emergency repairs to dentures or artificial teeth solely to relieve distress in eating up to a limit of €200.
4. In the event of **your** death outside **Ireland** the reasonable additional cost of funeral expenses abroad up to a maximum of €5,000 plus the reasonable cost of conveying **your** ashes to **your home**, or the additional costs of returning **your** body to **your home**.
5. Reasonable additional transport (economy class) or 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, reasonable additional transport or accommodation expenses for a friend, **close relative** or **travelling companion** to remain with **you** or travel to **you** from **Ireland** or escort **you** and additional travel expenses to return **you** to **your home** if **you** are unable to use the original return ticket.
6. With the prior authorisation of AXA Assistance, additional travelling costs to repatriate **you** to **your home** when recommended by **our** Chief Medical Officer, including the cost of a medical escort if necessary. Repatriation expenses will be in respect only of the identical class of travel utilised on the outward journey unless AXA Assistance agree otherwise.

Special Conditions

1. **You** must give notice immediately to AXA Assistance of any **bodily injury** or illness which necessitates **your** admittance to hospital as an in-patient or before any arrangements are made for **your** repatriation.
2. In the event of **your bodily injury** or illness **we** reserve the right to relocate **you** from one hospital to another and arrange for **your** repatriation to **Ireland** 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 **Ireland** to continue treatment.
3. **You** must contact AXA Assistance as soon as possible in the event of **you** incurring medical expenses in excess of €350 relating to one incident.
4. **You** must claim against **your** private health insurer first for any in-patient medical expenses abroad up to **your** policy limit. In the event of a claim under this policy **you** must advise **us** of any other insurance policy **you** hold or benefit from which may provide cover.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. Any claim arising directly or indirectly from a **pre-existing medical condition** affecting **you** unless **you** have declared ALL **pre-existing medical conditions** to **us** and **we** have written to **you** accepting them for insurance.
3. Costs of more than €350 or medical repatriation not agreed or authorised by **us** in advance.
4. Any treatment or diagnostic testing that was pre-planned or pre-known by **you**.

5. Any treatment which is not a surgical or medical procedure with the sole purpose of curing or relieving acute unforeseen illness or injury.
6. Treatment costs for cosmetic reasons unless **our** Chief Medical Officer agrees such treatment is necessary as a result of an accident covered by this policy.
7. The cost of treatment which, in the opinion of **our** Chief Medical Officer, can safely be delayed until **your** return **home**.
8. Expenses incurred as a result of a tropical disease where **you** have not had the recommended inoculations or vaccinations and/or taken the recommended medication.
9. Any claim arising from pregnancy related conditions not due to **complications of pregnancy** which first arise after departing on **your trip.** Normal pregnancy or childbirth, or travelling when **your medical practitioner** has recorded **your** pregnancy as being at heightened risk of premature birth, would not constitute an unforeseen event.
10. Costs incurred in obtaining or replacing medication, which at the time of departure is known to be required or to be continued outside **Ireland**.
11. The cost of dental treatment involving the provision of dentures, artificial teeth or the use of precious metals.
12. Treatment or services provided by a private clinic or hospital, health spa, convalescent home or any rehabilitation centre unless confirmed as medically necessary by **our** Chief Medical Officer.
13. Any costs **you** incur outside **Ireland** after the date **our** Chief Medical Officer tells **you** that **you** should return **home** or **we** arrange for **you** to return **home**. (**Our** liability to pay further costs under this Section after that date will be limited to what **we** would have paid if **your** repatriation had taken place.)
14. Costs incurred in the United States that exceed the average reimbursement the medical service provider receives for all services rendered to its patients for like treatment, but in any event no more than one and a half times the rate that would be applicable if the costs were payable by US Medicare.
15. **You** must not unreasonably refuse the medical repatriation services **we** agree to provide and pay for under this policy. If **you** choose alternative medical repatriation services **you** must notify **us** in writing in advance and, it will be at **your** own risk and own cost.
16. 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.
17. Additional costs arising from single or private room accommodation.
18. Any costs incurred in **Ireland** other than the cost of transporting **you** or **your** body or ashes to **your home**.
19. The cost of flight tickets exceeding economy class for an accompanying non-medical escort in the event of medical repatriation (any increase in cost due to requested upgraded flight tickets must be at the personal expense of the person(s) travelling).

20. Any costs incurred in Europe which would have been covered by the use of an EHIC card had **you** obtained one, and **you** failed to obtain one prior to travel.
21. Any costs incurred in Australia which would have been covered by Medicare had **you** enrolled, and **you** failed to enrol in Medicare, having had the opportunity to do so.
22. Any inpatient medical costs covered under **your** Private Health Insurance policy or the initial €55,000 (whichever is the highest), if **you** have confirmed that **you** have Private Health Insurance and it appears on **your** travel insurance certificate.
23. Air-sea rescue costs.
24. Any medical costs **you** incur when **you** are engaging in **winter sports** activities, unless **you** have paid the **winter sports** premium.
25. Any medical costs **you** incur when **you** are engaging in any **sports and activities** not listed on page 23. In the case of participating in **sports and activities** noted with an astrix on page 23 the **excess** is increased to €200 per **insured person**, each and every incident.
26. Anything mentioned in the General Exclusions.

Section C – Hospital Benefit

What IS Covered

If **we** accept a claim under Section B – Emergency Medical and Other Expenses, **we** will also reimburse **you** up to the amount as shown in the **Schedule of Benefits** for **incidental** expenses (such as newspapers, television rental and visitor taxi journeys) for each continuous 24–hour period that **you** have to spend in hospital as an in-patient outside **Ireland.** Itemised receipts must be kept as proof of costs incurred.

What Is NOT Covered

1. Any claim where **you** cannot provide itemised receipts.
2. Claims for more than one round **trip** taxi journey per day.
3. Anything mentioned in the General Exclusions.

Section D – Personal Accident

What IS Covered

If **you** suffer an accidental **bodily injury** during the **period of insurance** during **your trip** which, within 12 months is the sole and direct cause of **your** death or **loss of limb**, **loss of sight or permanent total disablement**, **we** will pay to **you** or **your** legal personal representatives one of the benefits as shown in the **Schedule of Benefits**.

Benefit is not payable under more than one item shown in the **Schedule of Benefits**.

What is NOT Covered

1. Any claim arising directly or indirectly from any **pre-existing medical conditions**.
2. Any disability or death that is caused by a worsening of physical health (e.g. a stroke or a heart attack) and not as a direct result of a **bodily injury**.
3. Any claim arising as a result of **you** participating in **sports and activities** marked with an astrix or **sports and activities** not listed on page 23.
4. Normal and habitual travel to and from **your home** and place of employment or second residence shall not be considered as a part of a **trip** and is not covered under the policy.
5. Anything mentioned in the General Exclusions.

Section E – Baggage, Baggage Delay and Passport

What IS Covered Baggage

We will pay **you** up to the amount as shown in the **Schedule of Benefits** for the accidental loss of, theft of or damage to **baggage** or **valuables**. 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 **baggage** or **valuables**).

The maximum **we** will pay for the following items is:

a) For any **single item** as shown in the **Schedule of Benefits**.
b) The total for all **valuables** is as shown in the **Schedule of Benefits**.

Baggage Delay

We will pay **you** up to the amounts as shown in the **Schedule of Benefits** for the emergency replacement of clothing, medication and toiletries if **your** checked in **baggage** is temporarily lost in transit during the outward journey and not returned to **you** within 12 hours, provided written confirmation is obtained from the carrier, confirming the number of hours the **baggage** was delayed. All receipts must be retained. If the loss is permanent the amount paid will be deducted from the final amount to be paid under this Section.

Passport

If **your** passport is lost or stolen outside of **Ireland we** will pay up to the amount shown in the **Schedule of Benefits** for reasonable additional travel and accommodation to obtain an emergency passport abroad, including reasonable additional transport costs if **you** are unable to make **your** pre-booked flight **home** following the loss or theft of **your** passport within 48 hours of **your** pre- booked flight **home**. **We** will only pay the pro rata value of the lost passport.

Special Conditions

1. **You** must report all incidences of loss or theft of **personal belongings** to the local Police in the country where the incident occurred within 24 hours of discovery and obtain a written

report. A Holiday Representative's Report is not sufficient.

