

Studentguard + Group Personal Accident & Travel Insurance

POLICY SCHEDULE

Policy Wording Applicable: Ortus Underwriting Studentguard + Group Travel 2025V1

This Schedule forms part of the policy. Please keep it safe and note that you must advise your insurance intermediary of any changes to the risk and items to be covered.

Policy Number:	ORL/GPAIBT/10713499	Agency Number:	ONE1
Insurance Intermediary:	One Education, a trading style of One Broker (GDIS) Ltd		
Group Master Policyholder:	Hilderstone College		
Postal Address:	14, 16, 18 St Peters Road, Broadstairs, Kent, United Kingdom		
Postcode:	CT10 2JW		
Period of Insurance	From: 26th January 2026	To: 25th January 2027	
Renewal Date:	26th January 2027	Date of Issue:	16th January 2026
Business Description:	Language School		
Premium:	As declared quarterly at a rate of £6.33 inclusive of IPT at 20% per student week.		
Security:	Underwritten by Liberty Managing Agency Limited for and on behalf of the members of Lloyd's Syndicate 4472 trading as Liberty Specialty Markets		
Unique Market Reference:	B1307C251491		

Declarations:

The Group Master Policyholder must forward quarterly declarations confirming the names of all Insured Persons covered under this policy, the date of course booking, the commencement date of the Academic Course, the duration of cover and the premium due to Us. Such declarations and the premium must be sent to us within 30 days of the end of the end of the quarter in which the course booking was made.

Category:	Insured Persons:
A	Any student who has booked an academic course with the Group Master Policyholder.

Category:	Operative Time
A	Cover under Section 1 - Cancellation, Curtailment or Change of Itinerary commences as soon as the journey is booked and ends when the student leaves home to commence the journey. Cover under Section 2 – Course Fees commences as soon as the academic course is booked and ends when the student has completed their course. Cover under the other sections commences as soon as the student leaves home on the first day and ends when they reach home on the last day of the journey. Cover for up to 14 days independent travel within Europe is also covered by this policy.

Benefits: TRAVEL		
Section	Sum Insured / Limit of Indemnity*	Excess
1. Cancellation, Curtailment or Change of Itinerary	Up to £7,500	Nil
2. Course Fees	Up to £7,500	Nil
3. Medical Expenses		
A. Medical Expenses	Up to £10 million	Nil
A1. Emergency Dental Pain Relief Treatment	£ 500	Nil
A2. Emergency Mental Health Treatment	£2,000	Nil
B. Emergency Repatriation Expenses	Up to £10 million	Nil
C. Supplementary Travel and Accommodation Expenses	£5,000	Nil
4. Personal Belongings	£2,000	Nil
A. Delayed Baggage	£ 100	Nil
5. Money	£ 250	Nil
Cash (coins and/or banknotes)	£ 100	Nil
A. Fraudulent Use of Credit Cards	£ 250	Nil
B. Emergency Replacement of Passport and other Documents	£ 250	Nil
6. Personal Liability – Limit of Indemnity	£2,000,000	Nil
7. Overseas Legal Expenses	Up to £25,000	Nil

Optional Cover: Cover only applies if provided by the Group Master Policyholder and shown as Insured in the table below

	Sum Insured	Excess	Insured
Valuables Extension to Section 4. Personal Belongings	£300	Nil	Yes
Natural Disaster extension to Section 1. Cancellation, Curtailment or Change of Itinerary Section 2. Course Fees			Yes

Benefits: PERSONAL ACCIDENT	
Section 8 – Personal Accident	Sum Insured / Limit of Indemnity*
Accidental Bodily Injury resulting in:	Category A
Death	*£25,000
Loss of Sight	£25,000
Loss of Hearing one ear	£ 5,000
Loss of Hearing both ears	£25,000
Loss of Limb	£25,000
Loss of Speech	£25,000
Permanent Total Disablement**	£25,000
Permanent Partial Disablement	Up to £25,000

* Death Benefit is restricted to £5,000 for persons under 16

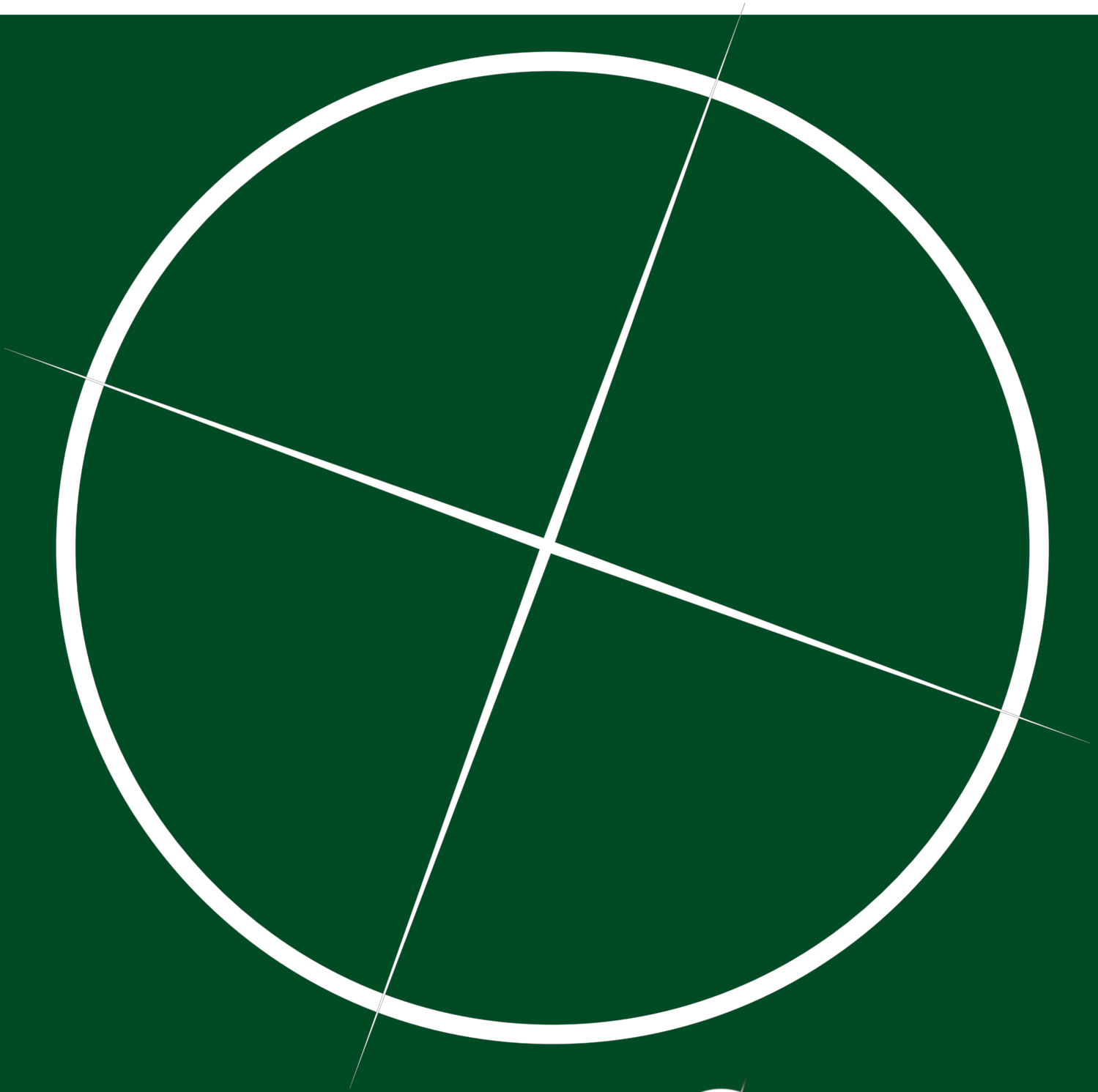
** The basis of cover for Permanent Total Disablement is Any and Every Occupation

Personal Accident: Maximum Benefit any one Insured Person	
Death and Capital Sums:	£25,000

Additional Endorsements Applicable

None.

Studentguard +
Group Personal Accident & Travel Insurance
Policy Wording



Contents	Page
Introduction	1
Contract of Insurance	1
Important Information	3
Complaints Procedure	4
Contact details for claims and help	6
Policy Definitions	8
Sections of Cover:	
Cancellation, Curtailment or Change of Itinerary	12
Course Fees	14
Medical Expenses	15
Personal Belongings	16
Money	17
Personal Liability	18
Overseas Legal Expenses	19
Personal Accident	21
Policy Conditions	22
Policy Exclusions	26
Additional Optional Extension – Natural Disaster	31

Introduction

Thank **You** for choosing Ortus Underwriting to be **Your** Insurance Provider. Ortus Underwriting is a trading name of Xact Risk Solutions Limited.

This Travel and Personal Accident insurance policy sets out the insurance protection in detail.

The premium has been calculated on the basis of the extent of cover **You** as the **Group Master Policyholder** have agreed with **Us** which is specified in the **Schedule**, the information **You** have provided and the declaration **You** have made. Please read the policy and the **Schedule** carefully to ensure that the cover meets the requirements of the **Insured Person(s)** and **You**.

Please take the time to read all these documents to make sure that the cover meets **Your** needs and that **You** understand the terms, exclusions and conditions. Please contact **Your** insurance intermediary if **You** have any questions or if **You** wish to make adjustments.

This policy consists of individual sections. **You** should read this policy in conjunction with the **Schedule** that confirms the sections insured and for any endorsements altering the cover as this gives precise details of the extent of the insurance protection in force.

You agree to make available a copy of this policy to any **Insured Person** who is eligible to make a claim under this policy.

This policy is administered by Ortus Underwriting, in accordance with the authority granted under a binding authority agreement with **Us**.

The Contract of Insurance

The policy wording, the information **You** have provided and/or the application form/statement of fact, the policy Schedule, or notice issued by **Us** at renewal and any endorsements together form the contract of insurance between **Us** and **You**, and must be read together.

In return for **You** having paid or agreed to pay the premium, **We** will provide the cover set out in this policy, to the extent of and subject to the terms contained in or endorsed on this policy.

Important

This policy is a legal contract. **You** must tell **Us** about any material circumstances which affect **Your** insurance and which have occurred either since the policy started or since the last renewal date.

A circumstance is material if it would influence **Our** judgement in determining whether to provide the cover and, if so, on what terms. If **You** are not sure whether a circumstance is material, please ask **Your** insurance intermediary who arranged this insurance. If **You** fail to tell **Us** it could affect the extent of cover provided under the policy.

You should keep a written record (including copies of letters) of any information **You** give **Us** or **Your** insurance intermediary when **You** renew this policy.

Breach of Term

We agree that where there has been a breach of any term (express or implied) which would otherwise result in **Us** automatically being discharged from any liability, then such a breach shall result in any liability **We** might have under this policy being suspended. Such a suspension will apply only from the date and time at which the breach occurred and up until the date and time at which the breach is remedied. This means that **We** will have no liability in respect of any loss occurring, or attributable to something happening, during the period of suspension.

