

**THE POLICYHOLDER AND THE INSURED PERSONS ARE REQUESTED TO READ THIS
POLICY CAREFULLY**

TRAVEL INSURANCE PACKAGE

for

Bank of Cyprus Public Company Limited

arranged by

Marsh Insurance Brokers Limited
per Guy Carpenter & Company LLC
1 Tower Place West, Tower Place, London EC3R 5BU, England

This Policy is a contract between **The Policyholder** named in the Schedule and

ΓΕΝΙΚΕΣ ΑΣΦΑΛΕΙΕΣ ΚΥΠΡΟΥ ΛΙΜΙΤΕΔ (The Insurers)
4 Evrou, Eurolife House, 2003 Strovolos, PO Box 21668, CY-1511 Nicosia, Cyprus

In **all** communications the Policy Number appearing overleaf should be quoted.

Subject to **The Policyholder** paying the premium the Insurers agree to provide insurance
in the terms set out in this Policy of Insurance.

In witness whereof this Policy has been signed on the date specified below by:

Authorised Signatory:

General Insurance of Cyprus
4 Evrou, Eurolife House, 2003 Strovolos
PO Box 21668
CY-1511 Nicosia, Cyprus

Dated in Nicosia, on thisth 2024

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Welcome

Welcome to the General Insurance of Cyprus, Travel Insurance Policy.

This policy is only valid when issued in conjunction with a Certificate of Insurance, and provided the required insurance premium has been paid.

The insurance premium has been based upon the information provided and the declarations **The Policyholder** has made. The Policyholder should read this policy carefully to make sure it meets the requirements of the **Insured Persons** and that the details on the Certificate of Insurance and the schedules are correct. If after reading the Certificate of Insurance and schedules, **The Policyholder** has any questions, please contact the insurance intermediary from which this policy was purchased.

Please note: terms shown in bold in this policy have the meanings given to them in the General Definitions on pages 13-18.

The Policyholder must ensure that each **Insured Person**, upon enrolment into the policy, must as a minimum receive:

- Certificate of Insurance
- Insurance Product Information Document (IPID)
- Policy Wording.

Insured Persons should check upon enrolment into this policy that the sums insured and sections of cover are adequate for their personal needs.

Important Information relating to this Policy

It is essential that **The Policyholder** provides **Us** with a fair representation of the risks **We** are accepting when applying for cover. It is also important **The Policyholder** advises their broker, intermediary or **Us** of any changes which occur during the **Period of Insurance** which may alter information previously provided. If **The Policyholder** is in doubt as to whether they need to disclose information to **Us**, then this should be declared.

It is the **Insured Person's** responsibility to submit all supporting documents in relation to a claim made. Therefore, **We** recommend that the **Insured Person's** (where appropriate) keep receipts, photographs and relevant documents to help with any claim to be made. It is advisable to always keep copies of all documents that are sent to **Us** when making a claim. This policy is a legal contract. **The Policyholder** must tell **Us** about any facts or changes which affect the insurance and which have occurred either since the policy started or since the last renewal date. If **The Policyholder** does not tell **Us** about relevant changes, this policy may not be valid or the policy may not cover the **Insured Persons** fully. **The Policyholder** should keep a written record (including copies of letters) of any information given to **Us** or the relevant insurance intermediary when renewing this policy.

This is not a Private Medical Insurance and only gives cover in the event of an **Accident** or sudden **Illness** that requires emergency treatment whilst on an **Insured Journey**. In the event of any medical treatment becoming necessary which results in a claim under this policy, the **Insured Person** will be required to allow **Us** or **Our** representatives unrestricted reasonable access to their medical records and information.

Choice of law

The appropriate law as set out below will apply unless **The Policyholder** and **Us** agree otherwise. This contract will be subject to the law of Cyprus.

The Policyholder and **Us** shall submit to the exclusive jurisdiction of the courts of Cyprus. Payment of the insurance premium is evidence of **The Policyholder's** acceptance of this choice of law and jurisdiction.

The Insurer

All sections are underwritten by ΓΕΝΙΚΕΣ ΑΣΦΑΛΕΙΕΣ ΚΥΠΡΟΥ ΛΙΜΙΤΕΔ (HE 6188), Head Office: 4 Evrou Street, Eurolife House, 2003 Strovolos, Nicosia-Cyprus, Tel.: +357 22128700, Fax: 22123706.

Ministry of Foreign Affairs Travel Advice

This policy does not cover **Insured Person's** travel to a country or specific area or event to which the Ministry of Foreign Affairs of the Republic of Cyprus ("**Ministry of Foreign Affairs**") has advised against all (or all but essential) travel.

It is the **Insured Person's** responsibility to check the latest advice from the Ministry of Foreign Affairs prior to commencing an **Insured Insured Journey**, which can be found at <https://www.gov.cy/en/information/travel-advice/>.

Schedules of Benefits/Compensation

Provided the appropriate premium has been paid, the **Insured Person** is covered in accordance with the policy shown herein, and subject to any endorsements or conditions issued by **Us**, up to the limits and sub-limits applicable to the **Level of Cover** selected by **The Policyholder**, as shown on the **Certificate of Insurance**.

All benefits are per **Insured Person**, per section, per **Insured Journey** unless otherwise stated.

This Insurance provides cover in respect of the following benefits that have an amount set against them. Where benefits are NOT insured, the words "Not Covered" are shown.

SECTION	PLATINUM CARD SERIES THIS COVER APPLIES TO THE FOLLOWING CARDS: PLATINUM VISA CREDIT, PLATINUM VISA DEBIT, PLATINUM MASTERCARD CREDIT, PLATINUM MASTERCARD DEBIT, ELITE, PRIVILEGE, AEGEAN MASTERCARD	SUM INSURED
1	<p><i>CANCELLATION and CURTAILMENT</i></p> <p>(of a Insured Journey by the Insured Person due to serious illness, Bodily Injury or Death or circumstances beyond the control of the Insured Person):</p> <p>Up to the invoiced cost, or up to a maximum limit of €5,000 (whichever is the lesser).</p> <p style="text-align: right;">Excess for all persons aged between 70 and 80 years of age:</p>	<p>Up to €5,000</p> <p style="text-align: right;">★ Excess: €100</p> <p style="text-align: right;">★ Excess: €500</p>
<i>NOTE</i>	No cover is offered to an Insured Person who has attained the age of 80.	
2	<p>PERSONAL ACCIDENT</p> <p>Death by Accidental Bodily Injury:</p> <p>Loss of one or more Limbs or Loss of Sight in one or both eyes:</p> <p>Permanent Total Disablement (any occupation) for an Insured Person aged up to 65 years of age:</p> <p>For children aged under 16, the maximum payment for Death by Accidental Bodily Injury is:</p>	<p>€200,000</p> <p>€200,000</p> <p>€200,000</p> <p>€10,000</p>
NOTE	The maximum amount of all benefits under Section 2 for one or more injuries sustained by an Insured Person during the Insured Journey shall not exceed the largest amount stated in this Schedule. No cover is afforded to an Insured Person who has attained the age of 80.	
3(a)	<p>MEDICAL EXPENSES and OTHER EXPENSES (incurred on an Insured Journey abroad outside of the Country of Domicile of the Insured Person):</p> <p>Including Emergency Evacuation and Repatriation Expenses.</p> <p style="text-align: right;">Excess for an Insured Person aged between 70 and 80 years of age:</p>	<p>Up to €850,000</p> <p style="text-align: right;">★ Excess: €100</p> <p style="text-align: right;">★ Excess: €500</p>
3(b)	<p>DAILY HOSPITAL BENEFIT (for each complete 24 Hour period spent in a Hospital on a Insured Journey abroad and payable for up to 30 days):</p> <p>Emergency Dental Treatment: up to €375</p> <p style="text-align: right;">Up to a maximum amount of:</p>	<p>€100 per complete day</p> <p>€3,000</p>
<i>NOTE</i>	No cover is offered under 3(a) and 3(b) for an Insured Person who has attained the age of 80.	
4(a)	<p>LOSS or DAMAGE to BAGGAGE and PERSONAL EFFECTS per PERSON</p> <p>Jewellery and Valuables Limit: €1,000</p> <p>Proof of Value or Original Receipt Limit: €250</p>	<p>Up to €2,000</p> <p style="text-align: right;">★ Excess: €100</p> <p style="text-align: right;">★ Excess: €100</p>
IMPORTANT	Cellular or Mobile Telephones must be kept with the Insured Person at all times during the Insured Journey and should never be left Unattended.	<p style="text-align: right;">Maximum Single Article Limit: €500</p> <p style="text-align: right;">Cellular or Mobile Telephone Limit: €450</p>
4(b)	<p>TEMPORARY DEPRIVATION of BAGGAGE per PERSON (due to delay, or Common Carrier misdirection in delivery).</p> <p>Reimbursement of reasonable receipted expenses incurred, following delayed delivery of luggage whilst in the care, custody and control of the airline, shipping line or other Common Carrier or their baggage-handling agents, on an:</p>	
4(b)1:	OUTWARD Insured Journey (after more than a 6 Hour Baggage Delay):	Up to €1,000 (maximum limit)
4(b)2:	OUTWARD Insured Journey ONLY in purchasing or hiring winter sports equipment abroad (including skis, ski equipment and/or essential clothing) following a Baggage Delay of more than 24 Hours from the time of disembarkation.	Up to €500 (maximum limit)
4(b)3:	INWARD (Return) Insured Journey (after more than an 18 Hour Baggage Delay) to the Country of Domicile of the Insured Person: Reimbursement of up to €45 per Hour of Delay, ONLY for receipted essential items purchased at home.	Up to €450 (maximum limit)
IMPORTANT	The Insured Person MUST also claim against the airline, shipping line or other Common Carrier for Lost, Damaged or Delayed Baggage.	

PROVISION	The maximum payable for reasonable receipted emergency purchases of essential items is limited to €250.00 per Item, Pair or Set.	
NOTE	Claims reimbursed under this Section 4(b) will be deducted from subsequent claims made under Section 4(a).	
5	MONEY Theft of Cash Limit (Bank Notes, Currency Notes and Money): (subject to proof of ownership such as any printed form of Bank account withdrawal, ATM or currency exchange receipt).	Up to €1,800 Up to €900 ★ Excess: €125
NOTE	Reimbursement of up to €200 for the receipted replacement of lost passports or national Identity Cards.	
6(a)	TRAVEL DEPARTURE DELAY per PERSON (provided that the Insured Person eventually departs on the Insured Journey). A compensation benefit if departure is delayed for more than 6 Hours: €300 A compensation benefit if departure is delayed for more than 12 Hours: €450 A compensation benefit if departure is delayed for more than 18 Hours: €600 Maximum payment in all (on an Outward or Return Insured Journey) – up to €600 per Person.	
6(b)	ABANDONMENT per PERSON (after a 24 Hour delay): OUTWARD INSURED JOURNEY – Non-Refundable Charges imposed by the Common Carrier and/or Accommodation Provider. RETURN INSURED JOURNEY – Reimbursement of Additional Travel Expenses due to Rearrangement of the Inward Travel Itinerary.	Up to €5,000
6(c)	MISSED CONNECTION per PERSON Reimbursement of reasonable receipted additional ticket to travel expenses following a Missed Connection.	Up to €1,000
IMPORTANT	There is NO Denied Boarding Insurance cover. Such expenses <u>must</u> be reimbursed by the airline, shipping line or other Common Carrier. There is NO cover for Delays in arrival times for any reason. Claims cannot be made under Section 6 and under Section 1 for the same incident or event.	
PROVISION	On a RETURN Insured Journey (home) to the Country of Domicile of the Insured Person, claims following Delayed Departures of more than 24 Hours due to a geological or a hydrological Natural Disaster are limited to €100.00 per Insured Person.	
NOTE	Claims reimbursed under Section 6(a) or 6(c) will be deducted from subsequent claims made under Section 6(b).	
7	PERSONAL LIABILITY As a result of Accidental death, Bodily Injury to, or accidental loss of, or damage to material property of, a third party.	Up to €1,000,000
8	LEGAL EXPENSES (including the costs of consultation): Arising out of Death, Bodily Injury to, or illness of, the Insured Person, caused by a third party.	Up to €5,000
9	HI-JACK and KIDNAP (for each complete 24 Hour period that the Insured Person is illegally held or is in detention): Payable for up to 30 days and up to a maximum amount of:	€125 per complete day €3,750
10	DOCUMENT REPLACEMENT (for business samples and documents not belonging to the Insured Person): Reasonable costs in replacing lost or misplaced essential business documents (needed by an Insured Person on a Insured Journey abroad).	Up to €1,900 ★ Excess: €125
11	CATASTROPHE For the extra cost of providing similar accommodation if reserved or booked accommodation cannot be lived in because of a natural disaster.	Up to €1,750
12	MUGGING (or violent personal assault that results in a serious Bodily Injury) to an Insured Person aged up to 80 years of age. Medical treatment and/or in-patient Hospitalisation reimbursement:	Up to €600
13	LOST or STOLEN DOMESTIC KEYS Receipted costs in replacing lost or stolen house, car and other Domestic Keys whilst on a Insured Journey abroad.	Up to €175
★	EXCESS (or Excess) is the first part of each and every loss or claim for which the Insured Person is responsible for and which is not payable by the Insurers.	★

SECTION	BUSINESS CARD SERIES THIS COVER APPLIES TO THE FOLLOWING CARDS: VISA BUSINESS CREDIT, VISA BUSINESS DEBIT, MASTERCARD BUSINESS CREDIT, MASTERCARD BUSINESS DEBIT, AEGEAN MASTERCARD BUSINESS	SUM INSURED
1	CANCELLATION and CURTAILMENT (of a Insured Journey by the Insured Person due to serious illness, Bodily Injury or Death or circumstances beyond the control of the Insured Person): Up to the invoiced cost, or up to a maximum limit of €5,000 (whichever is the lesser). Excess for all persons aged between 70 and 80 years of age:	Up to €5,000 ★ Excess: €100 ★ Excess: €500
NOTE	No cover is offered to an Insured Person who has attained the age of 80.	
2	PERSONAL ACCIDENT	

	Death by Accidental Bodily Injury: Loss of one or more Limbs or Loss of Sight in one or both eyes: Permanent Total Disablement (any occupation) for an Insured Person aged up to 65 years of age: For children aged under 16, the maximum payment for Death by Accidental Bodily Injury is:	€200,000 €200,000 €200,000 €10,000
NOTE	The maximum amount of all benefits under Section 2 for one or more injuries sustained by an Insured Person during the Insured Journey shall not exceed the largest amount stated in this Schedule. No cover is afforded to an Insured Person who has attained the age of 80.	
3(a)	MEDICAL EXPENSES and OTHER EXPENSES (incurred on a Insured Journey abroad outside of the Country of Domicile of the Insured Person): Including Emergency Evacuation and Repatriation Expenses.	Up to €850,000 * Excess: €100
	Excess for an Insured Person aged between 70 and 80 years of age:	* Excess: €500
3(b)	DAILY HOSPITAL BENEFIT (for each complete 24 Hour period spent in a Hospital on a Insured Journey abroad and payable for up to 30 days): Emergency Dental Treatment: up to €375	€100 per complete day Up to a maximum amount of: €3,000
NOTE	No cover is offered under 3(a) and 3(b) for an Insured Person who has attained the age of 80.	
4(a)	LOSS or DAMAGE to BAGGAGE and PERSONAL EFFECTS per PERSON Jewellery and Valuables Limit: €1,000 Proof of Value or Original Receipt Limit: €250	Up to €2,000 * Excess: €100 * Excess: €100
	Maximum Single Article Limit: €500 Cellular or Mobile Telephone Limit: €450	
IMPORTANT	Cellular or Mobile Telephones must be kept with the Insured Person at all times during the Insured Journey and should never be left Unattended.	
4(b)	TEMPORARY DEPRIVATION of BAGGAGE per PERSON (due to delay, or Common Carrier misdirection in delivery). Reimbursement of reasonable receipted expenses incurred, following delayed delivery of luggage whilst in the care, custody and control of the airline, shipping line or other Common Carrier or their baggage-handling agents, on an:	
4(b)1:	OUTWARD Insured Journey (after more than a 6 Hour Baggage Delay): Reimbursement of up to €100 per Hour of Delay, ONLY for receipted essential items purchased abroad.	Up to €1,000 (maximum limit)
4(b)2:	INWARD (Return) Insured Journey (after more than an 18 Hour Baggage Delay) to the Country of Domicile of the Insured Person: Reimbursement of up to €45 per Hour of Delay, ONLY for receipted essential items purchased at home.	Up to €450 (maximum limit)
IMPORTANT	The Insured Person MUST also claim against the airline, shipping line or other Common Carrier for Lost, Damaged or Delayed Baggage.	
PROVISION	The maximum payable for reasonable receipted emergency purchases of essential items is limited to €250.00 per Item, Pair or Set.	
NOTE	Claims reimbursed under this Section 4(b) will be deducted from subsequent claims made under Section 4(a).	
5	MONEY Theft of Cash Limit (Bank Notes, Currency Notes and Money): (subject to proof of ownership such as any printed form of Bank account withdrawal, ATM or currency exchange receipt).	Up to €1,800 Up to €900 * Excess: €125
NOTE	Reimbursement of up to €200 for the receipted replacement of lost passports or national Identity Cards.	
6(a)	TRAVEL DEPARTURE DELAY per PERSON (provided that the Insured Person eventually departs on the Insured Journey). A compensation benefit if departure is delayed for more than 6 Hours: A compensation benefit if departure is delayed for more than 12 Hours: A compensation benefit if departure is delayed for more than 18 Hours: Maximum payment in all (on an Outward or Return Insured Journey) – up to €600 per Person.	€300 €450 €600
6(b)	ABANDONMENT per PERSON (after a 24 Hour delay): OUTWARD INSURED JOURNEY – Non-Refundable Charges imposed by the Common Carrier and/or Accommodation Provider. RETURN INSURED JOURNEY – Reimbursement of Additional Travel Expenses due to Rearrangement of the Inward Travel Itinerary.	Up to €5,000
6(c)	MISSED CONNECTION per PERSON Reimbursement of reasonable receipted additional ticket to travel expenses following a Missed Connection.	Up to €1,000
IMPORTANT	There is NO denied boarding Insurance cover. Such expenses <u>must</u> be reimbursed by the airline, shipping line or other Common Carrier. There is NO cover for delays in arrival times for any reason. Claims cannot be made under Section 6 and under Section 1 for the same incident or event.	
PROVISION	On a RETURN Insured Journey (home) to the Country of Domicile of the Insured Person, claims following Delayed Departures of more than 24 Hours due to a geological or a hydrological natural disaster are limited to €100.00 per Insured Person.	
NOTE	Claims reimbursed under Section 6(a) or 6(c) will be deducted from subsequent claims made under Section 6(b).	
7	PERSONAL LIABILITY As a result of accidental Death, Bodily Injury to, or accidental loss of, or damage to material property of, a third party.	Up to €1,000,000
8	LEGAL EXPENSES (including the costs of consultation): Arising out of death, Bodily Injury to, or illness of, the Insured Person, caused by a third party.	Up to €5,000
9	HI-JACK and KIDNAP (for each complete 24 Hour period that the Insured Person is illegally held or is in detention): Payable for up to 30 days and up to a maximum amount of:	€125 per complete day €3,750
10	DOCUMENT REPLACEMENT (for business samples and documents not belonging to the Insured Person): Reasonable costs in replacing lost or misplaced essential business documents (needed by an Insured Person on a Insured Journey abroad).	Up to €1,900 * Excess: €125
11	CATASTROPHE For the extra cost of providing similar accommodation if reserved or booked accommodation cannot be lived in because of a natural disaster.	Up to €1,750
12	MUGGING (or violent personal assault that results in a serious Bodily Injury) to an Insured Person aged up to 80 years of age.	

