

# CRUISE TRAVEL INSURANCE

## SCHEDULE OF BENEFITS

Section of Cover	Cover Limit (per person)	Excess
<b>Cancellation and Curtailment</b>	£1,000/£2,500/£5,000/ £15,000 (as stated in <b>your policy certificate</b> )	Nil
<b>Emergency Medical Expenses &amp; Repatriation</b>	£5,000,000	
Dental Treatment	£250	
Funeral Expenses Abroad	£1,500	Nil
<b>Hospital Benefit</b>	£600 (£30 per complete day)	Nil
<b>Personal Possessions</b>	£1,500	
Single article limit	£250	
Valuables limit in total	£300	Nil
Delayed Baggage	£200	
Travel Documents	£500	
<b>Personal Money</b>	£500	
Cash limit	£300	Nil
Cash limit (under 18 years)	£150	
<b>Personal Accident</b>		
Death Benefit	£30,000	
Loss of Limbs or Loss of Sight	£30,000	
Permanent Total Disablement (aged under 65)	£30,000	Nil
Permanent Total Disablement (aged 65-85)	£15,000	
Death benefit limit (under 15 years /over 65 years)	£2,000	
<b>Missed Departure</b>	£1,000	Nil
<b>Delayed Departure</b>	£200 (£20 per 12 complete hours)	
<b>Cruise Abandonment</b>	Up to £1,000/£2,500/ £5,000/£15,000 (as stated in <b>your policy certificate</b> )	Nil
<b>Personal Liability</b>	£2,000,000	Nil
<b>Legal Expenses</b>	£30,000	
Limit in respect of additional accommodation & travel expenses	£3,000	Nil
<b>Missed Port</b>	£50 per port up to £300	Nil
<b>Stateroom/Cabin Confinement</b>	£50 per complete day up to £300	Nil
<b>Unused Pre-Booked Excursions</b>	£300	Nil
<b>Cruise Connection</b>	£1,500	Nil
<b>Optional Covers</b>	<b>Cover Limit (per couple)</b>	<b>Excess</b>
<b>Wedding/Civil Partnership Cover</b>		
Wedding Rings	£1,000	
Wedding Gifts	£2,000	Nil
Ceremonial Attire	£3,000	
Photographs / Video Recording	£1,500	

## FOR YOUR PEACE OF MIND

Please take a little time to read and understand what **we** will cover and what **we** will not cover under **your** insurance contract along with what **you** should do in the event of a claim to avoid any frustration or disappointment.

**We** would also like to draw **your** attention to restrictions on this **policy** in terms of age and **pre-existing medical condition(s)** as outlined in the **policy** document. This brochure explains the detailed terms of **your** insurance once **your** details are accepted by **us**. **We** have tried to make this insurance contract easily understood by **you**, the customer, in an effort to eliminate unrealistic expectations if an unfortunate incident should occur.

At the same time let **us** assure **you** that if something occurs that is covered by this insurance contract, then **we** will try **our** best to provide **you** with a high level of timely and courteous service.

After reading this document, if **you** decide the terms of the insurance contract do not meet **your** requirements **you** can, within 14 days of the date of **you** received this document, return it to Cruise 118, for a full refund of premium, provided **you** have not already travelled or incurred a claim.

So read on, have a great **crui**se and remember, **we** are here to help in time of trouble.

## CRUISE TRAVEL INSURANCE

This travel insurance has been arranged on behalf of Cruise 118.

The **Insurer** for this **policy** is: White Horse Insurance Ireland Limited. Registered Office: Bay 89.2, Free Zone West, Shannon, Co Clare, Republic of Ireland.

White Horse Insurance Ireland Limited are authorised and regulated by the Central Bank of Ireland. This can be checked with the Central Bank of Ireland by visiting their website [www.centralbank.ie](http://www.centralbank.ie).

This evidence of insurance is to confirm that those persons who have paid the appropriate premium are insured under Master Certificate Number WHIIL/CRUISE118/08/2011. This document only constitutes a valid evidence of insurance when it is issued in conjunction with a validation **certificate**/ booking invoice issued between 1st August 2011 and 31st July 2012. All travel must be completed by 17th July 2014.

### TERRITORIAL LIMITS

**Europe -** The Continent of Europe west of the Ural Mountains, Madeira, Canary Islands, Iceland, the Azores, Mediterranean Islands and Non-European countries bordering the Mediterranean (except Algeria, Lebanon, Libya and Israel)

**Worldwide -** Including USA and Canada

### POLICY AGE LIMITS

Maximum of 85 years of age on the date of purchasing this insurance **policy**.

### RESIDENCY

This **policy** is only available to **you** if **you** are permanently resident in the **United Kingdom** and have registered with a **medical practitioner** in the **United Kingdom**.

### PREGNANCY

This **policy** does not intend to cover the normal costs of losses otherwise associated with pregnancy (including multiple pregnancy) or childbirth. This includes, but is not limited to, delivery by caesarean section or any other medically or surgically assisted delivery which does not cause medical complications. This **policy** may, however, cover **you** should complications arise with **your** pregnancy due to an accidental **bodily injury** or unexpected serious **illness** which occurs while on **your cruise**.

## READ ME FIRST

### EVIDENCE OF COVER

**You** should read this document carefully. It gives **you** full details of what is and is not covered and the conditions of the cover. Cover will vary from policy to policy and Insurer to Insurer.

### ELIGIBILITY

This **policy** is only available if:

- **You** are permanently resident in the **United Kingdom**,
- **You** are registered with a **Medical Practitioner** in the **United Kingdom**,
- **You** are in the **United Kingdom** at the time of purchasing this **policy**,
- **Your trip** starts and ends in the **United Kingdom** within the dates shown on **your policy certificate**,
- **You** have booked a return ticket to the **United Kingdom** within the dates shown on **your policy certificate**.

### CONDITIONS, EXCLUSIONS AND WARRANTIES

Conditions, exclusions and warranties will apply to individual sections of **your policy** while general exclusions and conditions will apply to the whole of **your policy**. It is a condition of this **policy** that all material facts must be disclosed to the **Insurer** at the time of taking out this insurance. Failure to do so may result in the **Insurer's** non-liability for claims. Please see the section below entitled, Material Facts.

### SPORTS OR PASTIMES

**You** are only covered under the **policy** for claims arising from certain **sports and activities**. If **you** require cover for activities not listed within this booklet, please contact Cruise 118.

### PROPERTY CLAIMS

These claims are paid based on the value of the goods at the time **you** lose them and not on a 'new for old' or replacement cost basis. An allowance for wear, tear and depreciation will be deducted. Certain items of personal property are not covered.

### LAW APPLICABLE UNDER THIS CONTRACT

**You** and **we** are free to choose the laws applicable to the **policy**. **We** propose to apply the laws of the Republic of Ireland and by purchasing this **policy**, **you** have agreed to this.

### PERSONAL LIABILITY

There is no cover for Personal Liability claims arising directly or indirectly from, happening through or in consequence of ownership, possession or use of any vehicle, automobile, aircraft or any mechanically propelled conveyance.

### POLICY LIMITS

All sections of **your policy** have limits on the amount the **Insurer** will pay under that section. There are also specific limits under the **personal possessions** section for: any **single item**; **valuables**, items for which an original receipt, proof of purchase or an insurance valuation is not supplied.

### POLICY EXCESSES

The Cruise 118 tailored **cruise policy** has no excess cost. This means that any claim will not be subject to an excess.

### REASONABLE CARE / UNATTENDED PROPERTY

**You** must exercise reasonable care to prevent **illness**, injury or loss or damage to **your** property, as if uninsured. There is no cover for property left **unattended** in a place to which the general public has access. There is no cover for loss of **cash** which was not carried on the **insured** person unless placed in a safety deposit box or similar locked, fixed receptacle.