Terms not relevant to the actual loss

Where there has been non-compliance with any term (express or implied) of this policy, other than a term that defines the risk as a whole, and compliance with such term would tend to reduce the risk of:

- loss of a particular kind, and/or
- loss at a particular location, and/or
- loss at a particular time,

then **We** agree that **We** may not rely on the non-compliance to exclude, limit or discharge **Our** liability under this policy if **You** show that non-compliance with the term could not have increased the risk of the loss which actually occurred in the circumstances in which it occurred.

Change of policy cover

The cover provided by this policy is reviewed annually and **We** may change these on any anniversary of the **Period of Insurance** with the **Group Master Policyholder**.

We will only amend the premium or terms and conditions of this policy at any other time in order to reflect a change to an **Insured Person's** circumstances, or in the event of a change in the law affecting this policy, e.g. an increase in Insurance Premium Tax or other tax.

Who is Ortus Underwriting

Ortus Underwriting are regulated by the Financial Conduct Authority (FCA). **You** can check **Our** FCA registration by visiting the FCA website at www.fca.org.uk/register or by calling the FCA on 0800 111 6768.

Important Information

Law Applicable and Jurisdiction

In the absence of any agreement in writing to the contrary this **Policy** will be governed by and construed in accordance with the laws of England and Wales. Any dispute relating to this **Policy** will be subject to the jurisdiction of the courts of England and Wales.

Use of Language

Unless otherwise agreed, the contractual terms and conditions and other information relating to this contract will be in English.

Privacy Notice

How Liberty Uses Your Personal Data

Liberty takes the protection of **Your** personal data seriously and is committed to protecting **Your** privacy. In this notice, your data refers to **You** and any **Insured Person**.

There are a number of different companies within **Our** group. The specific company which acts as the "data controller" of **Your** personal data will be the organisation providing **Your Policy** as set out in the documentation that is provided to **You**.

If **You** are unsure **You** can also contact Liberty at any time:

- a) by emailing us at dataprotectionofficer@libertyglobalgroup.com, or
- b) by post at Data Protection Officer, Liberty Specialty Markets, 20 Fenchurch Street, London EC3M 3AW, UK.

Where **You** provide Liberty or **Your** agent or **Broker** with details about another person or persons, **You** must provide this notice to that person or persons.

For Liberty to deliver insurance services, deal with any claims or complaints that might arise and prevent and detect **Fraud**, Liberty need to collect and process personal data. The type of personal data that collected will depend on Liberty's relationship with **You**: for example as a **Policyholder**, third party claimant or witness to an incident. **Your** information will also be used for business and management activities such as financial management and analysis. This may involve sharing **Your** information with, and obtaining information about **You** from, **Our** group companies and third parties such as **Brokers**, credit reference agencies, reinsurers, claims handlers and loss adjusters, professional advisors, **Our** regulators, or **Fraud** prevention agencies. Liberty also collect personal data about our suppliers and business partners (such as **Brokers**) for the purposes of business management and relationship development.

Please see the full privacy notice available at www.libertyspecialtymarkets.com/privacy-and-cookies for further information on how **Your** personal data is used and the rights that **You** have in relation to the personal data Liberty hold about **You**.

Please contact Liberty using the details above if **You** wish to see the privacy notice in hard copy.

Complaints Procedure

We're Here to Help

If **You** are dissatisfied with **Our** services, please reach out to **Us**. At Liberty Specialty Markets, we take complaints very seriously and are committed to addressing them fairly and efficiently. **We** aim to thoroughly investigate all issues raised and resolve them satisfactorily whenever possible.

Questions or Concerns?

For any questions or concerns regarding **Your Policy** or the handling of a claim, please contact **Your Broker**, intermediary, or retail agent first.

How to Make a Complaint

If **You** wish to file a complaint, **You** can do so either in writing or by phone using the contact details below:

Customer Outcomes Manager
Liberty Specialty Markets
20 Fenchurch Street
London, EC3M 3AW
United Kingdom

Phone: +44 (0)20 3758 0840

Email: complaints@libertyglobalgroup.com

To expedite the process, please include the following information when submitting **Your** complaint:

- Policy number
- The name of the person or company from whom **You** purchased **Your** insurance
- A copy of **Your Policy** schedule
- A summary of **Your** complaint, including who **You** feel is responsible

Once **We** receive your complaint, **We** will acknowledge it in writing and provide a timeline for resolution.

We are committed to helping our customers as much as possible. If there are any specific circumstances or requirements that **You** think **We** should know about, such as a disability, financial hardship, bereavement – or anything else, then please let **Us** know.

Additional Information for Lloyd's Policies

If **Your Policy** is, or **You** believe it to be, underwritten at Lloyd's, please refer to the section titled "Lloyd's Policies Only" below for more information that may assist **You** in the complaints process.

If You're Still Dissatisfied

If **You** remain dissatisfied with **Our** response to **Your** complaint or if **Our** investigation takes longer than eight weeks, **You** may have the right to refer **Your** complaint to the Financial Ombudsman Service using the details below:

Financial Ombudsman Service
Exchange Tower
Harbour Exchange Square
London E14 9SR

Phone: 0800 023 4567 or 0300 123 9123

Email: complaint.info@financial-ombudsman.org.uk

Website: www.financial-ombudsman.org.uk

If **You** are not based in the **United Kingdom** and wish to escalate **Your** complaint to **Your** local dispute resolution service, please contact **Your Broker** for guidance on which organization can assist **You**.

Alternative Dispute Resolution for Luxembourg Residents

As Liberty Mutual Insurance Europe SE is a Luxembourg-based company, **You** may also refer your dispute to any of the following dispute resolution bodies:

Commissariat aux Assurances
11 Rue Robert Stumper,
2557 Gasperich Luxembourg
Tel: (+352) 22 69 11 – 1
Email: caa@caa.lu
Website: www.caa.lu

Service National du Médiateur de la consommation – this service is not available to our commercial customers
Ancien Hôtel de la Monnaie
6, rue du Palais de Justice
L-1841 Luxembourg
Tel: (+352) 46 13 11
Email: info@mediateurconsommation.lu
Website: www.mediateurconsommation.lu

Médiateur en Assurances
ACA,
12, rue Erasme
L-1468 Luxembourg
Tel: (+352) 44 21 44 1
Website: <https://www.mediation-assurance.org/>

Lloyd's Policies Only

As **Your Policy** is underwritten at Lloyd's, **You** may also contact the Lloyd's Complaints Team at any time:

Complaints
Lloyd's Market Services
One Lime Street
London EC3M 7HA
United Kingdom

Phone: +44 (0)20 7327 5693
Email: complaints@lloyds.com
Website: www.lloyds.com/complaints

The Lloyd's Complaints Team can act as a first point of contact and can also re-evaluate **Your** complaint if **You** are not satisfied with **Our** decision. If **Your Policy** is underwritten at Lloyd's, **You** may need to ask them to evaluate **Your** complaint before referring it to the Financial Ombudsman Service.

For detailed procedures regarding complaints at Lloyd's, please refer to the leaflet titled "Your Complaint – How We Can Help," which is available at www.lloyds.com/complaints. If you remain dissatisfied after Lloyd's has considered **Your** complaint, **You** may have the right to refer it to the Financial Ombudsman Service.

Financial Services Compensation Scheme (FSCS)

We are covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from the scheme if **We** cannot meet **Our** obligations. This depends on the type of business and circumstances of the claim. Most insurance contracts are covered for 90% of the claim with no upper limit.

Further information is available from the FSCS or **You** can visit their website at www.fscs.org.uk

Contact Details:

Freephone: 0800 678 1100 or 020 7741 410 (Lines are open Monday to Friday 08.30 to 17.30 excluding public holidays).

Address: PO Box 300, Mitcheldean, GL17 1DY.

Contact details for claims and help

Services

Insured Person(s) can access additional services to help them at a time of need. For **Our** joint protection telephone calls may be recorded and/or monitored.

Claims Service

Personal Accident Claims

Telephone: +44(0)345 0308 128

Email: newclaims.pa@davies-group.com

Travel Claims

Telephone: +44(0)345 0308 129

Email: travelclaims@davies-group.com

Our claims line operates 9 am to 5 pm, Monday to Friday.

Please have your **Policy** number to hand when calling.

Medical Assistance

Ortus Assistance, 24 Hour Emergency Service.

Please quote the reference **Ortus**.

Telephone: +44 (0)20 3989 8835

Ortus Assistance will advise on and where appropriate arrange all medical treatment, travel and accommodation covered under Medical and Emergency Travel Expenses.

In the event of a medical emergency **Ortus Assistance** has experienced multi-lingual staff who will

- Take charge of enquiries 24 hours a day 365 days a year and where necessary contact hospitals and guarantee any necessary fees
- Talk to doctors and hospital staff in their own language
- Ensure medical advisers are consulted at the outset for their views on the possibility of arranging **Repatriation** and the best method of transportation to be adopted.

Provided medical treatment, travel or accommodation has been arranged by the specialist emergency assistance provider **We** will pay all associated costs incurred on behalf of the **Insured Person** for the following

- Making arrangements for the **Insured Person** to travel home and where necessary ensure they are escorted by a medical attendant
- Ensuring assistance is provided upon the **Insured Person(s)** arrival in the **United Kingdom** or other **Country of Residence** following a **Repatriation**
- Making arrangements for the outward and return journeys for the next of kin or other nominated person to visit a sick or injured **Insured Person**
- Assisting in locating and sending drugs if not available locally
- Providing advice on minor ailments.

Other Emergency Services Provided Whilst Travelling

Assistance and Guidance whilst travelling

- Assistance with accommodation or travel rearrangements
- A phone home service if there is an emergency.
- A translation and interpretation service if needed.
- On stolen or lost passports, driving licenses air tickets or other travel documents.
- On how to trace luggage with an airline operator if it is delayed or lost.
- On contacting local Embassies or Consulates.
- Information on languages and time zones.
- On transfer of **Money** if required.
- On cancellation of credit cards if lost or stolen with the ability to report loss to the card provider.

Note: There may be charges for some services not funded by this insurance and the **Insured Person** will have to pay these together with travel costs resulting from the advice that is given.

Advice Before You Travel

Telephone: +44 (0)20 3989 8835

Ortus Assistance can be contacted and will provide advice and information on:

- Visa and entry permits that may need required
- Necessary vaccination and inoculation requirements and where they can be arranged
- What should be taken along on an **Insured Journey** in relation to first aid and health
- Currencies, travellers cheque and current exchange rates
- Languages, time zones and details of countries that will be visited.

Policy Definitions

Each time **We** use one of the words or phrases listed below, it will have the same meaning wherever it appears in the policy, **Schedule** or endorsement. A defined word or phrase will appear **bold** each time it appears in the policy.