	Medical treatment and/or in-patient Hospitalisation reimbursement:	Up to €600
13	LOST or STOLEN DOMESTIC KEYS Receipted costs in replacing lost or stolen house, car and other domestic keys whilst on a Insured Journey abroad.	Up to €175
*	EXCESS (or Excess) is the first part of each and every loss or claim for which the Insured Person is responsible for and which is not payable by the Insurers.	*

SECTION	GOLD CARD SERIES THIS COVER APPLIES TO THE FOLLOWING CARDS: VISA GOLD CREDIT, VISA GOLDDEBIT, MASTERCARD GOLD CREDIT, MASTERCARD GOLD DEBIT, MASTERCARD GOLD ETEK	SUM INSURED
1	CANCELLATION and CURTAILMENT <i>(of a Insured Journey by the Insured Person due to serious illness, -Bodily Injury or Death or circumstances beyond the control of the Insured Person):</i> Up to the invoiced cost, or up to a maximum limit of €4,000 (whichever is the lesser). Excess for all persons aged between 70 and 80 years of age:	Up to €4,000 * Excess: €100 * Excess: €500
NOTE	No cover is offered to an Insured Person who has attained the age of 80.	
2	PERSONAL ACCIDENT Death by Accidental Bodily Injury: Loss of one or more Limbs or Loss of Sight in one or both eyes: Permanent Total Disablement (any occupation) for an Insured Person aged up to 65 years of age: For children aged under 16, the maximum payment for Death by Accidental Bodily Injury is:	€150,000 €150,000 €150,000 €10,000
NOTE	The maximum amount of all benefits under Section 2 for one or more injuries sustained by an Insured Person during the Insured Journey shall not exceed the largest amount stated in this Schedule. No cover is afforded to an Insured Person who has attained the age of 80.	
3(a)	MEDICAL EXPENSES and OTHER EXPENSES (incurred on a Insured Journey abroad outside of the Country of Domicile of the Insured Person): Including Emergency Evacuation and Repatriation Expenses. Excess for an Insured Person aged between 70 and 80 years of age:	Up to €200,000 * Excess: €100 * Excess: €500
3(b)	DAILY HOSPITAL BENEFIT (for each complete 24 Hour period spent in a Hospital on a Insured Journey abroad and payable for up to 30 days): Emergency Dental Treatment: up to €375 Up to a maximum amount of:	€50 per complete day €1,500
NOTE	No cover is offered under 3(a) and 3(b) for an Insured Person who has attained the age of 80.	
4(a)	LOSS or DAMAGE to BAGGAGE and PERSONAL EFFECTS per PERSON Jewellery and Valuables Limit: €750 Proof of Value or Original Receipt Limit: €250 Maximum Single Article Limit: €450 Cellular or Mobile Telephone Limit: €450	Up to €1,750 * Excess: €100 * Excess: €100
IMPORTANT	Cellular or Mobile Telephones must be kept with the Insured Person at all times during the Insured Journey and should never be left Unattended.	
4(b)	TEMPORARY DEPRIVATION of BAGGAGE per PERSON (due to delay, or Common Carrier misdirection in delivery). Reimbursement of reasonable receipted expenses incurred, following delayed delivery of luggage whilst in the care, custody and control of the airline, shipping line or other Common Carrier or their baggage-handling agents, on an:	
4(b)1:	OUTWARD Insured Journey (after more than a 6 Hour Baggage Delay): Reimbursement of up to €70 per Hour of Delay, ONLY for receipted essential items purchased abroad.	Up to €700 (maximum limit)
4(b)2:	On a RETURN Insured Journey (home) to the Country of Domicile of the Insured Person, there is NO Baggage Delay Insurance cover.	
IMPORTANT	The Insured Person MUST also claim against the airline, shipping line or other Common Carrier for Lost, Damaged or Delayed Baggage.	
PROVISION	The maximum payable for reasonable receipted emergency purchases of essential items is limited to €250.00 per Item, Pair or Set.	
NOTE	Claims reimbursed under this Section 4(b) will be deducted from subsequent claims made under Section 4(a).	
5	MONEY Theft of Cash Limit (Bank Notes, Currency Notes and Money): (subject to proof of ownership such as any printed form of Bank account withdrawal, ATM or currency exchange receipt). Reimbursement of up to €200 for the receipted replacement of lost passports or national Identity Cards.	Up to €900 Up to €500 * Excess: €175
NOTE	Reimbursement of up to €200 for the receipted replacement of lost passports or national Identity Cards.	
6(a)	TRAVEL DEPARTURE DELAY per PERSON (provided that the Insured Person eventually departs on the Insured Journey). A compensation benefit if departure is delayed for more than 6 Hours: A compensation benefit if departure is delayed for more than 12 Hours: A compensation benefit if departure is delayed for more than 18 Hours:	€175 €262.50 €350

	Maximum payment in all (on an Outward or Return Insured Journey) – up to €525 per Person.	
6(b)	ABANDONMENT per PERSON (after a 24 Hour delay): OUTWARD INSURED JOURNEY – Non-Refundable Charges imposed by the Common Carrier and/or Accommodation Provider. RETURN INSURED JOURNEY – Reimbursement of Additional Travel Expenses due to Rearrangement of the Inward Travel Itinerary.	Up to €4,000
6(c)	MISSED CONNECTION per PERSON Reimbursement of reasonable receipts additional ticket to travel expenses following a Missed Connection.	Up to €700
IMPORTANT	There is NO Denied Boarding Insurance cover. Such expenses <u>must</u> be reimbursed by the airline, shipping line or other Common Carrier. There is NO cover for Delays in arrival times for any reason. Claims cannot be made under Section 6 and under Section 1 for the same incident or event.	
PROVISION	On a RETURN Insured Journey (home) to the Country of Domicile of the Insured Person, claims following Delayed Departures of more than 24 Hours due to a geological or a hydrological Natural Disaster are limited to €100.00 per Insured Person.	
NOTE	Claims reimbursed under Section 6(a) or 6(c) will be deducted from subsequent claims made under Section 6(b).	
7	PERSONAL LIABILITY As a result of accidental Death, Bodily Injury to, or accidental loss of, or damage to material property of, a third party.	Up to €750,000
8	LEGAL EXPENSES (including the costs of consultation): Arising out of Death, Bodily Injury to, or illness of, the Insured Person, caused by a third party.	Up to €1,750
9	HI-JACK and KIDNAP (for each complete 24 Hour period that the Insured Person is illegally held or is in detention): Payable for up to 30 days and up to a maximum amount of:	€100 per complete day €3,000
10	DOCUMENT REPLACEMENT (for business samples and documents not belonging to the Insured Person): Reasonable costs in replacing lost or misplaced essential business documents (needed by an Insured Person on a Insured Journey abroad).	Up to €750 * Excess: €125
11	CATASTROPHE For the extra cost of providing similar accommodation if reserved or booked accommodation cannot be lived in because of a natural disaster.	Up to €900
12	MUGGING (or violent personal assault that results in a serious Bodily Injury) to an Insured Person aged up to 80 years of age. Medical treatment and/or in-patient Hospitalisation reimbursement.	Up to €450
13	LOST or STOLEN DOMESTIC KEYS Receipted costs in replacing lost or stolen house, car and other Domestic Keys whilst on a Insured Journey abroad.	Up to €175
*	EXCESS (or Excess) is the first part of each and every loss or claim for which the Insured Person is responsible for and which is not payable by the Insurers.	*

SECTION	CLASSIC CREDIT CARD SERIES THIS COVER APPLIES TO THE FOLLOWING CARDS: VISA CLASSIC CREDIT, MASTERCARD CLASSIC CREDIT, BLUE MASTERCARD CREDIT	SUM INSURED
1	CANCELLATION and CURTAILMENT (of a Insured Journey by the Insured Person due to serious illness, Bodily Injury or Death or circumstances beyond the control of the Insured Person): Up to the invoiced cost, or up to a maximum limit of €2,000 (whichever is the lesser). Excess for all persons aged between 70 and 80 years of age:	Up to €2,000 * Excess: €100 * Excess: €500
NOTE	No cover is offered to an Insured Person who has attained the age of 80.	
2	PERSONAL ACCIDENT Death by Accidental Bodily Injury: Loss of one or more Limbs or Loss of Sight in one or both eyes: Permanent Total Disablement (any occupation) for an Insured Person aged up to 65 years of age: For children aged under 16, the maximum payment for Death by Accidental Bodily Injury is:	€50,000 €50,000 €50,000 €10,000
NOTE	The maximum amount of all benefits under Section 2 for one or more injuries sustained by an Insured Person during the Insured Journey shall not exceed the largest amount stated in this Schedule. No cover is afforded to an Insured Person who has attained the age of 80.	
3(a)	MEDICAL EXPENSES and OTHER EXPENSES (incurred on a Insured Journey abroad outside of the Country of Domicile of the Insured Person): Including Emergency Evacuation and Repatriation Expenses. Excess for an Insured Person aged between 70 and 80 years of age:	Up to €100,000 * Excess: €100 * Excess: €500
3(b)	DAILY HOSPITAL BENEFIT (for each complete 24 Hour period spent in a Hospital on a Insured Journey abroad and payable for up to 30 days):	€50 per complete day

	Emergency Dental Treatment: up to €375	Up to a maximum amount of:	€1,500
NOTE	No cover is offered under 3(a) and 3(b) for an Insured Person who has attained the age of 80.		
4(a)	LOSS or DAMAGE to BAGGAGE and PERSONAL EFFECTS per PERSON		Up to €950
	Jewellery and Valuables Limit: €450	Maximum Single Article Limit: €250	* Excess: €100
	Proof of Value or Original Receipt Limit: €250	Cellular or Mobile Telephones:	NOT COVERED
4(b)	TEMPORARY DEPRIVATION of BAGGAGE per PERSON (due to delay, or Common Carrier misdirection in delivery). Reimbursement of reasonable receipts expenses incurred, following delayed delivery of luggage whilst in the care, custody and control of the airline, shipping line or other Common Carrier or their baggage-handling agents, on an:		
4(b)1:	OUTWARD Insured Journey (after more than a 6 Hour Baggage Delay): Reimbursement of up to €45 per Hour of Delay, ONLY for receipts essential items purchased abroad.		Up to €450 (maximum limit)
4(b)2:	On a RETURN Insured Journey (home) to the Country of Domicile of the Insured Person, there is NO Baggage Delay Insurance cover.		
IMPORTANT	The Insured Person MUST also claim against the airline, shipping line or other Common Carrier for Lost, Damaged or Delayed Baggage.		
PROVISION	The maximum payable for reasonable receipts emergency purchases of essential items is limited to €250.00 per Item, Pair or Set.		
NOTE	Claims reimbursed under this Section 4(b) will be deducted from subsequent claims made under Section 4(a).		
5	MONEY Theft of Cash Limit (Bank Notes, Currency Notes and Money): (subject to proof of ownership such as any printed form of Bank account withdrawal, ATM or currency exchange receipt).		Up to €450 Up to €250 * Excess: €175
NOTE	Reimbursement of up to €200 for the receipts replacement of lost passports or national Identity Cards.		
6(a)	TRAVEL DEPARTURE DELAY per PERSON (provided that the Insured Person eventually departs on the Insured Journey). A compensation benefit if departure is delayed for more than 6 Hours: A compensation benefit if departure is delayed for more than 12 Hours: A compensation benefit if departure is delayed for more than 18 Hours: Maximum payment in all (on an Outward or Return Insured Journey) – up to €340 per Person.		€100 €150 €300
6(b)	ABANDONMENT per PERSON (after a 24 Hour delay): OUTWARD INSURED JOURNEY – Non-Refundable Charges imposed by the Common Carrier and/or Accommodation Provider. RETURN INSURED JOURNEY – Reimbursement of Additional Travel Expenses due to Rearrangement of the Inward Travel Itinerary.		Up to €2,000
6(c)	MISSED CONNECTION per PERSON Reimbursement of reasonable receipts additional ticket to travel expenses following a Missed Connection.		Up to €500
IMPORTANT	There is NO Denied Boarding Insurance cover. Such expenses must be reimbursed by the airline, shipping line or other Common Carrier. There is NO cover for Delays in arrival times for any reason. Claims cannot be made under Section 6 and under Section 1 for the same incident or event.		
PROVISION	On a RETURN Insured Journey (home) to the Country of Domicile of the Insured Person, claims following Delayed Departures of more than 24 Hours due to a geological or a hydrological Natural Disaster are limited to €100.00 per Insured Person.		
NOTE	Claims reimbursed under Section 6(a) or 6(c) will be deducted from subsequent claims made under Section 6(b).		
7	PERSONAL LIABILITY As a result of accidental Death, Bodily Injury to, or accidental loss of, or damage to material property of, a third party.		Up to €500,000
8	LEGAL EXPENSES (including the costs of consultation): Arising out of Death, Bodily Injury to, or illness of, the Insured Person, caused by a third party.		Up to €1,000
9	HI-JACK and KIDNAP (for each complete 24 Hour period that the Insured Person is illegally held or is in detention): Payable for up to 30 days and up to a maximum amount of:		€100 per complete day €3,000
10	DOCUMENT REPLACEMENT (for business samples and documents not belonging to the Insured Person): Reasonable costs in replacing lost or misplaced essential business documents (needed by an Insured Person on a Insured Journey abroad).		Up to €500 * Excess: €125
11	CATASTROPHE For the extra cost of providing similar accommodation if reserved or booked accommodation cannot be lived in because of a natural disaster.		Up to €900
12	MUGGING (or violent personal assault that results in a serious Bodily Injury) to an Insured Person aged up to 80 years of age. Medical treatment and/or in-patient Hospitalisation reimbursement:		Up to €450
13	LOST or STOLEN DOMESTIC KEYS Receipts costs in replacing lost or stolen house, car and other Domestic Keys whilst on a Insured Journey abroad.		Up to €175
*	EXCESS (or Excess) is the first part of each and every loss or claim for which the Insured Person is responsible for and which is not payable by the Insurers.		*

