

Membership Travel Scheme

Document	Member Schedule
Policy Number	ORL/EBGBLT/13494034
Master Policyholder	British Transport Police Federation
Master Policyholder's Address	Federation Office, 134 Thurlow Park Road, West Dulwich, London SE21 8HN
Business Description	Police Federation.
Insured Persons	Members of the Policy Holder's Insurance Scheme for whom a premium has been paid, their Partners and Dependant Children.
Age Limits	Serving Officers and Staff of the Insured: up to 70 years of age Retired Officers of the Insured: up to 70 years of age Partner of the Insured Person: up to 85 years of age Dependant Children: 18 years of age or 23 if in full-time education
Operative Time	This insurance is to cover holiday trips commencing during the Period of Insurance, having a destination outside the United Kingdom, (or within the United Kingdom for trips that include a pre-booked overnight stay in publicly available accommodation or an internal flight), hereinafter called a "Period of Travel". The Period of Travel operates from the time of leaving home, or place of employment (whichever is the later), during the whole time away and until return to home, or place of employment (whichever occurs first). Cover in respect of Section 1, Cancellation, operates from the date of booking a trip or commencement date of the Period of Insurance whichever is the later.
Maximum Trip Duration	31 days any one trip (31 days Winter Sports within the Period of Insurance) Note: Trips with a scheduled duration of more than 31 days are not covered under this policy unless you have requested, and we have agreed, an extension and paid an additional premium. You should request an extension as soon as you have booked any such trip.
Endorsement(s) Applicable	None
Geographical Limit	Worldwide
Reason for Issue	Renewal
Security	Certain Underwriters at Lloyd's, in the following proportions: Liberty Managing Agency Limited on behalf of Lloyd's Syndicate 4472 trading as Liberty Specialty Markets (66.67%) Canopus Managing Agents Limited for Lloyd's Syndicate 4444 (33.33%) Each insurer above binds themselves severally and not jointly, that is, in the event of a claim, each of insurer (and their Executors and Administrators) is liable only for their own share of their syndicate's proportion of the risk.
Unique Market Reference	B1307C251491

Period of Insurance

Policy Effective Date	1 st May 2026
Policy Expiry Date	30 th April 2027
Date of Issue	28 th April 2026

Broker Details

Broker Name	The Ardonagh Group
Broker Address	6 Bevis Marks, London EC3A 7BA

Membership Travel Scheme

Please note:

- If you join the scheme during the period of insurance, your cover starts on the date you joined the insurance scheme. No cover is given to you for anything that happens before you joined the scheme.
- In respect of Serving Officers and Staff, if your employment ends for whatever reason during the period of insurance, your cover ends on the date your employment ends or the last date of the last period for which a premium deduction has been taken, whichever is sooner.
- If your cover starts during or ends before the period of insurance, any cover for your partner and dependant children starts or ends at the same time.

Membership Travel Scheme

Travel Cover

Section	Schedule of Benefits	Sum Insured Per Insured Person	Excess #
1	Cancellation or Curtailment Expenses	Up to £5,000	£40
2	Journey Continuation	Up to £1,000	None
3	Travel Delay	Up to £100	None
4	Medical, Repatriation and Additional Expenses	Up to £10,000,000	£40
	Emergency Dental Treatment	Included within Item 4 up to £350	
	Funeral Expenses	Up to £2,000	
	Repatriation of remains or ashes	Up to £5,000	
	Continuation of Medical Expenses	Up to £50,000	
	Search and Rescue Expenses	Up to £25,000	
5	Hospital Benefit	£50 per 24 hours up to £1,500	None
	Foreign Coma Benefit	£50 per day up to 730 days	
6	Personal Liability	Up to £2,000,000	None
7	Legal Expenses	Up to £50,000	None
8	Personal Baggage	Up to £2000	£40
	• Single Article or Set or Pair of Articles Limit	£750	
	• Valuable Limit	£750	
	• Loss of Keys	Up to £500	
	Money	Up to £1,000	£40
	• Cash Limit (Insured Person age 16 and over)	£1,000	
	• Cash Limit (Insured Person under 16 years of age)	£50	
	• Financial Card or Cheque Misuse	Included within Item 8, Money	
	• Loss of Passport	Included within Item 8 up to £250	
	• Loss of Travel Documents	Included within Item 8 up to £250	
9	Delayed Baggage	£100 per 24 hours up to £250	None
10	Personal Accident	Up to £20,000	None
10a	Accidental Death		
	16 years of age and older	£20,000	
	Under 16 years of age	£1,000	
10b	Permanent Total Loss of Sight in One or Both Eyes	£10,000	
10c	Permanent Total Loss of Hearing in Both Ears	£20,000	
10d	Permanent Total Loss of Hearing in One Ear	£10,000	
10e	Permanent Total Loss of Speech	£20,000	
10f	Loss of One or More Limbs	£20,000	
10g	Permanent Total Disablement	£20,000	