Accident/Accidental

Shall mean a sudden violent external unforeseen and identifiable event if an **Insured Person** suffers **Bodily Injury** as a result of unavoidable exposure to the elements this will be considered as having been caused by an **Accident**.

Academic Course

Shall mean any educational course run by the **Group Master Policyholder**.

Accidental Bodily Injury

Injury caused by **Accidental** and/or violent means occurring within 12 months from the date of such **Accident**.

Appointed Representative

The lawyer or other suitably qualified person:

- (1) appointed by **Us** to act on the **Insured Person(s)** behalf
- (2) nominated by the **Insured Person**.

Broker

The company through which **You** purchased the **Policy** with **Us**.

Business

Activities directly connected with the business described in the **Schedule**.

Costs and Expenses

- (1) All reasonable and necessary legal costs charged by the **Appointed Representative** and agreed by **Us**.
- (2) Legal costs which an **Insured Person** has been ordered to pay by a court or other body which **We** have agreed to or authorised.

Country of Residence

The country which is **the Insured Person's** regular place of abode prior to the commencement of the **Journey**,
Or
any country for which the **Insured Person** holds a valid passport.

COVID-19

- (1) Coronavirus disease (COVID-19)
- (2) Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)
- (3) any mutation or variation of SARS-CoV-2
- (4) any fear or threat of 1), 2) or 3) above.

Europe

Albania, Andorra, Austria, Belarus, Belgium, Bosnia- Herzegovina, Bulgaria, Canary Islands, Channel Islands, Croatia, Czech Republic, Denmark, Estonia, Finland, France, Germany, Gibraltar, Greece, Hungary, Iceland, Ireland, Isle of Man, Italy Latvia, Liechtenstein, Lithuania, Luxembourg, Macedonia, Madeira, Mediterranean Islands (including Majorca, Menorca, Ibiza; Corsica; Sardinia; Sicily; Malta, Gozo; Crete, Rhodes and other Greek Islands; Northern and Southern Cyprus), Moldova, Monaco, Montenegro, Morocco, Netherlands, Norway, Poland, Portugal, Romania, Russian Federation (West of Urals), San Marino, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, Tunisia, Turkey, Ukraine, **United Kingdom**, Vatican City.

Excess

The amount of each and every claim that the **Insured Person** must pay as shown in the **Schedule** for the appropriate section of the **Policy** except for a claim for **Medical Expenses** in **European Union** countries where this will be waived where a reduction in cost is obtained using a European Health Insurance Card.

Group Master Policyholder

The company or organisation named in the **Policy** schedule. The **Group Master Policyholder** is the contracting party for this insurance.

Hijack

Unlawful seizure or unlawful control of an aircraft or other conveyance in which the **Insured Person** is travelling as a passenger.

Hospital

Any establishment which is registered or licensed as a full time facility for surgical and medical diagnosis and treatment of injured and sick persons by and under the supervision of a **Qualified Medical Practitioner** continuously providing a 24 hours a day nursing service supervised by State Registered Nurses or nurses with equivalent qualifications and is not primarily a mental institution or a place of rest for the aged, for drug addicts or alcoholics.

Illness

Any disease medical complaint or medical condition which is not **Accidental Bodily Injury**.

Incidental Holiday

Trips, other than those organised by the educational establishment: up to a maximum of 14 days in duration

- (1) Outside the **Insured Person's Country of Residence** and within **Europe**
- (2) Involving pre-booked travel or accommodation
- (3) Devoted entirely to pleasure, rest and relaxation; and
- (4) Taking place directly before or directly after the **Academic Course**
- (5) During the period time over which the **Academic Course** is provided
- (6) or during vacations recognised by the educational establishment

Insured Journey

Any trip booked or undertaken by an **Insured Person** for the purpose of attending an **Academic Course** with the **Group Master Policyholder** in the **United Kingdom** involving travel outside the **Insured Person's Country of Residence** including **Incidental Holiday** travel within **Europe** up to a maximum of 14 days per trip.

Insured Person(s)

Any person or category of persons shown as being insured in the **Schedule**

Journey

Any trip described in the **Schedule**

Legal Proceedings

Legal action for the pursuit of a claim for damages.

Loss of Hearing

Total and permanent loss of hearing in one or both ears to the extent that the hearing loss is greater than 95 decibels across all frequencies using a pure tone audiogram.

Loss of Limb(s)

Shall mean in respect of

- (1) an arm – physical severance of all four fingers at or above the metacarpal phalangeal joints (where the fingers join the palm of the hand) and/or
 - (2) a leg – physical severance at or above the level of the ankle (talo-tibial joint)
- and shall also mean permanent total loss of use of an entire hand or arm at or above the metacarpal phalangeal joints (where the fingers join the palm of the hand), or leg at or above the level of the ankle (talo-tibial joint).

Loss of Sight

Loss of Sight shall mean total and permanent loss of sight, which shall be deemed to have occurred:

- (1) in both eyes when the **Insured Person(s)** name has been added to the register of Blind Persons on the authority of a fully qualified ophthalmic specialist.
- (2) in one eye when the degree of sight remaining after correction is 3/60 or less on the Snellen Scale (which means the **Insured Person** is only able to see at 3 feet that which they should normally be able to see at 60 feet) and **We** are satisfied that the condition is permanent and without expectation of recovery.

Loss of Speech

Total and permanent loss of speech.

Money

Coins, bank or currency notes, cheques, postal orders, travellers cheques, travel tickets, luncheon vouchers, petrol or other coupons with a monetary value and credit vouchers which belong to or are under the custody and control of the **Insured Person**.

Ortus Assistance

The coordinator on **Our** behalf of a range of services in connection with medical, security and other travel assistance supported by a 24-hour helpline supplied by third parties who are contracted by **Us**.

Operative Time

The period of time that cover is in force during the **Period of Insurance**, as shown in the **Policy** schedule and relevant to each section of cover.

Partner

The **Insured Person's**:

- (a) spouse or
- (b) civil partner registered pursuant to the Civil Partnership Act or
- (c) someone of either sex with whom the **Insured Person** has been living as though they were their spouse for at least 3 months.

Period of Insurance

The period beginning with the effective date and ending with the expiry date as shown in the **Policy** schedule and any other period for which We have accepted Your premium.

Permanent Total Disablement

Any permanent disablement other than

- (a) **Loss of Hearing**
- (b) **Loss of Limb**
- (c) **Loss of Sight**
- (d) **Loss of Speech**

which 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 that will prevent the **Insured Person** from engaging in or giving attention to **Business** profession or occupation of any and every kind.

Personal Belongings

Items other than **valuables** which are the property of the **Insured Person** or property for which they are personally responsible and which are taken on or acquired during an **Insured Journey**.

Prospects of Success

In respect of all claims it is always more likely than not that an **Insured Person** will

- (1) recover damages or obtain any other legal remedy which **We** have agreed to
- (2) make a successful appeal or defence of an appeal.

Prospects of Success will be assessed by **Us** or an **Appointed Representative** on **Our** behalf. Consent will be given if legal opinion considers the prospect of success is more than 50% and that the amount of damages/ compensation will be more than the costs of pursuing a claim.

Public Conveyance

An air, land or water vehicle operated under licence for the transportation of fare-paying passengers.

Qualified Medical Practitioner

A doctor or specialist who is registered or licensed to practise medicine under the laws of the country they practise in other than an **Insured Person**, **Insured Person(s) Partner**, a member of the immediate family of the **Group Master Policyholder** or **Insured Person** or an employee of the **Group Master Policyholder**.

Repatriation

With prior approval from **Our** specialist emergency assistance provider and due solely to medical reasons, the return of the **Insured Person** to the **United Kingdom**

Or

The **Insured Person(s) Country of Residence** by normal scheduled airlines or by an air ambulance or other suitable means of transport.

Schedule

The document which specifies details of the **Group Master Policyholder**, **Insured Persons**, **Operative Time** and any **Excess**, Endorsements and Conditions applying to the **Policy**.

Strike

Any form of industrial action taken by workers which is carried on with the intention of preventing, restricting, or otherwise interfering with the production of goods or the provision of services.

United Kingdom

For the purposes of this **Policy** means England, Scotland, Wales and Northern Ireland.

Valuables

Cameras and other photographic equipment, telescopes and binoculars, audio/video equipment (including radios, cassette/compact disc players, iPods, mp3 and mp4 players, camcorders, DVD, video, televisions, and other similar audio and video equipment), mobile phones, satellite navigation equipment, computers and computer equipment (including PDA's, personal organisers, laptops, notebooks, netbooks, tablets and the like), computer games equipment (including consoles, games and peripherals) jewellery, watches, furs, precious and semi-precious stones and articles made of or containing gold, silver or other precious metals.

War

War, invasion, act of a foreign enemy, hostilities or a warlike operation or operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power.

We/Us/Our

Liberty Managing Agency Limited (LMAL) for and on behalf of the Lloyd's underwriting members of Lloyd's syndicate 4472 (Syndicate 4472) trading as Liberty Specialty Markets. For more information, please see the last page of this document.

Winter Sports

Any outdoor winter pursuits or sports including the following:

- Skiing (including skiing outside the area of the normal compacted snow or ski slope i.e. off-piste)
- Tobogganing
- Snow boarding
- Ice skating
- Ski or ski bob racing
- Mono skiing
- Ski jumping
- Ski boarding
- Ice hockey
- Use of bobsleighs or skeletons.

You/Your

The **Group Master Policyholder** named in the **Schedule**.

Section 1 Cancellation, Curtailment or Change of Itinerary

Cover

If during the **Period of Insurance** as a direct and necessary result of any cause outside of the control of the **Insured Person**:

A Cancellation

Any **Insured Person** is forced to cancel an **Insured Journey**

We will reimburse the **Insured Person** for all non returnable or irrecoverable deposits advance payments and other charges paid or due to be paid by the **Insured Person** for travel and accommodation in respect of the **Insured Journey** up to the Cancellation sum insured, less the **Excess**, shown in the **Schedule**

B Curtailment

Any **Insured Person** is forced to curtail an **Insured Journey** and return to the **United Kingdom** or their normal **Country of Residence**

We will reimburse the **Insured Person** up to the Curtailment sum insured, less the **Excess**, shown in the **Schedule** for all non returnable or irrecoverable deposits advance payments and other charges paid or due to be paid by the **Insured Person** for travel and accommodation in respect of the **Insured Journey**

and

the reasonable additional cost of travel and accommodation necessarily incurred to return the **Insured Person** to the **United Kingdom** or their normal **Country of Residence**

or

C Change of Itinerary

Following departure, any **Insured Person** is forced to alter pre-booked travel arrangements in connection with an **Insured Journey**

We will reimburse **You** or the **Insured Person** for the reasonable additional costs of travel and accommodation necessarily incurred to enable the **Insured Person** to continue that **Insured Journey** up to the Change of Itinerary sum insured, less the **Excess**, shown in the **Schedule**

Extensions

(i) Travel Delay and Abandonment

If during a **Period of Insurance** an **Insured Person** is delayed for at least 12 hours from the scheduled departure time (as shown on the travel ticket) of the outbound **Journey** from the **Country of Residence** or the return **Journey** to the **Country of Residence** because the scheduled departure of a **Public Conveyance** is delayed due to a **Strike** or industrial action, adverse weather conditions, traffic flow congestion, mechanical breakdown or structural defect **We** will pay the benefit amount of

Travel Delay

1. £20 for the first 12-hour delay and then £20 for each full 12-hour of delay thereafter up to £1,000 or the cost of the **Journey**, whichever is lesser

or

Abandonment

2. Up to £7,500 less the **Excess** if the **Insured Person** abandons his/her **Journey** after a delay of at least 12 hours of the scheduled departure time from the **Country of Residence**.