### COMPLAINTS PROCEDURE

If **you** have any cause for complaint regarding this insurance, please refer to the Complaints Section on page 11 of **your policy** wording.

### CANCELLATION PERIOD

If, after reading this **policy you** are not satisfied with it for any reason, **you** must return the **certificate** to Cruise 118 within 14 days of issue in order to receive a full refund of premium, provided **you** have not already travelled or incurred a claim.

### INFANTS

Please note that any person under the age of two (2) years of age, at the time of purchasing this insurance **policy**, will be insured for free when travelling with an insured adult.

### MATERIAL FACTS

**You** must disclose all material facts. A material fact is one that is likely to influence the **Insurer** in accepting **your** insurance. This could be the state of **your** health or that of a **close relative**. If **you** are in any doubt as to whether a fact is 'material', **you** should tell Cruise 118. If the fact is considered to be 'material', **you** should seek written confirmation from the **Insurer**. If **you** do not disclose material facts, it may result in **your** claim being invalid.

### PRE-EXISTING MEDICAL CONDITIONS

If **you** are aware that **you** or any other person (including a **relative**, **travelling companion** or **close business associate**) have:

- a **pre-existing medical condition** that could force **you** to cancel or cut short **your trip**;
- been admitted as an inpatient in hospital in the last 24 months;
- suffered from, or received any form of medical advice, treatment or medication for:
  1. Any Heart or Circulatory related condition (Including Hypertension, Angina, Stroke);

2. Any Lung or Breathing related condition (Other than inhaler controlled, mild Asthma, suffered in isolation);
3. Any Cancerous condition;
4. Any Kidney Related Disorder.

Then **you** must contact the **medical pre-screening company** in order to arrange cover for that condition. Failure to advise the **medical pre-screening company** of a **pre-existing medical condition** will result in claims for those undisclosed conditions not being paid. Contact the **medical pre-screening company** on telephone number: **0845 250 5378**.

Please note that cover cannot be offered for any **pre-existing medical condition** if **you**, or the person **you** are travelling with:

- are awaiting the results of medical tests or investigations;
- are travelling against the advice of a **medical practitioner**;
- are travelling for the purpose of obtaining medical treatment;
- are on a hospital waiting list;
- are receiving ongoing dialysis treatment;
- have been given a terminal prognosis;
- have a psychological condition (including anxiety, stress, depression, psychiatric or eating disorders, phobias);

### Accepted medical conditions

**You** do not need to contact the **medical pre-screening company** if the only medical condition(s) **you** have appears in the following list provided **you** are not awaiting surgery for the condition and have been fully discharged from any post-operative follow-up:

- Achilles tendon injury
- Acne
- Acid excess
- Allergy not requiring prescriptive treatment
- Anal fissure/fissular
- ADHD (Attention Deficit Hyperactive Disorder)
- Benign prostatic enlargement
- Blindness
- Broken Bone (not head or spine)
- Carpal tunnel syndrome
- Cataracts
- Chicken pox
- Colitis (no hospital treatment in last 12 months)
- Common cold / influenza
- Corneal graft
- Cosmetic Surgery (not gastric bands)
- Cut's and abrasions (non self inflicted)
- Cyst - breast
- Cyst - testicular
- Cystitis
- Deafness
- Diarrhoea and/or vomiting
- Dislocated hip (not replacement hip)
- Dyspepsia
- Eczema
- Epididimitis
- Essential tremor
- Fungal nail infection
- Gastric reflux
- Glandular fever (provided there have been no symptoms in the 3 months prior to inception of the **policy**)
- Glaucoma
- Gout
- Haemorrhoids
- Hay Fever
- Hernia (not hiatus)
- Hip replacement
- HRT (Hormone replacement therapy)
- Hyperthyroidism (overactive thyroid)
- Hyperthyroidism (underactive thyroid)
- Hysterectomy
- Irritable Bowel Syndrome
- Impetigo
- Macular degeneration
- Menorrhagia
- Migraine (confirmed diagnosis, with no ongoing investigations)
- Myalgic Encephalomyelitis (if only symptom is fatigue)
- Nasal Polyps
- Neuragia, Neuritis
- Nut allergy
- Osteochondritis
- Pelvic Inflammatory disease
- PMT (pre-menstrual tension)
- Pregnancy (no complications)

- Psoriasis
- Reflux oesophagitis
- Retinal detachment
- Rheumatism
- Rhinitis
- RSI (Repetitive strain injury)
- Shingles
- Shoulder injury
- Sinusitis
- Sleep Apnoea
- Tendon Injury
- Urticaria
- Varicose veins-legs only (If the **medical practitioner** has confirmed the **Insured** is fit to travel)
- Tinnitus
- Tonsillitis

#### What will happen when you call Medical Pre-screening?

Our trained operators will ask **you** a few simple questions about **your** intended holiday and the medical condition. **You** will be advised as to whether your **pre-existing medical condition** can be covered, whether there will be an additional premium to pay or whether there any changes to be made to the **policy** terms and conditions?

If cover can be provided, **you** will be given an acceptance code and a letter will be sent to **you** upon receipt of payment, detailing the extension of cover where applicable. Please read this letter carefully and keep it with **Your** insurance documents as it confirms the terms of the cover. Please note that cover is not effective until **you** are in receipt of this letter.

#### What will happen if you do not contact Medical Pre-Screening Company

If **you** do not contact the **medical pre-screening company** you will not be covered in the event of a claim arising out of **your pre-existing medical condition**.

#### POLICY CONTRACT PERIOD

A single return **trip**, as defined in the **period of insurance**, beginning and ending in the **United Kingdom**.

## DEFINITIONS

Any word defined below will have the same meaning wherever it is shown in **your policy** in bold print. These definitions have been listed in alphabetical order.

#### Accident, Accidental

A sudden, unexpected event caused by something external and visible, which results directly and solely in loss, damage or physical **bodily injury**.

#### Act of Terrorism

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

#### Bodily Injury

Means an identifiable physical injury sustained by **you** caused by sudden, unexpected, external and visible means.

#### Bridal Attire

Clothing and accessories of a formal nature worn by the Bride at the Wedding Ceremony

#### Cancellation Costs

Irrecoverable and unused travel, accommodation, car hire and excursions paid or contracted to be paid by **you** in respect of **your trip**.

#### Cash

Bank currency notes and coins in circulation.

#### Ceremonial Attire

Clothing of a formal nature worn only at Weddings and on similar occasions, including, but not limited to, **bridal attire** and Ceremonial Swords.

#### Certificate

An insurance validation **certificate** or booking invoice issued by Cruise 118 which describes **you** and the **Insured** person(s) who are covered under this **policy**.

#### Claims Handler

White Horse Administration Services Limited.

Telephone: 0871 664 7995\* quoting reference WHILL/CRUISE118/08/2011. \*(Calls cost 10p per minute from BT land lines. Calls from mobiles and other networks may be extra).

#### Close Business Associate

A person in the same employment as **you** in **your country of residence**, whose absence from work or place of employment for one or more complete days at the same time as **you**, prevents the effective continuation of that business.

#### Common-Law Partner(s)

Any couple (including same sex) in common law relationship or who have co-habitated in **your country of residence** for at least 6 months prior to the commencement of **your trip**.

#### Country of Residence

The country of permanent residence in which **you** live, for no less than six (6) months of the year.

#### Cruise

This means a **trip** involving a sea voyage of more than two days in total continuous duration, where transportation and accommodation is primarily on an ocean going ship which **you** are travelling on as a fare paying passenger.

#### Curtailed Costs

Travel costs necessary to return **you home** before the booked return date and a pro-rata amount representing the total irrecoverable and unused costs of accommodation, car hire and excursions attributable to each complete day of **your cruise** that is not spent overseas.

The following are not included in the definition:

- all costs attributable to the original booked outward and return travel tickets, whether used or unused.