SECTION	STUDENT INSURANCE (STUDENT - as defined in the General Definitions on page 17) Student age limits are between 16 (sixteen) and 40 (forty) years of age only. THIS COVER APPLIES TO THE FOLLOWING CARDS: ALL CARDS	SUM INSURED
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1	CANCELLATION and CURTAILMENT (of a Insured Journey by a Student following the Death of an Immediate Family member): Up to the invoiced cost, or up to a maximum limit of €500 (whichever is the lesser).	Up to €500 ★ Excess: €75
NOTE	No cover is afforded to a Student below 16 years of age or who has attained the age of 40 years.	
2	PERSONAL ACCIDENT Death by Accidental Bodily Injury: Loss of one or more Limbs or one or both Eyes: Permanent Total Disablement: For a Student aged under 18, the maximum payment for Death by Accidental Bodily Injury is:	€50,000 €50,000 €50,000 €10,000
NOTE	No cover is afforded to a Student who is below 16 years of age or who has attained the age of 40 years.	
	The maximum amount of all benefits under Section 2 for one or more injuries sustained by a Student during the Insured Journey shall not exceed the largest amount stated in this Schedule.	
3(a)	MEDICAL EXPENSES and OTHER EXPENSES (incurred on a Insured Journey abroad outside of the Country of Domicile of the Student): Including Emergency Evacuation and Repatriation Expenses.	Up to €17,500 ★ Excess: €500
NOTE	No cover is afforded to a Student who is below 16 years of age or who has attained the age of 40 years.	
3(b)	DAILY HOSPITAL BENEFIT	NOT COVERED
4(a)	LOSS or DAMAGE to BAGGAGE and PERSONAL EFFECTS per STUDENT Cover is restricted only to "checked-in" Baggage and personal effects whilst in the care, custody and control of the airline or other Common Carrier (or their baggage-handling agents).	Up to €500 ★ Excess: €100
	Proof of Value or Original Receipt Limit: €250 Maximum Single Article Limit: €250 Cellular or Mobile Telephones:	NOT COVERED
4(b)	TEMPORARY DEPRIVATION of BAGGAGE per STUDENT (due to delay, or Common Carrier misdirection in delivery). Reimbursement of reasonable receipted expenses incurred, following delayed delivery of luggage whilst in the care, custody and control of the airline, shipping line or other Common Carrier or their baggage-handling agents, on an:	
4(b)1:	OUTWARD Insured Journey (after more than a 6 Hour Baggage Delay): Reimbursement of up to €40 per Hour of Delay, ONLY for receipted essential items purchased abroad.	Up to €400 (maximum limit)
4(b)2:	On a RETURN Insured Journey (home) to the Country of Domicile of the Student, there is NO Baggage Delay Insurance cover.	
IMPORTANT	The Student MUST also claim against the airline, shipping line or other Common Carrier for Lost, Damaged or Delayed Baggage.	
PROVISION	The maximum payable for reasonable receipted emergency purchases of essential items is limited to €250.00 per Item, Pair or Set.	
NOTE	Claims reimbursed under this Section 4(b) will be deducted from subsequent claims made under Section 4(a).	
5	MONEY	NOT COVERED
6(a)	TRAVEL DEPARTURE DELAY per STUDENT (provided that the Student eventually departs on the Insured Journey). A compensation benefit if departure is delayed for more than 12 Hours: A compensation benefit if departure is delayed for more than 18 Hours: A compensation benefit if departure is delayed for more than 24 Hours: Maximum payment in all (on an Outward or Return Insured Journey) – up to €200 per Student.	€100 €150 €300
6(b)	ABANDONMENT	NOT COVERED
6(c)	MISSED CONNECTION per STUDENT Reimbursement of reasonable receipted additional ticket to travel expenses following a missed connection.	Up to €500
IMPORTANT	There is NO Denied Boarding Insurance cover. Such expenses <u>must</u> be reimbursed by the airline, shipping line or other Common Carrier. There is NO cover for Delays in arrival times for any reason. Claims cannot be made under Section 6 and under Section 1 for the same incident or event.	
PROVISION	On a RETURN Insured Journey (home) to the Country of Domicile of the Student, claims following Delayed Departures of more than 24 Hours due to a geological or a hydrological Natural Disaster are limited to €100.00.	
7	PERSONAL LIABILITY As a result of accidental Death, Bodily Injury to, or accidental loss of, or damage to material property of, a third party.	Up to €500,000
8	LEGAL EXPENSES (including the costs of consultation): Arising out of Death, Bodily Injury to, or illness of, a Student, caused by a third party.	Up to €750
9	HI-JACK and KIDNAP (for each complete 24 Hour period that a Student is illegally held or is in detention): Payable for up to 30 days and up to a maximum amount of:	€40 per complete day €1,200
10	DOCUMENT REPLACEMENT Replacement of books or other study or work materials loaned or belonging to a Student.	NOT COVERED
11	CATASTROPHE For the extra cost of providing similar accommodation if reserved or booked accommodation cannot be lived in because of a natural disaster.	NOT COVERED
12	MUGGING (or violent personal assault that results in a serious bodily Injury).	NOT COVERED
13	LOST or STOLEN DOMESTIC KEYS	NOT COVERED
★	EXCESS (or Excess) is the first part of each and every loss or claim for which the Cardholder (or Insured Person) is responsible for and which is not payable by the Insurers.	★

Warranty

All benefits herein for a Student will be invalidated if any trip abroad is less than 45 (forty-five) days and exceeds more than 365 (three hundred and sixty five) days. There is no cover should a Student take a vacation or undertake any travel away from their place of studies, other than to their normal place of permanent and/or parental residence in Cyprus.

Cancellation rights

We hope both the **Policyholder** is happy with the cover this policy provides. However, if after reading this policy, the insurance does not meet with **The Policyholder's** requirements, **The Policyholder** must notify the insurance intermediary who arranged this insurance in writing within fourteen (14) days from receipt of the policy documents.

The Policyholder may return the policy to **Us** within 14 days for cancellation and a full refund of the premium will be made providing no claim exists or has been made, no incident likely to result in a claim has occurred and no **Insured Persons** have already undertaken an **Insured Journey**.

The policy will be retroactively cancelled and the **Insured Persons** cannot make a claim under it and neither **The Policyholder** or **Insured Persons** nor **Us** will have any further rights, liabilities or obligations under this insurance policy.

Please note: If **The Policyholder** wishes to cancel this policy after 14 days from the date of receipt of the policy documents, or a claim exists or has been made, or an incident likely to result in a claim has occurred or an **Insured Person** has already undertaken an **Insured Journey**, **We** cannot refund the premium to **The Policyholder**.

If **The Policyholder** has any questions regarding the terms of this policy, they should contact the insurance intermediary directly for clarification, otherwise it shall be assumed that all terms are understood and accepted.

How to Make a Claim

For Emergency Assistance Claims

The **Insured Persons** should use the services of the following named assistance company for all assistance matters, medical emergency matters, in-patient hospital treatment and **Emergency Evacuation/Repatriation**. The assistance company will be solely responsible for all decisions on the most suitable, practical and reasonable solution to any problem. All such assistance is subject to the prior approval of said assistance company:



Tel: +30 2313 084 513

Tel: +357 24022713

Tel: +357 24030354

Email: starrclaims@healthwatch.gr

Healthwatch S.A. may be contacted at any time at the above telephone numbers.

In the event of an **Insured Person** requiring emergency in-patient hospital treatment and/or **Emergency Evacuation/Repatriation**, Healthwatch S.A. should be contacted as soon as reasonably possible, and authorisation obtained prior to such treatment and/or **Emergency Evacuation/Repatriation** taking place at the above telephone numbers.

Healthwatch S.A. must be informed that this Contract covers the person concerned and the following details must be provided:

- The **Insured Person's** name
- The **Insured Person's** location
- The **Insured Person's** details (including passport/visa etc).
- The Type of card, Name of the Bank, 4 last digits of the card
- Card holder's name (if different to **Insured Person's** name)
- The name and phone number of the doctor and hospital treating the **Insured Person** (if applicable)

- Any additional people (outside of normal protocol) that should be updated throughout the case
- Nature of the incident
- The desired end state (what you want Healthwatch S.A. to do)
- Any other pertinent information on the incident that may effect Healthwatch S.A. response (security situation etc)

Failure to contact Healthwatch S.A. prior to such treatment and/or **Emergency Evacuation/Repatriation** taking place may prejudice the claim and could mean that some or all of the costs involved may not be paid. The **Insured Person** should not attempt to find their own solution without having contacted Healthwatch S.A.

In the event that liability cannot be established at the outset of an emergency it is agreed that the first named **Insured Person** will guarantee payment until such **time that liability can be accepted by Us**.

For Non-Emergency Claims

Please contact HealthWatch S.A. and request a claim form within 25 (twenty-five) days after the occurrence or commencement of any non-emergency loss or event covered by this insurance.

Tel: +30 2313 084 513

Tel: +357 24022713

Tel: +357 24030354

Email: starrclaims@healthwatch.gr

Office hours for notifying non-emergency claims are Monday – Friday, 0900 – 1700 hours (GMT +2).

When completed, actual claim forms should be returned to HealthWatch to the above email address within 90 (ninety) days of the incident giving rise to a claim together with all relevant documentation and the bank statement verifying payment for the Insured Journey. HealthWatch will promptly consider the claim and contact the **Insured Person** with their response within 5 days from receipt of the claim form. **Insured Person(s)** are advised to retain copies of all documents for their own reference. A claim received without all relevant documentation will not be accepted.

Failure to complete, or to sign claim forms correctly, or to supply the required documentation may prejudice or delay the **Insured Person(s)** right to indemnity or benefit under this Insurance. The documentation submitted is at the claimant's expense (or at the expense of their legal representative) and the **Insured Person(s)** attention is also drawn to the Excess applicable to certain Sections of this Insurance.

Insured Persons should not send in any documentation until they have a completed claim form to go with it. The claim form lists the additional documentation necessary to support a claim. Always make sure that any loss or theft of Valuables or any items are reported to the police within 24 hours of discovering the loss or as soon as possible after that, and a written report is obtained in the country where the incident occurred. If the **Insured Person's Baggage** is damaged or lost in transit whilst "checked-in" they must report it to the handling agents or airline as soon as possible on collection and obtain a Property Irregularity Report. These reports (if applicable to the claim), together with all available receipts and any other requested documentation, must be submitted with the claim form.

Reciprocal Health Agreements

Some countries provide reciprocal health agreements for visiting citizens of certain nationalities ("Reciprocal Health Agreements"). These agreements can sometimes give the **Insured Person** access to free or reduced cost medical treatment and services within participating state or government hospitals or clinics.

Insured Persons should check with the relevant embassy before travelling to see if there is a reciprocal health agreement that exists between their country of citizenship and destination. If it does then it is recommended that the **Insured Person** enrolls in the reciprocal health programme before departure.

In the event of liability being accepted for a medical expense which has been reduced by the use of a Reciprocal Health Agreement, **We** will not apply the deduction of an **Excess** under Section 3 –Medical Expenses and Other Expenses

Operative Time

Under Section 1 in respect of Cancellation only, this insurance is effective from the date of booking or reserving a planned **Insured Journey** by means of the **Card** and terminates on commencement of the Insured Journey.

In respect of **all** other Sections, Insurance commences when the Insured Person(s) leave their place of residence or business in Cyprus (whichever is the later) to start their Insured Journey, until the time of **return** to their place of residence or business in Cyprus (whichever is the earlier) on completion of the Insured Journey.

Have A Safe Trip

Before **Insured Person's** go overseas, check out the Ministry of Foreign Affairs website at <https://www.gov.cy/en/information/travel-advice/>.

This policy does not cover **Insured Person's** travel to a country or specific area or event to which the Ministry of Foreign Affairs have advised against all (or all but essential) travel.

It is the **Insured Person's** responsibility to check the latest advice from the Ministry of Foreign Affairs prior to commencing an **Insured Journey**, which can be found at <https://www.gov.cy/en/information/travel-advice/>.

European Union (EU) Air Passengers Rights

Under Regulation (EC) No 261/2004 establishing common rules on compensation and assistance to passengers in the event of denied boarding and of cancellation or long delay of flights, an **Insured Person** may be entitled to, inter alia, claim compensation from their carrier if any of the following happen:

1. Denied Boarding

If they check in on time but are denied boarding because there are not enough seats available or if their flight is cancelled, the airline operating the flight must offer financial compensation.

2. Long Delays

If they are delayed two hours or more, the airline must offer them meals and refreshments, hotel accommodation and communication facilities. If they are delayed for more than five hours, the airline must also offer to refund their ticket.

3. Luggage

If an **Insured Person's** checked-in luggage is damaged or lost by an EU airline, they must claim compensation from the airline within 7 days. If their checked-in luggage is delayed, they must claim compensation from the airline within 21 days of its return.

4. Death or Bodily Injury

If an **Insured Person** is injured in an **Accident** on a flight by an EU airline, they may claim damages from the airline. If an **Insured Person** dies as a result of these injuries their **Immediate Family** may claim damages from the airline.

5. Flight Cancellation

Full details of air passengers' rights are available online at the following link:

https://europa.eu/youreurope/citizens/travel/passenger-rights/air/index_en.htm

General definitions

Listed below are certain words that appear throughout the policy in bold. In all cases they have the meanings shown below.

Accident / Accidental:

Shall mean a sudden, unexpected, unusual, specific, external event which occurs at an identifiable time and location during the **Period of Insurance**.

Baggage:

shall mean luggage, belongings and personal possessions which the **Insured Person** takes with them on their **Insured Journey**, or buys whilst away on their **Insured Journey** (excluding winter sports equipment and clothing unless stated as

otherwise in the Schedules of Benefits/Compensation, golf equipment or any other sports equipment which are usually worn, carried or held in the course of participating in a recognised sport).

Bodily Injury:

1. Injury caused by **Accidental** and/or violent means; or
2. Injury resulting from exposure to the elements.

occurring within 12 months from the date of the **Accident** by which such injury is caused.

Card(s):

shall mean a valid and/or eligible **card** issued by **The Policyholder**, namely any personal or a company business (corporate):

- **Platinum Card Series:**
 - Platinum Visa Credit
 - Platinum Visa Debit
 - Platinum Mastercard Credit
 - Platinum Mastercard Debit
 - Elite
 - Privilege
 - Aegean Mastercard
- **Business Card Series:**
 - Visa Business Credit
 - Visa Business Debit
 - Mastercard Business Credit
 - Mastercard Business Debit
 - Aegean Mastercard Business
- **Gold Card Series:**
 - Visa Gold Credit
 - Visa Gold Debit
 - Mastercard Gold Credit
 - Mastercard Gold Debit
 - Mastercard Gold Credit Etek
 - Mastercard Gold Debit Etek
- **Classic Card Series**
 - Visa Classic Credit
 - Mastercard Classic credit
 - Blue Mastercard Credit

Close Business Colleague:

shall mean any business partner or associate employed by the **Insured Person** or by the same company as the **Insured Person**, client, guest or other person as nominated by the **Insured Person**, travelling with the **Insured Person** on a business **Insured Journey** from Cyprus up to a maximum of **3** (three) people). The **Insured Person** must have pre-paid in full, before the **Insured Journey** commences, the required cost of assigned (or reserved) ticketing to travel abroad by means of any of the defined Business **Cards**.

Common Carrier:

shall mean any public transport by road, rail, sea or air with a licensed carrier operating a regular and/or charter passenger service.

Country of Domicile:

The country in which the **Insured Person** resides in and/or the country to which the **Insured Person** shall return to when repatriated.

Curtailment:

shall also include the abandonment of the scheduled **Insured Journey** on written medical advice either by return to Cyprus, or to attend a local Hospital abroad as an in-patient. In respect of a **Student**, Curtailment is extended to include a return to Cyprus following the death of an **Immediate Family** member of the **Student**.

Emergency Evacuation and Repatriation:

The costs incurred for the emergency evacuation of an **Insured Person** to the nearest place of safety or their **Country of Domicile** while on an Insured Journey.

Excess:

The first part of each and every claim that the **Insured Person** is responsible for paying per incident claimed for, under each section.

Excluded Territory:

Shall include Belarus, Cuba, Iran, North Korea, Russia, Syria & Ukraine. **Excluded Territories** shall also include any country or specific area or event that the Ministry of Foreign Affairs have advised against all, or all but essential, travel.

Full Time Employment:

Means any employee or an executive director with a full-time employment contract.

HealthWatch:

The claims administrator who should be contacted in the event of a claim (See section headed "How To Make A Claim" above)

Hospital:

means an institution which has accommodation for residential patients and facilities for diagnosing, carrying out surgery and treatment. It does not include a long-term nursing home, a geriatric or convalescence home or an extended care facility.

Illness:

Means unexpected Illness or disease (not resulting from **Bodily Injury**) contracted anywhere in the world that declares itself during the **Period of Insurance**.

Immediate Family:

shall mean the following relatives of the **Insured Person** provided that such relatives have the same **Country of Domicile** as the **Insured Person**):

- spouse (wife or husband), which includes a common-law/civil partner.
- dependent children 18 (eighteen) years of age and under (including legally adopted children or step-children), or 23 (twenty-three) years of age and under provided such children are unmarried and in full-time education (cover excludes children under the age of 16 (sixteen) years if travelling unaccompanied);
- parents(s); step-parents(s); parent(s)-in-law;
- grandparent(s);
- grandchildren;
- brother(s); sister(s); son(s); daughter(s); a son-in-law; a daughter-in-law

Insured Journey:

A trip or journey which begins during the **Period of Insurance**, and is outside the **Insured Person's** normal **Country of Domicile**, for a period of up to 90 (ninety) days, or up to 14 (fourteen) days for **Immediate Family** travelling without the **Insured Person**, which has been pre-paid, either in full or more than 50% (fifty percent) if prepaid in part, before its commencement by means of the **Card**.