(ii) Missed Departure Additional Travel & Accommodation

If during a **Period of Insurance** as a result of the failure of a **Public Conveyance** due directly to a **Strike** or industrial action, adverse weather conditions, traffic flow congestion, default or financial failure or mechanical breakdown an **Insured Person** misses the international departure of **such Public Conveyance** on which the **Insured Person** is booked to travel from the **Country of Residence** at the commencement of the **Insured Journey**

or

the initial point of departure at the end of the **Journey**,

We will indemnify the **Insured Person** in respect of reasonable additional travel and accommodation expenses incurred to reach the scheduled destination up to £1,000 for any one **Journey**, provided that:

- (1) such travel is of a standard no greater than the class of transport on the outbound **Journey** and
- (2) the standard of accommodation is up to but not superior to that in which the **Insured Person** was or would have been staying during the course of the **Journey**.

Section 2 Course Fees

Cover

If during the **Period of Insurance** as a direct and necessary result of:

- a) the death, serious injury, sudden **Illness** or complications of pregnancy (as diagnosed by a **Qualified Medical Practitioner** who specialises in obstetrics) of **the Insured Person**, or the **Insured Person's Partner**, mother, father, daughter, son, sister or brother.
- b) the **Insured Person** being subject to, jury service, subpoena or **Hijack** of the conveyance on which the **Insured Person** is travelling
- c) cancellation or curtailment of scheduled public transport services consequent upon **Strike**, riot or civil commotion
- d) the **Insured Person's** residence or business premises being rendered uninhabitable within 7 days of commencement of the planned **Journey** or
- e) the **Insured Person's** presence being required by the Police following burglary or attempted burglary at the **Insured Person's** residence or business premises,
- f) a **Natural Disaster**

the **Insured Person** is forced to cancel any part of an **Academic Course** prior to the commencement of that **Journey**; or curtail or alter the itinerary of any part of an **Academic Course** during the course of that **Journey**; **We** will indemnify the **Insured Person** up to the sum insured, less the **Excess**, shown in the **Schedule** for any irrecoverable pre-paid college, university or language school course fee which the **Insured Person** has to pay or is contracted to pay.

Conditions applicable to Course Fees Section

- (1) The **Insured Person** must obtain a medical certificate from a **Qualified Medical Practitioner** and prior approval of **Our** specialist emergency service provider to confirm the necessity to return home prior to Curtailment of the **Journey**.
- (2) If the **Insured Person** fails to notify the travel agent, tour operator or provider of transport / accommodation immediately it is found necessary to cancel the **Journey Our** liability shall be restricted to the cancellation charges that would have applied had failure not occurred.
- (3) If the **Insured Person** cancels the **Journey** due to Incidental **Illness** or **Accidental Bodily Injury** the **Insured Person** must provide a medical certificate from a **Qualified Medical Practitioner** stating that this necessarily and reasonably prevented the **Insured Person** from travelling.
- (4) The **Insured Person** must provide invoice and receipts for unused course fees, charges or expenses claimed for.
- (5) The **Insured Person** must provide written confirmation from the college, university or language school that rearrangement of the course or any part of it has been considered and is not suitable for any future date.

Section 3 Medical Expenses

Cover

In the event of the **Insured Person** sustaining **Accidental Bodily Injury** or contracting an **Illness** during the course of an **Insured Journey** during the **Period of Insurance** **We** will pay up to the sums insured, less the **Excess**, shown in the **Schedule** for the cover items noted below:

A Medical Expenses

For reasonable and necessary emergency medical, surgical, **Hospital** or nursing home charges or fees, including the cost of rescue services and levied by the National Health Service within the **United Kingdom** or outside the **Insured Persons Country of Residence** and outside the **United Kingdom**.

Including

- 1) Cost of rescue services
- 2) Emergency optical expenses
- 3) Complications of pregnancy as diagnosed by a **Qualified Medical Practitioner** who specialises in obstetrics provided that if travelling between 28 - 35 (inclusive) weeks the **Insured Person** provides a medical certificate - which must be dated no earlier than 5 days before the outbound travel date - issued by a doctor or midwife confirming the number of weeks of pregnancy and that they are fit to travel.

A1 Emergency Dental Pain Relief Treatment

Emergency dental treatment incurred by an **Insured Person** during an **Insured Journey** for the relief of pain and discomfort only.

A2 Emergency Mental Health Treatment

Emergency medical treatment incurred by an **Insured Person** during an **Insured Journey** which is required to alleviate the sudden and naturally occurring symptoms associated with an episode of severe emotional or physical distress and which arises as a result of anxiety stress, depression or any phobia or mental or nervous disorder.

B Emergency Repatriation Expenses

Upon the advice of **Our** specialist emergency service provider for the **Repatriation** of the **Insured Person** to their **Country of Residence** including reasonable and necessary costs incurred in repatriating the **Insured Person** to the most suitable **Hospital** or to the **Insured Person's** home address in **their Country of Residence** provided that such **Repatriation** is medically necessary and organised by **Our** specialist emergency service provider.

C Supplementary Travel and Accommodation Expenses

- 1) For reasonable and necessary costs for the travel and accommodation expenses of the **Insured Person** incurred in returning to their **Country of Residence**.
- 2) For travel and accommodation of up to two relatives or friends of the **Insured Person** who on medical advice from a **Qualified Medical Practitioner** are advised to travel to or remain with the **Insured Person**. For the purposes of this extension Accommodation shall mean accommodation of a standard up to but not exceeding that in which the **Insured Person** was or would have been staying during the course of the **Journey**.
- 3) For funeral expenses incurred in the burial or cremation of the **Insured Person** outside the **Country of Residence**.
- 4) In transporting the **Insured Person's** body or ashes for burial in the **Country of Residence** (excluding funeral and interment costs in the **Country of Residence**)
- 5) In transporting the **Insured Person's Personal Belongings** (as defined in the **Personal Belongings** Section) back to the **Country of Residence**.

Conditions applicable to Medical and Emergency Repatriation Expenses Section

- (1) The **Insured Person** must contact **Ortus Assistance** if the **Insured Person** requires in-patient **Hospital** treatment or **Emergency Repatriation** otherwise **We** may not be able to reimburse the costs incurred.
- (2) If **We** incur costs as a result of advice or assistance being provided or the settlement of any expenses being made in good faith by the specialist emergency assistance provider to any person who is not insured under this **Policy**, **You** shall reimburse **Us** in respect of such costs and expenses.

Section 4 Personal Belongings

Cover

In the event of the **Insured Person** suffering loss of or damage to **Personal Belongings** during an **Insured Journey** during the **Period of Insurance** **We** will indemnify the **Insured Person** in respect of such loss or damage up to the **sum insured**, less the **Excess**, shown in the **Schedule**

Provided that the maximum amount payable in respect of any one unspecified item will be £250.

Conditions applicable to Personal Belongings Section

- (1) The **Insured Person** shall take all reasonable care in avoiding any loss or damage to their **Personal Belongings**.
- (2) **We** shall be entitled in the event of a loss and at **Our** sole option to replace any article lost (whether wholly or in part) or to reimburse the **Insured Person** not exceeding in any event the insured value thereof.
- (3) Any amount paid for Temporary Loss will be deducted from any subsequent payment for total loss or subsequent damage where the Temporary Loss becomes Permanent.
- (4) The **Insured Person** must retain any damaged articles for **Our** inspection. **We** shall be entitled to take up and keep possession of any damaged property and to deal with as salvage following such damage.

Extension

A. Delayed Baggage

If during a **Period of Insurance** all or part of an **Insured Person's Personal Belongings** are lost or temporarily mislaid for more than 12 hours during any stage (other than the final return stage to the **Country of Residence**) of a **Insured Journey** **We** will reimburse the **Insured Person** up to the sum insured shown in the **Schedule** which has been paid for the purchase of essential items of replacement clothing or toilet requisites.

Any amounts paid under this Extension will be deducted from any subsequent amounts payable under **Personal Belongings** in respect of the same loss.

Additional Optional extension

B. Valuables

(only included if shown as "Insured" on Schedule of Benefits)

If during a **Period of Insurance** an **Insured Person** sustains loss of or damage to **Valuables** during an **Insured Journey**, **We** will pay the **Insured Person**, in respect of such loss or damage up to the sum insured, less the **Excess**, shown in the **Schedule** in total for any one **Insured Journey**.

Section 5 Money

Cover

In the event of the **Insured Person** suffering the loss or theft of **Money** during the course of an **Insured Journey** during the **Period of Insurance**

or

occurring during the 120 hours immediately prior to such **Journey** or the 120 hours immediately following such **Journey** if obtained for the purposes of undertaking the **Insured Journey** and in the custody and control of the **Insured Person**.

We will indemnify the **Insured Person** in respect of such loss up to the sum insured, less the **Excess**, shown in the **Schedule**.

Provided that the maximum amount payable in respect of coins, bank or currency notes will be £100.

Extensions

A. Fraudulent Use of Credit Cards

If the **Insured Person** sustains financial loss as a direct result of a credit charge debit or bankers card being lost or stolen during an **Insured Journey** and it being fraudulently used by someone other than the **Insured Person**, **We** will indemnify the **Insured Person** for such loss up to sum insured, less the **Excess**, shown in the **Schedule** for any one **Insured Journey** provided that the **Insured Person** has fully complied with all terms and conditions under which such card has been issued.

B. Emergency Replacement of Passport and other Documents

If the **Insured Person** sustains loss of or damage resulting in any travel documents, passport and / or visa driving licence required for an **Insured Journey** becoming void during the course of the **Insured Journey**, **We** will indemnify the **Insured Person** in respect of any fees charged including those charged by the including those charged by the appropriate consular visa and/or passport office and for any additional travel or accommodation expenses in obtaining any official or temporary travel documents or replacement visa and/or passport up to sum insured, less the **Excess**, shown in the **Schedule** for any **Insured Journey**.