2. For items damaged whilst on **your trip you** must obtain a damage report/repair statement from an appropriate agent.
3. **You** must take all reasonable steps to get back any article which has been lost or stolen, and to identify the person **you** believe to be responsible for the loss and assist in any legal action.
4. 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) immediately obtain a Property Irregularity Report from the airline, but no later than 24 hours of discovery of the incident
    b) give formal written notice of the claim to the carrier 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 this policy.
5. **You** must provide an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your** claim. The maximum payment for any **single item** for which an original receipt, proof of purchase or insurance valuation (obtained prior to loss) is not supplied is €75, subject to a maximum of €300 for all such items.
6. If the item can be repaired economically **we** will pay the cost of the repair only.
7. **You** must keep all **your** receipts, flight tickets and check-in luggage tags and send them to **us** with **your** claim.
8. **You** must retain any property which is damaged, and, if requested, send it to **us** at **your** own expense. **You** must not abandon any property for **us** to deal with or dispose of any damaged items as **we** may need to see them.
9. If **we** pay a claim for the full value of the property and it is subsequently recovered or there is any salvage then it will become **our** property.
10. Payment will be made based on the value of the property at the time of purchase. A deduction will be made for wear, tear and loss of value depending on the age of the property.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident (except claims under '**Baggage** Delay' above).
2. Loss, theft of or damage to **valuables** or **your** passport left **unattended** at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe or safety deposit box.
3. Loss, theft of or damage to **personal belongings** left unsecured or **unattended** or outside **your** reach at any time in a place to which the public have access.

4. Theft of or damage to **personal belongings** from an **unattended** motor vehicle unless:
    a) the items were out of sight in the locked motor vehicle; and
    b) evidence that force and violence were used to get into the motor vehicle is provided.
5. Loss or damage due to delay, confiscation or detention by customs or other authority.
6. Loss, theft of or damage to unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, cosmetics, perfumes, tobacco, alcohol, antiques, musical instruments, mobile telephones, smart phones or telecommunication equipment of any kind, documents of any kind, bonds, securities, perishable goods, surfboards/sailboards, bicycles, marine equipment or craft or any related equipment or fittings of any kind, 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. Loss, theft of or damage to business goods, samples, tools of trade, motor accessories and other items used in connection with **your** business, trade, profession or occupation.
10. 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.
11. Loss or damage due to depreciation in value, variations in exchange rates or shortages due to error or omission.
12. Claims arising from loss or theft from **your** accommodation unless there is evidence of forced entry which is confirmed by a Police report issued by the local Police in the country of incident.
13. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **baggage** or **valuables**.
14. Claims arising for **personal money**.
15. Claims arising from loss, theft or damage of **personal belongings** shipped as freight or under a bill of lading.
16. Anything mentioned in the General Exclusions.

Section F – Personal Money and Documents

What IS Covered

Your personal money and documents are covered whilst **you** are carrying them on **your** person (in an item of clothing **you** are wearing or in a container which **you** are holding or which is attached to you) or if **you** have left them in a safety deposit box during a **trip.**

We will pay **you** up to the amounts shown in the **Schedule of Benefits** for the accidental loss of, theft of or damage to **personal money** and documents (including driving licence).

Special Conditions

1. **You** must report all incidences of loss or theft to the local Police in the country where the incident occurred within 24 hours of discovery and obtain a written report. A Holiday Representative's report is not sufficient.
2. Receipts for items lost, stolen or damaged including foreign currency exchange receipts showing the amount must be retained as these will be required to substantiate **your** claim.
3. **You** must produce evidence of the withdrawal of bank notes, currency notes or coins – otherwise no payment will be made.
4. If **personal money** is lost, stolen or damaged while deposited in a hotel safe or safety deposit box **you** must report to the hotel, in writing, details of the loss, theft or damage and obtain an official report from an appropriate local authority.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. **Personal money** left **unattended** at any time unless deposited in a hotel safe or locked safety deposit box.
3. Loss, theft of or damage to travellers' cheques if **you** have not complied with the issuers' conditions or where the issuer provides a replacement service.
4. Loss or damage due to delay, confiscation or detention by customs or other lawful officials and authorities.
5. Loss or damage due to depreciation in value, variations in exchange rates or shortages due to error or omission.
6. Anything mentioned in the General Exclusions.

Section G – Personal Liability

What IS Covered

We will pay **you** up to the amount shown in the **Schedule of Benefits** (inclusive of legal costs and expenses) against any amount **you** become legally liable to pay as compensation for any claim or series of claims arising from any one event occurring during a **trip** outside **Ireland**, 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**, **travelling companion**, 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, your travelling companion**, 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**.

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 this cover provided that such representative(s) comply(ies) with the terms and conditions outlined in this policy.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. Compensation or legal costs arising directly or indirectly from:
    a) Liability which has been assumed by **you** under agreement unless the liability would have attached in the absence of such agreement.
    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 rowboats, punts or canoes and where the appropriate **golf equipment** premium has been paid, golf buggies whilst in use on a golf course).
    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 **excess** as detailed in the **Schedule of Benefits**, **Limits and Excesses** for each and every claim arising from the same incident).
    f) Any responsibility arising out of **your** criminal, malicious or deliberate acts.
3. Any claim arising as a result of **you** participating **sports and activities** marked with an astrix or **sports and activities** not listed on page 23.
4. Anything mentioned in the General Exclusions.

Section H – Delayed Departure

What IS Covered

If **you** have arrived at the terminal and have checked-in, or attempted to check-in for **your** pre-booked flight, sea crossing, international coach or international train journey from or to **Ireland**, and it is delayed for more than 12 hours beyond the intended departure time as a direct result of:

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

We will reimburse **you:**

a) up to the amount shown in the **Schedule of Benefits** for the first full 12 consecutive hours that **your** departure is delayed for **your** costs incurred in the terminal in respect of restaurant meals and refreshments consumed; and
b) the subsequent amount shown in the **Schedule of Benefits** for each full 12 hours delay thereafter for **your** costs incurred in the terminal in respect of restaurant meals, refreshments consumed and hotel accommodation, up to a maximum as shown in the **Schedule of Benefits**.

Special Conditions

1. Itemised receipts must be kept as proof of purchase.
2. **You** may claim under only one of the following Sections: Section H – Delayed Departure, Section I – Holiday Abandonment or Section J – Missed Departure for the same event.
3. **You** must check-in or attempt to check-in at the terminal according to the itinerary supplied to **you**.
4. **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.
5. **You** must comply with the terms of contract of the travel agent, tour operator or provider of transport.

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 **you** purchased this insurance or at the time of booking any **trip** whichever is the later.
   b) the withdrawal from service (temporary or otherwise) of **public transport** on the recommendation of the regulatory authority in any country. **You** should refer any claim in this case to the transport operator involved.

2. Claims where **you** do not provide receipts for the restaurant meals, refreshments and accommodation.
3. Any claim where **you** have not obtained written confirmation from the carrier giving the period and reason for delay.
4. Any costs or charges for which any carrier or provider must, has or will compensate **you**.
5. Claims if **you** do not check-in (or attempt to check-in) and arrive at the departure point before the advised time.
6. Any expenses where reasonable alternative travel arrangements have been made within 12 hours of the scheduled departure time.
7. Anything mentioned in the General Exclusions.

Section I – Holiday 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 **Ireland** for at least 24 hours from the scheduled time of departure due to:

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

We will reimburse **you** up to the amount shown in the **Schedule of Benefits** 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 24 hours has elapsed and the period of **your trip** is reduced by more than 25% of the original pre-booked duration, **you** choose to cancel **your trip**.

Special Conditions

1. **You** may claim under only one of the following Sections: Section H – Delayed Departure, Section I – Holiday Abandonment or Section J – Missed Departure for the same event.
2. **You** must check-in or attempt to check-in at the terminal according to the itinerary supplied to **you**.
3. **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.
4. **You** must comply with the terms of contract of the travel agent, tour operator or provider of transport.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.

2. Claims arising directly or indirectly from:
    a) **strike or industrial action** or air traffic control delay existing or publicly declared by the date **you** purchased this insurance or at the time of booking any **trip** whichever is the later.
    b) the withdrawal from service (temporary or otherwise) of **public transport** on the orders or recommendation of the regulatory authority in any country. **You** should refer any claim in this case to the transport operator involved.
3. Anything mentioned in the General Exclusions.

Section J – Missed Departure

What IS Covered

We will pay **you** up to the amount as shown in the **Schedule of Benefits** for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** overseas destination or returning to **Ireland** 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 direct result of:

a) the failure of scheduled **public transport**; or
b) an accident to or breakdown of the vehicle in which **you** are travelling; or
c) an accident or breakdown occurring ahead of **you** on a motorway or dual carriageway which causes an unexpected delay to the vehicle in which **you** are travelling; or
d) **strike or industrial action** or **adverse weather conditions**.

Special Conditions

1. **You** may claim under only one of the following Sections: Section H – Delayed Departure, Section I – Holiday Abandonment or Section J – Missed Departure for the same event.
2. In the event of a claim arising from any delay occurring on a motorway or dual carriageway **you** must obtain written confirmation from the Gardaí/Police or attending emergency breakdown services of the location, reason for and duration of the delay.
3. **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.
4. **You** must obtain a written report from the carrier confirming the delay and the cause.
5. All itemised receipts must be retained.
6. **You** must obtain a written report from the Gardai/Police or attending emergency service if the vehicle **you** are travelling in breaks down or is involved in an accident.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.