If the trip or journey exceeds, or was intended to exceed, a period of 90 (ninety) days, then the entire period of travel will not be covered.

If a trip or journey by **Immediate Family** travelling without the **Insured Person** exceeds, or was intended to exceed, a period of 14 (fourteen) days, then the entire period of (unaccompanied) travel will not be covered.

A one-way trip or journey with no admitted Return (Inward) date will not be covered.

Under this Insurance, the precise duration of the **Insured Journey** is determined by the scheduled departure date(s) and times(s) and scheduled return date(s) and time(s) on the pre-paid assigned (or reserved) return tickets for travel, that have been accepted by a cardholder.

The complete round **Insured Journey** must be pre-paid, either in full or more than 50% (fifty percent) if prepaid in part, before the Insured Journey commences by means of the **Card**.

Insured Person:

means any person (also referred to as the cardholder) holding a personal or a Company Business (corporate) **Card** issued by **The Policyholder**.

Cover is provided for the **Insured Person** and **Immediate Family** travelling with the **Insured Person**, whose complete round **Insured Journey** must be pre-paid, either in full or more than 50% (fifty per cent) if pre-paid in part, before the **Insured Journey** commences by means of the **Card**. The **Insured Journey** shall not exceed more than 90 (ninety) days.

Cover is extended to include up to a maximum of 3 (three) **Close Business Colleagues** travelling with the **Insured Person** on a business **Insured Journey** from Cyprus. Payment for the required cost of assigned (or reserved) ticketing for this travel abroad must be pre-paid in full, before the **Insured Journey** commences, by means of the **Card**.

Cover is also extended to include travel by the **Insured Person's Immediate Family** travelling **without** the **Insured Person** on an **Insured Journey** that shall not exceed more than 14 (fourteen) days per year in all. Payment for the required cost of assigned (or reserved) ticketing for this travel abroad must be pre-paid in full, before the **Insured Journey** commences, by means of the **Card**. Cover excludes children under the age of 16 (sixteen) years if travelling unaccompanied.

Level of Cover:

The applicable sections of cover and the respective limits and **Excesses** identified within the Schedule of Benefits/Compensation as indicated in the policy. The levels of cover available are "Platinum", "Business", "Gold", "Classic" and "Student".

Loss of Limb:

means permanent loss by physical separation of a hand at or above the wrist or of a foot at or above the ankle or the permanent, total and irrecoverable loss of use of the **Insured Person's** hand, arm, foot or leg.

Loss of Sight:

means permanent and total loss of sight which We will consider as having happened:

- in both eyes (after correction) if, on the authority of a fully-qualified ophthalmic specialist, the degree of sight the **Insured Person** has left in both eyes is 3/60 or less on the Snellen scale (meaning the **Insured Person** can see at not more than three feet what the **Insured Person** should be able to see at sixty feet); or
- in one eye (after correction) if, on the authority of a fully-qualified ophthalmic specialist, the degree of sight the **Insured Person** has left is 3/60 or less on the Snellen scale (meaning the **Insured Person** can see at not more than three feet what the **Insured Person** should be able to see at sixty feet).

Period of Insurance

means **Insured Journeys** commencing during the 12 (twelve) calendar months **from 1st December 2024 to 1st December 2025** both days at 00:01 Hours Cyprus Time. The Insurance will only operate in respect of departures during the un-expired period of the eligible **Card**. In the event of the eligible **Card** being either cancelled or expiring without being renewed prior to the expiry date specified above, all cover hereunder shall cease.

Permanent Total Disablement

means disablement wholly preventing the **Insured Person** from engaging in or giving attention to their usual occupation, caused other than by **Loss of Limb** or **Sight**, which disablement lasts without interruption for more than 12 months from the date of **Accident**, and in all probability shall continue for the remainder of the **Insured Person's** life.

Pre-Existing Condition

means any illness, disease, illness, defect, physical infirmity or condition, including sequelae (morbid symptom or condition) or complications thereof that in the opinion of a **Qualified Medical Practitioner** appointed by **HealthWatch** can reasonably be related thereto, for which the **Insured Person** is receiving or has received medical treatment, advice or investigation prior to the **Insured Journey**.

We shall not be liable for claims arising from any **Pre-Existing Condition** for which the **Insured Person**, or a member of the **Insured Person(s) Immediate Family**, , or any **Close Business Colleague**, whilst on an **Insured Journey**:

1. has received in-patient treatment during the 6 (six) months immediately prior to commencement of the **Insured Journey** or the date of inclusion hereunder, whichever shall first occur; or

2. is taking prescribed medication for which they have consulted a doctor or specialist within the past 6 (six) months, unless the condition for which they are taking it and their dosage levels are normally stable and well controlled, or
3. is receiving or is on a **Hospital**, clinic or nursing home waiting list for in-patient investigation or treatment, or
4. has been given a terminal prognosis.

Qualified Medical Practitioner

A doctor or specialist who is registered or licensed to practice medicine under the laws of the country they practice in other than an **Insured Person**, or a member of the **Immediate Family** of the **Insured Person** or an employee of the **Insured Person**.

Sports Equipment:

means items of a personal nature specifically designed and intended to be used for participation in a particular sport, game or leisure activity.

Strike or Industrial Action:

shall mean action taken by employees of a company which is carried out with the intention of preventing or restricting or otherwise interfering with the production of goods or the provision of services.

This Insurance does not cover failure of **Common Carrier** and public transport services caused by **Strike or Industrial Action**, of which any kind of warning and/or public announcement had been given prior to departure from the **Insured Person(s)** place of residence or business to commence the Insured Journey.

Strikes or Industrial Action declared illegal by any government with the stated or unstated objective of causing travel disruption are not covered including, but not limited to, "work to rule".

Student:

shall mean dependent children (including legally adopted children or step-children) of the cardholder, aged between 16 (sixteen) and 40 (forty) years, who are in full-time study at a recognised university or an advanced educational facility abroad, including but not limited to, a college, school or other educational institution.

Any trip abroad shall not be less than 45 (forty-five) days and shall not exceed more than 365 (three hundred and sixty five) days.

Payment for a one-way trip (departure or return) must be pre-paid in full before the trip commences by a parent of a **Student** by means of an eligible **Card** and is only for the benefit of a **Student**. The Insurers will only pay to a **Student**, or to the Insured Person, up to the amounts stated in the **Student** Schedule of Benefits/Compensation (as described more fully in the **Student** schedule of Benefits/Compensation shown on pages 9-10).

Territorial Limits:

World-wide excluding the **Insured Person(s) Country of Domicile** and any other **Excluded Territories**.

Terrorist Act:

shall mean any actual or threatened use of force or violence directed at or causing damage, Bodily Injury, harm or disruption, or commission of an act dangerous to human life or property, against any individual, property or government, with the stated or un-stated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. **Terrorist Act** shall also include any act which is verified or recognised by the (relevant) Government as an act of terrorism.

The Policyholder:

Bank of Cyprus Public Company Limited

Theft:

means the unauthorised removal of an article from the possession of an **Insured Person**, with intent to permanently deprive the **Insured Person** of it.

Unattended:

When the **Insured Person** is not in full view of and not in a position to prevent unauthorised interference with or **theft** of their property or vehicle.

Valuables:

means equipment including, but not limited to, CD's, DVD's, lap top computers (including ancillary equipment), headphones, cameras, camcorders, electrical items, electronic and photographic cine and recording equipment, telecommunications equipment, personal stereo equipment, binoculars, antiques, jewellery, watches, leather goods, silks, perfumes, curios and works of fine art.

Valuables must be carried in the **Insured Person(s)** hand-luggage

War:

Shall mean armed conflict between nations, invasion act of foreign enemy, civil war, military or usurped power.

We/Us/Our:

Shall mean ΓΕΝΙΚΕΣ ΑΣΦΑΛΕΙΕΣ ΚΥΠΡΟΥ ΛΙΜΙΤΕΔ (HE 6188), 4 Evrou Street, Eurolife House, 2003 Strovolos, Nicosia, Cyprus . **We** are solely obligated and liable for all covers and benefits provided under the terms of this policy, Certificate of Insurance and any endorsements.

Section 1: Cancellation and Curtailment

If the **Insured Person** abandons an **Insured Journey** on written medical advice or returns to their **Country of Domicile** on written medical advice, or is ill, injured or admitted into a local Hospital or a local clinic as an in-patient, or a Hospital or a clinic whilst on an **Insured Journey** as an in-patient and is likely to be in Hospital for more than 12 (twelve) Hours, the **Insured Person** or any person on behalf of the **Insured Person** must contact **HealthWatch** within 24 (twenty-four) hours in order that **HealthWatch** can confirm the Conditions of cover. If this is not done, it could mean that **We** may not provide any cover, or the amount of benefit paid for Cancellation or Curtailment will be reduced or denied. **We** or **HealthWatch** reserve the right to relocate the **Insured Person** from one Hospital to another. **We** also reserve the right to limit payment to what the **HealthWatch** appointed Qualified Medical Practitioner deems to be reasonable.

To pay up to the amount stated in the Schedules of Compensation in all for the **Insured Person** in respect of reimbursement for the benefit of the **Insured Person** only, of deposits paid and forfeited and further non-returnable payments due under the terms of the travel booking conditions if the **Insured Journey** is necessarily and unavoidably cancelled which means that the **Insured Person** does not travel on their **Insured Journey** and/or if the **Insured Journey** is necessarily and unavoidably curtailed due to:

- 1) The death, serious **Bodily Injury** or serious **illness** of:
 - (a) The **Insured Person(s)**, or
 - (b) The person with whom the **Insured Person** is travelling or had arranged to travel, such person having the same **Country of Domicile** as the **Insured Person**, or
 - (c) The spouse, common-law/civil partner, parent, step-parent, parent-in-law, grandparent, child, step-child, grandchild, brother, sister, son, daughter, fiancé(e) or **Close Business Colleague** of the **Insured Person**, such person having the same **Country of Domicile** as the **Insured Person**.
- 2) Jury service, military service, attendance under a subpoena as a witness in a court of law or the compulsory quarantine restriction of the **Insured Person** or of the person with whom the **Insured Person** is travelling or had arranged to travel.

THE LIMITS:

The indemnity under this Section is limited to the following:

- (A) Up to the amount stated in the Schedules of Benefits/Compensation for the **Insured Person**.
- (B) Notwithstanding the above the amount payable is further limited in respect of Cancellation claims to the scale of cancellation charges as defined in the travel booking conditions of the provider of transport or accommodation.
- (C) In respect of Curtailment claims the amount is limited as in (A) above but is further limited to the proportionate amount of the total pre-paid cost for each day of the **Insured Journey** foregone.
- (D) In respect of Cancellation claims the **Insured Person** has a duty to first seek reimbursement from the Common Carrier and /or tour operator with whom they have booked the trip.

EXCESS:

This Section is subject to the **Excess** amount stated in the Schedules of Benefits/Compensation of each and every loss or claim for the **Insured Person**.

EXCESS PROVISION:

In respect of all person(s) aged over 70 (seventy) years old, the Excess is increased from the amount stated in the Schedules of Compensation to €500.00.

Conditions applicable to Section 1

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. Where the absence from work or permanent place of Employment of a **Close Business Colleague** of the **Insured Person** necessitates the Cancellation of an **Insured Journey**, this must be certified by a senior director of such company.
2. Claims cannot be made simultaneously under this Section and under Section 6 for the same incident or event.
3. Cancellation claims will only be considered in respect of an Outward **Insured Journey** (where the **Insured Person** has not yet commenced their **Insured Journey**).
4. Curtailment claims will only be considered in respect of a Return (Inward) **Insured Journey** (when the **Insured Person** has already travelled abroad).
5. No cover is afforded under this Section for person(s) who have attained the age of 80 (eighty) years.

SPECIAL CLAIM CONDITION APPLICABLE to SECTION 1:

(A) If the **Insured Journey** has been pre-paid, reserved or booked in advance using air miles and a claim for Cancellation of a **Insured Journey** is subsequently accepted by **HealthWatch**, **We** will reimburse the **Insured Person** for the cost of replacement ticket(s) to the same (or a similar) destination, provided that the ticket(s) are purchased within a maximum period of 12 (twelve) calendar months from the original date of the reserved or booked and planned **Insured Journey**.

(B) Where Cancellation or Curtailment of an **Insured Journey** is due to death, serious **Bodily Injury** or serious **Illness** of any person not travelling with the **Insured Person** on the **Insured Journey**, then all terms, exceptions and conditions, including all **Excess** restrictions, will be applied in relation to the age of that person.

Exclusions applicable to Section 1

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 - 40

We will not pay:

1.
 - a. for disinclination to travel or financial circumstances of any **Insured Person**;
 - b. for failure to notify the travel agent, tour operator or provider of transport or accommodation immediately it is found necessary to cancel or curtail the travel arrangements;
 - c. for Cancellation of scheduled **Common Carrier** and public transport services which results in the delay, or the re-scheduling of, the commencement of the **Insured Journey**;
 - d. for any surcharges, levied by the travel agent and/or tour operator increasing basic brochure prices.
2. for expenses payable by the travel agent, tour operator, provider of transport, hotel, shipping line or airline.
3. the cost of the **Insured Person(s)** original Return (Inward) **Insured Journey** if the **Insured Person** needs to cut short their **Insured Journey**.
4. For the **Insured Person(s)** having to cut short their **Insured Journey** if they do not return to the **Country of Domicile**.
5. if at the time of booking a **Insured Journey**, the **Insured Person**, or any person with whom the **Insured Person** had intended to travel with, or stay with:
 - (a)** is expected to give birth before, or within **3** (three) months following the date of arriving back home in their **Country of Domicile**; or
 - (b)** is travelling against the advice of a registered **Qualified Medical Practitioner** or for the purpose of obtaining medical advice or treatment abroad; or
6. for claims arising from or contributed to or aggravated by any chronic or **Pre-Existing Condition**.
7. for costs or expenses of any kind:

incurred for amounts paid after the date of the onset of any incident, diagnosis, **Illness** or condition resulting in or contributing to the cancellation and/or curtailment of the **Insured Journey**.

8. for cases of minor **Illness** or **Illness** or **Bodily Injury**, which in the opinion of **HealthWatch**, **does not** prevent the **Insured Person** from commencing or continuing their **Insured Journey**.
9. for consequential expenses following the death or **Illness** of any pet or animal.
10. for any charges that relate to airport taxes or air passenger duty.
11. for claims relating to persons who have attained the age of 80 years

Section 2: Personal Accident

In the event of **Accidental Bodily Injury** being sustained by the **Insured Person** during the **Period of Insurance**, benefit will be paid up to the amount stated in the Schedules of Benefits/Compensation for:

- (A) Death by **Accidental Bodily Injury**
- (B) **Loss of one or more Limbs** or **Loss of Sight** of one or both Eyes
- (C) **Permanent Total Disablement** from following any occupation

PROVISIONS:

1. In respect of children aged under 16 (sixteen) years at the time of **Accidental Bodily Injury** the benefit under (A) above will be limited to the amount stated in the Schedules of Benefits/Compensation.
2. No benefits will be payable:
 - a. under (A) or (B) unless such death or loss occurs within 12 (twelve) calendar months of the date of **Accidental Bodily Injury**;
 - b. under (C) except on proof to **Us**, or **HealthWatch**, that the **Permanent Total Disablement** has continued for 12 (twelve) calendar months from the date of **Bodily Injury** and in all probability will continue for the remainder of the **Insured Person(s)** life.
3. The maximum amount of all benefits payable for one or more injuries sustained by an **Insured Person** during the **Insured Journey** shall not exceed the amount stated in the Schedules of Benefits/Compensation.
4. The benefit under (C) or for **Permanent Total Disablement** as defined below, is limited to **Insured Person(s)** aged up to 65 (sixty-five) years and who are in Full Time Employment only.
5. No cover is afforded under this Section in respect of all Person(s) who have attained the age of 80 (eighty) years.

Conditions applicable to Section 2

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. If a notice of a claim is provided for an **Insured Person**, then the Insurance provided will terminate for that **Insured Person**.
2. **We** or **HealthWatch**, at the expense of the **Insured Person(s)** executor(s); administrator(s); dependant(s); beneficiary(ies) or legal heir(s), shall have the right and opportunity to examine the body of the Insured Person whose **Bodily Injury** is the basis of a claim.
3. No cover is afforded under this Section for person(s) who have attained the age of 80 (eighty) years.

Extension applicable to Section 2

Notwithstanding any provision to the contrary within this Policy, or any endorsement thereto, it is agreed that General Exclusions 1 and 2 on page 39 do not apply to this Section 2.

Always provided that the **Insured Person(s)** are not actively participating in any, war or Terrorist Activity.

For the purpose of this Extension, Terrorist Activity means an act, or acts, of any person, or group(s) of persons, committed for political, religious, ideological or similar purposes with the intention to influence any government and/or put the public, or any section of the public, in fear. Terrorist Activity can include, the use of force or violence and/or the threat thereof. Furthermore, the perpetrators of Terrorist Activity can either be acting alone, or on behalf of, or in connection with any organisation(s) or government(s).