Section 6 Personal Liability

Cover

We will indemnify the **Insured Person** up to the Limit of Indemnity shown in the **Schedule** for sums which the **Insured Person** shall become legally liable to pay as damages and the **Insured Person(s)** proper costs and expenses in respect of **Accidental** death or **Accidental Bodily Injury** to any other person or accidental loss of or damage to material property of any other person.

All costs and expenses incurred with **Our** written consent in respect of any claims against the **Insured Person** shall be payable in addition notwithstanding that **Our** total liability does not exceed the Limit of Indemnity shown in the **Schedule**.

Conditions applicable to Personal Liability Section

- (1) The **Insured Person** shall give immediate notice to **Us** of any occurrence for which there may be liability under this **Policy** and shall provide **Us** with such particulars and information as **We** may require and shall forward to **Us** immediately on receipt every letter, writ, summons and process and shall advise **Us** in writing immediately the **Insured Person** has knowledge of any impending prosecution inquest or fatal inquiry in connection with the said occurrence.
- (2) The **Group Master Policyholder** and any **Insured Person** must not admit any liability or pay, offer to pay or negotiate any claim without **Our** prior written consent.
- (3) **We** shall be entitled at **Our** discretion to take over and conduct in the name of the **Insured Person** the defence or settlement of any claim and to prosecute at **Our** own expense and for **Our** own benefit any claim for indemnity or damages against any other person(s) and the **Insured Person** shall give all information and assistance required.
- (4) **We** may at any time at **Our** sole discretion pay to the **Insured Person** a sum equal to the Limit of Indemnity for Personal Liability stated in the **Schedule** in respect of any occurrence or any lesser sum(s) for which the claim or claims arising from such occurrence can be settled and **We** shall not be under any further liability in respect of that occurrence except for the payment of costs and expenses of litigation incurred prior to such payment.
- (5) In the event of a claim or series of claims resulting in the liability of the **Insured Person** to pay a sum in excess of the Limit of Indemnity for Personal Liability stated in the **Schedule** **Our** liability for such costs and expenses shall not exceed an amount being in the same proportion as **Our** payments to the **Insured Person** bear to the total payment made by or on behalf of the **Insured Person** in settlement of the claim or claims.
- (6) **Our** liability under Personal Liability for all damages payable by the **Insured Person** to any claimant or number of claimants in respect of any one occurrence or all occurrences of a series arising out of one original cause shall not exceed the Limit of Indemnity shown in the **Schedule**.

Section 7 Overseas Legal Expenses

Cover

We will negotiate on the **Insured Person(s)** behalf up to the sum insured shown in the **Schedule** for legal rights to bring **Legal Proceedings** to pursue a civil claim resulting from an incident, for which the **Insured Person** is not at fault which causes the death of or personal injury to an **Insured Person** during an **Insured Journey**, provided that

- (1) the insured incident occurs during the **Period of Insurance**
- (2) **Prospects of Success** exist for the duration of the claim
- (3) in respect of any appeal or defence of an appeal, it has been reported to **Us** at least 10 working days prior to the deadline for any appeal
- (4) the maximum amount **We** will pay for **Costs and Expenses** for any one **Insured Person** in respect of any or all claims arising from one cause is £25,000
- (5) an **Insured Person** or their legal representative reports an insured incident as soon as possible and in any event no later than 180 days after the date the **Insured Person** knew or should have known about the insured incident and the **Insured Person** adheres to the following

An Insured Person(s) Duty

An **Insured Person** must report the incident that is expected to give rise to a claim to **Us** as soon as possible and in any event no later than 180 days after the date the **Insured Person** knew or should have known about the incident.

Legal Representation

- (a) On acceptance of a claim, if appropriate, **We** will appoint an **Appointed Representative**.
- (b) If it is necessary to start court proceedings or there is a conflict of interest, the **Insured Person** is free to nominate an **Appointed Representative** by sending to **Us** the name and address of the suitably qualified person.
- (c) If **We** do not agree to the choice of **Appointed Representative** under (b) above, the **Insured Person** may choose another suitably qualified person.
- (d) If there is still a disagreement with regard to the **Appointed Representative**, **We** will ask the president of a relevant national law society to choose a suitably qualified person to represent the **Insured Person**. **We** and the **Insured Person** must accept such choice.
- (e) In all other circumstances **We** will be free to choose an **Appointed Representative**.
- (f) An **Appointed Representative** will be appointed by **Us** and represent the **Insured Person** according to **Our** standard terms of appointment (which may include a 'no win no fee' agreement). The **Appointed Representative** must co-operate with **Us** at all times.

Our Rights and the Insured Person(s) Obligations

- (a) **We** will have direct access to the **Appointed Representative** who will, upon request, provide **Us** with any information or opinion on the claim.
- (b) The **Insured Person** must co-operate fully with **Us** and the **Appointed Representative** and must keep **Us** up-to-date with the progress of the claim.
- (c) At **Our** request the **Insured Person** must give the **Appointed Representative** any instructions that **We** require.
- (d) The **Insured Person** must notify **Us** immediately if anyone offers to settle a claim or makes a payment into court.
- (e) If the **Insured Person** does not accept the recommendation of the **Appointed Representative** to accept a reasonable offer or payment into court to settle a claim, **We** may refuse to pay further **Costs and Expenses**.
- (f) No agreement to settle on the basis of both parties paying their own costs is to be made without **Our** prior approval.

Discontinuance of a Claim

If the **Insured Person**

- (a) settles a claim or withdraws a claim without **Our** prior agreement
 - (b) does not give suitable instructions to the **Appointed Representative**
 - (c) dismisses an **Appointed Representative** without **Our** prior consent
- the cover **We** provide will end immediately and **We** will be entitled to re-claim from the **Insured Person** any **Costs and Expenses** **We** have incurred.

Recoveries

The **Insured Person** must take every available step to recover **Costs and Expenses** that **We** have to pay and you must pay **Us** any **Costs and Expenses** that are recovered.

Disputes

If any difference arises between **Us** and the **Insured Person** in respect of the acceptance, refusal, control or handling of any claim under this section, the **Insured Person** can take the steps outlined in **Our** complaints procedure stated under **Our** Promise of Service.

Arbitration

The **Insured Person** has the right to refer any difference that arises between **Us** and the **Insured Person** in respect of the acceptance, refusal, control or handling of any claim under this section to arbitration, which will be decided by counsel chosen jointly by **Us** and the **Insured Person**. If there is a disagreement with regard to the choice of counsel, **We** will ask the president of a relevant national law society to choose a suitably qualified person. The arbitrator's decision shall be final and binding on both parties. All costs for resolving the difference will be met by the party whom the decision is made against.

Section 8 - Personal Accident

Cover

We will pay the sum insured shown in the **Schedule** for **Accidental Bodily Injury** to an **Insured Person** occurring during the **Period of Insurance** which within 24 months of the date of the **Accident** solely directly and independently of any other cause results in any of the benefits listed below

- **Death**
- **Loss of Limb(s)**
- **Loss of Sight**
- **Loss of Hearing**
- **Loss of Speech**
- **Permanent Total Disablement**

The amount payable to the **Insured Person** shall be the amount as stated in the **Schedule** for that category of **Insured Person**.

Extensions

Permanent Partial Disablement

In the event of an **Insured Person** suffering permanent disablement as a direct result of **Accidental Bodily Injury**, We will pay a percentage of the benefit provided for **Permanent Total Disablement** depending on the degree of permanent disablement.

Benefits for specific disabilities are:

Permanent severance or permanent and total loss of use of

Intellectual Capacity	100%
The back or spine below the neck with no damage to the spinal Cord	40%
The neck or cervical spine with no damage to the spinal Cord	30%
A shoulder elbow or wrist	25%
A hip knee or ankle	20%
A thumb	30%
A forefinger	20%
Any finger other than a forefinger	10%
A big toe	15%
Any other toe	5%

Any permanent disability which is not covered by **Loss of Limbs Sight Hearing** or **Speech** or any of the benefits above up to a maximum 100% of the benefits above up to a maximum 100% of the **Permanent Total Disablement** benefit.

Any permanent disability under this item will be assessed by considering the severity of the disablement in conjunction with the stated percentages for specific types of permanent disablement stated above. The occupation of the **Insured Person** will not be taken into consideration during this assessment.

When more than one form of **Permanent Partial Disablement** results from **Accidental Bodily Injury** the percentages will be added together but We will not pay more than 100% of the **Permanent Total Disablement** in total

If a claim is made for **Loss of Limbs Sight Hearing** or **Speech** then a claim for **Permanent Partial Disablement** cannot also be made

Disappearance

If an **Insured Person** has been missing for a period of 180 consecutive days during an **Insured Journey** and there is sufficient evidence to support the conclusion that death has been caused by **Accidental Bodily Injury**, such **Insured Person** will be presumed to have died.

However We will require the benefit to be repaid if the **Insured Person** is found to have been alive or is found alive.

Policy Conditions

All of the following Policy Conditions apply to each Section of the policy.

Premium Adjustment

It has been agreed that the Premium has been based on estimated numbers and is adjustable and the **Group Master Policyholder** shall within 30 days of the end of the **Period of Insurance** provide the actual numbers to **Us** and the premium will be adjusted accordingly.

Benefit Limits

1. Payment of Benefit

We will not pay under more than one of the benefits listed below in connection with the same **Accident** for the same **Insured Person**.

Loss of Limb, Loss of Sight, Loss of Speech or Loss of Hearing Permanent, Total Disablement, Permanent Partial Disablement.

After payment has been made for

Loss of Limb, Loss of Sight, Loss of Speech or Loss of Hearing Permanent Total Disablement, Permanent Partial Disablement

no further payments shall be made by **Us** in respect of that **Insured Person** during the current **Period of Insurance**.

2. Payment of Permanent Total Disablement

Benefit in respect of **Permanent Total Disablement** will be payable after the expiry of 52 consecutive weeks disablement and on certification that disablement is permanent and without expectation of recovery by a medical examiner appointed by **Us**.

It is the duty of the **Group Master Policyholder** or **Insured Person** to inform **Us** if any claim payment does exceed these limits. Payment will be proportionately reduced until these limits are not exceeded.

3. Maximum Benefit

The maximum amount shown in the **Schedule** payable for any **Insured Person** for all **Accidental Bodily Injury** arising from any one **Accident**.

4. Minors

If the **Insured Person** is under the age of 16 at the date of the **Accident** giving rise to a claim the maximum amount payable for Death will be £5,000.

Alteration of Insured Risk

1) If:

- (a) there has been any alteration to the **Business** and/or the occupation or pursuits of the **Group Master Policyholder** or any **Insured Persons** after the effective date of this insurance which increases the risk of loss, liability, destruction, damage, **Accident** or injury
or
- (b) **Your** interest ceases except by will or operation of law

We will at **Our** option avoid the **Policy** from the date of such alteration or when **Your** interest ceases, unless **We** accept the alteration.