2. Claims arising directly or indirectly from:
    a) **strike or industrial action** existing or declared publicly announced by the date **you** purchased this insurance or at the time of booking any **trip** whichever is the later.
    b) an accident to or breakdown of the vehicle in which **you** are travelling for which a professional repairer's 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.
    d) the withdrawal from service (temporary or otherwise) of **public transport** on the orders or recommendation of the regulatory authority in any country. **You** should refer any claim in this case to the transport operator involved.
3. Additional expenses where the scheduled **public transport** operator has offered reasonable alternative travel arrangements.
4. Any claim where **you** have not allowed sufficient time to arrive at the international departure point in time to check-in or clear passport and security controls.
5. Anything mentioned in the General Exclusions.

Section K – Missed Connection

What IS Covered

If **you** fail to arrive at the international departure point in time to board **your** connection on which **you** are booked to travel as a result of the failure of other scheduled **public transport**, **we** will pay **you** up to the amount shown in the **Schedule of Benefits** per **trip**, for reasonable meals, refreshments, additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** overseas destination or connecting flights outside **Ireland**.

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 retain all receipts.
4. **You** may claim only once under Section H – Delayed Departure or J – Missed Departure for the same event, not twice.

What is NOT Covered

1. Any claim for missed connection under the Essential policy when **you** have not purchased the missed connection cover, paid the appropriate premium and is shown on **your** certificate of insurance.

2. Any claim for missed cruise connection when **you** have not purchased the cruise connection cover, paid the appropriate premium and is shown on **your** certificate of insurance.
3. **Strike or industrial action** existing or declared publicly by the date these benefits became effective or **you** booked **your trip** (whichever is the earlier).
4. Withdrawal from service (temporary or otherwise) of **public transport** on the recommendation of the regulatory authority or any similar body in any country.
5. Additional expenses where the scheduled **public transport** operator has offered reasonable alternative travel arrangements within 4 hours of the scheduled departure time or within 4 hours of an actual connecting flight arrival time.
6. Missed connection 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.
7. Missed connection cover is not available under the Backpacker policy.
8. Anything mentioned in the General Exclusions.

Section L – Catastrophe Cover

What IS Covered

We will pay **you** up to the amounts shown in the **Schedule of Benefits** in the event that the tour company is unable to assist and **you** are forced to move from the pre-booked accommodation as a result of fire, lightning, explosion, earthquake, storm, tempest, hurricane, flood, tsunami, 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.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. Any claim where the hotel or tour company have made alternative arrangements.
3. Anything mentioned in the General Exclusions.

Section M – Mugging

What IS Covered

We will pay **you** up to the amounts shown in the **Schedule of Benefits** for every complete period of 24 hours **you** receive in-patient hospital treatment which is covered under Section B — Emergency Medical Expenses and Other Expenses as a direct result of a **mugging** whilst on **your trip.**

Special Conditions

1. **You** must give notice immediately to AXA Assistance or **us** of any **bodily injury** which necessitates **your** admittance to hospital as an in-patient.
2. **You** must report the **mugging** to the Police as soon as possible and obtain from them a written report of the incident.
3. **We** require written confirmation of **your** injuries and the period of in-patient treatment from the hospital.

What Is NOT Covered

1. Anything mentioned in the General Exclusions.

Section N – Withdrawal of Services

What IS Covered

We will pay **you** up to the amounts shown in the **Schedule of Benefits** for every complete period of 24 hours **your** pre-booked hotel completely withdraws the following services due to **strike or industrial action**:

1. water or electrical facilities; or
2. swimming pool facilities; or
3. kitchen services to the extent that no food is available; or
4. chambermaid facilities.

What Is NOT Covered

1. Any claim not substantiated by a written report from the hotel management confirming the exact length, nature and cause of the disruption.
2. Claims arising directly or indirectly from **strike or industrial action** which was advised or known to **you** by the date **you** purchased this insurance or at the time of booking any **trip** whichever is the later.
3. Claims for services which were not available prior to any **strike or industrial action**.
4. Anything mentioned in the General Exclusions.

Section O – Kennel/Cattery Fees

What IS Covered

We will pay **you** up to the amount shown in the **Schedule of Benefits** for additional kennel/ cattery fees incurred for every complete 24 hour period that **you** are delayed after receiving in-patient hospital treatment which is covered under Section B - Emergency Medical and Other Expenses.

Special Conditions

1. **You** must send **us** written confirmation (at **your** own expense) from the appropriate kennel or cattery confirming the amount of additional fees that **you** have had to pay together with the dates for which these were payable.

What Is NOT Covered

1. Any claim arising from **your bodily injury**, illness or disease that is not covered under Section B – Emergency Medical and Other Expenses.
2. Any claim where **your** pet's stay does not exceed the pre-booked period of accommodation.
3. Anything mentioned in the General Exclusions.

Section P – Hijack Benefit

What IS Covered

We will pay **you** up to the amounts shown in the **Schedule of Benefits** for each 24 hours **you** are detained in the event that the **public transport** in which **you** are travelling as a fare paying passenger is hijacked.

Section Q – Third Party Supplier Insolvency

What IS Covered

We will pay **you** up to the amounts shown in the **Schedule of Benefits** for any irrecoverable, unused costs and charges relating to third party companies that become insolvent within **your** booking, such as accommodation providers, hotels, car hire, ferries, coaches, which **you** have paid or are contracted to pay.

Special Conditions

1. **You** may claim only under Section Q – Third Party Supplier Insolvency or Section A – Cancellation or **Curtailment** charges, not both.
2. In the first instance **your** claim should be submitted to the credit card provider, if the irrecoverable costs were paid for by credit card.

3. **You** must obtain written confirmation from the liquidator that the third party provider has become insolvent.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. Any costs relating to the failure of an airline.
3. Costs incurred relating to the insolvency of a third party company existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip** whichever is the later.
4. Any costs incurred by **you** which are recoverable from the company providing the accommodation or for which **you** receive or are expected to receive compensation.
5. Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
6. Any costs for normal day to day living such as food and drink which **you** would have expected to pay during **your trip**.
7. Any costs recoverable from any company who is bonded or insured elsewhere.
8. Anything mentioned in the General Exclusions.

Section R – Overseas Legal Expenses and Assistance

What IS Covered

We will pay **you** up to the amount shown in the **Schedule of Benefits** for legal costs to pursue a civil action for compensation if, as a direct result of one event, someone else causes **you bodily injury**, illness or death during **your trip**.

Where there are two or more **insured person(s)** insured by this policy, then the maximum amount payable by **us** shall not exceed double the amount shown in the **Schedule of Benefits**.

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.

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** 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. If **you** withdraw from a legal action, without **our** prior consent, other than on the advice of **your adviser**, **you** will be responsible for any **adviser's costs** and **you** will be responsible for reimbursing any **adviser's costs** or other fees already paid under these benefits to **us**.
6. **We** will not initiate legal proceedings in more than one country for the same occurrence.
7. **We** may choose to conduct legal proceedings in the United States of America or Canada under the contingency fee system operating in those countries.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. Any claim where **we** think there is no reasonable chance of **you** winning the case or achieving a reasonable settlement.
3. Legal costs or expenses incurred in pursuit of any claim against a travel agent, tour operator, carrier, **us**, **our** agents, AXA Assistance or their agents, AA Ireland, someone **you** were travelling with, a person related to **you**, or another **insured person**.
4. Legal costs or expenses incurred before **we** accept **your** claim in writing.
5. Any claim where the legal costs and expenses are likely to be greater than the anticipated amount of compensation.
6. Lawyers' fees incurred on the condition that **your** action is successful.
7. Penalties or fines which a Court awards against **you.**
8. Legal costs and expenses incurred if an action is brought in more than one country.
9. Any claim where in **our** opinion the estimated amount of compensation payment is less than €1,000 for each **insured person** or where **you** do not have a reasonable chance of success.
10. Travel, accommodation and **incidental** costs incurred to pursue a civil action for compensation.
11. Costs of any appeal.
12. Claims occurring within **Ireland.**
13. Claims by **you** other than in **your** private capacity.
14. Anything mentioned in the General Exclusions.

Sections S1, S2, S3, S4 and S5 – Winter Sports

(only operative if indicated in the travel insurance certificate)

Winter sports are covered only on a non-competitive and non-professional basis. **You** are not covered when engaging in organised competitions or when engaging in an activity against local authoritative warning or advice.

Cover in respect of Sections S1, S2, S3, S4 and S5 only operates:

1. Under single **trip** policies if the appropriate **winter sports** extension has been chosen and the appropriate additional premium has been paid and is shown on the travel insurance certificate.
2. Under annual multi **trip** policies for a period not exceeding 17 days in total in each **period of insurance**, if the appropriate **winter sports** extension has been chosen and the appropriate additional premium has been paid and is shown on the travel insurance certificate.

Winter sports cover is not available under the Backpacker policy.

Section S1 – Ski Equipment

What IS Covered

We will pay **you** up to the amount as shown in the **Schedule of Benefits** for the accidental loss of, theft of or damage to **your** own **ski equipment**, or hired **ski equipment**. The amount payable will be the value at the time of the loss less a deduction for wear tear and depreciation (calculated from the table below), or **we** may at **our** option replace, reinstate or repair the lost or damaged **ski equipment**.