Exclusions applicable to Section 2

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 - 40

We will not pay:

1. for **Bodily Injury** directly or indirectly caused by, resulting from, or in connection with release of weapons of mass destruction that do not involve an explosive sequence.
2. for claims relating to persons who have attained the age of 80 years

Section 3: Medical Expenses and Other Expenses

If the **Insured Person** is ill, injured or admitted into a Hospital or a clinic abroad whilst on an **Insured Journey** as an in-patient and is likely to be in Hospital for more than 12 (twelve) Hours, the Insured Person or any person on behalf of the Insured Person should contact **HealthWatch** within 72 hours of admittance in order that **HealthWatch** can confirm the Conditions of cover. If this is not done, it could mean that **We** may not provide any cover, or the amount of benefit paid for Medical Expenses will be reduced or denied. **We** or **HealthWatch** reserve the right to relocate the **Insured Person** from one hospital to another. **We** also reserve the right to limit payment to what the **HealthWatch** appointed Qualified Medical Practitioner deems to be reasonable.

We will pay up to the amount stated in the Schedules of Benefits/Compensation for:

1. emergency medical, surgical and Hospital treatment (including emergency dental treatment up to €375.00 for immediate relief of pain to natural teeth only), additional reasonable accommodation and repatriation expenses necessarily incurred and payable within 12 (twelve) calendar months of the incident giving rise to a claim as certified by a **Qualified Medical Practitioner**, as the result of the **Insured Person** sustaining **Accidental Bodily Injury** or suffering **Illness** during a **Insured Journey**, such expenses having been specifically agreed by **Us** or **HealthWatch**.
2. necessary and reasonable travel and hotel or accommodation expenses of a relative or friend of the **Insured Person**, or registered nurse, who shall either upon compassionate grounds or upon medical advice accompany the **Insured Person** because of the severe functional disability of the **Insured Person**, such expenses having been agreed in advance by **Us** or **HealthWatch**.
3. additional reasonable **Evacuation and Repatriation** expenses necessarily incurred by the **Insured Person** consequent upon the death, sudden serious **Illness** or serious **Accidental Bodily Injury** of the **Insured Person(s)** spouse, common-law/civil partner, parent, step-parent, parent-in-law, grandparent, child, step-child, grandchild, brother, sister, son, daughter, son-in-law, daughter-in-law, fiancé(e) or **Close Business Colleague** resident in the **Insured Person(s) Country of Domicile**, such expenses having been agreed in advance by **Us** or **HealthWatch**.
4. transfer of the **Insured Person(s)** body or ashes in the event of death by **Accidental** means or death by natural causes (not arising, contributed or aggravated by, any chronic or **Pre-Existing Condition**) during an **Insured Journey**, to the **Country of Domicile** (excluding funeral and interment costs), such costs having been agreed by **Us** or **HealthWatch** or alternatively to pay up to €3,750.00 towards the cost of burial or cremation expenses if incurred abroad.
5. reasonable travel expenses for a relative or friend to travel from the **Insured Person(s) Country of Domicile** to stay with and travel home with the **Insured Person** if this is medically necessary and authorised in advance by **Us** or **HealthWatch**.
6. the reasonable cost of returning children of the **Insured Person** to the **Country of Domicile** unaccompanied when travelling abroad following the **Accidental Bodily Injury** or **Illness** of the **Insured Person** and subject to prior agreement by **Us** or **HealthWatch**.
7. emergency **Evacuation and Repatriation** Services:
 - 7.1 In the event that an **Insured Person** suffers an **Illness**, or serious **Accidental Bodily Injury** whilst on an **Insured Journey** and is in a serious medical condition, then **We** or **HealthWatch** shall on medical grounds arrange for the transportation of moving the **Insured Person** to the nearest Hospital where appropriate medical care is available to avoid death or serious impairment to the **Insured Person(s)** health. Alternatively, at **Our** discretion, **We** or **HealthWatch** will arrange for the return of the **Insured Person** to their **Country of Domicile** together, if necessary, with a medical escort.
 - 7.2 **We** or **HealthWatch** retain the absolute right to decide whether the **Insured Person(s)** medical condition is sufficiently serious to warrant an Emergency **Evacuation and Repatriation**. **We** or **HealthWatch** further reserve the right to decide the place to which the **Insured Person** shall be evacuated to and the means or

method by which such **Evacuation and Repatriation** will be carried out, having considered all the facts and circumstances of which **HealthWatch** are made aware of at the relevant time.

We or **HealthWatch** also reserve the right to decide the means or method by which such **Evacuation and Repatriation** will be carried out having considered all the facts and circumstances of which **HealthWatch** are made aware of at the relevant time. **Evacuation and Repatriation** must be affected in the most economical manner and **We** will only reimburse normal and legitimate costs.

EXCESS:

This Section is subject to the **Excess** amount stated in the Schedules of Benefits/Compensation of each loss or claim for each **Insured Person**.

EXCESS PROVISION:

In respect of all person(s) aged over 70 (seventy) years old, the **Excess** is increased from the amount stated in the Schedules of Benefits/Compensation to €500.00.

Conditions applicable to Section 3(a)

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

Medical Expenses incurred in the United Kingdom applicable to National Health Service (NHS) and NHS Trust Hospital charges **only** are limited to **€7,000.00**.

Cover under Section 3(b): DAILY HOSPITAL BENEFIT

In the event that the **Insured Person** is admitted to a Hospital abroad, as an in-patient due to **Accidental Bodily Injury** or **Illness** sustained during the **Insured Journey**, **We** will pay to the **Insured Person** a benefit of the amount stated in the Schedules of Benefits/Compensation each complete day that the **Insured Person** is hospitalised abroad up to the maximum amount stated in the Schedule of Benefits/Compensation. **We** or **HealthWatch** reserve the right to relocate the **Insured Person** from one hospital to another.

Conditions applicable to Section 3(a) & 3(b)

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. If the **Insured Person** becomes ill or has to go into Hospital during an Insured Journey to Australia, the **Insured Person** must register for treatment under the national Medicare scheme of this country and must notify **HealthWatch**, once the **Insured Person** is admitted as an in-patient. If the **Insured Person** does not do this, it could mean that **We** will not provide cover.
2. If there is any doubt as to how to register for the Medicare scheme, the **Insured Person** should contact **HealthWatch** who will be able to help.
3. No cover is afforded under this Section in respect of person(s) who have attained the age of 80 (eighty) years.

Exclusions applicable to Section 3(a) & 3(b)

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 - 40

This policy does not cover claims arising directly or indirectly from or due to:

1. charges levied for services received in the **Insured Person(s) Country of Domicile** or any treatment or medication which can be reasonably delayed until the **Insured Person(s)** return to their **Country of Domicile** or which at the time of departure is known to be required or continued during the **Insured Journey**.
2. any form of elective or emergency cosmetic surgery and/or treatment following **Accidental Bodily Injury**.
3. expenses incurred and payable more than 12 (twelve) calendar months after the date of incident giving rise to a claim or the first manifestation of an **Illness**.
4. charges for private or single room accommodation, unless it is medically necessary and approved by **Us** or **HealthWatch**.
5. expenses incurred for in-patient treatment not specifically or prior authorised by **Us** or **HealthWatch**.
6. **Evacuation and Repatriation** expenses not specifically or prior authorised by **Us** or **HealthWatch**.

7. costs incurred after the **Insured Person** is medically fit to be repatriated following **Accidental Bodily Injury** or **Illness**
8. any treatment, costs or expenses or medication of any kind once the **Insured Person(s)** have returned from their **Insured Journey** to their **Country of Domicile**.
9. optical expenses, unless incurred as a result of an emergency.
10. any treatment, costs or expenses or medication of any kind:
 - a. not verified by a **Qualified Medical Practitioner's** report or competent medical authority;
 - b. administered by a member of the medical profession who is a relative, employer or employee of the **Insured Person**;
 - c. where the **Insured Person** has not taken recommended inoculations prior to the **Insured Journey**;
 - d. which in the opinion of **HealthWatch** are considered to be investigative, including routine physical examinations.
12. Cases of minor **Illness** or **Bodily Injury**, which in the opinion of **HealthWatch**, does not prevent the **Insured Person** from commencing or continuing their **Insured Journey**.
13. for claims relating to persons who have attained the age of 80 years

Section 4: Loss or Damage to Baggage and Personal Effects

After deducting an amount for wear and tear, age and/or condition and loss of value, **We** will pay up to the total amounts stated in the Schedules of Benefits/ Compensation to indemnify the **Insured Person** for the intrinsic value or cost of repairs, whichever is the lesser, of **Baggage** and/or Personal Effects which are accidentally lost, stolen or damaged, such property owned by, or having been taken on, or purchased on the **Insured Journey** by the **Insured Person** up to the amount stated in the Schedule of Benefits/Compensation in respect of any one item, pair or set. In respect of **Valuables**, **Our** liability is limited to a maximum of the amount stated in the Schedule of Benefits/Compensation in all.

We will also pay up to the amount stated in the Schedule of Benefits/Compensation for the costs incurred in the obtaining of replacement, lost, stolen or damaged Cellular or Mobile Telephone(s), which were lost, stolen or damaged during an **Insured Journey**. It is warranted that Cellular or Mobile Telephone(s) must not be packed in **Baggage** that the **Insured Person** checks-in at any airport or other departure zone and must remain with the **Insured Person** at all times during the **Insured Journey** and must never be left **Unattended** by the **Insured Person**.

Conditions applicable to Section 4(a)

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. In the event of loss or damage to an article forming part of a pair or set, **We** will indemnify the **Insured Person** for the value of the lost, stolen or damaged item and not for the value of the pair or set of which the item forms part, after deducting an amount for Wear and Tear, age and/or condition and loss of value.
2. For items over EUR 250 claims will not be considered unless substantiated by an original sales receipt or an original valuation for any item, pair or set.
3. In respect of **Valuables**, claims will not be considered unless an original sales receipt or an original valuation or acceptable evidence of ownership is provided.
4. Should the **Insured Person** purchase particularly valuable items, whilst on an **Insured Journey**, that exceed the Jewellery and **Valuables** Limit as stated in the Schedule of Benefits/Compensation, such item(s) should be insured under a separately arranged insurance policy, because this Insurance cannot guarantee that such item(s) will be covered for their full replacement value if lost, stolen or damaged.
5. Whilst in the care, custody and control of an airline, shipping line or other **Common Carrier** (or their baggage-handling agents), cover is restricted to checked-in (*held*) **Baggage** only. **We** shall **only** be liable for one item of **Baggage** per any one **Insured Person**. For the purposes of this Insurance, Baggage, which is shared amongst more than one person, shall be deemed to belong to and apply to one **Insured Person** only.
6. In respect of **Student(s)**, cover is restricted to checked-in (*held*) **Baggage** only whilst in the care, custody and control of the airline, shipping line or other **Common Carrier** or their baggage-handling agents and whose trip abroad exceeds more than **45** (forty-five) days but does not exceed more than **365** (three hundred and sixty-five) days.

Cover under Section 4(b): TEMPORARY DEPRIVATION of BAGGAGE (Baggage Delay)

We will provide reimbursement up to the amount stated in the Schedule of Benefits/Compensation per **Insured Person**, for necessary expenses incurred for the reasonable emergency purchase of essential items of clothing or toiletries or requisites (excluding books or other study or work materials) consequent upon the Temporary Deprivation of **Baggage** due

to delay or misdirection in delivery on an Outward **Insured Journey** only (unless stated as otherwise in the Schedules of Benefits/Compensation), provided that the **Insured Person** is not entitled to similar cover under any other insurance. The **Insured Person** must declare to **Us** or **HealthWatch** any amount(s) paid by the airline, shipping line, **Common Carrier**, tour operator, hotel or other provider of services to the **Insured Person**. Any purchases made after the **Baggage** has been delivered by the Common Carrier (or their nominated courier service) to the accommodation address of the **Insured Person** will not be reimbursed.

The maximum payable for reasonable emergency purchases of essential items of clothing or requisites is limited to €250.00 per item, Pair or Set and must be substantiated by an original sales receipt.

Conditions applicable to Section 4(b)

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. Claims for reasonable emergency purchase of essential items of clothing or requisites (excluding books or other study or work materials) substantiated by original sales receipts for the replacement items and written confirmation from the airline, shipping line or other **Common Carrier** or their baggage-handling agents of the date and precise time of misdirection and if recovered the date and precise time of delivery.
2. Cover is restricted only to checked-in (*held*) **Baggage** whilst in the care, custody and control of the airline, shipping line or other **Common Carrier** (or their baggage-handling agents). **We** shall only be liable for one item of **Baggage** per **Insured Person**. For the purposes of this Insurance, a singular item of **Baggage**, which is shared amongst more than one person, shall be deemed to belong to and apply to one **Insured Person** only.
3. The maximum payable for reasonable emergency purchases of essential items of clothing or requisites is limited to €250.00 per item, Pair or Set and must be substantiated by an original sales receipt.

Conditions applicable to Section 4(a) & 4(b)

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. Claims reimbursed under Section 4(b) will be deducted from subsequent claims made under Section 4(a).
2. In respect of repair(s), an estimate must be obtained either stating the cost of repairs or confirming that the item is beyond repair. Salvage must be retained for possible inspection together with a photograph of the damaged item where appropriate. For further claim evaluation, the **Insured Person** may be required to send the damaged item to an address designated by **HealthWatch**, (on **Our** behalf), at the **Insured Person(s)** own expense and within 30 (thirty) days from the date of request.
3. Wherever possible, any reasonable expenses or emergency purchases should be billed to a Bank of Cyprus card account.
4. **Valuables** shall only be covered for the amounts stated in the Schedules of Benefits/Compensation against total loss due to theft and only when they are deposited in a securely locked safe belonging to a hotel, or when the **Insured Person** is wearing or carrying **Valuables** on their person.
5. **WEAR and TEAR:**
Payment of any claim will be based on the value of the property at the time it was lost, stolen or damaged. A reasonable amount may be deducted for Wear and Tear or loss of value through depreciation, resulting from ordinary use, age and exposure.

EXCESS:

Section 4(a) is subject to the **Excess** amount stated in the Schedules of Benefits/Compensation for each and every loss or claim by each **Insured Person**, except in respect of Temporary Deprivation of **Baggage** claims (under 4(b) above) which are not subject to an **Excess**.

Exclusions applicable to Section 4(a) & 4(b)

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 – 40

We will not pay:

1. for damage due to insect, moth, vermin, Wear and Tear and loss of value following mechanical or electrical breakdown or derangement, atmospheric or climatic conditions or gradual deterioration.

2. for delay, loss, theft, breakage or damage to fragile or brittle articles including, but not limited to, clocks, china, porcelain, mirrors, glass and sculpture(s), or arising from the cracking or scratching thereof.
3. for delay, loss, theft, **Accidental** breakage or damage to musical instruments.
4. for loss due to legal confiscation or detention by customs or other authority.
5. for costs incurred in replacing **Unattended** mobile phones, including any incurred inconvenience or reporting expenses
6. for delay, loss, theft or damage to lap top computers and core components (including ancillary equipment).
7. for delay, loss, theft or damage to deeds, books, study, or work materials, manuscripts or securities of any kind.

8. for delay, loss, theft or damage to goods, business samples, tools and/or motor accessories owned by the **Insured Person** and goods intended for resale in connection with the **Insured Person(s)** trade, profession or business.
9. for loss, theft or damage to Money and/or Cash, bank or currency notes, tickets, passports, national Identity Cards, Green Cards, lift passes or admission tickets.
10. for loss, theft or damage to **Baggage** and/or suitcases, holdalls, hand-luggage or similar, unless rendered unusable including, but not limited to, prams, pushchairs, strollers, buggies and their accessories.
11. for delay, loss, theft or damage and/or breakage to:
 - (a) contact or corneal or micro-corneal lenses, or spectacles or optical glasses and sunglasses, or arising from the scratching of any lenses (including glass in watch faces, Mobile Telephone(s), cameras, binoculars or telescopes);
 - (b) dentures, bridgework, hearing aids, prosthetics and artificial Limbs.
12. for loss or damage due to any process of cleaning, repairing or restoring, or loss or damage caused by leaking powder or fluid or liquid or any type of food and oils carried within the **Insured Person(s) Baggage**, or leakage from **Baggage** belonging to another passenger whilst in the custody, care and control of an airline, sea vessel or other **Common Carrier** or their baggage-handling agent.
13. for delay, loss, theft or damage to household goods and soft furnishings including, but not limited to, rugs, carpets, curtains and any type of Key, pedal cycles, motor vehicles, winter sports equipment and clothing (unless stated as otherwise in the Schedules of Benefits/Compensation), water sports equipment, other sports equipment, all sports clothing, marine equipment and craft and their accessories.
14. for any item, pair or set worth more than the Maximum Single Article Limit (as stated in the Schedules of Benefits/Compensation) for which the **Insured Person** does not have an original sales receipt or an original valuation estimate.
15. For
 - (a) loss, theft or damage of the **Insured Person(s) Baggage**, Personal Effects and/or **Valuables**, whilst in buses or coaches operated by the airline, shipping line, **Common Carrier**, tour operator, travel agent or hotel.
 - (b) permanent theft or temporary loss or delay, following **Accidental** or deliberate retrieval by a third party, of the **Insured Person(s) Baggage** and/or Personal Effects, from any hand luggage compartment in any aircraft and/or other **Common Carrier** hand luggage compartment and/or from a luggage carousel or **Common Carrier Baggage** release service, that is operated by an authorised baggage-handling agent at any airport, seaport or other destination or departure zone, or point of entry or exit zone, or through confiscation by Customs or other authority.
16. for **Baggage**, Personal Effects and/or **Valuables** carried on a vehicle roof rack.
17. for shortages due to mistakes, error, neglect, omission, exchange or depreciation in value or confiscation by customs or other authority.
18. for theft or suspected theft not reported within 24 (twenty four) Hours to the Police in the country where the **Insured Person** is staying and/or where a written Police Report has not been obtained.
19. for loss or theft from the place of accommodation of the **Insured Person**, unless in a securely locked room where there is evidence of forced or violent entry, which is confirmed by a written Police Report.
20. for any delay, loss, theft or damage to property shipped as freight or under a cargo bill of lading.
21. for any delay, loss, theft or damage to sporting and marine equipment or clothing that is borrowed, hired, used or rented by the **Insured Person**.
22. for **Baggage**, Personal Effects and/or **Valuables** not in the custody, care or control of the **Insured Person**, or whilst in the custody, care or control of any other person or any other party, other than the airline, shipping line or other **Common Carrier** or their baggage-handling agents.
23. **Baggage**, Personal Effects and/or **Valuables** lost, stolen or damaged whilst in transport with the **Insured Person** on any type of train or tram-car, bus or coach and mini-cab or taxi.
24. delay, loss, theft or damage to any perishable goods or any type of food, oils or liquids or pharmaceutical medicines (including bottles and their contents), confectionery, spirits, alcohol, liquor, cigars, cigarettes and tobacco.