- 2) An **insured person** has no right to alter this **Policy** and the cover or benefits provided, only the right not to be included.

Assignment

The **Insured Person** may not assign 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**.

Cancellation

We reserve the right to retain the **Premium** where claims have occurred in the **Period of Insurance** when cancellation takes place.

- (a) The **Group Master Policyholder** and **Insured Persons** may not cancel this **Policy** at any time.
- (b) An **Insured Person** may withdraw from the cover provided by this **Policy** at any time by giving notice to the **Group Master Policyholder**. No refund of Premium will be payable.
- (c) **We** may cancel this **Policy** at any time by sending not less than 30 days' notice in writing to the **Group Master Policyholder's** last known address.

If the **Policy** is cancelled under (b) above, **We** will refund part of the premium for the unexpired period, which will be

- calculated on **Our**, then current, short period rating basis, and provided that there have been no
- (i) claim(s) made under the **Policy** for which **We** have made a payment
 - (ii) claim(s) made under the **Policy** which are still under consideration
 - (iii) incident(s) which **You** are aware of and which are likely to give rise to a claim which has yet to be reported to **Us** during the current **Period of Insurance**.
- (d) **We** will cancel this **Policy** from the inception date if the premium has not been paid. Such cancellation will be confirmed in writing by **Us**.
- (e) All cover for **Insured Persons** will stop 30 days after the date of cancellation and any unused proportion of the premium already paid to **us** in advance will be returned to the **Group Master Policyholder**.
- (f) The **Group Master Policyholder** is responsible for promptly notifying **Insured Persons** that the **Policy** has been cancelled and for returning any unused premium due.

Claims Procedure

If in relation to any claim **You** or the **Insured Person** have failed to fulfil any of the following conditions, **You** or the **Insured Person** will lose the right to indemnity or payment for that claim. The claim may be rejected if it is made so long after the event that **We** are unable to investigate the claim fully.

You or the **Insured Person** must

- (a) tell **Us** as soon as practicable of any event or occurrence which may result in a claim and in any event no later than 60 days after the occurrence of such event
- (b) as soon as practicable and at **Your** or the **Insured Person(s)** expense, provide **Us** with a written claim containing as much information as possible of the loss, destruction, damage, **Accident** or injury, including the amount of the claim
- (c) provide **Us** at **Your** or the **Insured Person(s)** own expense with all certificates information and evidence reasonably required by **Us** and in the form and of such nature as **We** may prescribe
- (d) immediately pass to **Us** unanswered, all communications from third parties in relation to any event which may result in a claim under this **Policy**
- (e) not admit or repudiate liability, nor offer to settle, compromise, make payment which may result in a claim or pay any claim under this **Policy** without **Our** written agreement and the **Insured Person** shall
 - (i) submit to medical examination at **Our** request in respect of any alleged **Accidental Bodily Injury** where **We** shall pay the fee
 - (ii) as soon as possible after the occurrence of any **Accidental Bodily Injury** obtain and follow the advice of a **Qualified Medical Practitioner**.

We shall not be liable for any consequences arising due to the **Insured Person(s)** failure to obtain and follow such advice and use such appliance or remedies as may be prescribed.

Contribution

If at the time of an event giving rise to a claim there is any other insurance **Policy** in force in **Your** or the **Insured Person(s)** name which covers **You** or the **Insured Person** for the same expense loss or liability **We** will only pay a proportion of the claim being determined by reference to the cover provided by each of the relevant policies with the exception of Personal Accident benefits which will be payable in full.

If there is another insurance **Policy** in **Your** name which covers **You** or an **Insured Person** for the same expense or loss provided by **Us**, **We** will pay only once under the most applicable **Policy** for the loss or expense.

Cyber Risks

Any benefits under Sections 1 to 7 caused by or arising out of a Cyber Act or a Cyber Incident are payable, subject to the terms, conditions, limitations and exclusions of this **Policy**.

Any benefits under Section 8 due to:

- (a) the use of, or inability to use, any application, software, or programme in connection with any electronic equipment (for example a computer, smartphone, tablet or internet-capable electronic device);
 - (b) any computer virus;
 - (c) any computer related hoax relating to (a) and/or (b) above
- are payable, subject to the terms, conditions, limitations and exclusions of this **Policy**.

For the purposes of this Cyber Risks condition the following definitions apply.

Cyber Act:

An unauthorised, malicious or criminal act or series of related unauthorised, malicious or criminal acts, regardless of time and place, or the threat or hoax thereof involving access to, processing of, use of or operation of any Computer System.

Cyber Incident:

- (a) Any error or omission or series of related errors or omissions involving access to, processing of, use of or operation of any Computer System; or

- (b) any partial or total unavailability or failure or series of related partial or total unavailability or failures to access, process, use or operate any Computer System.

Computer System:

Any computer, hardware, software, communications system, electronic device (including, but not limited to, smart phone, laptop, tablet, wearable device), server, cloud or microcontroller including any similar system or any configuration of the aforementioned and including any associated input, output, data storage device, networking equipment or back up facility, owned or operated by **You** or any other party.

Fraud

If a claim made by **You** or anyone acting on **Your** behalf is fraudulent or fraudulently exaggerated or supported by a false statement or fraudulent means or fraudulent evidence is provided to support the claim, **We** may:

- (1) refuse to pay the claim,
- (2) recover from **You** any sums paid by **Us** to **You** in respect of the claim,
- (3) by notice to **You** cancel the **Policy** with effect from the date of the fraudulent act without any return of premium.

If **We** cancel the **Policy** under (3) above, then **We** may refuse to provide cover after the time of the fraudulent act. This will not affect any liability **We** may have in respect of the provision of cover before the time of the fraudulent act.

If this **Policy** provides cover to any person other than **You** and a claim made by such person or anyone acting on their behalf is fraudulent or fraudulently exaggerated or supported by a false statement or fraudulent means or fraudulent evidence is provided to support the claim, **We** may:

- (1) refuse to pay the claim,
- (2) recover any sums paid by **Us** in respect of the claim (from **You** or such person, depending on who received the sums or who benefited from the cover provided),
- (3) by notice to **You** and such person cancel the cover provided for such person with effect from the date of the fraudulent act without any return of premium in respect of such cover.

If **We** cancel a person's cover under (3) above, then **We** may refuse to provide cover after the time of the fraudulent act. This will not affect any liability **We** may have under such cover occurring before the time of the fraudulent act.

Hijack

If an **Insured Person** is the victim of a Hijack cover provided by this **Policy** shall continue for a period not exceeding twelve months from the date of **Hijack** to enable the **Insured Person** to complete the original **Journey** or to return to their **Country of Residence**.

Identification

The **Policy** and the **Schedule** will be read as one contract. A particular word or phrase which is not defined in **Bold** will have its ordinary meaning.

Interest

We will not pay interest on any claim payable.

Non Disclosure, Misrepresentation or Misdescription

In deciding to accept this **Policy** and in setting the terms and premium, **We** have relied on the information given to **Us**. **You** must take care when answering any questions **We** ask by ensuring that all information provided is accurate and complete. If **You** become aware that information **You** have given us is inaccurate, you must inform your insurance intermediary/broker as soon as practicable.

Non Disclosure, Misrepresentation or Misdescription before this policy was entered into

If you have breached **Your** duty to make a fair presentation of the risk to **Us** before this **Policy** was entered into, then:

- Where the breach was deliberate or reckless **We** may avoid this **Policy** and refuse all claims, and keep all premiums paid
- Where the breach was neither deliberate or reckless, and but for the breach
 - **We** would not have agreed to provide cover under this **Policy** on any terms, **We** may avoid this **Policy** and refuse all claims, but will return any premiums paid
 - **We** would have agreed to provide cover under this **Policy** but on different terms (other than premium terms), **We** may require that this **Policy** includes such different terms with effect from its commencement, and/or
 - **We** would have agreed to provide cover under this **Policy** but would have charged a higher premium, **Our** liability for any loss amount payable shall be limited to the proportion that the premium **We** charged bears to the higher premium **We** would have charged, as outlined in Schedule 1 to the Insurance Act 2015.

We may also cancel the **Policy** as described in the cancellation section of this **Policy**

Non Disclosure, Misrepresentation or Misdescription before a variation was agreed

If you have breached **Your** duty to make a fair presentation of the risk to **Us** before any variation to this **Policy** was agreed, then:

- Where the breach was deliberate or reckless, **We** may cancel this **Policy** with effect from the date of the variation, and keep all premiums paid;
- Where the breach was neither deliberate nor reckless, and but for the breach:
 - **We** would not have agreed to the variation on any terms, **We** may treat this **Policy** as though the variation was never made, but will return any additional premiums paid
 - **We** would have agreed to the variation but on different terms (other than premium terms) **We** may require that the variation includes such different terms with effect from the date it was made, and/or
 - **We** would have agreed to the variation but would have increased the premium, or would have increased it by more than **We** did or would not have reduced it or would have reduced it by less than **We** did, **Our** liability for any loss amount payable shall be limited on a proportionate basis as outlined in Schedule 1 of the Insurance Act 2015. This condition operates in addition to any provisions relating to underinsurance in this **Policy**.

We may also cancel the **Policy** as described in the cancellation section of this **Policy**.

Payment of a claim to the Group Master Policyholder

If **We** agree to pay the **Group Master Policyholder** a valid claim for cover under this **Policy** that has been arranged or purchased for the direct benefit of an **Insured Person** (other than if an assignment has been agreed), the **Group Master Policyholder** agrees to promptly forward any payments received under this **Policy** to that **Insured Person** to the extent that the **Insured Person** has suffered **Bodily Injury**, loss, damage or expense recoverable under this policy or is otherwise entitled to a **Policy** payment either contractually or implied.

The receipt of such payment by the **Group Master Policyholder** will discharge **Our** liability to pay any amount directly to the **Insured Person** and our liability under the **Policy**. The **Insured Person** (or their legal representative) has no right to claim or sue **Us**.

Policy Age Limit

Unless otherwise agreed by **Us** and specifically noted in this **Policy** no person over the age of 75 will be covered by this **Policy**.

Policy Alteration

We reserve the right to make changes, add to the **Policy** terms and/or change the premium for this insurance for legal, regulatory or taxation reasons.

Reasonable Precautions

You and **Insured Person's** must take all reasonable precautions to prevent

- a) loss, destruction or damage to the property insured
- b) **Accident** or injury to any person or loss or destruction of, or damage to, their property and must comply with all legal requirements and safety regulations and conduct the **Business** in a lawful manner.

Sanctions

We will not provide any cover or be liable to pay any claim or provide any benefit under this **Policy** to the extent that this 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.

Subjectivity

At the inception of or during each **Period of Insurance**, the insurance provided by this **Policy** may be subject to **You**

- (a) providing **Us** with any additional information.
- (b) completing any actions agreed between **You** and **Us**.
- (c) allowing **Us** to complete any actions agreed between

You and **Us**.