Age of Item	Amount Payable
Up to 1 year old	90% of purchase price
Up to 2 years old	70% of purchase price
Up to 3 years old	50% of purchase price
Up to 4 years old	30% of purchase price
Up to 5 years old	20% of purchase price
Over 5 years old	No payment

Our liability for **ski equipment** hired by **you** shall be further limited to the **insured person's** liability for such loss or damage.

The maximum **we** will pay for the following items is:

a) For any **single item** as shown in the **Schedule of Benefits**.
b) For owned **ski equipment** as shown in the **Schedule of Benefits**.
c) For hired **ski equipment** as shown in the **Schedule of Benefits**.

Special Conditions

1. Anything mentioned in the Special Conditions to Section E – Baggage, Baggage Delay and Passport.
2. The maximum payment for any **single item** for which an original receipt, proof of purchase or insurance valuation (obtained prior to the loss) is not supplied is €75, subject to a maximum of €300 for all such items.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. Anything mentioned in What is NOT Covered under Section E – Baggage, Baggage Delay and Passport.
3. Anything mentioned in the General Exclusions.

Section S2 – Hire of Ski Equipment

What IS Covered

We will pay **you** up to the amount shown in the **Schedule of Benefits** 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 12 hours of **your** own **ski equipment**.

Special Conditions

1. **Our** liability for **ski equipment** hired by **you** shall be further limited to the **insured person's** liability for such loss or damage under the hire agreement.
2. Anything mentioned in the Special Conditions to Section E – Baggage, Baggage Delay and Passport.
3. **You** must keep all receipts for hire costs and send these to **us** with **your** claim.

What Is NOT Covered

1. Anything mentioned in What is NOT Covered under Section E – Baggage, Baggage Delay and Passport.
2. Anything mentioned in the General Exclusions.

Section S3 – Ski Pack

What IS Covered

We will pay **you** up to the amount as shown in the **Schedule of Benefits**:

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 **you** lose it.

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. **You** must report to an appropriate authority within 24 hours of discovery and obtain a written report of the loss or theft of **your** ski pass.

What Is NOT Covered

1. Any claims arising directly or indirectly as a result of any **pre-existing medical conditions** unless **you** have declared ALL **pre-existing medical conditions** to **us** and **we** have written to **you** accepting them for insurance.
2. Anything mentioned in the General Exclusions.

Section S4 – Piste Closure

What IS Covered

If **you** are prevented from skiing (excluding cross country skiing) at the pre-booked resort due to lack of snow **we** will pay **you**, up to the amount shown in the **Schedule of Benefits** for every complete 24 hour period, up to the maximum shown in the **Schedule of Benefits**, for the cost of transport organised by the tour operator to an alternative site.

The cover only applies to trips to outside **Ireland** to resorts, taken during their published ski season, which **you** have pre-booked for a period exceeding 12 hours and for so long as such conditions prevail at the resort, but not exceeding the pre-booked period of the **your trip**.

If no alternative sites are available **we** will pay **you** compensation of the amount shown in the **Schedule of Benefits**.

Special Conditions

1. **You** must obtain written confirmation from the resort management of the piste conditions, confirming the closure of facilities, the dates applicable and the reason for the closure.

What Is NOT Covered

1. Any circumstances where transport costs, compensation or alternative skiing facilities are provided to **you**.
2. Anything mentioned in the General Exclusions.

Section S5 – Avalanche Closure

What IS Covered

We will pay **you** up to the amount shown in the **Schedule of Benefits** for the cost of transport organised by the tour operator to an alternative site if an avalanche results in the closure of skiing facilities (excluding cross-country skiing) in **your** resort and it is not possible to ski.

The cover only applies to trips to outside **Ireland** to resorts, taken during their published ski season, which **you** have pre-booked for a period exceeding 12 hours and for so long as such conditions prevail at the resort, but not exceeding the pre-booked period of the **your trip**.

Special Conditions

1. **You** must obtain written confirmation from the resort management of the piste conditions, confirming the closure of facilities and the dates applicable.

What is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. Anything mentioned in the General Exclusions.

Section T1, T2, T3 and T4 – Business Cover

(only operative if indicated in the travel insurance certificate)

Cover in respect of Sections T1, T2, T3 and T4 only operates under single **trip** policies and annual multi **trip** policies if the appropriate business cover extension has been chosen and the appropriate additional premium has been paid and is shown on the travel insurance certificate. This extension to the policy provides the following modifications to the insurance specifically in respect of any **business trip** made by **you** during the **period of insurance**.

Business cover is not available under the Backpacker policy.

Section T1 - Emergency Return Home

What IS Covered

We will pay all necessary additional travelling costs incurred in transporting **you home** early

from a **trip** (and, if required, back to the overseas location within the original period of the booked **trip**) as a result of a serious accident or illness of a **close business associate** whose absence from **your** place of work at the same time as **you**, as certified by a director or manager, requires **your** immediate return.

What Is NOT Covered

1. Any costs for transportation not arranged by **us**, or incurred without **our** prior approval.
2. The cost of flight tickets exceeding economy class for each **insured person**.
3. Anything mentioned in the General Exclusions.

Section T2 – Business Equipment

What IS Covered

1. In addition to the cover provided under Section E – Baggage, Baggage Delay and Passport **we** will pay **you** up to the amount as shown in the **Schedule of Benefits** for accidental loss, theft of, or damage to **your business equipment**. The amount payable will be the value at the time of the loss less a deduction for wear, tear and depreciation (calculated from the table below), or **we** may at **our** option replace, reinstate or repair the lost or damaged **business equipment**.

Age of Item	Amount Payable
Up to 1 year old	90% of purchase price
Up to 2 years old	70% of purchase price
Up to 3 years old	50% of purchase price
Up to 4 years old	30% of purchase price
Up to 5 years old	20% of purchase price
Over 5 years old	No payment

   The maximum **we** will pay for the following items is:
   a) For any **single item** as shown in the **Schedule of Benefits**.
   b) For computer equipment as shown in the **Schedule of Benefits**.
   c) For business samples as shown in the **Schedule of Benefits**.
2. **We** will also pay **you** for any emergency courier expenses **you** have incurred, in obtaining any **business equipment**, which is essential to **your** intended business itinerary, up to the amount shown in the **Schedule of Benefits**.
3. **We** will pay **you** for the purchase of essential items, up to the amount shown in the

Schedule of Benefits if **your business equipment** is delayed or lost in transit on **your** outward journey for more than 12 hours.

Special Conditions

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery and obtain a written report of the loss, theft or attempted theft of all **business equipment**.
2. For items damaged whilst on **your trip you** must obtain an official report from an appropriate local retailer confirming the item is damaged and beyond repair.
3. If **your business equipment** is delayed **you** must supply receipts for the essential items purchased and written confirmation from the carrier as to the exact nature and length of delay.
4. Receipts for items lost, stolen or damaged must be retained as these will help **you** to substantiate **your** claim.
5. The maximum payment for any **single item** for which an original receipt, proof of purchase or insurance valuation (obtained prior to the loss) is not supplied is €75, subject to a maximum of €300 for all such items.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. Loss, theft or damage to **business equipment** left unsecured or **unattended** or outside **your** reach at any time in a place to which the public have access.
3. Theft of or damage to **business equipment** from an **unattended** motor vehicle unless:
    a) the items were out of sight in the locked motor vehicle; and
    b) evidence that force and violence were used to get into the motor vehicle is provided by **you**.
4. Claims arising from **business equipment** and **valuables** whilst in the custody of a carrier.
5. 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.
6. Claims arising from damage caused by leakage of powder or liquid carried within **business equipment**.
7. Claims arising from loss or theft from **your** accommodation unless there is evidence of forced entry which is confirmed by a Police report issued by the local Police in the country of incident.
8. Loss or damage due to delay, confiscation or detention by customs or other authority.
9. Loss of, theft of or damage to films, tapes, cassettes, cartridges or discs other than for their value as unused materials unless purchased pre-recorded when **we** will pay up to the maker's latest list price.

10. Any loss, theft of, or damage to **business equipment** shipped as freight or under a bill of lading.
11. Anything mentioned in the General Exclusions.

Section T3 – Business Equipment Hire

What IS Covered

We will pay **you** up to the amount as shown in the **Schedule of Benefits** for each 24 hour period, for the cost of necessary hire of **business equipment** following:

a) loss or damage of **your business equipment**; or
b) the misdirection or delay in transit for at least 12 hours of **your business equipment**.

Special Conditions

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery and obtain a written report of the loss, theft or attempted theft of all **business equipment**.
2. For items damaged whilst on **your trip you** must obtain an official report from an appropriate local retailer confirming the item is damaged and beyond repair.
3. If **your business equipment** is misdirected or delayed **you** must obtain written confirmation from the carrier as to the exact nature and length of delay or misdirection.
4. **You** must keep all receipts for hire costs and send them to **us** with **your** claim.
5. Receipts for items lost, stolen or damaged must be retained as these will help **you** to substantiate **your** claim.