#### Emergency Assistance Service

Telephone: **+44 (0) 844 879 8313** or **+44 (0)208 763 4932**

24 hours a day, 365 days a year

#### Family

Up to two (2) adults and all their dependent children under the age of sixteen (16) at the time of purchase of the **policy** and in full time education.

#### Fragile Articles

Means any item(s) carried as **your personal possessions** which could be easily damaged or destroyed.

#### Home

**Your** usual place of residence in the **United Kingdom**, for no less than 6 months of the year.

#### Insurer

White Horse Insurance Ireland Limited.

#### Illness

Any disease, infection or **bodily injury** which is unexpectedly contracted by **you** prior to **your trip** or unexpectedly manifests itself for the first time during **your trip**.

#### Insurance Premium Tax (IPT)

A Government tax which must be paid by **you** in addition to the insurance premium. Only residents of the Channel Islands and Isle of Man are exempt from taxation.

#### Medical Practitioner

Means a registered practicing member of the medical profession who is not related to **you** or any person with whom **you** are travelling.

#### Medical Pre-Screening Company

Telephone **0845 250 5378**. Quoting reference number WHILL/CRUISE118/08/2011.

#### Pair or Set

Two or more items of **personal possessions**, which are complimentary or used or worn together.

#### Personal Money

Bank currency notes and coins in circulation and travellers cheques.

#### Personal Possessions

Luggage, clothing, **valuables** and personal items which are owned by **you** and have been either taken or purchased on the **trip**.

The following are not included in the definition:

Animal skins, antiques, bicycles, binoculars, bonds, buggies, computer games and computer game consoles, computer or telecommunications equipment of any kind, contact or corneal lenses, coupons, diving equipment, documents of any kind, furs, ipods, marine and craft equipment, mobile phones, **money**, motor vehicles, MP3 players, musical instruments, prams, radios, sailboards or related equipment or fittings of any kind, securities, stamps, surfboards, tape recorders, television sets, travellers cheques, video equipment or DVD equipment of any kind.

#### Period of Insurance

The **trip** duration as shown in **your certificate**.

Cover under the Cancellation section of **your policy** starts from the date the **certificate** is issued and ends:

- at the start of **your trip** (other than for **pre-existing medical conditions** as stated above); or
- if a claim is made under the Cancellation cover.

The cover under all other sections of **your policy** starts at **your trip** departure and ends at:

- if a claim is made under the Cancellation cover or
- on **your** return to **your home**, place of business, hospital or nursing home in the **United Kingdom** or
- the expiry of the **policy** or
- following **your** refusal and/or failure to return **home** following confirmation from the treating doctor that **you** are fit and able to return **home** or
- your trip** exceeding the maximum **trip** length for single **trips**.

**One-way trip cover** - ends on the expiry of the **policy**, or seventy two (72) hours after the time **you** first leave the immigration control of **your** final destination country.

Cover will automatically be extended day by day up to a maximum of thirty (30) days after the expiry of the **policy** when **your** return is necessarily delayed as a result of ill-health of **you** or the failure of **public transport** provided that the **Emergency Assistance Service** has been notified.

#### Policy Age Limits

Single **Trip** – Eighty five (85) years at time of purchasing **your** insurance.

#### Policy

**Your certificate**, this **policy** and endorsements.

#### Pre-Existing Medical Condition

- Any condition from which **you** have suffered from, or received any form of medical advice, treatment or medication for:
  - Any heart or circulatory related condition (including Hypertension, Angina or Stroke);
  - Any lung or breathing related condition (other than inhaler controlled, mild asthma, suffered in insolation);
  - Any cancerous condition;
  - Any kidney related disorder.
- Any condition for which **you** have been admitted to hospital as an in-patient in the last 24 months.

#### Public Transport

A train, bus, coach, ferry service or scheduled airline flight operating to a published timetable to join the booked travel itinerary.

#### Redundancy, Redundant

**You** becoming unemployed under the Protection of Employment Act. **You** must have been given a Notice of **redundancy** and be receiving payment under the current **redundancy** payments legislation.

The following are not included in the definition:

- Any employment which has not been continuous and with the same employer for at least two years;
- Any employment which is not on a permanent basis;
- Any employment which is on a short term fixed contract;
- Any instance where **you** had reason to believe that **you** would be made **redundant** at the time of booking **your trip**.

#### Relative

Brother, step brother, brother-in-law, **common law partner**, daughter, step daughter, adopted daughter, daughter-in-law, fiancé(e), grandchild, grand parents, legal guardian, parent, step parent, parent-in-law, sister, step sister, sister-in-law, son, step son, adopted son, son-in-law, foster child or spouse.

#### Single Item

Any one article, pair, set or collection owned by **you**.

#### Sports & Activities

The following activities are included within the cover as standard, as long as they are amateur activities, conducted under adequate supervision and on an incidental basis. Please note that **you** are automatically covered under this **policy** for any activities that **you** participate in whilst onboard **your cruise ship**.

**You** are required at all times to wear the appropriate safety equipment for that activity (for example protective clothing and / or suitable head protection). Please note that a General Exclusion of cover exists under **your policy** with **us** for claims arising directly or indirectly from **your** "wilful exposure to danger". This means that **we** will not pay **your** claim if **you** do not meet this **policy** condition.

Archery, badminton, baseball, basketball, beach games, black water rafting (Grade 1 to 4), bungee jumping (Maximum of two jumps), canoeing (excluding white water canoeing of any grade), cricket, cycling (excluding BMX or mountain biking), dinghy sailing, fell walking, fencing, fishing (excluding wade fishing), football, golf, hiking (under 2,000 metres altitude), horse riding (excluding jumping, hunting, polo and racing), hot air ballooning which has been booked in the **United Kingdom** prior to departure, jet boating, jet skiing, jogging, marathon running, motorcycling up to 125cc (Providing rider holds a full driving licence and is wearing a crash helmet), netball, orienteering, paintballing (Providing protective eye-wear and clothing worn), parascending (over water), pony trekking, racquetball, rambling, river canoeing, roller skating, roller blading, rounders, rowing, safari (if pre-booked through **United Kingdom** operator, excluding the use of firearms), sail boarding, sailing within **territorial waters**, scuba diving up to 15 metres (excluding solo dives and no dives less than twenty four (24) hours before departure), skate boarding, snorkelling, squash, surfing, tennis, track events, trekking (under 2,000 meters altitude), triathlon, volleyball, water skiing, white water rafting (up to grade 4), windsurfing, yachting (inside **territorial waters**).

#### Sports Equipment

Those items that are usually worn, carried, used or held during the participation in a sporting activity.

The following are not included in the definition:

- ski equipment
- golf equipment

#### Territorial Waters

All waters within the jurisdiction of the country **you** are visiting during **your cruise**.

#### Travel Documents

Means passport, green cards, travel tickets and accommodation vouchers owned by **you**.

#### Travelling Companion

Any named person on **your** insurance **certificate** and/or booking invoice.

#### Trip

Any journey made by **you** within the area shown in the **certificate** which begins and ends in the **United Kingdom** during the **period of insurance**. The **policy** will also cover a one way **trip** commencing in the **United Kingdom** but ends 72 hours after the time **you** first leave the immigration control of **your** final destination country.

#### Unattended

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

#### United Kingdom

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

#### Valuables

Articles made of or containing gold, silver or other precious metals, jewellery, leather goods, furs, camcorders, photographic equipment, precious or semi-precious stones, silks, telescopes, binoculars, watches, computer equipment, computer games & computer game consoles, cameras, compact disc players, MP3 players & iPods, sunglasses, spectacles, Mini-Disc players, owned by **you**.

#### We/Us

White Horse Insurance Ireland Limited

### Wedding Gifts

Gifts for the Bride and Groom presented for the purposes of celebrating the Wedding Ceremony.