If this is the case, then the **Schedule** will clearly state the information required and the dates **We** require such information by.

Upon completion of these requirements (or if they are not completed by the required dates) **We** may, at **Our** option

- (i) modify **Your** premium.
- (ii) amend the terms and conditions of this **Policy**.
- (iii) exercise **Our** right to cancel the **Policy** under the Policy Condition for Cancellation.
- (iv) leave the Policy terms, conditions, and premium unaltered.

The Contracts (Rights of Third Parties) Act 1999

Except for an **Insured Person**, a person or company who was not a party to this **Policy** has no right under the Contracts (Rights to Third Parties) Act 1999 to enforce any term of this **Policy** but this does not affect any right or remedy of a third party which exists or is available apart from that Act.

Policy Exclusions

This Part of the policy provides details of all Exclusions. Exclusions applicable to all sections of the policy are listed first, followed by Exclusions applicable to each individual section of the policy.

This **Policy** does not cover:

- (1) any consequence whatsoever resulting directly or indirectly from or in connection with any of the following regardless of any other contributory cause or event:
 - a. **War** in the **Insured Person(s) Country of Residence** or secondment.
 - b. any action taken in controlling, preventing, suppressing or in any way relating to 1a above.
The above exclusion shall be inoperative in the event of **War** being declared whilst the **Insured Person** is actually engaged on an **Insured Journey** abroad.
- (2) the **Insured Person** engaging in any kind of flying other than as a passenger.
- (3) the **Insured Person** engaging in **Winter sports**.
- (4) the **Insured Person** travelling on a motorcycle over 125 cc.
- (5) 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.
- (6) the **Insured Person** committing or attempting to commit suicide or intentionally inflicting self injury.
- (7) the **Insured Person(s)** own criminal act.
- (8) any loss incurred after the expiry of the **Period of Insurance**.
- (9) any loss to any **Insured Person** who is a professional sportsperson or a professional entertainer.
- (10) any loss incurred during any **Incidental Holiday** trip outside **Europe** or within **Europe** whose duration exceeds 14 days unless such trip has been authorised and organised by the **Group Master Policyholder**.

Section 1 - Cancellation, Curtailment or Change of Itinerary

We will not be liable for any claim resulting from:

- (1) the **Insured Person** travelling against or planning to travel against the medical advice of a **Qualified Medical Practitioner** or for the purpose of obtaining medical treatment.
- (2) disinclination to travel or if on an **Insured Journey**, deciding not to continue.
- (3) any costs or charges paid or discharged by the use of promotional vouchers or awards of any description.
- (4) **Your** or an **Insured Person(s)** financial circumstances.
- (5) a **Natural Disaster** other than the cover provided under the optional extension and this extension is shown as being included on the **Schedule**.
- (6) withdrawal from service temporarily or permanently of any means of transport on the orders or recommendation of the manufacturer, the Civil Aviation Authority, National Air Traffic Services, any port authority or similar body in any country except where on the day the **Insured Person** is due to depart such **Insured Person** is prevented from taking their trip due to:
 - (a) airspace being closed for more than 24 hours from the date and time of their scheduled departure, as shown on their ticket/itinerary
 - (b) an airport or port they are scheduled to travel from or through being closed for more than 24 hours from the date and time of their scheduled departure, as shown on their ticket/ itinerary All claims must be supported by documentary evidence that the **Insured Person** has been unable to obtain a refund from their travel and/or accommodation provider.
- (7) **Strike**, labour dispute or failure of the means of transport (other than disruption of road and rail services by avalanche snow or flood) other than where the departure of any means of transport on which the **Insured Person** is booked to travel is delayed by at least 24 hours unless the delay is due to a **Strike** or industrial action which existed or the possibility of which existed and for which advance warning had been given prior to the date on which the **Insured Journey** was booked.
- (8) **You** or the **Insured Person** violating the laws or regulations of the country in which they are travelling.
- (9) an **Insured Person** failing to check in according to the itinerary provided unless the failure was due to **Strike** or industrial action.
- (10) **You** or the **Insured Person** failing to obtain, hold, produce or maintain the required immigration, work, residence or similar visas permits or documents for the country to which they are travelling.
- (11) evacuation of nationals of the country involved.
- (12) regulations, border restrictions or orders made by any Public Authority or Government.; or any expenses incurred whilst travelling against the advice of any Public Authority or Government if, at the time of booking the **Insured Journey**, such advice was in place.
- (13) any claim where it is subsequently found that the person involved is not an **Insured Person**. Any costs incurred in this event shall be **Your** sole responsibility.
- (14) any circumstance that could have been reasonably foreseen as giving rise to a claim at the time an **Insured Journey** was booked.
- (15) any expenses incurred as the result of the failure to fulfil contractual obligations or financial failure of any transport or accommodation provider, college, university or language school or any agent acting for them or of any agent acting for the **Group Master Policyholder** or **Insured Person**.

- (16) additional travel and accommodation expenses where the means of transport and/or accommodation used is of a standard superior to that of the outbound leg of the **Journey**.
- (17) more than a rateable proportion of any expenses which are also recoverable from any other insurance policy which is applicable to the **Insured Person**.
- (18) any irrecoverable pre-paid college, university or language school course fee the **Insured Person** has to pay or is contracted to pay.
- (19) the amount of the **Excess** shown in the **Schedule** of each and every claim for Cancellation, Curtailment, Change of Itinerary.
- (20) loss, charge or expense as a result of a delay in notifying the tour operator, travel agent, or transport or accommodation provider that it is necessary to cancel a booking; or an **Insured Person** deciding not to travel or if on a **Journey** deciding not to continue.
- (21) or in any way caused by or resulting from **COVID-19**; other than when a trip is cancelled before commencement directly and necessarily as a result of:
 - a) **Illness** caused by **COVID-19** of an **Insured Person**, or,
 - b) an **Insured Person** receiving a positive diagnosis of **COVID-19** following an official PCR test.
- (22) or in any way caused by the Insured Person being in a state of anxiety stress, depression or any phobia or mental or nervous disorder.

Travel Delay and Abandonment

We will not be liable for any claim resulting from

- (1) the failure of the **Insured Person** to check in not later than the time indicated by the carriers unless the failure was due to **Strike** or industrial action.
- (2) the failure of the **Insured Person** to obtain written confirmation from the carriers or their handling agents of the number of hours delay and the reason for such delay.
- (3) withdrawal from service temporarily or permanently of any means of transport on the orders or recommendation of the manufacturer, the Civil Aviation Authority, National Air Traffic Services, any port authority or similar body in any country except where on the day the **Insured Person** is due to depart from the **United Kingdom** such **Insured Person** is prevented from taking their trip due to
 - (a) airspace being closed for more than 24 hours from the date and time of their scheduled departure, as shown on their ticket/itinerary
 - (b) an airport or port they are scheduled to travel from or through being closed for more than 24 hours from the date and time of their scheduled departure, as shown on their ticket/ itinerary All claims must be supported by documentary evidence that the **Insured Person** has been unable to obtain a refund from their travel and/or accommodation provider
- (4) the failure of the **Insured Person** to accept alternative 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) **Strike** labour dispute or industrial action which existed or the possibility of which existed and for which advance warning had been given prior to the date on which the **Insured Journey** was booked.
- (6) delay where compensation is recoverable from the airline or other carrier.
- (7) any circumstance that could have been reasonably foreseen as giving rise to a claim at the time an **Insured Journey** was booked
- (8) or in any way caused by **COVID-19**.
- (9) or in any way caused by the Insured Person being in a state of anxiety stress, depression or any phobia or mental or nervous disorder.

Missed Departure, Additional Travel and Accommodation

We will not pay any claim

- (1) If the **Insured Person** does not make reasonable efforts to get to the International Departure Point from or to the **United Kingdom** for the time specified on the travel tickets.
- (2) as a result of any circumstance that could have been reasonably foreseen as giving rise to a claim at the time an **Insured Journey** was booked.
- (3) resulting from or in any way caused by **COVID-19**.
- (4) resulting from or in any way caused by the Insured Person being in a state of anxiety stress, depression or any phobia or mental or nervous disorder.

Section 2 - Course Fees

We will not pay for

- (1) any expenses incurred where a **Journey** is booked or undertaken against the advice of a **Qualified Medical Practitioner** or where the purpose of the **Journey** is to receive medical treatment or advice.
- (2) any expenses incurred as the result of the failure to fulfil contractual obligations or financial failure of any transport, accommodation provider, college, university or language school or any agent acting for them or of any agent acting for the **Group Master Policyholder** or **Insured Person**.
- (3) any expenses incurred as a result of the failure to obtain, hold, produce or maintain the required immigration, work, residence or similar visas permits or documents for the country to which they are travelling.
- (4) any costs or charges paid or discharged by the use of promotional vouchers or awards of any description.

- (5) any expenses incurred as a result of disinclination of an **Insured Person** to travel or, if on a **Journey**, disinclination to continue.
- (6) more than a rateable proportion of any expenses which are also recoverable from any other insurance policy which is applicable to the **Group Master Policyholder** or **Insured Person**.
- (7) any expenses incurred where a **Academic Course** is cancelled as a result of redundancy or resignation of the **Insured Person** or of the termination of the **Insured Person's** employment within 31 days of the commencement of a pre-booked **Journey** or **Academic Course**.
- (8) any expenses incurred as result of adverse changes in the **Group Master Policyholder's** or an **Insured Person's** financial circumstances.
- (9) any expenses incurred as a result of a **Natural Disaster** other than the cover provided under the optional extension and this extension is shown as being included on the **Schedule**.
- (10) any expenses incurred as a result of regulations, border restrictions or orders made by any Public Authority or Government.; or any expenses incurred whilst travelling against the advice of any Public Authority of Government if, at the time of booking the **Insured Journey**, such advice was in place.
- (11) **Strike** labour dispute or failure of the means of transport (other than disruption of road and rail services by avalanche snow or flood) other than where the departure of any means of transport on which the **Insured Person** is booked to travel is delayed by at least 24 hours unless the delay is due to a **Strike** or industrial action which existed or the possibility of which existed and for which advance warning had been given prior to the date on which the **Insured Journey** was booked.
- (12) any expenses incurred if the **Group Master Policyholder** or **Insured Person** was aware at the time of applying for this Insurance of any reason why the **Journey** should be cancelled or curtailed.
- (13) the amount of the **Excess** shown in the **Schedule**.
- (14) any claim in any way caused by or resulting from **COVID-19**.
- (15) any claim in any way caused by or resulting from the **Insured Person** being in a state of anxiety stress, depression or any phobia or mental or nervous disorder.