What Is NOT Covered

1. Loss, theft or damage to **business equipment** left unsecured or **unattended** or outside **your** reach at any time in a place to which the public have access.
2. Theft of or damage to **business equipment** from an **unattended** motor vehicle unless:
   a) the items were out of sight in the locked motor vehicle; and
   b) evidence that force and violence were used to get into the motor vehicle is provided by **you**.
3. Claims arising from **business equipment** and **valuables** whilst in the custody of a carrier.
4. Claims arising from damage caused by leakage of powder or liquid carried within **business equipment**.
5. Claims arising from loss or theft from **your** accommodation unless there is evidence of forced entry which is confirmed by a Police report issued by the local Police in the country of incident.
6. Loss or damage due to delay, confiscation or detention by customs or other authority.

7. Loss of, theft of or damage to films, tapes, cassettes, cartridges or discs other than for their value as unused materials unless purchased pre-recorded when **we** will pay up to the maker's latest list price.
8. Anything mentioned in the General Exclusions.

Section T4 – Business Money

What IS Covered

We will pay **you** up to the amount shown in the **Schedule of Benefits** for the accidental loss of, theft of or damage to **business money**.

a) For cash (bank notes, currency notes and coins) as shown in the **Schedule of Benefits**.
b) For all other **business money** as shown in the **Schedule of Benefits**.

Special Conditions

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery and obtain a written report of the loss, theft or attempted theft of all **business money**. A Holiday Representatives report is not sufficient.
2. Receipts for items lost, stolen or damaged including foreign currency exchange receipts showing the amount must be retained as these will be required to substantiate **your** claim.
3. If **business money** is lost, stolen or damaged while deposited in a hotel safe or safety deposit box **you** must report to the hotel, in writing, details of the loss, theft or damage and obtain an official report from an appropriate local authority.
4. **You** must retain all travel tickets and tags for submission if a claim is to be made under this policy.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. Loss, theft of or damage to **business 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 travellers' cheques if **you** have not complied with the issuers' conditions or where the issuer provides a replacement service.
4. Loss or damage due to delay, confiscation or detention by customs or other lawful officials and authorities.
5. Loss or damage due to depreciation in value, variations in exchange rates or shortages due to error or omission.
6. Anything mentioned in the General Exclusions.

Sections U1, U2 and U3 – Golf Cover

(only operative if indicated in the travel insurance certificate and appropriate additional premium paid)

Cover in respect of Sections U1, U2 and U3 only operates:

Under single **trip** policies and annual multi **trip** policies if the appropriate golf cover extension has been chosen and the appropriate additional premium has been paid and is shown on the travel insurance certificate.

Golf cover is not available under the Backpacker policy.

Section U1 – Golf Equipment

What IS Covered

We will pay **you** up to the amount as shown in the **Schedule of Benefits** for accidental loss, theft of, or damage to **your golf equipment**. The amount payable will be the value at the time of the loss less a deduction for wear, tear and depreciation (calculated from the table below), or **we** may at **our** option replace, reinstate or repair the lost or damaged **golf equipment**.

Age of Item	Amount Payable
Up to 1 year old	90% of purchase price
Up to 2 years old	70% of purchase price
Up to 3 years old	50% of purchase price
Up to 4 years old	30% of purchase price
Up to 5 years old	20% of purchase price
Over 5 years old	No payment

The maximum **we** will pay for the following items is:

a) For any **single item** as shown in the **Schedule of Benefits**.

Special Conditions

1. Anything mentioned in the Special Conditions to Section E – Baggage, Baggage Delay and Passport.
2. The maximum payment for any **single item** for which an original receipt, proof of purchase or insurance valuation (obtained prior to the loss) is not supplied is €75, subject to maximum of €300 for all such items.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, each and every incident.
2. Claims arising for **golf equipment** left unsecured or **unattended** or outside **your** reach at any time in a place to which the public have access.
3. Theft of or damage to **golf equipment** from an **unattended** motor vehicle unless:
    a) the items were out of sight in the locked motor vehicle; and
    b) evidence that force and violence were used to get into the motor vehicle is provided.
4. Loss, theft or damage to **golf equipment** over five years old.
5. Anything mentioned in What is NOT Covered under Section E – Baggage, Baggage Delay and Passport.
6. Anything mentioned in the General Exclusions.

Section U2 – Golf Equipment Hire

What IS Covered

We will pay **you** up to the amount as shown in the **Schedule of Benefits** for each 24 hour period, for the cost of necessary hire of **golf equipment** following:

a) accidental loss, theft or damage to of **your golf equipment**; or
b) temporary loss in transit during the outward journey for at least 24 hours of **your golf equipment**.

Special Conditions

1. **You** must report to the Police in the country where the incident occurred within 24 hours of discovery and obtain a written report of the loss, theft or attempted theft of all **golf equipment**.
2. For items damaged whilst on **your trip you** must obtain an official report from an appropriate retailer confirming the item is damaged and beyond repair.
3. If **your golf equipment** is temporarily lost in transit **you** must obtain written confirmation from the carrier as to the exact nature and length of time temporarily lost.
4. If **your golf equipment** is 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 written confirmation. If **your golf equipment** is 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 this policy.

5. Receipts for items lost, stolen or damaged must be retained as these will help **you** to substantiate **your** claim.
6. **You** must keep all receipts for hire costs and send them to **us** with **your** claim.

What Is NOT Covered

1. Loss, theft of or damage to **golf equipment** left unsecured or **unattended** or outside **your** reach at any time in a place to which the public have access.
2. Theft of or damage to **golf equipment** from an **unattended** motor vehicle unless:
    a) the items were out of sight in the locked motor vehicle; and
    b) evidence that force and violence were used to get into the motor vehicle is provided.
3. Loss or damage due to delay, confiscation or detention by customs or other authority.
4. 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.
5. Claims arising from loss or theft from **your** accommodation unless there is evidence of forced entry which is confirmed by a Police report.
6. Anything mentioned in the General Exclusions.

Section U3 – Non-refundable Golfing Fees

What IS Covered

We will pay **you** up to the amount shown in the **Schedule of Benefits**, for the proportionate value of any non refundable, pre-paid green fees, **golf equipment** hire or tuition fee necessarily unused if:

a) **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
b) following accidental loss or theft of **your** documentation which prevents **your** participation in the pre-paid golfing activity.

Special Conditions

1. **You** must report to the Police in the country where the incident occurred within 24 hours of discovery and obtain a written report of the loss, theft or theft or attempted theft of **your** golfing documentation.
2. **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.

What Is NOT Covered

1. Any claims arising directly or indirectly as a result of any **pre-existing medical conditions** unless **you** have declared ALL **pre-existing medical conditions** to **us** and **we** have written

to **you** accepting them for insurance.

2. Anything mentioned in the General Exclusions.

Section V – Wedding Cover

(only operative if indicated in the travel insurance certificate and appropriate additional premium paid)

Cover only operates:

Under single **trip** policies and annual multi **trip** policies if the appropriate wedding cover extension has been chosen and the appropriate additional premium has been paid and is shown on the travel insurance certificate.

Wedding cover is not available under the Backpacker policy.

Special Definitions

you/your/insured person/insured couple - means the couple travelling abroad to be married or enter into a civil partnership whose names appear on the travel insurance certificate.

Wedding/Civil Partnership attire - means dress, suits, shoes and other accessories bought specially for the Wedding/Civil Partnership and make-up, hair styling and flowers paid for or purchased for the Wedding/Civil Partnership forming part of **your baggage**.

Important additional limits are shown below:

€250 is the maximum **we** will pay for any **single item**. A camera with attachments or a matching set of earrings and necklace, for example, are considered one item.

What Is Covered

1. **We** will pay up to the amounts shown in the **Schedule of Benefits** for the accidental loss of, theft or damage to the items shown below forming part of **your baggage/valuables**:
    a) Each wedding ring taken, or purchased during **your trip**.
    b) **Your** wedding gifts taken, or purchased during **your trip**.
    c) **Your** wedding attire which is specifically to be worn on **your** wedding day.
2. **We** will pay up to the amount shown in the **Schedule of Benefits** 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 **Ireland** if:
    a) the professional photographer who was booked to take the photographs / video recordings on **your** wedding day is unable to fulfil their 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 15 days after the wedding day and whilst **you** are still at the holiday/honeymoon location.

If the same items are also covered under Section E - Baggage, Baggage Delay and Passport **you** can only claim for these under one section for the same event.

Sections W1, W2, W3 and W4 – Travel Disruption Cover

(only operative if indicated in the travel insurance certificate and appropriate additional premium paid)

Cover in respect of Sections W1, W2, W3 and W4 only operates:
Under single **trip** policies and annual multi **trip** policies if the appropriate Travel Disruption cover extension has been chosen and the appropriate additional premium has been paid and is shown on the travel insurance certificate.