Membership Travel Scheme

10h	Temporary Total Disablement		
	16 years of age and older	£100 per week	
	Under 16 years of age	Not Covered	
	Excess Period	Nil	
	Benefit Period	104 weeks	
10i	Temporary Partial Disablement		
	16 years of age and older	£40 per week	
	Under 16 years of age	Not Covered	
	Excess Period	Nil	
	Benefit Period	104 weeks	
11	Car Hire Excess Waiver	Up to £1,500	None
12	Hijack and Kidnap	£500 per 24 hours	None
		Up to £15,000	
13	Catastrophe	Up to £3,000	None
14	Winter Sports		
	• Winter Sports Equipment		
	• Part 1 - Owned	Up to £500	£40
	• Part 2 - Hired	Up to £300	£40
	• Part 3 – Winter Sports Equipment Hire		
	• For each 24 hour period	£50	
	• Maximum Any One Claim	£350	
	• Ski Pass	Up to £200	£40
	• Ski Pack	Up to £400	£40
	• Piste Closure	£50 per 24 hours	None
		Up to £500	
	• Avalanche Closure	Up to £500	£40
	• Inability to participate in Winter Sports Activities		
	• Per day	£100	
	• Maximum Any One Claim	£700	
	# The Excess applies per Insured Person Per Section.		

Membership Travel Scheme

Medical Emergency Abroad Procedure

In the event of illness or accident abroad which may lead to Hospital treatment or Curtailment of the trip, you or the Insured Person must contact:

Ortus Assistance, 24 Hour Emergency Service.

Please quote the reference Ortus.

Telephone: +44 (0)203 989 8835

Email: ah-assist@ortusunderwriting.com

When contacting Ortus Assistance, please advise the following:

1. The telephone number from which you are calling.
2. Your Policy Number (ORL/EBGLT/13362007)
3. The name and telephone number of the Doctor and Hospital attending.

Failure to contact Ortus Assistance in the event of an emergency may prejudice your claim.

Travel Oracle App

The ultimate travel safety companion. It provides you with the most up to date travel information and advice, as well as real time alerts on breaking news globally. The Travel Oracle App can be downloaded onto your smart phone from the Apple App store or Google Play store.

Register as a new user and enter Healix policy number **LO254351** (please note this is different to the policy number provided on this policy schedule).

Your password must be:

- Between 8-20 characters
- Contain at least one upper and lower case letter
- At least one number and a character from the list below:
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This Policy is signed on behalf of Underwriters