Section 5: Money

We will pay up to the amount stated in the Schedule of Benefits/Compensation in all to indemnify the **Insured Person** for theft of, or **Accidental** damage to Cash, bank or currency notes, letters of credit, travel tickets, passports, Green Cards, national Identity Cards and admission tickets during the **Insured Journey**. Theft or damage to actual Cash (bank notes, coins and currency) is limited to the amount allowed by any currency regulations applicable at the date of commencement of the **Insured Journey** or to the amount stated in the Schedules of Benefits/Compensation whichever is the lesser. To be reimbursed, the **Insured Person** must provide a written Police Report and a detailed description of the proof of ownership of Money and/or Cash, such as any printed form of a Bank account withdrawal, ATM (*Automated Teller Machine*), transfer or currency exchange receipt.

The maximum payable for children aged under 16 (sixteen) years is €50.00 and the Excess amounts stated in the Schedules of Benefits/Compensation do not apply.

The maximum payable for receipted expenses for replacing lost, stolen or damaged passports and national Identity Cards is limited to €200.00 per **Insured Person**.

EXCESS:

This Section is subject to the **Excess** amount stated in the Schedule of Benefits/Compensation for each loss or claim for each **Insured Person**.

Conditions applicable to Section 5

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 – 38

1. Cover for Cash is only in respect of money carried and concealed on the person of the **Insured Person**. Consequent upon cash being stolen or damaged, **We** shall only be liable for one loss per **Insured Person**. Personal money and/or cash held under the supervision of one person and on behalf of others shall only be deemed to belong to and apply to one **Insured Person**.
2. Should the **Insured Person** be a victim of a theft that is subsequently reported within 24 (twenty four) Hours to the police in the country where the **Insured Person** is located, only money (bank notes, currency notes and coins) that was carried and physically concealed on their person, will be considered as a claim and only up to the maximum amount stated in the Schedule of Benefits/Compensation. **We** will not pay for loss, theft or damage where the **Insured Person** fails to exercise due diligence, attentiveness, care and personal control that would, in similar circumstances, be taken by a reasonable and prudent person to guard and protect their money from loss, theft or damage.

Exclusions applicable to Section 5

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 – 40

We will not pay:

1. for theft or damage of shop (wholesale or retail) credit vouchers which can be exchanged for goods or services.
2. for theft or damage of Money and/or Cash held in trust by the **Insured Person**, or for theft or damage to Money and/or Cash belonging to the business of the **Insured Person** or **Close Business Colleague**.
3. for theft or damage of Money and/or Cash not carried or concealed on the person of the **Insured Person**, or Money and/or Cash not secured in a securely locked safety deposit box or not locked in a safe belonging to a hotel, apartment or a provider of accommodation.
4. for devaluation of currency or in respect of shortages due to mistakes, error, neglect, omission, exchange or depreciation in value or confiscation by customs or other authority.
5. due to an unauthorised person fraudulently using credit or debit cards in the name of the **Insured Person**
6. for money, cash or documents which are left **Unattended** by the **Insured Person** even if left obscured in a securely locked vehicle protected by an alarm.
7. for loss of passport not accompanied by a report from the consular representative confirming the date of loss, the date of notification of loss and the date on which a replacement passport was obtained.

Section 6: Travel Delay, Abandonment and Missed Connection

We will pay up to the amount stated in the Schedule of Benefits/Compensation, if the departure of the **Common Carrier** in which the **Insured Person** had originally arranged to travel on the Outward or Return (Inward) **Insured Journey** as a fare-paying passenger is unexpectedly delayed at the departure zone or point of entry or exit for at least the number of hours stated in the Schedule of Benefits/Compensation from the intended time as specified in the travel itinerary supplied to the **Insured Person**, due to adverse weather conditions, or mechanical breakdown, structural defect or derangement of or affecting the **Common Carrier** or sea vessel, provided that the **Insured Person(s)** eventually depart on their **Insured Journey**. The cover is in effect once the **Insured Person** is *en route* on the scheduled departure date of their **Insured Journey**. Travel Departure Delay benefit is also payable up to the amounts stated in the Schedules of Benefits/Compensation, following **Strike or Industrial Action**, but only on a Return (Inward) **Insured Journey**.

No benefit is payable if the **Insured Person** or any person travelling with the **Insured Person** had previously been advised by the airline, **Common Carrier**, shipping line, tour operator and/or travel agent that the scheduled departure time of the flight or sailing time had been delayed and was therefore aware of, and knew about, the delay before leaving their place of residence or business in their **Country of Domicile**. This includes reports on any potential disruptions to **Common Carrier** and public transport services as evidenced by publication in the international press and/or any media announcements. In respect of cruises, a benefit will only be payable for shipping line or sea vessel delays occurring on the first leg or the Outward voyage of the sea vessel (or cruise liner).

6(b): ABANDONMENT (after a 24 Hour Delay)

Up to the amount stated in the Schedules of Compensation if the **Insured Person** elects to cancel the whole travel itinerary after the number of hours delay stated in the Schedule of Benefits/Compensation in respect of reimbursement of any irrecoverable cancellation charges imposed by the **Common Carrier** or shipping line or provider of transport or accommodation.

6(c): MISSED CONNECTION

Reimbursement up to the amount stated in the Schedules of Benefits/Compensation in all for the **Insured Person** for reasonable additional travel expenses incurred during a **Insured Journey** for the rearrangement of an alternative flight connection if the **Insured Person** misses a reserved or booked connecting flight or cruise as a result of adverse weather conditions or mechanical breakdown of the aircraft in which the **Insured Person** was travelling or was intending to travel in, provided that the original flight itinerary allows a minimum of 2.5 hours between flights booked with different airlines or 1.5 hours between flights booked with the same airline, between connecting flights at any airport or other international departure zone and after allowing for airport security checks and airline check-in time limitations.

Conditions applicable to Section 6

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. Claims reimbursed under Section 6(a) or Section 6(c) will be deducted from subsequent claims made under Section 6(b).
2. Claims cannot be made simultaneously under this Section and under Section 1 for the same incident or event.
3. The **Insured Person** shall have checked-in according to the itinerary provided by the tour operator, travel agent, provider of transport or **Common Carrier** and shall have obtained written confirmation from the airline or shipping line or their ground-handling agents that their flight or sailing was delayed by an event described in this Section. Such confirmation must state the actual period of the delay. The delay period shall be calculated from the scheduled departure time of the flight or sailing shown in the itinerary and up to the actual time of departure.

SPECIAL PROVISION - NATURAL DISASTER:

Notwithstanding any policy exclusion contained herein to the contrary, including but not limited to, closure of airspace (temporary or otherwise) under order from the Civil Aviation Authority, or of any similar executive authority in any country (including national Air Traffic Control) and in addition to expenses met by an airline under Regulation (EC) No. 261/2004 on Air Passengers Rights, **We** will pay a fixed benefit of €100.00 per person in all if the departure of the **Common Carrier** in which the **Insured Person** had originally arranged to travel on a Return (Inward) **Insured Journey** as a fare-paying

passenger, is delayed for more than 24 (twenty-four) Hours from the time specified in the travel itinerary supplied to the **Insured Person**, due to a geological or a hydrological Natural Disaster which would include, but is not limited to, volcanic eruptions, earthquakes, avalanches, floods, tsunamis, landslides, hurricanes, tempests, tornados and/or wildfires. The **Insured Person** must get a written confirmation letter from the **Common Carrier** and/or appropriate transport company or authority stating the reason for the delay and how long the delay lasted, which prevented the **Insured Person** from travelling.

Exclusions applicable to Section 6

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 – 40

We will not pay:

1. if the **Insured Person** arrives at the departure point after the recommended check-in time. The **Insured Person** must have checked-in for the **Insured Journey** at or before the recommended check-in time.
2. pre-announced **Strike's or Industrial Action** including, but not limited to, reports on any potential disruptions to **Common Carrier** and public transport services as evidenced by publication in the international press and/or any media announcements.
3. for extra costs of restaurant meals and refreshments consumed and/or hotel accommodation, the reimbursement of which should be obtained from the airline, shipping line or **Common Carrier** (or their ground-handling agents).
4. for the failure of the **Insured Person** to accept alternative or equivalent means of transport within the period of delay where this is offered on reasonable terms in lieu of the original mode of conveyance.
5. for the breakdown of any vehicle during the **Insured Person(s)** transportation to the international departure point.
6. for any hostile act including, but not limited to, bomb threats or bomb scares.
7. delay in arrival at destination because of accumulated delays in departure from more than one exit zone or departure point.
8. for the failure of the **Insured Person** to ensure adequate time has been allowed in the scheduled travel itinerary for transfers between connections via all modes of transport.
9. for re-routing or successive or cumulative delays in arrival times. There is no cover for delays in arrival times for any reason.
10. for the **Insured Person** being denied boarding by any airline, shipping line, **Common Carrier** or other provider of services. The **Insured Person** must ask at the check-in counter, or the boarding gate, for the text stating their rights, particularly about compensation and assistance (under Articles 14(1) and 14(2) of Regulation (EC) No. 261/2004 in relation to Air Passengers Rights] and/or Regulation (EC) No. 889/2002 of the European Parliament and of the Council of 13th May 2002. The **Insured Person** must direct any claim for compensation to the transport operator concerned.

Section 7: Personal Liability

We will pay for an **Insured Person's** legal liability arising during the **Period of Insurance** up to the amount stated in the Schedules of Benefits/Compensation as a result of:

- a) **Accidental Bodily Injury** to someone.
- b) **Accidental** loss of or damage to someone else's material property.

IMPORTANT – Third Party Liability:

If the **Insured Person** uses any form of mechanically propelled vehicle including, but not limited to, a car, van, motorcycle, quad-bike, moped or scooter, sail or powered boat, or an airborne craft or saddle-bearing animals, no Liability cover will apply and the **Insured Person** must have separately insured cover for Third Party **Bodily Injury** or property damage.

Conditions applicable to Section 7

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. It is warranted that the **Insured Person** will provide notice of any cause for a legal claim as soon as the **Insured Person** knows about it and send any documents or written confirmation of liability or acknowledgement of a

potentially viable claim to **Us** or **HealthWatch**, who have complete control over any legal representatives and solicitors appointed and any legal proceedings.

2. The **Insured Person** must help **Us** or **HealthWatch** and must not negotiate, pay, settle, admit or deny any claim without Our or **HealthWatch's** prior written permission and must follow the advice of **Us** or **HealthWatch** or that of their agents in handling any claim.
3. The Insured Person, where possible, must recover and repay any expenses **We** may have incurred.

Exclusions applicable to Section 7

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 – 40

We will not pay:

1. Employers liability, contractual liability, or liability to a member of the **Insured Person(s) Immediate Family** or any **Close Business Colleague** or household or travelling companion or anyone employed by the **Insured Person**.
2. for **Bodily Injury** to employees of the **Insured Person** unless they are a **Close Business Colleague** travelling with the **Insured Person** in accordance with the terms of this policy
3. for animals belonging to or in the care, custody or control of the **Insured Person**.
4. for pursuit of trade, business or profession.
5. due to ownership, possession or occupation of land or buildings (other than occupation only of any temporary residence).
6. due to ownership, possession or use of mechanically propelled vehicles which term shall include, but is not limited to, rental cars, aircraft or other aerial device, hovercraft or water-craft, firearms or weapons.
7. due to the **Insured Person** being under the influence of intoxicating liquor, drugs (except as medically prescribed by a **Qualified Medical Practitioner**),
8. for activities requiring the use of motorised equipment, organised sporting activity, hazardous Employment or occupation.

Section 8: Legal Expenses

To pay for legal costs and expenses up to the amount stated in the Schedule of Benefits/Compensation incurred by the **Insured Person** or the **Insured Person(s)** representatives in pursuit of legal proceedings for compensation and/or damages directly arising from the pursuit of a claim against a third party who has caused **Bodily Injury** to or **Illness** or death of the **Insured Person** by an incident occurring during an **Insured Journey**.

Conditions applicable to Section 8

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

The **Insured Person**, where possible, must recover **Our** expenses and repay to Us any expenses they are able to collect back.

1. It is warranted that the **Insured Person** will provide notice of any cause for a legal claim as soon as possible and send any documents or written confirmation of liability or acknowledgement of a potentially viable claim to **Us** and the legal representative appointed.
2. The **Insured Person** must help **Us** or the legal representative and must not negotiate, pay, settle, admit or deny any claim without prior written permission and must follow **Our** advice or the advice of the legal representative or that of their agents in handling any claim.

Special claims conditions applicable to Section 8

1. If **We** agree that legal proceedings are necessary, but **We** are not able, or the **Insured Person** does not wish **Us** to act for them, **We** will agree the **Insured Person(s)** right to use their own legal representative to act for them. If the **Insured Person** does not have, or does not wish to appoint their own legal representative, **We** will suggest **HealthWatch** act as legal representatives, who will be willing and able to act for the **Insured Person(s)**.
2. Any representative the **Insured Person** chooses is appointed to act for the **Insured Person**.

Exclusions applicable to Section 8

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 – 40

We will not pay:

1. costs or expenses incurred for any claim brought against a tour operator, travel agent, provider of transport or **Common Carrier** or **Us**, or any person with whom the **Insured Person** has travelled with or had arranged to travel with.
2. costs or expenses incurred for any claim arising out of the use or hiring of rental cars.
3. costs or expenses incurred prior to the granting of support by **Us**, or which are based directly or indirectly on the amount of any award.
4. costs for pursuing a claim for **Bodily Injury**, loss or damage caused by or in connection with the **Insured Person(s)** trade, profession or business
5. any claim where **We** or the legal representative consider that the prospects of success in achieving a reasonable settlement are insufficient and/or where the laws, practices and/or financial regulations of the country in which the incident occurred preclude the **Insured Person** from obtaining a satisfactory settlement or where the costs of taking any action will be greater than any award.
6. any claim due to ownership, possession or use of mechanically propelled vehicles which term shall include, but is not limited to, rental cars, aircraft or other aerial device, hovercraft or water-craft, firearms or weapons.
7. any claim caused by the **Insured Person** being under the influence of intoxicating liquor or drugs (except as medically prescribed by a **Qualified Medical Practitioner**),
8. any claim related to activities requiring the use of motorised equipment, organised sporting activity, hazardous Employment or occupation.
9. claims against an employer whilst on an **Insured Journey**.
10. any claims for professional negligence.

Section 9: Hi-Jack and Kidnap

We will pay a benefit to the **Insured Person** for each complete 24 (twenty-four) Hour period of detention and up to the amount specified in the Schedules of Benefits/Compensation if during an **Insured Journey** the **Insured Person** is illegally held against their will due to a Hi-jack or Kidnap.

If the **Insured Person** is the victim of a Hi-jack or Kidnap which occurs during an **Insured Journey** this Insurance will be automatically extended until the **Insured Person(s)** has been returned to their place of residence at the end of the **Insured Journey** or for a period not exceeding 30 (thirty) days in all whichever the sooner.

Conditions applicable to Section 9

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

The **Insured Person** must give **Us** a written statement from an appropriate authority that confirms the Hi-jack or Kidnap took place and how long it lasted.

Exclusions applicable to Section 9

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 – 40

We will not pay:

1. any claim which is not confirmed and proven by the relevant authorities and a report obtained. Such report will confirm the events of the Hi-jack or Kidnap, how long it lasted for and will detail any action taken by the emergency authorities and the Police.
2. if the **Insured Person** is individually selected against as a victim following their own activities or of their Family or of their business, causing a reasonable expectation of increased risk.
3. ransom payments.