Travel Disruption cover is not available under the Backpacker policy.

Definitions - applicable to this section of cover (shown in Italics)

Covered Events
Fire, flood, earthquake, explosion, tsunami, landslide, avalanche, hurricane, storm, tornado, volcanic activity or medical epidemic/outbreak.

Section W1 – Extended Cancellation or Curtailment Charges

What IS Covered
Section A – Cancellation or **Curtailment** charges is extended to include the following cover.
We will pay **you**:

a) up to the amount shown in the **Schedule of Benefits** for unused travel, accommodation (including excursions up to €250) and other pre-paid charges that **you** cannot claim back from any other source if **you** cannot travel and have to cancel **your trip**, or the **trip** is **curtailed** before completion as the result of a ***covered event***; or

b) up to the amount shown in the **Schedule of Benefits**, per **trip**, for re-booking fees incurred for the identical **trip**, if **you** wish to re-book **your trip** for a later date, if the **public transport** on which **you** were booked to travel from **Ireland** is cancelled due to a ***covered event***

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 immediately 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. In the event of a claim for **curtailment** claims will be calculated strictly from the date **you** return to **your home** in **Ireland.**
5. **You** must contact **us** to make necessary travel arrangements for **you**.
6. If the car which **you** intended to use for **your trip** is stolen, or is damaged and is unroadworthy, within seven days of the departure date, and repairs are unable to be completed by the day of departure, then the costs of an equivalent hire car will be covered and no cancellation costs will be paid.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits** for, **Limits and Excesses** per **insured person**, for each and every incident.
2. Anything mentioned under what is not covered under Section A – Cancellation or **Curtailment** Charges.
3. Anything mentioned in the General Exclusions.

Section W2 - Extended Delayed Departure

What IS Covered

Section H – Delayed departure is extended to include the following cover.

If **you** have arrived at the terminal and have checked-in, or attempted to check-in for **your** prebooked flight, sea crossing, international coach or international train journey from or to **Ireland**, and it is delayed for more than 12 hours beyond the intended departure time as a direct result of a ***covered event***, **we** will pay you:

a) up to the amount shown in the **Schedule of Benefits** for the first full 12 consecutive hours that **your** departure is delayed for **your** costs incurred in the terminal in respect of restaurant meals and refreshments consumed; and

b) the subsequent amount shown in the **Schedule of Benefits** for each full 12 hours delay thereafter for **your** costs incurred in the terminal in respect of restaurant meals, refreshments consumed and hotel accommodation, up to a maximum as shown in the **Schedule of Benefits**.

Special Conditions

1. Itemised receipts must be kept as proof of purchase.
2. **You** may claim under only one of the following Sections: Section H – Delayed Departure, Section I – Holiday Abandonment or Section J – Missed Departure for the same event.
3. **You** must check-in or attempt to check-in at the terminal according to the itinerary supplied to **you**.
4. **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.
5. **You** must comply with the terms of contract of the travel agent, tour operator or provider of transport.

What Is NOT Covered

1. Anything mentioned under what is not covered under Section H – Delayed Departure.
2. Anything mentioned in the General Exclusions.

Section W3 - Extended Holiday Abandonment

What IS Covered

Section I – Holiday Abandonment is extended to include the following cover.

If departure of the scheduled **public transport** on which **you** are booked to travel is delayed at the final departure point from **Ireland** for at least 24 hours from the scheduled time of departure due to a ***covered event*** **we** will pay **you** up to the amount shown in the **Schedule of Benefits** 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 24 hours has elapsed and the period of **your trip** is reduced by more than 25% of the original pre-booked duration, **you** choose to cancel **your trip.**

Special Conditions

1. **You** may claim under only one of the following Sections: Section H – Delayed Departure, Section I – Holiday Abandonment or Section J – Missed Departure for the same event.
2. **You** must check-in or attempt to check-in at the terminal according to the itinerary supplied to **you.**
3. **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.
4. **You** must comply with the terms of contract of the travel agent, tour operator or provider of transport.

What Is NOT Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured**

person, for each and every incident.

2. Anything mentioned under what is not covered under Section I –Holiday Abandonment.
3. Anything mentioned in the General Exclusions.

Section W4 - Accommodation Cover

What IS Covered

We will pay **you** up to a maximum of €500 for **your** reasonable additional travel and/or accommodation costs (room only, up to a maximum of €100 per night for 5 nights) which are of a similar standard to that of **your** pre-booked travel and accommodation that **you** cannot claim back from any other source if **you** have to make alternative arrangements to return to **your home** or stay longer outside of **Ireland** due to a ***covered event***.

Special Conditions

1. **You** must get (at **your** own expense) written confirmation from the **public transport** operator (or their handling agents) of the cancellation or number of hours delay and the reason for these together with details of any alternative transport offered.

What Is Not Covered

1. The **excess** as shown in the **Schedule of Benefits**, **Limits and Excesses** per **insured person**, for each and every incident.
2. Claims arising directly or indirectly from any ***covered event*** under this section existing or being publicly announced by the date **you** purchased this policy or the **trip** is booked (whichever is later).
3. Any costs incurred by **you** which are recoverable from the providers of the accommodation (or their administrators) or for which **you** receive or are expected to receive compensation or reimbursement.
4. Any costs incurred by **you** which are recoverable from the **public transport** operator or for which **you** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
5. Any accommodation costs, charges and expenses where the **public transport** operator has offered reasonable alternative travel arrangements.
6. Anything mentioned in the General Exclusions.

Special conditions relating to claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get a written report of the loss, theft or attempted theft of all **baggage/valuables**. A Holiday Representative's report is not sufficient.

2. If **valuables** are lost, stolen or damaged while in a hotel safe or safety deposit box **you** must report to the hotel, in writing, details of the loss, theft, or damage and get (at **your** own expense) written confirmation.
3. If **baggage** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report to them, in writing, details of the loss, theft or damage and get (at **your** own expense) written confirmation. If **baggage** is lost, stolen or damaged whilst in the care of an airline **you** must:
    a) get a Property Irregularity Report from the airline.
    b) give written notice of the claim to the airline, within the time limit contained in their conditions of carriage (please retain a copy).
    c) keep all travel tickets and tags for submission if **you** are going to make a claim under this policy.
4. **You** must provide (at **your** own expense) an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your** claim.

What is NOT covered

1. The **excess** per **insured person**, each and every incident, unless **you** have purchased an **excess** waiver and this is shown on **your** travel insurance certificate.
2. Loss, theft of or damage **valuables** left **unattended** at any time (including in a vehicle, in checked in luggage or while in the custody of a carrier, tour operator or **public transport** operator) unless deposited in a hotel safe or safety deposit box.
3. Claims arising from **baggage** left unsecured or **unattended** or outside **your** reach at any time in a place to which the public have access.
4. Theft of or damage to **baggage** from an **unattended** motor vehicle unless:
    a) the items were out of sight in the locked motor vehicle; and
    b) evidence that force and violence were used to get into the motor vehicle is provided by **you.**
5. Loss or damage due to delay, confiscation or detention by customs or other authority.
6. Loss, theft of or damage to un-set precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, mobile telephones, smart phones or telecommunication equipment of any kind, documents of any kind, bonds, securities, perishable goods, bicycles, and damage to suitcases (unless the suitcase is 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 caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.

9. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **baggage/valuables**.
10. Claims arising for loss or theft of wedding gifts left **unattended** in a place to which the general public has access (e.g. in the room the reception is held).
11. Claims arising from loss or theft from **your** accommodation unless there is evidence of forced entry which is confirmed by a police report.
12. Anything mentioned in the General Exclusions.

General Conditions **(applicable to the whole policy)**

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

1. **You** must comply with **our** Important Health Requirements. No cover will come into force, or continue in force, for Emergency Medical and Other Expenses, Cancellation or **Curtailment**, unless each **insured person** who must make a **medical health declaration** in respect of the period for which insurance is required, has declared ALL **pre-existing medical conditions** to **us** and they have been formally accepted by **us** in writing. Any medical information **you** give **us** will be treated as strictly confidential. **We** will not pass **your** medical information to anyone without **your** specific authority. **We** will use it to decide whether or not **we** can cover **you** and **we** will refer to it in the event of any claim.
2. **You** must tell **us** before booking any **trip** or departing on any **trip** if there is any change in **your** health, medication or treatment. If **you** do not tell **us** about changes, claims may not be accepted and **your** policy may be invalid. All changes must be declared to Medical Screening on 1890 456 250 and accepted before cover can continue.
3. **You** must tell **us** as soon as possible if **you** are hospitalised as an in-patient, or of any emergencies or claims whatsoever that are likely to exceed €350.
4. **We** ask that **you** notify **us** within 28 days of **you** becoming aware of an incident or loss leading to a claim and **you** return **your** completed claim form and any additional information to **us** as soon as possible.
5. **You** must pay the appropriate premium for the full number of days comprising **your** planned **trip**. If **you** travel for more than the number of days for which **you** have paid for cover, **you** will not be covered after the last day for which **you** have paid.
6. In the event of a claim and if **we** require it, **you** must agree to be examined by a **medical practitioner** of **our** choice, at **our** expense. In the event of **your** death **we** may also request and will pay for a post-mortem examination.
7. **You** must take all reasonable care and precautions to protect yourself against accident, illness, disease or injury and to safeguard **your** property against loss, theft or damage. **You** must act as if **you** are not insured and take steps to minimise **your** loss as much as possible and take reasonable steps to prevent a further incident.