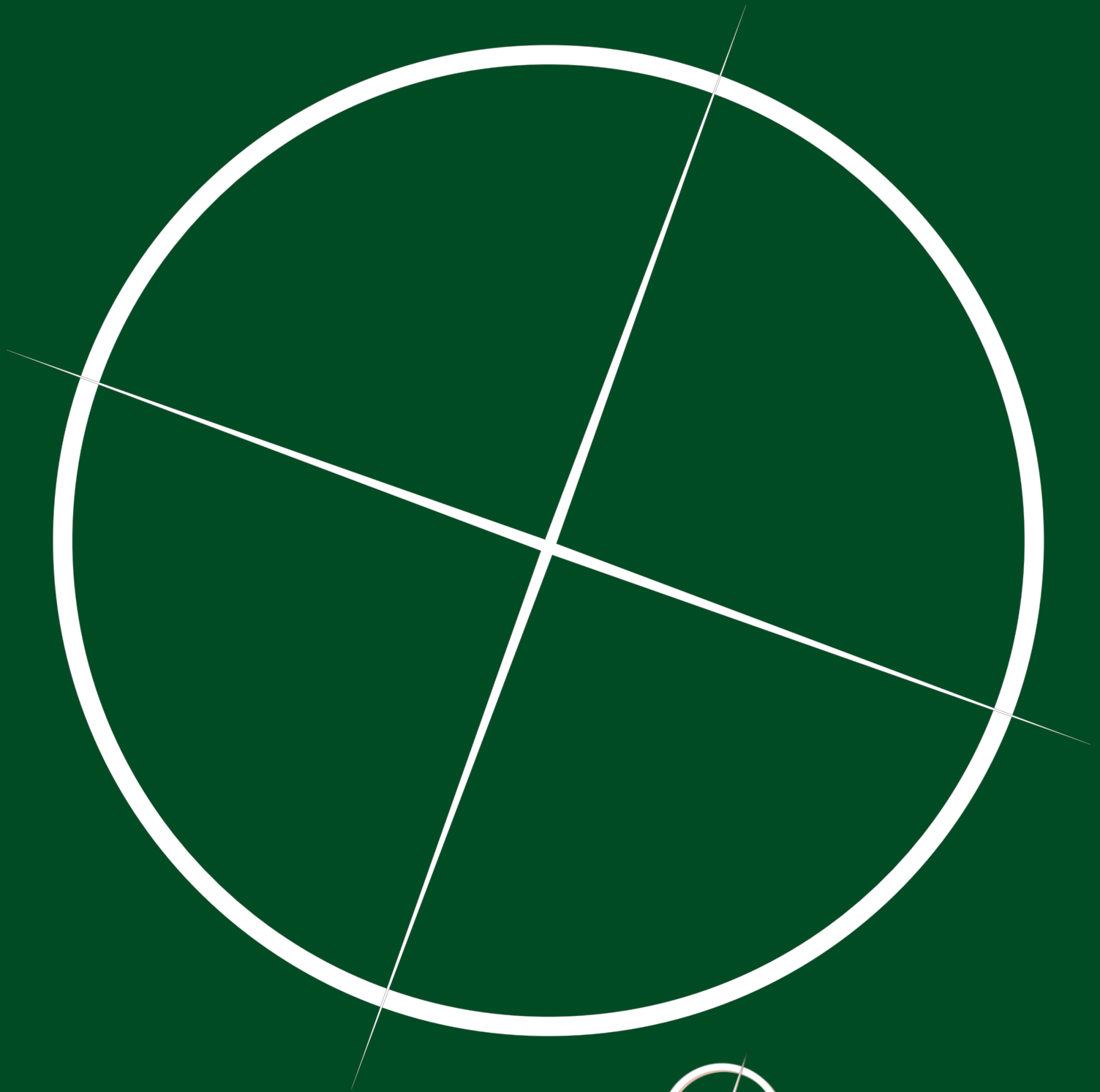
Matthew Stark
Chief Executive Officer
Ortus Underwriting
Registered Office: 15 Westferry Circus, London, E14 4HD
Registered in England No: 08142321
Authorised and regulated by the Financial Conduct Authority

Membership Travel Scheme

Endorsements – Applicable to all Sections

None

British Transport Police Federation
Membership Travel Scheme
Insured Persons' Policy Wording



 **ORTUS**

UNDERWRITING

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How To Make a Claim

If **You** think **You** may have a claim, then please contact **Us** as soon as feasible with as much information as possible and **We** will tell **You** what to do next.

Claims Procedure

Notice of any incident that may give rise to a claim must be made as soon as is feasibly possible upon return of the trip.

Claim Notifications should be sent to:

Ortus Travel Claims

Telephone: +44 (0)345 0308 129

Email: travelclaims@davies-group.com

Medical Emergency Abroad Procedure

In the event of **Illness** or **Accident** abroad which may lead to Hospital treatment or Curtailment of the trip, **You** someone on behalf of the **Insured Person** must contact:

Ortus Assistance, 24 Hour Emergency Service.

Please quote the reference **Ortus**.

Telephone: +44 (0)203 989 8835

Email: ah-assist@ortusunderwriting.com

When contacting **Ortus Assistance**, please advise the following:

1. The telephone number from which **You** are calling.
2. **Your Policy** Number
3. The name and telephone number of the Doctor and Hospital attending to **You**.

Failure to contact **Ortus Assistance** in the event of an emergency may prejudice **Your** claim.

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Your password must be:

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- Contain at least one upper and lower case letter
- At least one number and a character from the list below:
! @ # \$ % ^ & * () - + ? | = } { ; : " ,

Reciprocal Health Arrangements

Global Health Insurance Card (GHIC) or European Health Insurance Card (EHIC):

If possible, **We** recommend **You** obtain a GHIC prior to any travel, if you don't currently have an EHIC, and keep it on **You** whilst travelling outside of **Your** usual **Country of Domicile**.