Section 10: Document Replacement

We will pay to the **Insured Person** up to the amount stated in the Schedules of Benefits/Compensation for the replacement of business samples and documents not owned by the **Insured Person** which are lost, stolen or damaged on an **Insured Journey**.

Conditions applicable to Section 10

1. The commercial wholesale value of lost, stolen or damaged business samples and documents must be substantiated in writing to **Us** or **HealthWatch** in the event of a loss by the **Insured Person(s)** employer.
2. **We** will deduct any amount paid under this Section from any amount paid under Sections 4 and 5.
3. Should the **Insured Person** be a victim of a theft it must be reported within 24 (twenty four) hours to the police in the country where the **Insured Person** is located at the time of loss. Cover is not provided for loss, theft or damage where the **Insured Person** fails to exercise due diligence, which means the performance of all vigilant activity, attentiveness, care and personal control that would, in similar circumstances, be taken by a reasonable and prudent person to guard and protect their documents from loss, theft or damage.

Exclusions applicable to Section 10

We will not pay:

1. for documents which are left **Unattended** by the **Insured Person** even if left obscured in a securely locked vehicle protected by an alarm.

Section 11: Catastrophe

We will pay to the **Insured Person** up to the amount stated in the Schedules of Benefits/Compensation for the cost of providing other accommodation similar to reserved or booked accommodation which cannot be lived in because of fire, explosion, earthquake, civil commotion, storm, tempest or flooding.

Conditions applicable to Section 11

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. The **Insured Person** must provide **Us** or **HealthWatch** with a written statement from an appropriate national or local authority confirming the reason for and the nature of the Catastrophe and how long it lasted for.

Exclusions applicable to Section 11

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 – 40

We will not pay:

1. any expenses that the **Insured Person** would normally have to pay for during the period shown on the travel itinerary.
2. any claim resulting from the **Insured Person** travelling against the advice of the appropriate national or local authority.

Section 12: Violent Assault

Should the **Insured Person** be a victim of an unprovoked violent assault, causing serious **Bodily Injury** which requires immediate medical attention, this Policy provides for reimbursement of expenses incurred for medical treatment and/or

in-patient Hospitalisation or clinic admission up to the amount stated in the Schedules of Benefits/Compensation, provided that the **Insured Person** reports the incident to the Police within 24 (twenty four) Hours of the attack and obtains a written Police Report.

Conditions applicable to Section 12

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. If the **Insured Person** is hospitalised as an in-patient for more than 24 (twenty four) Hours as the result of a mugging, someone must contact **HealthWatch** on behalf of the **Insured Person** immediately. If this is not done, it could mean that **We** or **HealthWatch** may not provide any cover.
2. No cover is afforded under this Section in respect of all Person(s) who have attained the age of 80 (eighty) years.

Exclusions applicable to Section 12

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 – 40

We will not pay:

1. additional expenses incurred for in-patient treatment not specifically or prior authorised by **Us** or **HealthWatch** 12 (twelve) hours after the mugging or violent assault to the **Insured Person**.
2. for claims relating to persons who have attained the age of 80 years

Section 13: Lost or Stolen Domestic Keys

We will pay to the **Insured Person** up to the amount stated in the Schedule of Benefits/Compensation for the receipted costs incurred in the obtaining of replacement lost or stolen house keys, vehicle keys and other domestic keys, which domestic keys were lost or stolen during an **Insured Journey** and belong to the **Insured Person** or any member of the **Insured Person(s) Immediate Family** or household or travelling companion or anyone employed by the **Insured Person** (including a **Close Business Colleague**).

Conditions applicable to Section 13

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. The **Insured Person** shall always act in a prudent manner and exercise reasonable care for the safety and supervision of the **Insured Person(s)** keys as if uninsured.
2. Domestic keys must not be packed in **Baggage** that the **Insured Person** checks-in at any airport or other departure zone and must be always kept with the **Insured Person** during their **Insured Journey** and must never be left **Unattended** or with persons not known to the **Insured Person**.

Exclusions applicable to Section 13

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 – 40

We will not pay:

1. Expenses reimbursed or benefits payable by the **Insured Person(s)** own insurance provider or their employer's insurance provider.
2. Residences other than the **Insured Person(s)** primary residence or business or any residence hired or rented by the **Insured Person**.
3. Keys to any vehicle not owned by the **Insured Person**.
4. Wear and Tear, gradual deterioration, inherent fault and/or damage.

Section 14: Purchase Protection Insurance

Eligible Card(s):

Credit and/or Debit Platinum VISA, Platinum MasterCard, ELITE MasterCard, Privilege Card, Aegean Mastercard
Credit and/or Debit Business VISA, Business MasterCard, Business Aegean Mastercard;
Credit and/or Debit Gold VISA or Gold MasterCard, Gold ETEK Card;
VISA Classic Credit and MasterCard Classic Credit and Classic Blue MasterCard Credit Card,

When the **Insured Person** fully charges a covered article purchase to their **Card** during an **Insured Journey** (the “**Covered Article**”), this Insurance protects that article if it is lost, stolen or accidentally damaged, until the **Insured Person** returns to their **Country of Domicile**. The **Insured Person** is covered up to an amount per occurrence as stated in the Schedule of Benefits/Compensation herein, provided that the item is not covered under a manufacturer’s warranty, or under a shop-warranty, or under any other extended warranty agreement or source of indemnity, such as household contents insurance.

We will pay, subject to the Terms, Conditions and Exclusions of this Policy, either:

- (a): the cost of the Covered Article, or
- (b): the actual cost to repair or replace the Covered Article with an article of like kind and quality.

Schedule of Compensation under Section 14:

Limits Of Indemnity:

- (a): €500 Maximum any one Covered Article. **We** shall not be liable to pay more than the intrinsic value of a lost or damaged item which is part of a pair or set purchased as a single Covered Article;
- (b): €1,000 in all any one loss involving more than one Covered Article;
- (c): €2,500 in all in the **Period of Insurance**, any one **Insured Person**;
- (d): €250,000 in all in the **Period of Insurance** in respect of all **Insured Person(s)**.

In respect of ELITE and Privilege **Card** holders only, this section is extended to cover sports equipment less than 12 (twelve) months old, the cost of which was originally charged to the ELITE or Privilege **Card**. Sports Equipment cover is provided following **Aggravated Theft** whilst on an **Insured Journey**, for replacement costs up to the original purchase price.

- (a): €500 Maximum any one Covered Article; nevertheless, **We** shall not be liable to pay more than the intrinsic value of a lost or damaged item which is part of a pair or set purchased as a single Covered Article;
- (b): €1,500 in all any one loss involving more than one Covered Article;
- (c): €5,000 in all in the Period of Insurance, any one **Insured Person**;

Excess:

€75.00 each and every loss, each **Insured Person**.

Conditions applicable to Section 14

The following Conditions apply to this section. Please also refer to the General Conditions on pages 35 - 38

1. The **Insured Person** must take all necessary action to avoid or diminish loss or damage to Covered Articles, including taking all reasonable steps to get back any lost or stolen articles.
2. If any loss or damage occurs, notice of claim must be provided in accordance with the “How To Make A Claim” section within this Policy.
3. Claims for theft or loss of Covered Articles will not be considered unless the theft or loss is reported to the Police, or an appropriate authority where the incident took place, immediately upon discovery and a written Police Report obtained within 24 (twenty four) hours of loss. Liaison with the Police and obtaining written Police Reports to support a claim is the sole responsibility of the **Insured Person**.
4. Valid claims payable under this Policy for any loss or damage will be paid immediately upon receipt of the written proof of such loss or damage and all required information or documentation necessary to support the claim. For damaged items a repair estimate must be obtained either stating the cost of repairs or confirming that the article is beyond repair. For lost, stolen or damaged property, the **Insured Person** must provide a detailed description of the Covered Article along with its date of purchase and its value.
5. **We** may in any claim for damage recoverable hereunder, require the **Insured Person** to send the damaged Covered Article to an address designated by **Us** at the Insured Person(s) own expense.

Coverage shall be void if, whether before or after a claim, the **Insured Person** has concealed or misrepresented any material fact or circumstances affecting this Policy.

Should the **Insured Person** purchase particularly **Valuable** items while on an **Insured Journey**, which exceed the Maximum Covered Article Limit (as stated in the Schedule of Benefits/Compensation), such purchase(s) should be insured under a separate Insurance policy, because **We** cannot guarantee that such articles will be covered for their full replacement value if lost, stolen or accidentally damaged.

7. Under no circumstances should newly purchased Covered Articles ever be left unattended, or with persons not known to the **Insured Person**, particularly at an airport, seaport, railway station or in a hotel room or in a ship's cabin (whether locked or not), or in vehicles (even if protected by an alarm), or any public transport or any area or place that has public and/or common access, even if monitored by security staff and/or security cameras (such as CCTV).

Exclusions applicable to Section 14

The following exclusions apply to this section. Please also refer to the General Exclusions on pages 39 – 40

We will not pay:

1. the **Excess** amount stated within this section;
2. more than the limit of indemnity stated within this section;
3. for loss or damage which is covered under any other insurance or which would be so covered but for the existence of this Insurance;
4. claims for loss of or damage to and/or theft of:
 - [a]: **Unattended** articles;
 - [b]: sports equipment whilst in use, including firearms and weapons (other than ELITE and Privilege **Card** holders as above);
 - [c]: Cellular or Mobile Telephone(s) and their accessories including, but not limited to, *i-Pods*, *MP3* players or similar mobile personal stereo devices, and/or *GPS* navigation and tracking systems, or lap-top computers
5. claims for articles which the **Insured Person** damages through alteration or abuse;
6. claims for articles that are used, rebuilt or remanufactured or are purchased for resale or commercial use;
7. claims for loss by theft where theft cannot be substantiated;
8. claims for loss of or damage to property whilst in the care, custody or control of any airline, **Common Carrier**, their handling agent or shipping merchant;
10. for claims for loss or theft which was not reported to the Police, or an appropriate authority where the incident took place, immediately upon discovery and a written Police Report obtained within 24 (twenty four) hours of loss;
11. for claims for loss or damage where the **Insured Person** has failed to give notice of claim occurrence within 25 (twenty-five) days of the incident that gives rise to a claim;
12. for claims where the **Insured Person** does not have an original purchase invoice or sales receipt.
13. for inherent product defect and natural disaster;
15. for legal confiscation or detention by any government, public authority or customs official;
17. claims for shipping, delivery and handling expenses, or installation, assembly, service or any warranty charges;
18. claims for covered articles purchased within the **Insured Persons Country of Domicile**;
19. any claim that is attributable or is as a direct consequence of the Insured Person behaving irresponsibly;
20. claims due to the non-fulfilment of the instructions or recommendations of the manufacturer or distributor concerning the use of the covered articles;
21. claims for any purchases made by the Insured Person via the *InterNet* or any similar computer related transaction that is billed to a **Card**.

General Conditions

Each section of the policy contains specific conditions. They must be read in conjunction with the following General Conditions which apply to all sections unless otherwise stated.

It is a condition precedent to liability that on the happening of any event which may give rise to a claim the **Insured Person** must tell **Us** immediately and give **Us** all the assistance **We** may reasonably require whether or not they intend to claim. When the **Insured Person** tells **Us** about an incident or claim **We** may pass on information relating to it to any relevant claims related database.

1. Alteration of Risk:

Where there is a deliberate or reckless misrepresentation or non-disclosure of relevant information after the effective date of this Insurance which increases **Our** exposure, the policy will be treated as void and of no effect from the date of such misrepresentation or non-disclosure and no return of premium will be allowed.

Where such misrepresentation or non-disclosure is not deliberate or reckless but would have affected **Our** consideration of the risk, **We** may take the following actions with effect from the date of the misrepresentation or non-disclosure:

- a. if **We** would not have provided insurance on any terms, **We** will treat the policy as void and of no effect and **We** will return the amount of any premiums paid from that date;
- b. if **We** would have entered the contract but at an additional premium, **We** have the right to reduce any claim payment in proportion to the amount of the underpayment; and/or
- c. if **We** would have entered the contract but applied different terms, **We** have the right to amend the terms to those which would have been applied.

2. Assignment:

The **Policyholder** may not assign or transfer the benefits under this policy. **We** shall not be bound to accept or be affected by any notice of any trust charge, lien, purported assignment or other dealing with or relating to this policy.

3. Contribution & Other Insurances:

The **Insured Person** must inform **Us** as soon as an event giving rise to a claim has occurred if there is other insurance that would, or would but for the existence of this insurance, pay such claim. If at the time of an event giving rise to a claim there is any other insurance policy in force in the **Insured Person's** name which covers the **Insured Person** for the same expense, any amount collectible from such other insurance will be deducted from any amount **We** will pay.

We will not pay any claim in respect to care, treatment, services or supplies furnished by any program or agency funded by any government.

4. Fit To Travel:

The **Insured Persons** and/or **Immediate Family** or **Close Business Colleagues** who are part of the travelling party, must be fit to travel when booking any **Insured Journey**

5. Fraud:

If an **Insured Person** or anyone acting on their behalf makes a fraudulent claim under the policy, **We**:

- a. Are not liable to pay the claim; and
- b. May recover from the **Insured Person** any sums paid by **Us** in respect of the claim;

5. Premium Payment Warranty:

The **Policyholder** warrants that all premiums due to **Us** under this policy are paid within the terms agreed from the inception date. Non-receipt by **Us** of such premium, by midnight (local standard time) on the premium due date, shall render this policy void with effect from inception.

6. Reasonable Precautions:

All **Insured Persons** must take all reasonable precautions to avoid **Accident, Bodily Injury** or **Illness** to any person, or loss, destruction or damage to their property and must always act as if they are uninsured and must comply with all legal requirements and safety regulations.

If in relation to any claim the **Insured Person** has failed to fulfil any of these conditions, they will lose their right to indemnity or payment for that claim.

The **Insured Person** must take all reasonable steps to get back any article which has been lost or stolen. They must if asked to, identify the person they believe to be responsible for the loss and to assist with any prosecution if necessary.

7. **Recovery from Third Parties:**

In the event that a third party is held liable for all, or part of any claim paid under this policy **We** may exercise **Our** legal right to pursue the third party to recover **Our** outlay. The **Insured Person** will upon **Our** request agree to and permit **Us** to do such acts and things as may be necessary or reasonably required for the purpose of exercising this right. **We** will pay the costs and expenses involved in exercising the right against third parties.

The **Insured Person** shall cooperate with **Us** to obtain or pursue a recovery or contribution from, or in the prosecution of any and all valid claims **We** may have against any other insurance or third parties

8. **Sanctions Limitation Clause:**

We shall not provide cover or pay or be liable for any claims or provide any benefit under this policy if by providing any cover, paying any claims or providing any benefit under this policy would expose **Us** to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, **United Kingdom** or United States of America.

9. **Insured Person Cover and Limits Suitability Review:**

Insured Persons must check upon enrolment into this policy that the sums insured and sections of cover are adequate for their personal needs and if not, they should notify **The Policyholder** prior to travel to enquire if alternative cover arrangements can be made

10. **Notice of Claim**

in the event of an incident which may give rise to a claim, notice should be given to **HealthWatch** in accordance with the directions under the section "How to Make a claim" contained within this policy wording.
Failure to do so may prejudice the **Insured Person's** claim.

11. **Salvage**

The **Insured Person** must keep any damaged items for potential recovery by **Us** as Salvage. If required to, such damaged items are to be sent at the **Insured Person(s)** own expense to **HealthWatch** for examination within 30 (thirty) days of the date of the request.

12. **Admittance of Liability**

Except with the written consent of **Us** or **HealthWatch**, no person is entitled to admit liability on **Our** behalf or to give any representations or other undertakings binding upon **Us**. **We** or **HealthWatch** shall be entitled to conduct all proceedings arising out of or in connection with claims in the name of the **Insured Person** and to instruct solicitors of **Our** own choice for this purpose.

13. **Observance of Terms and Conditions**

The due observance and fulfilment of the Terms and Conditions of this Insurance by the **Insured Person** or anyone acting on the **Insured Person(s)** behalf shall be a condition precedent to any liability of **Us** to make any payment under this Insurance.

14. Medical Examination

In the event of the **Bodily Injury** or death of an **Insured Person**, **We** shall have the right to have a medical examination or post-mortem at the expense of the legal representative(s) of the **Insured Person** as often as reasonably required, including if necessary, autopsy and dis-interment, unless prohibited by law.

15. Other Compensation

If the Insured Person(s) flight is cancelled or delayed, this Insurance shall be in excess of any compensation and/or financial assistance that the Insured Person is entitled to under Regulation (EC) No. **261/2004** Articles 14 (1) and 14(2) in relation to Air Passengers Rights and/or Regulation (EC) No. 889/2002 on air carrier liability in the event of accidents.

16. Jurisdiction of the Policy

This Policy is governed by the laws of Cyprus. In the event of a dispute between **Us** and **The Policyholder** and/or the **Insured Person** as to the interpretation of this Insurance, such dispute may be referred to a court of competent jurisdiction in Cyprus.

The Greek interpretation of this Insurance and the words used shall prevail, should the wordings contained within this Policy of Insurance be translated into any other language. Should this Insurance be translated into any other language (including the English language), the translation is made **only** for convenience and **only** the Greek language version is valid and binding on **Us**.