8. The policy **excess**, as and when applicable, will be deducted in respect of each **insured person**, and each and every separately identified occurrence of loss whether notified to **us** as one claim or otherwise.
9. **We** will make every effort to apply the full range of services in all circumstances as shown in **your** policy booklet. Remote geographical locations or unforeseeable adverse local conditions may prevent the normal standard of service being provided.
10. **You** must not admit, deny, settle, reject, negotiate or make any arrangement for any claim without **our** permission.
11. 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.
12. **We** have the right, if **we** choose, in **your** name but at **our** expense to:
    a) take over the defence or settlement of any claim,
    b) take legal action in **your** name to get compensation from anyone else for **our** own benefit or to get back from anyone else any payments that have already been made,
    c) take any action to get back any lost property or property believed to be lost.
13. **We** may at any time pay to **you our** full liability under the policy after which no further payments will be made in any respect.
14. **You** or **your** legal representatives must supply at **your** own expense all information, evidence, details of household insurance or other insurance that may cover the loss, medical certificates, original invoices, receipts, reports and assistance that may be needed. **We** may refuse to reimburse **you** for any expenses for which **you** cannot provide receipts or bills. Please keep copies of all documents sent to **us**.
15. **You** must report all incidents to the local Police in the country where it occurs and obtain a crime or lost property report, which includes an incident number.
16. If **we** provide transportation or settle **your** claim and as a result **you** have unused travel ticket(s) **you** must surrender those tickets to **us**. If **you** do not **we** will deduct the amount of those tickets from any amount paid to **you**.
17. If **you** or anyone acting for **you** in any respect makes a claim under the policy knowing the claim to be false or fraudulently exaggerated, makes a statement in support of a claim knowing the statement to be false, submits a document in support of a claim knowing the document to be forged or false or makes a claim in respect of any loss or damage caused by **your** wilful act or with **your** connivance, then **we** will not pay the claim or any other claim which has been or will be made under the policy, may at **our** option declare the policy void, shall be entitled to recover from **you** the amount of any claim already paid under the policy, may inform the Police/Gardaí of the circumstances and shall not make any return of premium.
18. If **we** pay any expense for which **you** are not covered, **you** must pay this back within one month of **our** asking.
19. If at the time of any incident which results in a claim under this policy, 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 D – Personal Accident).

20. **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.

General Exclusions **(applicable to the whole policy)**

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 B – Emergency Medical and Other Expenses and Section C – Hospital Benefit 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** pursuit of **winter sports** unless the appropriate additional premium has been paid and Sections S1, S2, S3, S4 and S5 are shown as operative in **your** travel insurance certificate. However, even if **winter sports** cover is included **you** are still not covered for the following activities: skiing against local authoritative warning or advice, off piste skiing or snowboarding where an avalanche warning of more than 2 is in place, ski stunting, free-style skiing, ice hockey, bobbing, tobogganing, heli skiing, ski acrobatics, ski flying, ski jumping, ski mountaineering, snowcat skiing, snow carting or the use of bob sleighs, luges or skeletons.
5. **Your** engagement in or practice of: **manual work** 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 an applicable current Republic of Ireland driving licence is held permitting the use of such vehicles in **Ireland** and the country visited and a crash helmet is worn (see the **sports and activities** Section on pages 23) professional entertaining, professional sports, racing (other than on foot), motor rallies and motor competitions, track-driving, or any tests for speed or endurance.
6. **Your** participation in or practice of any other sport or activity unless:
   a) shown as covered without charge in the **sports and activities** list page 23; or
   b) shown as operative in **your** travel insurance certificate.

   Sports and activities are only covered on an **incidental**, non-competitive and non-professional basis. Under no circumstances will any claims arising from any unlisted

activities be covered regardless of whether undertaken as part of an organised excursion or event

7. Any claim for any person who has reached the age of 80 years prior to the commencement of the **period of insurance** on Essential, and any claim for any person who has reached the age of 46 years prior to the commencement of the **period of insurance** on the Backpacker product.
8. Any claim resulting from **you** attempting or committing suicide, deliberately injuring yourself, using any drug not prescribed by a registered **medical practitioner**, being addicted to any drugs, or abusing solvents, drugs or alcohol, or being under the influence of drugs or solvents.
9. Claims arising from alcohol; **we** do not expect **you** to avoid alcohol during **your trip**, but **we** will not cover any claim arising where **you** have consumed so much alcohol that **you** have notably impaired **your** faculties and/or judgment and **you** need to make a claim. **Your** claim can also be declined where **you** refuse to allow the treating doctor, medical facility or police to complete appropriate testing such as breathalyser or blood tests and/or **you** refuse to make the report available to **us**.
10. Any claim resulting from **your** involvement in a fight except in self-defence.
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** or any loss or damage deliberately carried out or caused by **you.**
13. 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.
14. Any other loss, damage or additional expense following on from the event for which **you** are claiming unless **we** provide cover under this insurance. Examples of such loss, damage or additional expense would be the cost of replacing locks after losing keys, costs incurred in preparing a claim, loss of earnings following **bodily injury** or illness, or loss or costs incurred arising from the interruption of **your** business, inconvenience, distress or loss of enjoyment.
15. Operational duties of a member of the Armed Forces other than claims arising from authorised leave being cancelled due to operational reasons, as provided for under sub section 4 of Section A – Cancellation or **Curtailment** charges.
16. **Your** travel to a country or specific area or event to which a government agency in the Republic of Ireland, the travel advice unit of the department of Foreign Affairs* or the World Health Organisation (WHO) or similar body has advised against all or all but essential travel. *Contact details are: 80 St. Stephen's Green, Dublin 2. Telephone: (01) 478 0822 or refer to: www.dfa.ie/services/traveladvice
17. Any claim caused by **you** jumping from vehicles, balconies or buildings, regardless of the

height, or any other self-exposure to needless risk (unless **your** life is in danger or **you** are trying to save someone's life);

18. Any claim **you** would have been required or been expected to pay, if the event resulting in the claim had not happened.
19. Costs of telephone calls or faxes, meals, taxi fares (with the exception of the taxi costs incurred for the initial journey to a hospital abroad due to **your** illness or injury), newspapers, laundry costs, or interpreters' fees.
20. Any circumstances **you** are aware of that could reasonably be expected to give rise to a claim on this policy.
21. Any claim when **you** have not paid the appropriate premium for the number of days comprising **your** planned **trip**. If **you** travel for more than the number of days for which **you** have paid for cover, **you** will not be covered after the last date for which **you** have paid.
22. Any costs paid for using any airline mileage reward scheme (for example Avios), any card bonus point schemes, any Timeshare, Holiday Property Bond or other holiday points scheme and/or any associated maintenance fees.

Claims Conditions

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

1. Claims

You must notify **us** preferably by phone or at the address given below:
AXA Assistance Claims Centre Kilmartin N6 Retail Park Athlone Co. Westmeath, **Ireland** Tel: 01 431 1204 or from outside **Ireland** + 353 1 431 1204

The notification must be made within 28 days or as soon as possible thereafter following any **bodily injury**, illness, disease, incident, event, redundancy or the discovery of any loss, theft or damage which may give rise to a claim under this policy.

When contacting the claims department, please quote Ref: AA Ireland Travel Insurance and have the following information to hand:

- Name of **your** policy and where it was purchased
- Policy number
- Date Insurance purchased
- Resort and country visited
- Value of claim

- Brief circumstances
- Travel dates
- Incident date

Failure to have the above information to hand may result in **your** claim being delayed.

You must also inform **us** if **you** are aware of any writ, summons or impending prosecution. Every communication relating to a claim must be sent to **us** without delay. **You** or anyone acting on **your** behalf must not negotiate admit or repudiate any claim without **our** written consent.

You or **your** legal representatives must supply at **your** own expense all information, evidence, details of household insurance and medical certificates as required by **us**. **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.

You must retain any property which is damaged, and, if requested, send it to **us** at **your** own expense. If **we** pay a claim for the full value of the property and it is subsequently recovered or there is any salvage then it will become **our** property. **We** may refuse to reimburse **you** for any expenses for which **you** cannot provide receipts or bills.