Section 3 - Medical Expenses Emergency Repatriation Expenses and Supplementary Travel and Accommodation Expenses

We will not be liable for any claim resulting from

- (1) medical expenses incurred when the specific purpose of the **Journey** is for the **Insured Person** to receive medical treatment or advice.
- (2) medical expenses arising from an **Illness** which the **Insured Person** is aware of and in respect of which the **Insured Person** is travelling against medical advice or where a terminal prognosis has been given.
- (3) medical expenses incurred whilst on an **Insured Journey** within the **Insured Person(s) Country of Residence**.
- (4) any expenses incurred 12 months after the date the need for treatment first arises.
- (5) any expenses which are recovered from any other insurance policy or national insurance programme which is applicable to the **Insured Person**.
- (6) dental or optical expenses other than those incurred in providing the minimum treatment necessary to relieve pain and discomfort for the duration of the **Insured Journey**, and then only provided that all routine dental and optical treatment is completed prior to the **Insured Journey**.
- (7) Emergency mental health treatment if the **Insured Person** has been treated for or diagnosed with a mental health condition during the twelve month period prior to the date of booking their **Journey** and/or **Academic Course**.
- (8) surgical or medical treatment which can be reasonably delayed until the **Insured Person's** return to the **Country of Residence**
- (9) medication and/or treatment which at the time of departure is known to be required or to be continued outside the **Country of Residence**.
- (10) the amount of the **Excess** shown in the **Schedule**.
- (11) any expenses incurred which in any way arise from or are attributable to sexually transmitted diseases.
- (12) Private medical expenses in the **United Kingdom** unless cover has been agreed and included by **Us**.

Section 4 - Personal Belongings

We will not be liable for any claim resulting from

- (1) breakage of articles of a brittle nature unless caused by an accident to the conveyance in which the article is being carried.
- (2) loss or damage caused by
 - (a) moth or vermin or gradual deterioration, atmospheric or climatic conditions, wear and tear (this does not apply to the loss of or damage to any item resulting from wear and tear to a clasp setting or other fastening to a carrier or container)
 - (b) mechanical or electrical failure or breakdown
 - (c) any process of cleaning, dying, restoring, repairing or alteration
- (3) loss of **Money** under this section.
- (4) Loss of **Valuables** unless cover under this optional extension is shown as being operative.
- (5) loss or damage caused by delay detention or confiscation by order of any Government or Public Authority.
- (6) loss which is not reported to the local police or appropriate authorities within 48 hours of its discovery and a written report obtained (in the case of an airline the **Insured Person** will need to obtain a property irregularity report).
- (7) loss or damage from pressure in an aircraft cargo hold.

- (8) theft or attempted theft of **Personal Belongings or Valuables** from any unattended vehicle unless kept out of sight in a locked boot or compartment or in the case of a hatchback or estate car under a purpose built luggage cover. There must be evidence that the vehicle has been broken into.
- (9) loss of or damage to vehicles their parts or accessories.
- (10) loss of or damage to **Personal Belongings** sent as freight or under a bill of lading.
- (11) loss of or damage to sports equipment (including **Winter Sports** equipment) while in use.
- (12) loss or corruption of or damage to software, information or data contained in any computer, tapes or recording equipment or any cost incurred in repairing or replacing such information, software data computers, tapes or recording equipment
- (13) any items of household furniture household appliances or household equipment.
- (14) loss or damage occurring in the custody of an airline or other transport carrier unless reported immediately upon discovery and in the case of an airline a Property Irregularity Report obtained.
- (15) contact or corneal lenses, dentures, dental caps or crowns, hearing aids or fragile articles, or pedal cycles or laptop computers and sporting equipment whilst in use.
- (16) any article more specifically insured or recoverable under any other insurance.
- (17) the amount of the **Excess** shown in the **Schedule** for each and every claim for **Personal Belongings**. In the event of a claim under both the **Personal Belongings** and **Money** Sections of this **Policy** arising out of a single cause only one **Excess** will apply per **Insured Person**.

Section 5 - Money

We will not pay any claim for

- (1) any costs due to delay confiscation by customs or any other authority errors or omissions in receipts or payment or accountancy or depreciation in value.
- (2) any loss which is not reported to the local police or appropriate authorities within 48 hours of its discovery and a written report obtained (in the case of an airline the **Insured Person** will need to obtain a property irregularity report).
- (3) any loss or theft of a credit card, charge card or cash card which results in fraudulent use unless the **Insured Person** has complied with all the terms and conditions under which the card was issued.
- (4) more than £250 in respect of **Money** and credit card misuse in total traveller's cheques unless the loss or theft is reported immediately to the local branch or agent of the issuing company; or if the issuing company provides a replacement service.
- (5) promotional vouchers or awards or any goods or services obtained through the conversion of such vouchers or awards.
- (6) any single loss of Coins bank or currency notes in excess of £100.
- (7) the amount of the **Excess** shown in the **Schedule** of each and every claim for **Money** In the event of a claim under both the **Money** and **Personal Belongings** sections of this **Policy** arising out of a single cause only one **Excess** will apply per **Insured Person**.
- (8) theft or attempted theft of **Money** from any unattended Vehicle unless kept out of sight in a locked boot which is separate from the passenger compartment or locked compartment or in the case of a hatchback or estate car, under a purpose built luggage cover. There must be evidence that the vehicle has been broken into.

Section 6 - Personal Liability

We will not be liable for any claim arising from

- (1) any liability in respect of **Accidental** death or **Accidental Bodily Injury** sustained by any member of the **Insured Person(s)** family or any person who is under a contract of service with **You** and which arises out of and in the course of their employment by **You** or liability arising in connection with any **Business** profession or occupation.
- (2) liability for loss of or damage to property belonging to or in the custody or control of the **Insured Person**, their family or of any employee or agent of the **Insured Person**.
- (3) liability arising out of the ownership possession or use by the **Insured Person** of any land or buildings.
- (4) liability arising from the ownership possession or use of any mechanically propelled vehicle, aircraft, hovercraft or watercraft (other than hand propelled watercraft) under the control of the **Insured Person**.
- (5) liability arising out of the use of firearms.
- (6) liability involving animals other than domestic cats and dogs and horses.
- (7) liability assumed by the **Insured Person** by agreement unless such liability would have attached to the **Insured Person** in the absence of such agreement.
- (8) liability which is the result of any claim resulting from the transmission of any communicable disease or virus.
- (9) liability which is the result of any wilful malicious or unlawful act.
- (10) any punitive or exemplary damages.

Section 7 - Overseas Legal Expenses

We will not pay any claim

- (1) if the **Insured Person** does not keep to the terms, conditions and exceptions under Legal Expenses section.
- (2) where the **Insured Person** is more specifically insured under another policy or in respect of any amount which the **Insured Person** cannot recover from a more specific insurance because the insurer of that insurance refuses the claim.
- (3) relating to the **Insured Person** driving a motor vehicle without a valid licence and/or insurance.
- (4) relating to any **Illness**, death or **Bodily Injury** which develops gradually or is not caused by a specific sudden event.
- (5) arising from Deep Vein Thrombosis (DVT) or its symptoms that result from travelling by air.
- (6) in respect of libel or slander.

- (7) for **Costs and Expenses** incurred prior to **Our** written acceptance of a claim.
- (8) for **Costs and Expenses** which have been incurred by the **Appointed Representative** on a contingency fee basis.
- (9) in respect of any legal action an **Insured Person** takes which **We** have not agreed to or where an **Insured Person** does anything to hinder **Us** or the **Appointed Representative**.
- (10) deliberately or intentionally caused by the **Insured Person** or as a result of the **Insured Person(s)** criminal act.
- (11) for any fines, penalties, compensation or damages which the **Insured Person** is ordered to pay by a court or other authority.
- (12) in respect of an application for judicial review.
- (13) relating to any non-contracting party's rights (other than those of an **Insured Person**) to enforce all or any part of this section. The Contracts (Rights of Third Parties) Act 1999 does not apply to this section for a dispute with **Us** other than as catered for in conditions 6 and 7 Legal Expenses.
- (14) against a tour operator, travel agent, insurer or their agent, a member of the **Insured Person(s)** family, another **Insured Person** under this **Policy**, the **Group Master Policyholder** or **Us**.

Section 8 - Personal Accident

We will not pay any claim for **Accidental Bodily Injury** directly or indirectly caused by the **Insured Person** suffering from

- (1) any gradually operating cause.
- (2) any naturally occurring condition or degenerative process.
- (3) Illness or disease (unless resulting directly from Accidental Bodily Injury).

Optional Extension - Natural Disaster Cover

(cover only included if shown as “Insured” on Schedule of Benefits)

Additional definition added to the **Policy** applicable to this Natural Disaster extension only:

Natural Disaster

Hurricane, tornado, storm, high water, wind, driven water, tsunami, earthquake, volcanic eruption, landslide, snowstorm or natural fire.

Amendment to the **Policy** Exclusions applicable to this Natural Disaster extension only:

Section 1 – Cancellation and Curtailment

Exclusion 12 is deleted and replaced with the following:

(12) regulations, border restrictions or orders made by any Public Authority or Government.; or any expenses incurred whilst travelling against the advice of any Public Authority of Government if, at the time of booking the Insured Journey, such advice was in place.

This exclusion shall not apply to the cover provided in respect of **Natural Disaster**.

Section 2 - Course Fees

Exclusion 8 is deleted and replaced with the following:

(10) any expenses incurred as a result of regulations, border restrictions or orders made by any Public Authority or Government.; or any expenses incurred whilst travelling against the advice of any Public Authority of Government if, at the time of booking the Insured Journey, such advice was in place.

This exclusion shall not apply to the cover provided in respect of **Natural Disaster**.

Additional conditions applicable to this Natural Disaster extension only under:

Section 1 – Cancellation and Curtailment

Section 2 - Course Fees

(i) The cover provided for **Natural Disaster** will only apply when a recognised government body, acting on behalf of such government, of the country to or from which the **Insured Person** is travelling has issued a directive:

prohibiting all travel to or from

or

recommending evacuation from

the country or specific area or event to which the **Insured Person** was travelling provided that the directive came into force after the **Insured Person** was provided with or purchased this insurance or booked the **Journey** (whichever is the later), or in the case of Curtailment or Alteration to Itinerary, after the **Insured Person** had left the **United Kingdom** or **Country of Residence** to commence the **Journey**.

(ii) The cover provided will only apply when the **Insured Person** is unable to recover their incurred expenses through any other means.

Amendment to the cover applicable to this Natural Disaster extension under:

Section 1 – Cancellation and Curtailment

Extensions

(i) Travel Delay and Abandonment

(ii) Missed Departure Additional Travel & Accommodation

The cover specified in the **Policy** for these extensions is extended to include the additional cause of **Natural Disaster**.

Ortus Underwriting
Registered Office: 15 Westferry Circus, London, E14 4HD

Company Number: 08142321

Underwritten by Liberty Managing Agency Limited for and on behalf of the members of Lloyd's Syndicate 4472 trading as Liberty Specialty Markets.

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