### Wedding Rings

The ring(s) exchanged by the Bride and Groom at the Wedding Ceremony.

### You/ Yours/ Insured

Any person named on the **certificate**.

## SECTIONS OF COVER

### CANCELLATION AND CURTAILMENT

#### • What You Are Covered For:

If **your trip** is cancelled or curtailed due to any one of the reasons listed below during the **period of insurance**, the **Insurer** will indemnify **you** up to the amount shown in the Schedule of Benefits and on **your insurance certificate**:

#### • Cancellation

For irrecoverable and unused travel, accommodation, car hire and excursion expenses paid or contracted to be paid by **you** in respect of **your own trip** (prior to any occurrence giving rise to a claim under this section).

#### • Curtailment

For travel expenses necessary to return **you home** before the booked return date and a pro-rata amount representing the irrecoverable and unused costs of accommodation, car hire and excursions attributable to each complete day of **your trip**. (Excluding all pre-paid travel costs attributable to the original booked outward and return journeys).

Reasons for Cancellation and Curtailment:

- a) death, **accidental bodily injury** or unexpected **illness**, occurring during the **period of insurance**, to **you**, **your travelling companion**, a **relative** or **close business associate** of **you** or **your travelling companion**;
- b) **you** being called for jury service, witness call or compulsory quarantine;
- c) **your** posting overseas or emergency and unavoidable requirements of duty in the Armed Forces, Police, Fire, Nursing or Ambulance Services;
- d) **your redundancy** notified during the **period of insurance** which qualifies for payment under the **redundancy** payments act;
- e) fire, flood or burglary at **your home** or place of business occurring or becoming apparent within 5 days prior to the commencement of the **cruise** or during the course of **your cruise**;
- f) **your** presence being required by the police following burglary at **home** or **your** place of business; or

#### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising directly or indirectly as a result of a **pre-existing medical condition** of **you**, **your relative**, **your travelling companion**, or **close business associate**, unless declared to and agreed by the **Insurer** in writing, with any required additional premium paid and/or amendments to **policy** conditions;
2. claims arising if **you**:
  - i. are travelling against the advice of a **medical practitioner** or for the purpose of obtaining medical treatment; or
  - ii. are on a hospital waiting list or awaiting the results of medical investigations; or
  - iii. have received a terminal prognosis
3. claims arising which are not supported by written medical confirmation and clinical reports from medical service providers, as well as all other proof of the happening of an event causing cancellation or curtailment;
4. claims arising where **you** have not received the necessary inoculations or vaccinations or obtained the necessary visas or passport documentation;
5. claims arising from any loss resulting from the cancellation or delay of a flight, subsequent to **your** initial International departure or return from or to **your country of residence**;
6. claims arising from where **you** will not and/or cannot travel to an area subject to disease of epidemic or pandemic proportions.
7. claims arising from **you** suffering from any form of a psychological condition (including anxiety, stress, depression, psychiatric or eating disorders or phobias)

### SPECIAL CONDITION

It is a condition of this section that any claim for Cancellation be advised verbally to your issuing agent within 48 hours and confirmed in writing to the **claims handler**. Curtailment must be authorised by the **Emergency Assistance Service** if the cost of **your trip home** is more than £250, following confirmation from the treating doctor that it is medically necessary that **you** curtail **your trip**.

**If you curtail your trip due to an illness/death of a third party, family member or relative then you must also contact the Emergency Assistance Service, otherwise your claim may be declined. You must always mitigate your costs.**

### EMERGENCY MEDICAL EXPENSES AND REPATRIATION

#### SPECIAL CONDITION

In the event of **your** death, incurring medical expenses in excess of £250, or **you** being involved in an **accident**, being admitted to hospital, or curtailing for medical reasons, the **Emergency Assistance Service** must be advised as soon as possible and liability shall only attach for expenses agreed by them. Failure to notify the **Emergency Assistance Service** will prejudice the **Insurer** and will result in the **Insurer's** non-acceptance of liability of such claims.

#### • What You Are Covered For:

The **Insurer** will reimburse **you** up to the amount shown in the Schedule of Benefits in respect of the following expenses necessarily incurred as a result of **you** sustaining **accidental bodily injury**, suffering an **illness** or dying:

#### 1 Emergency Medical Expenses

1. cost of medical, surgical or hospital treatment (including emergency dental treatment up to £250 for the immediate relief of pain only). The **Insurer** reserves the right to repatriate **you**, when in the opinion of the doctor in attendance and the **Insurer's** medical advisors, **you** are fit to travel;
2. cost of transporting **your** remains to the **United Kingdom**, or the reasonable cost of a funeral in the country where death occurs, if other than **your** usual **country of residence**, up to £1,500;
3. reasonable additional transportation and accommodation costs incurred by **you** and any one of **your travelling companions**, as a result of **you** receiving medical advice from the doctor in attendance and the **Insurer's** medical advisors that **your** originally planned return journey to the **United Kingdom** is impossible due to medical reasons. (Payment shall be based upon the average cost of transportation and accommodation incurred prior to the originally planned return date, at the **Insurer's** discretion).

#### 2 Emergency Repatriation

- a) the cost of returning **you** to the **United Kingdom** by medically appropriate means, where in the opinion of the **Insurer's** medical advisors, such return is medically necessary.

#### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising directly or indirectly as a result of a **pre-existing medical condition** of **you**, **your relative**, **your travelling companion**, or **close business associate**, unless declared to and agreed by the **Insurer** in writing, with any required additional premium paid and/or amendments to **policy** conditions;
2. claims arising if **you**:
  - i. are travelling against the advice of a **medical practitioner** or for the purpose of obtaining medical treatment; or
  - ii. are on a hospital waiting list or awaiting the results of medical investigations; or
  - iii. have received a terminal prognosis.
3. claims arising for treatment or surgery which, in the opinion of the **Insurer's** medical advisors, is not essential or can reasonably be delayed until **your** return to **your home**;
4. claims arising from the additional costs of single or private hospital room accommodation;
5. claims arising from medical treatment of any kind received after **you** have returned to the **United Kingdom**;
6. claims arising from medical treatment of any kind not authorised at the time by a recognised registered **medical practitioner**;
7. claims arising from medical treatment of any kind occurring after **you** have refused the offer of repatriation when, in the opinion of the **Insurer's** medical advisors, **you** are fit to travel;
8. claims arising in respect of elective medical treatment,

- physiotherapy treatment and other associated therapies;
9. claims arising out of **your** failure to contact the **Emergency Assistance Service**.
  10. claims arising from **You** suffering from any form of a psychological condition (including anxiety, stress, depression, psychiatric or eating disorders or phobias)

#### SPECIAL CONDITIONS

1. If **you** are travelling to countries within the European Union (EU) or the European Economic Area (EEA) **you** are requested to obtain a European Health Insurance Card (EHIC) from **your** local Post Office. **You** can also apply either online through [www.dh.gov.uk/travellers](http://www.dh.gov.uk/travellers) or by telephoning 0845 606 2030. This will entitle **you** to benefit from the reciprocal health care arrangements which exist between countries within the EU/EEA. It is a condition of **your** insurance contract that **you** mitigate any cost to the **Insurer**.
2. Should **you** require medical treatment in Australia, **you** must enrol with MEDICARE. It is not necessary to enrol on arrival. **You** can simply do this at the first occasion on which they receive treatment. In-patient and out-patient treatment at a public hospital is then available free of charge. Should **you** be admitted to hospital then immediate contact must be made with the **Emergency Assistance Service** and their authority obtained in respect of any treatment not available under MEDICARE before such treatment is provided. It is a condition of your insurance contract that **you** mitigate any cost to the **Insurer**.