17. Claims discretion

The Policyholder shall have no discretion as to which claims are paid, when they are paid, nor the amounts paid to the **Insured Person**. All such decisions shall rest solely with the **Us** or **HealthWatch**.

18. Reasonable steps to reduce a loss

The **Insured Person** must take all reasonable steps to avoid or reduce any loss and must keep to all the Terms, Exclusions, Conditions and endorsements of this Policy in order to avoid a claim being rejected by **Us** or **HealthWatch**. The **Insured Person** is responsible for and must provide **Us** or **HealthWatch** with all the information and documents needed to assess the claim correctly and so pay the claim fairly and properly.

19. Claim documentation

We will not be liable for any claim for which the **Insured Person** fails to provide necessary, correct, original and/or official documents that are required by **Us** or **HealthWatch** to support the intended claim. All documents must be submitted within 90 (ninety) days of the incident giving rise to a claim and must be originals. The **Insured Person** must comply with all the Policy Conditions, as **We** will only pay claims that are completely substantiated in the manner requested. A claim received without the required documentation will not be accepted.

20. Important Information and Special Terms and Conditions

This Policy contains certain Terms, Conditions and Exclusions in each Section, in addition to the Terms, General Conditions and General Exclusions applying to all Sections. Failure to comply with these Terms and Conditions means **We** will not accept any claim that the **Insured Person** makes, as **We** will only pay claims that are completely substantiated in the manner requested.

Many claims for loss, damage or theft are caused by travellers not being careful enough with their belongings. If the **Insured Person** does not take good care of their property, **We** or **HealthWatch** may totally or partially reject any claim subsequently made.

Certain Terms and Conditions relate to the **Insured Person(s)** health or the health of other persons who might not be travelling with the **Insured Person** but whose wellbeing the **Insured Person(s)** **Insured Journey** may depend on. In such circumstances, **We** will not cover claims arising from medical problems which the **Insured Person** or other person(s) had or knew about before cover commenced.

Should the **Insured Person** take part in certain sports or activities where there is a high risk of sustaining **Bodily Injury**, they may not be covered under the Terms and Conditions of this Insurance. Please refer to the **General Exclusions** on pages 39-40 which are applicable to all Sections.

21. Important General Conditions

The **Insured Person(s)** attention is drawn to the following:

- a) Checked-in (*held*) **Baggage** claims will not be considered unless supported by a Property Irregularity Report (PIR), which must be obtained should the airline or other **Common Carrier** or their baggage-handling agent lose, damage, delay or misdirect **Baggage** belonging to the **Insured Person** on an **Insured Journey** abroad. The **Insured Person** must also record full details of the incident in writing to the airline, shipping line or other **Common Carrier** or their baggage-handling agent which states the date of loss, theft, damage, delay or misdirection of the **Baggage** whilst in their care, custody or control. Airline or other **Baggage** tags must be kept. Should the **Baggage** be recovered, the airline, shipping line, **Common Carrier** or their baggage-handling agent must confirm in writing the date and exact time of delivery to the **Insured Person**.
- b) The airline, **Common Carrier** or their baggage-handling agent must also confirm in writing whether or not the **Insured Person** has received any financial compensation, or discount vouchers, or complimentary air miles from them, due to **Baggage** loss, damage, delay or misdirection.
- c) **Valuables**, Money and important Documents are not covered if packed in **Baggage** that the **Insured Person** checks-in at the airport, or other departure zones. These must always be kept with the **Insured Person** during their **Insured Journey** as hand-luggage. Under no circumstances should **Valuables**, Personal Effects, mobile telephone(s) or other personal belongings ever be left unattended, or with persons not known to the **Insured Person**, particularly at an airport, seaport, railway station or in a hotel or in a ship's cabin or in vehicles or any public place.
- d) If the **Insured Person** is taking particularly valuable items on their **Insured Journey**, these must be insured under a separate insurance policy arranged in the **Insured Person(s) Country of Domicile**, as this Insurance cannot guarantee that such items will be covered for their full replacement value if lost, stolen or damaged.
- e) The **Insured Person** must not take more cash than is essential on their **Insured Journey** and should use their credit card wherever possible and use secure safety deposit boxes whenever they are available. Cover for cash is only in respect of money carried on the person of the **Insured Person**.
- f) Where **Baggage** has been delayed for a significant period following disembarkation on an Outward **Insured Journey** only (unless stated as otherwise in the Schedules of Benefits/Compensation), the **Insured Person** is entitled to make reasonable emergency purchases of essential items of clothing or requisites but must keep all of the original sales receipts for the replacement items in order to make a valid claim.
- g) If the **Insured Person** disappears and their body is not found within one year after disappearance, should sufficient evidence be produced to **Us** that leads to the conclusion that the **Insured Person** sustained death by **Accidental Bodily Injury**, **We** will pay the amount stated in the Schedules of Benefits/Compensation. Payment is subject always to the proviso that the beneficiary(ies) or legal heirs shall sign an undertaking to refund such sum to **Us** if the **Insured Person** is subsequently found to be alive.

General Exclusions

Each section of the policy contains exclusions. They must be read in conjunction with the following exclusions which apply to all sections unless otherwise stated. This policy does not cover:

1. **War** whether war is declared or not, hostilities or any act of war or civil war
2. **Terrorist Act** including the use of biological or chemical materials
3. Nuclear reaction, nuclear radiation or radioactive contamination
4. The **Excess**, being the first amount of each and every claim under each section, where shown as applicable in the **Schedule of Benefits/Compensation** applicable to the **Level of Cover** shown on the **Certificate of Insurance**.
5. Any claim occurring from a **Pre-Existing Condition**
6. Any claim occurring outside of the **Period of Insurance** shown on the **Certificate of Insurance**.
7. Any claim for any losses that are not directly covered by the terms and conditions of this policy.
8. Any claim occurring if the **Insured Person** fails to be in compliance with all conditions and provisions of this insurance.
9. Any claim for additional expense(s) or fee(s) arising from errors or omissions of the **Insured Person** booking arrangements or their failure to obtain relevant visa or passport documents.
10. Any claim occurring because the **Insured Person** acted illegally (including misrepresentation, fraud, deception or hiding a material fact), or broke any government prohibition, travel warning or regulation including visa requirements.
11. Any circumstance that could have been reasonably foreseen as giving rise to a claim for Cancellation, Travel delay or Personal Accident section **Period of Insurance**.
12. The **Insured Person** engaging in any kind of flying other than as a passenger in a commercially licensed passenger carrying aircraft, unless with prior agreement from **Us** in writing.
13. The **Insured Person** being a full-time member of the armed forces of any nation or international authority, or a member of any reserve forces called out for permanent service.
14. The **Insured Person's** own criminal or malicious act or committing or attempting to commit suicide or intentionally inflicting self-injury or participating in civil commotions or riots of any kind.
15. Any claim arising from an **Insured Journey** in a destination, region or country where prior to the commencement of the **Insured Journey** warnings had been issued by the Ministry of Foreign Affairs against all, or all but essential travel to such destination, region or country.
16. Any claim arising in an **Excluded Territory** including Belarus, Cuba, Iran, North Korea, Russia, Syria & Ukraine.
17. Any claim arising from any participation in any sport, activity or athletics on a professional or semi-professional basis.
18. Claims where there is another insurance policy covering the same risk
19. Claims in respect to care, treatment, services or supplies furnished by any program or agency funded by any Government.
20. Costs recoverable elsewhere or any costs the **Insured Person** would have expected or would have been required to pay, if the event resulting in the claim had not happened.
21. The **Insured Person** being under the influence of alcohol as defined by the motor vehicle laws at their **Insured Journey** destination.
22. Claims arising from the **Insured Person** being under the influence of or due wholly or partly to the effects of drugs, narcotic agents or substance abuse, other than for drugs taken in accordance with treatment prescribed and directed by a **Qualified Medical Practitioner** but not for the treatment of drug, narcotic agents or substance abuse.
23. Any claim occurring from the **Insured Person** being in control of a motorcycle or vehicle without a current motorcycle or vehicle license valid for the country they are travelling in and the relevant licence required within the **Country of Domicile** or the **Insured Person** being a passenger travelling on a motorcycle or in a motor vehicle that is in the control of a person that does not hold a current motorcycle or motor vehicle license valid for the country they are travelling in and the relevant licence required within the **Country of Domicile**.
24. Costs of telephone calls or faxes, food, drinks, laundry, taxi fares, car hire or indirect losses which occur in connection with or as a result of the main loss
25. Any claim arising from any act of **War** or **Terrorist Act**, other than when such event first arose after the **Insured Person** started their **Insured Journey** and where they had no direct or indirect involvement in such event. In any event cover shall only be in force for a maximum of 30 days at the **Insured Person's Insured Journey** destination or until the **Insured Journey** is scheduled to end, the **Insured Person** returns to their **Country of Domicile**, or they exceed the maximum **Insured Journey** duration shown in the Schedule of Benefits/Compensation whichever occurs first.
26. normal pregnancy, without any accompanying **Bodily Injury, Illness** or complication. This policy is designed to provide cover for unforeseen events, **Accidents** and **Illnesses** and normal childbirth would not constitute an unforeseen event.
27. Any expense related to accident or **Bodily Injury** occurring whilst the **Insured Person** is engaged in any hazardous activity, pastime or pursuit including, but not limited to, hunting, big-game-hunting, safari, paint-balling, roller-blading, skateboarding, caving, mountaineering or rock climbing normally requiring the use of ropes or guides, potholing or underground activity, skydiving, parachuting, paragliding, bungee-jumping, ballooning, hang-gliding, delta-plane flying, underwater activities that require the use of artificial breathing apparatus, scuba-diving, water-sports, canyon water-sport, kayaking, sailing or yachting outside coastal waters or from country to country, deep sea fishing, jet-boating, white water rafting, fencing, martial arts, rallying, racing of any kind other than on foot.

28. Winter Sports except for Privilege, Elite, Platinum, Business, Gold and Aegean **Card** holder(s) as defined on pages 4-8 above, provided such eligible cardholder(s) are only skiing on-piste
29. Psychiatric disorders, infirmities or conditions for which treatment has previously been received
30. Business interruption, business inconvenience and subsequent loss of profit of any kind
31. Any Journey in excess of a defined period of an **Insured Journey**
32. Any claims where the **Insured Person** is travelling for the purpose of obtaining, or to receive, medical advice or treatment abroad.
33. Any cardiovascular or circulatory condition including, but not limited to, a heart condition, hypertension, blood clots, raised cholesterol, stroke or aneurysm that has occurred at anytime prior to the commencement of cover under this Insurance and/or prior to any Journey.
34. Where the **Insured Person** is contracted to work abroad
35. Any claim arising from the tour operator, travel agent, airline, common carrier or other company, firm or person becoming insolvent or being unable or unwilling to fulfil any part of their obligation, including legal costs arising from any subsequent legal proceedings and costs of expenses incurred.
36. Any claim arising directly or indirectly from withdrawal from service, temporary or otherwise, of an aircraft, Common Carrier or sea vessel, or coach or train under order from the Civil Aviation Authority (or a port, road or rail authority), or of any similar regulatory authority in any country
37. Any claim arising directly or indirectly from the closure of airspace (temporary or otherwise) under order from the Civil Aviation Authority, or of any similar executive authority in any country (including national Air Traffic Control)
38. In respect of Baggage, Personal Effects, Valuables, Keys Money and/or Cash that the **Insured Person** leaves **Unattended** in a public place, even if monitored by security staff and/or security cameras (such as CCTV), including, but not limited to, a beach or beside a swimming pool (even if concealed), or in a bag or coat hanging off the back of a chair, or left in a cloakroom, or in a hotel room (unless in a securely locked safe), or in a ship's cabin, or in any aeroplane, train or vehicle, or any area or place that has public and/or common access.
39. No insurance cover or benefit shall be provided, and no sum shall be payable under this policy for:
 - the use of, or inability to use, any application, software, or programme in connection with any electronic equipment including, but not limited to, a computer, a smartphone, a tablet or an internet capable electronic device; or
 - any computer virus; or
 - any computer related hoax relating to (a) and/or (b) above; or
 - loss of, or damage to, any electronic data wherever it is stored.
 However, this Exclusion does not apply to benefits payable under Sections 1 and 2 and 3(a) herein.
40. An infectious or contagious disease, an outbreak of which has been declared a Public Health Emergency of International Concern (PHEIC) by the World Health Organisation (WHO) and/or by the European Union Aviation Safety Agency (EASA) and/or the European Centre for Disease Prevention and Control (ECDC). This Exclusion shall apply to claims made after the date of any such declaration(s) other than where a relevant diagnosis has been made by a qualified medical practitioner before the date of any such declaration(s). This Exclusion will continue to apply until the WHO, EASA and/or ECDC cancels or withdraws any relevant PHEIC. Infectious or contagious disease means any disease capable of being transmitted from an infected person, animal or species to another person, animal or species by any means.

Complaints Procedure

We are dedicated to providing **Insured Persons** with a high-quality service and want to ensure that this is maintained at all times. If the **Insured Person's** feel that **We** have not offered a first-class service, please write and tell **Us** and **We** will do **Our** best to resolve the problem.

If the **Insured Persons** have any questions, concerns or problems regarding any aspect of this insurance or the handling of a claim they should contact **Us**. If the **Insured Persons** wish to make a complaint, they can do so at any time by filling out and submitting the complaint form, which is available on **Our** website (www.genikesinsurance.com.cy) or at any of **Our** Branches.

When your complaint is received, **We** will send a confirmation that **We** have received it, within two (2) working days. Your complaint will be handled by specialized members of our staff. We reassure you that **We** will handle it fairly, without prejudice. Within fifteen (15) working days you will receive a written reply informing you of the results of our investigation and the actions we will take pertaining to your complaint, if applicable. While **We** make every effort to respond to all complaints within fifteen (15) working days, there are instances where this is not possible e.g. due to the complexity of a complaint. If we need more than fifteen (15) days to investigate a complaint, **We** will inform you accordingly, in due time, explaining the reasons for the delay.

Beyond the Insurer:

If you remain dissatisfied following the final written response, you may contact the Financial Ombudsman (13 Lord Byron Avenue, 1096, Nicosia, telephone 22848900, fax 22660584, website www.financialombudsman.gov.cy) pursuant to the Establishment and Operation of the Body for the Out-of-Court Settlement of Financial Disputes Law of 2010 as amended.

Our Promise:

We will:

- acknowledge all complaints promptly.
- investigate quickly and thoroughly.
- keep **The Policyholder** and the **Insured Person** informed of progress.
- do everything possible to resolve the complaint.
- use the information from complaints to continuously improve **Our** service.

Data Protection

Protecting the Insured Person's data

Protecting **Insured Person's** privacy is very important to **Us**. **Our** full Personal Data Privacy Statement can be found here:

<http://www.genikesinsurance.com.cy>

We are committed to protecting privacy and handling personal data in an open and transparent manner.

Our Personal Data Privacy Statement provides an overview of how **We** collect and process the **Insured Person's** personal data, including sensitive data, and inform the **Insured Person** about his/her rights under the EU General Data Protection Regulation ("GDPR") and any law supplementing or implementing the GDPR; It describes how **We** process the **Insured Person's** personal data and protects his/her rights, as well as other important information regarding the safety and use of personal data.

Personal data provided to Us

If **The Policyholder** or **Insured Person** provides **Us** with personal data about other people to be insured on the policy, such as **Family** or friends, **The Policyholder** or **Insured Person** agrees to obtain their agreement and notify them of **Our** use of their personal data.

How we use personal data

We will use the **Insured Person's** personal data to assess and manage claims and ensure the efficient administration of policy benefits, and to manage complaints. The legal basis for processing the **Insured Person's** personal data is the performance of our contract with **The Policyholder** and to provide the **Insured Person** the services described in this policy.

Special categories of personal data

Some personal data is defined by the current Data Protection legislation as special categories of sensitive personal data such as information about health. **We** may collect and process such data from **The Policyholder** and the **Insured Person** for insurance purposes where permitted by relevant legislation and the **Insured Person** gives explicit consent.

Who we share the Insured Person's information with

We may share the **Insured Person's** personal data with **The Policyholder**, our reinsurers, claims administrators, loss adjusters and legal consultants. **We** may also disclose certain personal data to **Our** service providers, contractors, agents and group companies that perform activities on **Our** behalf. These transfers would always be made in compliance with relevant Data Protection legislation.

We may transfer **The Policyholder** and **Insured Person's** data to insurance market participants which are located outside of the European Economic Area. These transfers would always be made in compliance with relevant Data Protection legislation.

Data retention and erasure

We will not keep the **Insured Person's** data for longer than is necessary for the purposes for which the data is processed and for compliance with legal or regulatory obligations.

The Insured Person's rights

If the **Insured Persons** have any questions about **Our** use of personal data, they may contact **Our** Data Protection Officer in writing at the following addresses: (a) via post at: 4, Evrou street, Eurolife House, 2003 Strovolos, Nicosia, Cyprus, P.O. Box 21668, 1511 Nicosia, Cyprus or (b) via email at: dpo@gic.bankofcyprus.com.

Right to Complain

You also have the right to complain to the Office of the Commissioner for Personal Data Protection. You can visit their website to find out how to submit a complaint (www.dataprotection.gov.cy).