Cancellation of Your Policy

Statutory Cancellation Rights
You may cancel this policy within 14 days of receipt of the policy documents (new business) or for annual multi **trip** policies the renewal date (the cancellation period) by writing to **us** at the address shown on **your** travel insurance certificate during the cancellation period. Any premium already paid will be refunded to **you** providing **you** have not travelled and no claim has been made or is intended to be made and no incident likely to give rise to a claim has occurred. Any cancellations after this 14 day period will not be refunded.

Cancellation Outside The Statutory Period
You may cancel this policy at any time after the cancellation period by writing to **us** at the address shown on **your** travel insurance certificate. If **you** cancel after the cancellation period no premium refund will be made.

We reserve the right to cancel the policy by providing 21 days notice by registered post to **your** last known address. No refund of premium will be made.

Non payment of premiums
We reserve the right to cancel this policy immediately in the event of non payment of the premium.

Complaints Procedure

Making yourself heard

We are committed to providing **you** with an exceptional level of service and customer care. **We** realise that things can go wrong and there may be occasions when **you** feel that **we** have not provided the service **you** expected. When this happens, **we** want to hear about it so that **we** can try to put things right.

Who to contact?

The most important factors in getting **your** complaint dealt with as quickly and efficiently as possible are:

- to be sure **you** are talking to the right person, and;
- that **you** are giving them the right information.

When **you** contact **us**:

- Please give **us your** name and contact telephone number.
- Please quote **your** policy and/or claim number and the type of policy **you** hold.
- Please explain clearly and concisely the reason for **your** complaint.

So **we** begin by establishing **your** first point of contact:

Step One – Initiating your complaint:

Does **your** complaint relate to:

A. **Your** policy?

B. A claim on **your** policy?

If **A**, **you** need to, contact Quality & Compliance Manager AA Ireland Travel Insurance on Tel: 01 617 9988

If **B**, **you** need to, contact AXA Assistance Claims Centre on Tel: 01 431 1204

We expect that the majority of complaints will be quickly and satisfactorily resolved at this stage, but if **you** are not satisfied, **you** can take the issue further:

Step Two – If you are still unhappy:

If **your** complaint is one of the few that cannot be resolved by this stage contact the Head of Customer Care, who will arrange for an investigation on behalf of the Chief Executive: AXA Travel Insurance, Head of Customer Care, The Quadrangle, 106-118 Station Road, Redhill, RH1 1PR or

email: claimcomplaints@axa-travel-insurance.com

Step Three – Beyond Inter Partner Assistance:
If **we** have given **you our** final response and **you** are still dissatisfied **you** may refer **your** case to the Financial Service Ombudsman (FSO).

The FSO is an independent body that arbitrates on complaints about general insurance products. It will only consider complaints after **we** have provided **you** with written confirmation that **our** internal complaints procedure has been exhausted. The Ombudsman can be contacted at: Financial Services Ombudsman Financial Services Ombudsman's Bureau, 3rd Floor, Lincoln House, Lincoln Place, Dublin 2.
Tel: 01 662 0899 Fax: 01 662 0890 E-mail: enquiries@financialombudsman.ie

Referral to the FSO will not affect **your** right to take legal action against **us**.

Compensation Scheme
Inter Partner Assistance is covered by the Insurance Compensation Fund. **You** may be entitled to compensation from the fund if Inter Partner Assistance cannot meet its obligations. The Insurance Compensation Fund may provide funds for liquidators so that they may pay the valid claims of insolvent Insurers. **You** can get more information about compensation fund arrangements from the Central Bank of Ireland.

Our promise to you:

- Acknowledge written complaints promptly.
- Investigate quickly and thoroughly.
- Keep **you** informed of progress.
- Do everything possible to resolve **your** complaint.
- Learn from **our** mistakes.
- Use information from complaints to continuously improve **our** service.

To help **us** improve **our** service **we** will record and may monitor telephone calls.

Use of Your Personal Data

If **your** insurance application is accepted **you** also agree **we** may:

a) disclose and use information about **you** and **your** insurance cover – including information relating to **your** medical status and health – to companies within the AXA group of companies worldwide, **our** partners, service providers and agents in order to administer and service **your** insurance cover, process and collect relevant payments on it, for fraud prevention and to manage the insurance products which **you** have purchased;

b) undertake all of the above within and outside the European Union. This includes processing **your** information in countries in which data protection laws are not as comprehensive as in the EU. However, **we** have taken appropriate steps to ensure the same (or equivalent) level of protection for **your** information in other countries as there is in the European Union; and

c) monitor and/or record **your** telephone calls in relation to cover to ensure consistent servicing levels and account operation.

We use advanced technology and well defined employee practices to help ensure that **your** information is processed promptly, accurately and completely and in accordance with applicable data protection law.

If **you** want to know what information is held about **you** by the AXA Group, please write to: AXA Travel Insurance, Data Protection Officer, The Quadrangle, 106-118 Station Road, Redhill, RH1 1PR. There may be a charge for this service, as permitted by law. Any information which is found to be incorrect will be corrected promptly.

By providing the requested data relating to **your** travel insurance policy **you** consent to **us** using it for administrative purposes and for informing **you** of other products and services, which may be of interest to **you** by letter, telephone and/or email. As a responsible organisation, **we** always try to ensure that any marketing information is relevant to **you. Your** information is kept securely and never shared with third parties. If **you** do not wish to receive marketing information from **us** or **our** associated companies please call **us** on 01 617 9988 or email **us** at mytravel@theaa.ie. Sensitive Personal Information may be required for medical screening. If **you** request cover for a **medical condition** which requires medical screening **we** may require medical information from **you** including sensitive personal information. This information will be used for the purpose of assessing risk and calculating the premium. In the unfortunate event that **you** have to make a claim, this information may also be used for the processing of **your** claim.

Frequently asked Questions?

What Travel Insurance documents do I need to take on holiday with me?
We advise **you** have **your** travel insurance policy number available in the event of a claim or emergency as well as all medical and claims emergency numbers should **you** need to contact AA Ireland**. You** should also take any state (EHIC) medical card and private medical insurance details with **you**, if they cover **you** and other policy holders whilst abroad.

Can I travel whilst pregnant?
Pregnancy is not a **medical condition**; **you** may choose to travel quite late into **your** pregnancy. Airlines and ferry companies, including cruise liners, have their own restrictions due to health and safety requirements, **you** should check with them, or any other mode of transport **you** propose to take, before **you** book.
We will only pay claims due to a **complication of pregnancy** certified by a **medical practitioner**.

When does the cover begin and end on my policy?
If **you** are purchasing an annual policy then the start date of **your** policy should be the date that **you** wish cancellation cover to be effective from, not the actual date of departure on **your** first **trip** e.g. if travelling on 1 October and purchasing **your** policy on 1 September **you** will need to put in the 1 September as a start date in order to ensure **you** have cancellation cover between 1 September – 1 October. If **you** put in the 1 October there will be no cover under **your** insurance until **you** depart on **your trip** (1 October). For Single **trip** policies cancellation cover starts on the date of purchase regardless of **your** actual **trip** dates.

How many times can I go away if I have an Annual Multi Trip policy?
There is no restriction on the number of times **you** go away during the period of this insurance on an Annual Multi **trip** Insurance policy; however each **trip** should not exceed 31 days in total for Value, 45 days in total for Essential and 60 days in total for Extra policies. **Winter sports** trips are covered up to a maximum of 17 days in total in each **period of insurance** (so long as appropriate premiums have been paid to include cover for **winter sports**).

Can individuals on a family policy travel separately?
Under annual multi **trip** cover each adult is insured to travel separately but children must always travel with one of the adults named on the certificate.

What if I am travelling to more than one country?
Please ensure **you** select the areas that cover all destinations within **your** journey e.g. if **you** planning to stay in France for a few days immediately prior to a **trip** to the USA **you** would require Worldwide cover (including the United States of America, Canada and the Caribbean) refer to **territorial limits** definition on page 15 and 16.

What should I do if I hold a Private Health Insurance Policy policy?
If **you** have a Private Health Insurance Policy which includes cover for overseas in-patient medical treatment up to a minimum of €55,000 and have therefore received a discount on **your** policy, this will be shown on **your** travel insurance certificate. If **you** are admitted into hospital abroad as an inpatient **you** must first claim against **your** Private Health Insurer up to **your** overseas benefit limit, before cover under Section B- Emergency Medical and Other Expenses of **your** policy will come into effect.

I have pre-existing medical conditions. Can I get cover for these on my policy too?
If **you** wish to cover any claims which may arise from any **pre-existing medical conditions you** must go through the screening process with AllClear. Once this is complete **we** will confirm whether or not **we** can cover **your pre-existing medical conditions** and whether this would be subject to the payment of an additional premium. The additional premium must be paid before cover can be provided.

Other AA services available

Car Insurance

Membership

Home Insurance

Home Membership

European Breakdown Cover

Car Inspection

Van Insurance

Roadwatch

Routeplanner

Public Policy

Signs

AA Approved Accomodation

AA Rewards

For information on any of the above visit theAA.ie



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01 617 9950
www.theAA.ie

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Essextra 04/16