### HOSPITAL BENEFIT

#### • What You Are Covered For:

The **Insurer** will pay **you** the amount shown in the Schedule of Benefits for each and every completed period of 24 hours for which **you** are an inpatient in a hospital abroad, as a direct result of an **accidental bodily injury** or unexpected **illness** which is covered under Emergency Medical Expenses and Repatriation section.

#### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims where the **Emergency Assistance Service** has not been contacted and a recommended hospital has been appointed.
2. claims made against the State Room/Cabin Confinement section.

### PERSONAL POSSESSIONS

#### • What You Are Covered For:

##### 1. Lost, Stolen or Damaged

The **Insurer** will reimburse **you** up to the amount as shown in the Schedule of Benefits, for the value of **personal possessions** taken or purchased on the **trip** by **you** which is accidentally lost, stolen or damaged. The maximum payment for any **single item** are shown in the Schedule of Benefits. The maximum payment for **valuables** is shown in the Schedule of Benefits. 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 £60 subject to a maximum of £300 for all such items. The maximum payment for tobacco, alcohol or fragrances (perfumes, aftershaves etc) is £50.

##### 2. Travel Documents

The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits, for travel and accommodation (room only) expenses incurred in obtaining temporary **travel documents** and the cost of a temporary passport to return **you** home.

##### 3. Baggage Delay

The **Insurer** will reimburse **you** for the cost of purchase of necessities, up to the maximum as shown in the Schedule of Benefits should **personal possessions** be delayed or lost in transit on **your** outward journey from the **United Kingdom** for more than twenty four (24) hours. Payment made under this heading will be set against the amount of any claim arising if the **personal possessions** are permanently lost. **You** must supply receipts for the items purchased and confirmation from the carrier of the length of delay. No cover is available under this section for delays to **your personal possessions** on any aspect of **Your** return journey to the **United Kingdom**.

All claims are based on the value at today's prices less a deduction for wear, tear and depreciation as follows:

- Up to one year old - 85% of purchase price
- Up to two years old - 70% of purchase price
- Up to three years old - 50% of purchase price
- Up to four years old - 25% of purchase price

- Up to five years old - 10% of purchase price
- Over five years old - nil

#### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. wear, tear and depreciation of the article(s) (see table above);
2. claims arising from breakage of **fragile articles** unless caused by fire or **accident** to a vehicle;
3. claims arising for loss, theft or damage to prams, buggies, wheelchairs, pedal cycles, motor vehicles, marine or diving equipment and craft, surfboards, sailboards or related equipment or fittings of any kind;
4. claims arising from damage caused by leakage of powder or liquid carried within personal effects or baggage;
5. claims arising for **money**, cheques, contact lenses, antiques, computer equipment of any kind, mobile telephones, TV sets;
6. claims arising for theft which are not reported to any appropriate police authority within 24 hours of discovery and an official written report obtained;
7. claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official written report obtained (and specifically for claims arising against or in common carriers and hotels, any claim not reported in writing to such carrier or hotel within 24 hours of discovery, and an official written report obtained). In the case of an airline, a Property Irregularity Report will be required;
8. claims arising for breakage of **sports equipment** whilst in use;
9. claims arising from delay, detention, seizure or confiscation by customs or other officials;
10. claims arising for loss, theft or damage to household goods or anything shipped as freight or under a bill of lading;
11. claims arising for loss or damage of dentures or bridgework.
12. claims arising for **personal possessions** left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property. Including, theft or damage occurring on a beach or in or around a swimming pool;
13. claims arising for loss, theft or damage of items from an **unattended** motor vehicle, unless taken from a locked boot, glove box or locked & secured roof box between 8pm and 8am local time and there is evidence of forced entry which is confirmed by a police report;
14. claims arising for loss or damage to items carried on a vehicle roof rack;
15. claims arising for loss, theft or damage to **valuables** which at the time of such loss, theft or damage were located in checked-in luggage or a motor vehicle;

### PERSONAL MONEY

#### • What You Are Covered For:

The **Insurer** will indemnify **you** up to the amount as shown in the Schedule of Benefits in respect of loss of **money** which is the property of **you** and carried on **your** person (a reduced limit applies as shown in the Schedule of Benefits for children under 18 unless an adult premium has been paid for that person) or placed in a safety deposit box or similar locked, fixed receptacle. Cover for **money** is limited to the **money** limit as shown in the Schedule of Benefits.

#### • What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising for theft which has not been reported to any appropriate police authority within 24 hours of discovery and an official written report obtained;
2. claims for loss which has not been reported to any appropriate authority within 24 hours of discovery and an official written report obtained (and specifically for claims arising against common carriers and hotels, any claim not reported in writing to such carrier or hotel within 24 hours of discovery, and an official written report obtained);
3. claims arising from delay, detention, seizure or confiscation by Customs or other officials;
4. claims arising from shortages due to error, omission or depreciation in value;
5. claims arising for loss or theft of **personal money** which at the time of such loss or theft was located in checked-in luggage or an **unattended** motor vehicle at any time;
6. claims arising for **personal money** left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property.

## PERSONAL ACCIDENT

### Special Definitions (which are shown in italics)

#### Loss of Limb

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

#### Loss of Sight

- Means total and irrecoverable loss of sight which shall be considered as having occurred:
  - a) In both eyes if **your** name is added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist and
  - b) In one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen scale.

#### Permanent Total Disablement

- Means physical or mental impairment that has a substantial and long-term adverse effect on **your** ability to carry out any form of employment and at least three of the following normal day to day activities:
  - a. Dressing and undressing
  - b. Personal hygiene
  - c. Getting up and down a flight of stairs
  - d. Getting in and out of a bed or chair
  - e. General household duties including cleaning, ironing or shopping.

We will consider that **you** are unable to perform an activity when the following applies:

- **You** are unable to perform the activity even with the use of equipment and;
- **You** always need the help of another person to perform the activity.

#### What You Are Covered For:

The **Insurer** will pay **you** or **your** estate the sum insured as shown in the Schedule of Benefits for one of the following losses resulting from an external **accident** resulting in **your** death, loss of limb(s), *loss of sight* or *permanent total disablement*. Loss must occur within 180 days of the date of **accident**. No benefits shall be paid for more than one loss suffered.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. Any benefit where **your** death, injury or loss does not occur within 180 days of the **accident**.
2. Any benefit as a result of participating in a **sport and activity**, unless **you** have paid the additional premium prior to travel, for that specific **sport and activity** and cover is confirmed on **your certificate**.
3. Any benefit if **you** cannot prove to the **Insurer** that the permanent total disablement has continued for 12 months from the date of the injury and in all probability will continue for the remainder of **your** life.
4. More than one lump sum under this section.

## MISSED DEPARTURE

#### What You Are Covered For:

The **Insurer** will indemnify **you** up to the amount shown in the Schedule of Benefits, in respect of reasonable additional costs of travel and accommodation necessarily incurred if **you** are unable to reach the international point of departure of the booked travel itinerary on the initial outward or final return journey as a consequence of the failure of **public transport** services or the **accident**/breakdown of a motor vehicle in which **you** are travelling, inclusive of reasonable costs incurred should delay or cancellation of **your** scheduled **public transport**, cause **you** to miss **your** ships departure.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising as a result of **your** not having taken reasonable steps to complete the journey to the departure point on time;
2. claims arising from the failure of **public transport** services caused by strike, riot or civil commotion for which warning has been given prior to the commencement of departure to the departure point;
3. claims arising from the vehicle not having been properly serviced and maintained, in the event of vehicle breakdown;
4. claims arising from an **accident**/breakdown of a motor vehicle, where no written evidence of such **accident**/breakdown has been supplied.
5. claims arising from delay/cancellation of **public transport**, where no written evidence of such delay/cancellation has been supplied.

## DELAYED DEPARTURE AND CRUISE ABANDONMENT

#### What You Are Covered For:

In the event of a delay of **your** outward flight or sea **trip** from the **United Kingdom** or planned inbound flight or sea **trip** to the **United Kingdom**, the **Insurer** will compensate **you** as follows:

#### 1. Delayed Departure

The amount shown in the Schedule of Benefits for the first full 12 hour period of delay and an additional amount for each full 12 hour period of delay thereafter, up to the maximum amount shown in the Schedule of Benefits. Please note that **you** must obtain in writing from the carrier, a statement confirming the length and exact nature of the delay.

#### 2. Cruise Abandonment

If **you** choose to cancel **your** **trip** following a delay of not less than 24 hours beyond the scheduled departure time (and written confirmation obtained from the carrier), the **Insurer** will indemnify **you** up to the amount shown in the Schedule of Benefits for irrecoverable and unused travel, accommodation, car hire and excursion expenses paid or contracted to be paid by **you** in respect of **your** own **trip** (prior to any occurrence giving rise to a claim under this section).

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising for delay caused by strike or industrial action, if the strike or industrial action was notified at the time the insurance was purchased;
2. **your** failure to check in as per **your** original itinerary;
3. any claim payable that can be paid under the section Missed Departure.

#### SPECIAL NOTE:

Both travel delay and **cruise** abandonment are restricted to the following causes:

- i. Strike or industrial action
- ii. Adverse weather conditions
- iii. Mechanical breakdown

## PERSONAL LIABILITY

#### What You Are Covered For:

The **Insurer** will indemnify **you** up to the amount as shown in the Schedule of Benefits for **your** legal liability for **accidental** injury to third parties and/or **accidental** damage to their property within the **territorial limits** of their policy. This cover is applicable only in respect of liability under the law of the country in which the event giving rise to the claim occurred, or under the laws of the Republic of Ireland.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising directly or indirectly from, happening through or in consequence of:
  - a. employer's liability, contractual liability, or liability to a member of **your** family or **your travelling companion**;
  - b. animals belonging to, or in the care, custody or control of the **Insured**;
  - c. wilful, malicious or unlawful acts or the use of firearms;
  - d. the pursuit of trade, business or profession;
  - e. ownership or occupation of land or buildings (other than **your** temporary trip accommodation); or
  - f. the influence of intoxicating liquor or drugs;
2. claims arising directly or indirectly from, happening through or in consequence of ownership, possession or use of any vehicle, automobile, aircraft, watercraft, or any mechanically propelled conveyance;
3. claims for legal fees and costs resulting from any criminal proceedings;
4. any claim where **you** have cover under another insurance policy.

#### SPECIAL CONDITION

No liability shall be admitted and no admission, arrangement, offer, promise or payment shall be made by the **Insured** without the written consent of the **Insurer**, who shall be entitled, if they so desire, to take over and conduct, in the name of the **Insured**, their defence of any claim or to prosecute for their own benefit any claims for indemnity, damages or otherwise against any third party. The **Insurer** shall have full discretion in the conduct of any negotiations, proceedings, or the settlement of any

claims and the **Insured** shall, wherever possible, give all such information and assistance as the **Insurer** may require.

## LEGAL EXPENSES

- **What You Are Covered For:**

The **Insurer** will reimburse **you** up to the amount as shown in the Schedule of Benefits, for legal costs incurred by **you** in pursuit of legal proceedings against third parties (excluding any member of **your** or **your travelling companion's** family, **your travelling companion**, **close business associate** or employer) for any compensation owed to **you** arising directly from **your** physical **bodily injury** or **your** death during the **period of insurance**.

- **What You Are Not Covered For:**

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising for any legal expenses incurred without prior written authorisation by the **Insurer**;
2. claims arising where the **Insurer** considers **your** prospects of success in achieving a reasonable benefit to be insufficient;
3. claims arising pursuant to a contingent fee agreement between **you** and **your** counsel/lawyer;
4. claims arising for any additional travel and accommodation expenses incurred, whilst in pursuit of legal proceedings;
5. claims arising from **you** pursuing legal proceedings as part of and/or on behalf of a group or organisation;
6. legal costs and expenses incurred in pursuit of any claim against a travel agent, tour operator, **crucise** operator, carrier, airline, medical establishment, **us**, the **Emergency Assistance Service** or their agents, someone **you** were travelling with, a person related to **you**, a **travelling companion** or another **Insured** person.
7. claims occurring under criminal law;
8. claims occurring or where the case is brought to court in more than one country.

## SPECIAL CONDITIONS

The **Insured** must comply with the following procedures:

- a) the **Insured** shall apply to the **Insurer** for a written acknowledgement by the **Insurer** of the existence of a potentially viable claim;
- b) if an acknowledgement in (a) is granted, the **Insurer** shall initially pay up to 5% of the amount shown in the Schedule of Benefits for legal costs incurred by the **Insured** to determine the probability of success in achieving a reasonable benefit. This shall include an assessment of the legal liability of the potential defendant and the ability to collect damages from the potential defendant;
- c) the **Insurer** shall not be responsible for any legal expenses incurred prior to its issuing the **Insured** with a written acknowledgement of the existence of a potentially viable claim;
- d) in the event that the **Insured** is awarded compensation (by judgement or settlement), the **Insurer** shall be entitled to recover from the **Insured** or on behalf of the **Insured** any sum paid under any section of this **policy** on account of the same incident for which compensation is received.
- e) No liability shall be admitted and no admission, arrangement, offer, promise or payment shall be made by the **Insured** without the written consent of the **Insurer**, who shall be entitled, if they so desire, to take over and conduct, in the name of the **Insured**, their defence of any claim or to prosecute for their own benefit any claims for indemnity, damages or otherwise against any third party. The **Insurer** shall have full discretion in the conduct of any negotiations, proceedings, or the settlement of any claims and the **Insured** shall, wherever possible, give all such information and assistance as the **Insurer** may require.

## MISSED PORT

- **What You Are Covered For:**

In the event of the cancellation of a scheduled port visit due to adverse weather or timetable restrictions, as confirmed by the tour operator in writing, the **Insurer** will compensate **you** up to the amount in the Schedule of Benefits for each missed port, provided always that **you** obtain in writing from the carrier a statement confirming the reason for the missed port.

- **What You Are Not Covered For:**

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising from a missed port caused by strike or industrial action if the strike or industrial action was notified at the time the

insurance was purchased.

2. **your** failure to attend the excursion as per **your** original itinerary.
3. claims arising from when **your** ship cannot put people ashore due to a scheduled tender operation failure.
4. claims where a monetary amount (including on board credit) of compensation has been offered by the ship or tour operator.

## STATEROOM / CABIN CONFINEMENT

- **What You Are Covered For:**

The **Insurer** will pay **you** the amounts shown in the Schedule of Benefits for each complete 24 hour period that **you** are confined by the Ship's Medical Officer to **your** cabin for medical reasons during **your** **crucise**.

- **What You Are Not Covered For:**

In addition to the general exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. any confinement to **your** cabin which has not been confirmed in writing by the ships medical officer.
2. claims made against the Hospital Benefit section.

## UNUSED PRE-BOOKED EXCURSIONS

- **What You Are Covered For:**

Up to the amounts shown in the Schedule of Benefits, for the cost of excursions pre-booked in the **United Kingdom**, which **you** were unable to use as a direct result of being a hospital in-patient due to an **accident** or **illness** which is covered under the Emergency Medical Expenses section of this **policy**.

- **What You Are Not Covered For:**

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims where the **Emergency Assistance Service** has not been contacted and a recommended hospital has been appointed.
2. claims made against the Hospital Benefit section.

## CRUISE CONNECTION

- **What You Are Covered For:**

Up to the amounts shown in the Schedule of Benefits, for reasonable and additional onward travel expenses and room only accommodation costs, necessarily incurred in reaching the next available embarkation point in time to board the original **crucise** ship on which **you** are booked to travel, or **your** failure to disembark **your** **crucise** ship at the original disembarkation place in time to reach **your** international flight departure point as a result of:

- a) the failure of any scheduled **public transport**;
- b) the failure of **your** booked **crucise** ship;
- c) strike, industrial action or adverse weather conditions.

- **What You are Not Covered For:**

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for any claims arising directly or indirectly from:

- 1) strike or industrial action or air traffic control delay that existed or was publicly announced at the date of **you** purchasing this insurance or at the time of booking any **trip**.
- 2) withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Civil Aviation Authority or a Port Authority of any similar body in any country.
- 3) additional expenses where the scheduled **public transport** operator has offered **you** reasonable alternative travel arrangements.
- 4) any delay caused by the quarantine on a **crucise** ship that **you** were booked to travel on.

## SPECIAL CONDITIONS

1. **You** must allow sufficient time for the scheduled **public transport**, **crucise** ship or other transport to arrive on schedule and to deliver **you** to **your** embarkation point or international departure point.

## OPTIONAL WEDDING / CIVIL PARTNERSHIP COVER

Please note that this cover section is only applicable when **You** have paid the appropriate additional premium and when this additional cover section is confirmed on **your** **certificate** of insurance.

## WEDDING RING(S)

- **What You Are Covered For:**

The **Insurer** will pay up to the amount stated in the Schedule of Benefits for loss of or damage to the **wedding ring(s)**, which occurs during the period of time specified below:

1. Cover commences seven days prior to the Wedding Ceremony and expires twenty-four hours after the Wedding Ceremony.

- **What You Are Not Covered For:**

1. Theft of **wedding ring(s)** unless such items were removed by visible and forcible means.
2. Any loss by theft not reported to the police within twenty-four hours of discovery and a written police report obtained.
3. Loss or damage which is or but for the existence of this **policy** would be otherwise insured.
4. Loss or damage arising from wear or tear, moth, vermin, atmospheric or climatic conditions, deterioration, depreciation, confiscation, detention or any process of cleaning, restoration or repair.
5. Loss or damage by theft or attempted theft of any **wedding ring(s)** left in an **unattended** vehicle, unless the property is left in the locked boot or locked glove compartment of a motor vehicle, concealed from view and there is evidence of visible and forcible entry thereto.

## WEDDING GIFTS

- **What You Are Covered For:**

The **Insurer** will pay up to the amount shown in the Schedule of Benefits for loss of or damage to **wedding gifts** due to **accident**, fire or theft by visible and forcible entry thereto, whilst being stored by **you**. This cover also applies whilst gifts are in transit or on display at the reception. Cover applies 48 hours prior to the Wedding Ceremony and for a subsequent twenty-four hours after the reception thereafter, or until a claim is made under this section of the **policy**, whichever occurs first.

- **What You Are Not Covered For:**

1. Any loss (other than by damage) not reported to the police within twenty-four hours of discovery and a written report obtained.
2. Loss or damage arising from wear or tear, moth, vermin, atmospheric conditions, deterioration, depreciation, confiscation, detention or any process of cleaning, restoration or repair.
3. Loss or damage which is or but for the existence of this **policy** would be otherwise insured.
4. Loss or damage by theft or attempted theft of any **wedding gifts** left in an **unattended** vehicle, unless the property is left in the locked boot or locked glove compartment of a motor vehicle, concealed from view and there is evidence of visible and forcible entry thereto.
5. Loss or damage by theft or attempted theft of any **wedding gifts** left in the **home** or ceremony venue or reception venue, unless there is evidence of visible and forcible entry thereto.
6. Loss or damage of any item where receipt or sufficient proof of purchase is not provided.

## CEREMONIAL ATTIRE

- **What You Are Covered For:**

The **Insurer** will pay up to the amount stated in the Schedule of Benefits for:

1. The reinstatement or replacement (at **our** discretion) of **bridal attire** to be worn by the Bride if such attire is lost or damaged whilst in **your** possession or that of a **close relative** within one month prior to the Wedding Ceremony. In respect of hired attire cover shall apply for up to 48 hours after commencement of the Wedding Ceremony.
2. Loss of or damage to **ceremonial attire** worn by **you** and **your** Attendants within forty-eight hours before and for duration of the wedding.
3. The reimbursement of all deposits and other charges paid for the purchase or hire of the **ceremonial attire** which are not recoverable solely due to the financial failure of the contracted suppliers unless the completed goods are made available prior to the Wedding Ceremony. Cover under this item commences from the date the premium is paid and applies until completion of Wedding Ceremony and Reception.

In respect of points 1 and 2 above, an amount will be deducted in respect of hired attire to reflect previous wear and tear.

- **What You Are Not Covered For:**

1. Loss or damage arising from wear or tear, moth, vermin, atmospheric or climatic conditions, deterioration, depreciation, confiscation, detention or any process of cleaning, restoration or repair.
2. Loss or damage which is or but for the existence of this **policy** would be otherwise insured.
3. any loss or theft not reported to the police within twenty-four hours of discovery and a written report obtained. Except in the case of damage, in which case a written estimate from a reputable retailer may be accepted.
4. Loss or damage by theft or attempted theft of any **ceremonial attire** left in an **unattended** vehicle, unless the property is left in the locked boot or locked glove compartment of a motor vehicle, concealed from view and there is evidence of visible and forcible entry thereto.

## WEDDING PHOTOGRAPHS / VIDEO RECORDING

- **What You Are Covered For:**

The **Insurer** will pay up to the amount stated on the Schedule of Benefits to reimburse **you** for unforeseen expenses necessarily incurred to take Wedding Photographs and Videos as a direct and necessary consequence of:

1. non-appearance for any reason of the pre-booked Professional Photographer or Professional Video Operator contracted for the Wedding Ceremony.
2. Loss of or damage to the original film or negatives before copies are made.
3. non-development of the original film or negatives (other than as a result of under or over exposure).

Cover under this section commences from the date the premium is paid, and applies until completion of Wedding Ceremony and Reception, or a claim being made under this section of the **policy**, whichever occurs first.

- **What You Are Not Covered For:**

1. losses recoverable from any other source.
2. contracts which are not in writing.
3. any costs which would have been incurred had the original supplier not failed to meet their contractual obligations.
4. financial failure of any service provider.

## GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS OF THE INSURANCE

In addition to the Exclusions listed under each section of cover within this **policy**, the **Insurer** shall not be responsible for claims:

1. which are directly or indirectly caused by, occasioned by, resulting from or in connection with any of the following regardless of any other cause or event contributing concurrently or in any other sequence to the claim;
  - i. **act of terrorism**; this exclusion will not apply to losses under the Emergency Medical Expenses and Repatriation Section, nor the Hospital Benefit Section nor the Personal Accident Section unless such losses are caused by nuclear, chemical or biological attack or planned attack, or the disturbances were already taking place at the beginning of any **trip** in which case the exclusion will apply
  - ii. invasion or warlike operations (whether war be declared or not), hostile acts of sovereign or government entities, civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power or martial law or confiscation by order of any government or public authority; or
  - iii. seizure or illegal occupation; or
  - iv. confiscation, requisition, detention, legal or illegal occupation, embargo, quarantine or any result of any order of public or government authority which deprives **you** of the use or value of **your** property, nor for loss or damage arising from acts of contraband or illegal transportation or illegal trade; or
  - v. discharge of pollutants or contaminants, which pollutants and contaminants shall include but are not limited to any solid, liquid, gaseous or thermal irritant, contaminant or toxic or hazardous substance or any substance the presence, existence or release of which endangers or threatens to endanger the health, safety or welfare of persons or the environment; or
  - vi. chemical or biological release or exposure of any kind; or
  - vii. attacks by electronic means including computer hacking or the introduction of any form of computer virus; or
  - viii. threat or hoax, in the absence of physical damage due to an act of terrorism; or

- ix. any action taken in controlling, preventing, suppressing or in any way relating to any act of **terrorism**.
2. from loss or destruction of, or damage to any property whatsoever, or any loss or expense whatsoever resulting in or arising therefrom, or any consequential loss of any legal liability of whatsoever nature, directly or indirectly caused by or contributed to, or arising from;
  - i. ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel; or
  - ii. the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof;
3. from **you** engaging in any illegal or criminal act;
4. from any consequential loss whatsoever. Claims shall only be paid for those losses which are specifically stated under the terms of this insurance;
5. wilful exposure to areas known to be infected with;
  - (a) Severe Acute Respiratory Syndrome (S.A.R.S);
  - (b) Avian Influenza, Asian Birdflu and/or H5N1;
  - (c) or any other Influenza A viruses.
6. directly or indirectly out of **your** financial incapacity, except in the circumstance of **redundancy**;
7. which but for the existence of this insurance, would be covered under any other insurance policy(ies), including any amounts recovered by **you** from private health insurance, E111 Card payments, any reciprocal health agreements, airlines, hotels, home contents Insurers or any other recovery by **you** which is the basis of a claim;
8. from the tour operator, airline or any other company, firm or person either becoming insolvent or being unable or unwilling to fulfil any part of their obligation;
9. from any **sport and activity** (except where an appropriate premium has been paid);
10. **your** suicide or attempted suicide
11. arising directly or indirectly from **your** wilful exposure to danger (except in an attempt to save human life) **You** must exercise reasonable care to prevent **illness**, injury or loss or damage to **your** property as if uninsured;
12. **you** being under the influence of or in connection with the use of alcohol or drugs, unless as prescribed by a treating doctor;
13. from **you** being in or entering or descending from an aircraft other than a fully licensed passenger carrying aircraft in which **you** are travelling as a passenger other than as a member of the crew and not for the purpose of undertaking any trade, training or technical operation therein or thereon;
14. directly or indirectly from **you** being engaged in any manual employment after the commencement of the **trip**;
15. which have not been proven and the amount thereof substantiated.
16. where **you** travelling against the advice of a **medical practitioner**
17. arising directly or indirectly from **your** travel to a country or specific area or event to which the Travel Advice Unit of the Foreign & Commonwealth Office or the World Health Organisation has advised the public not to travel.
18. arising from **your** stress, anxiety, depression or any other mental or nervous disorder.
19. directly or indirectly from volcanic ash.

### CONDITIONS APPLICABLE TO ALL SECTIONS OF THE INSURANCE

1. All material facts must be disclosed to the **Insurer** at the time of taking out this Insurance. Failure to do so may result in the **Insurer's** non-liability for claims. A material fact is any fact known to the **Insured** which is likely to influence the **Insurer's** in the acceptance or assessment of the insurance. If **you** are in any doubt as to whether a fact is 'material' then for **your** own protection it should be disclosed. All information provided in purchasing this insurance shall form the basis of the contract. The **Insured** should keep a record (including copies of letters) of all information provided by Cruise 118 for the purpose of entering into this contract.
2. All **Certificates**, information and evidence required by the **Insurer** shall be furnished at the expense of the **Insured** or his legal personal representatives and shall be in such form and of such nature as the **Insurer** may prescribe. The **Insured** shall as often as required submit to a medical examination on behalf of the **Insurer** at the **Insured's** expense.
3. In the event of death of the **Insured**, the **Insurer** shall be entitled to have a post-mortem examination at their own expense.
4. Any items which become the subject of a claim for loss or damage shall be retained for **Insurer** inspection and shall be forwarded to **our claims handlers** upon request at the expense of the **Insured** or his legal personal representatives. All such items shall become the property of the **Insurer** following final settlement of the claim.
5. In the event of any occurrence which may give rise to a claim under this

insurance, the **Insured** shall take all reasonable steps to minimize any loss arising out of such claim.

6. This insurance is non-transferable. Should the journey or holiday be cancelled prior to departure for any reason whatsoever other than those set out in the Cancellation section of the **policy** then the insurance cover terminates immediately and the premium is neither apportionable nor refundable.
7. The **Insurer** and the **Insured** are entitled to choose the law applicable to the insurance contract. The **Insurer** chooses the laws of the Republic of Ireland and, in the absence of any agreement to the contrary, the laws of the Republic of Ireland shall apply.
8. The **Insurer**, at its own expense, may take proceedings in the name of the **Insured** to recover compensation or secure an indemnity from any third party in respect of any loss or damage covered by this insurance and any amount so recovered shall belong to the **Insurer**.
9. In the event that the **Insured** recovers by any means, damages from any third party in respect of personal accident, all benefits paid to the **Insured** shall be repaid to the **Insurer**.
10. If any fraudulent claim is made or if any fraudulent means or devices are used to obtain any benefit under this **policy**, all benefits thereunder shall be forfeited as well as all premiums paid.
11. In the event that the **Insured** experiences a problem with the **policy** or the claims process, please refer to the Complaints Procedure.

### COMPENSATION SCHEME

White Horse Insurance Ireland Limited is covered by the Financial Services Compensation Scheme. If White Horse Insurance Ireland Limited cannot meet their obligations **you** may be entitled to compensation from The Financial Services Compensation Scheme. The Financial Services Compensation Scheme provides funds for liquidators so that they may pay the valid claims of insolvent insurers. The fund will provide an amount up to £2,000 or 90% of the net loss, whichever is less. **You** can get more information about compensation fund arrangements from the following website [www.fscs.org.uk](http://www.fscs.org.uk).

### DATA PROTECTION

Please note that any information provided to **us** will be processed by **us** and our agents in compliance with the provisions of the Data Protection Act 1998 as amended, for the purpose of providing insurance and handling claims, if any, which may necessitate such information being provided to third parties.

### FOR 24 HOUR EMERGENCY ASSISTANCE SERVICE:

Telephone: **+44 (0)844 879 8313 or +44 (0)208 763 4932**  
24 hours a day, 365 days a year.

### FOR CLAIMS:

Please telephone White Horse Administration Services Limited on 0871 664 7995 (Calls cost 10p per minute from BT land lines. Calls from mobiles and other networks may be extra)

Please note that it is a condition of **your policy** that **you** notify **us** of **your** intention to make a claim within 31 days of **your** return date.

When **you** contact **us** please ensure that **you** have the following information available to **you** as **we** will require it to process **your** claim:

- Master policy reference of WHILL/CRUISE118/08/2011
- Details of where **you** purchased **your policy** (Cruise 118)
- **Your policy** number
- Date of purchase of **your policy**
- **Cruise** booking details
- Actual or intended travel dates
- Incident date
- Brief circumstances of **your** claim
- Value of **your** claim

Please note that **your** claim may be delayed if **you** are unable to advise **us** on the above information

## COMPLAINTS PROCEDURE

Should **you** have any query or complaint regarding **your** insurance or in the way **your** claim has been dealt with, in the first instance please write to:

The General Manager  
White Horse Insurance Ireland Limited,  
Bay 89.2,  
Free Zone West,  
Shannon,  
County Clare,  
Republic of Ireland

If **you** are still not satisfied with **our** decision after following the above procedure, **you** may then write to:

The Financial Services Ombudsman's Bureau  
Third Floor  
Lincoln House  
Lincoln Place  
Dublin 2  
Republic of Ireland  
Telephone: 00353 (1) 6620 899  
Fax: 00353 (1) 6620 890

Please note the Ombudsman will not consider **your** case until **you** have followed the complaints procedure by writing to White Horse Insurance Ireland Limited, as outlined above.

Please quote **your** insurance reference number and **your** claim number in all **your** correspondence to all parties involved with this procedure. This procedure is intended to provide **you** with a prompt and practical service with any complaints that **you** may have.