- If you have an existing EHIC or GHIC, it will remain valid until the expiry date on the card. Once your current card expires you will need to apply for a new GHIC card. You can apply for a new card up to 9 months before your current card expires.
- The GHIC and EHIC entitle **You** to reduced-cost, sometimes free, medical treatment that becomes necessary while **You** are in a European Economic Area (EEA) country or in Switzerland. The EEA consists of the European Union (EU) countries plus Iceland, Liechtenstein and Norway.
- The card gives access to state-provided medical treatment only. Remember, this might not cover all the things **You** would expect to get free of charge from the NHS in the **United Kingdom**. **You** may have to make a contribution to the cost of **Your** care.
- **You** can obtain more information about the GHIC, including how to apply, online at www.gov.uk/global-health-insurance-card.

Australia:

- If **You** are travelling to Australia **You** can enrol in Medicare which will entitle **You** to subsidised hospital treatments and medicines. **You** can do this by contacting a local Medicare office in Australia.
- All claims for refunds under the Medicare scheme must be made before **You** leave Australia. For more information on Medicare visit: www.medicareaustralia.gov.au or email: medicare@medicareaustralia.gov.au.

If **You** make use of these arrangements or any other worldwide reciprocal health arrangement which reduces **Your** medical expenses, **You** will not have to pay an excess.

Welcome

This cover is part of a Master Policy.

As an **Insured Person**, **You** receive cover under this Travel insurance. This document gives **You** details about the cover **You** have.

If **You** have any queries relating to this cover or would like to see the full Master Policy please contact the **Master Policyholder**.

Insured Persons' Policy Wording Information

This cover has been prepared in accordance with the instructions of the **Master Policyholder**. Please read this Insured Persons' Policy Wording carefully to ensure that **You** understand its limits, terms, conditions and exclusions. If **You** have any queries relating to this cover please contact the **Master Policyholder**.

This Insured Persons' Policy Wording consists of:

- General Definitions which define particular words and expressions that apply to the whole of this Insured Persons' Policy Wording;
- General Exclusions, Claims Conditions and General Conditions apply to the cover as a whole;
- the coverage sections which give precise details of the cover being provided;
- Complaints section and notices which provides details of what to do should **You** not be entirely satisfied with the service **You** have been provided and details of notices **We** must provide.

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.

General Definitions

Wherever one of the words or phrases listed below is used in this Insured Persons' Policy Wording it will have the same meaning wherever it appears unless stated otherwise. A defined word or phrase will start with a capital letter each time it appears in this document and is printed in bold type e.g. **Accident**, except for headings and titles.

Throughout this Insured Persons' Policy Wording words in the singular include the plural and vice versa. References to legislation include such legislation as amended and to any statutory re-enactment of the same or substantially similar legislation ..

If a word or phrase has a different meaning in a particular section then that section will have a revised definition of that word or phrase.

Applicable to ALL Sections of this Insured Persons' Policy Wording

The following Definitions apply to all Sections of the **Policy** Insured Persons' Policy Wording and all clauses, extensions and endorsements unless otherwise stated:

Accident/Accidental

A sudden, unexpected, fortuitous, specific event which occurs at an identifiable time and place.

Act of Terrorism

Any act or acts of any person or group(s) of persons committed for political, religious, ideological or similar purposes with the intention to influence any government and /or to put the public or any section of the public in fear. An **Act of Terrorism** can include but not be limited to the actual use of force or violence and/or the threat of use. Furthermore the perpetrators of an **Act of Terrorism** can either be acting alone, or on behalf of or in connection with any organisation or government.

Age Limit

As stated on the Member schedule.

Benefit Period

The maximum period for which the **Temporary Total Disablement** benefit is payable. This period will commence at the end of the **Excess Period**.

Bodily Injury

Identifiable physical injury which:-

1. Is sustained by an **Insured Person**, and
2. Is caused by an **Accident** during the **Operative Time** during the **Period of Insurance**, and
3. Solely and independently of any other cause, except **Illness** directly resulting from or medical or surgical treatment rendered necessary by such injury, occasions the death or disablement of the **Insured Person** within twelve months from the date of the **Accident**.

Broker

As stated on the Member schedule.

Channel Islands

Jersey, Guernsey, Alderney and Sark.

Close Relative

Mother, father, sister, brother, husband, wife, **Partner**, daughter, son, step-parent, step-daughter, step-son, adopted daughter, adopted son, grandparent, grandchildren, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, or fiancé(e).

Coma

A continuous, unconscious and unresponsive state.

Country of Domicile

The country in which the **Insured Person** permanently resides.

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.

Dependant Children

A child under the age of 18 years or under the age of 23 years if in full time education irrespective of whether such child normally resides with the **Insured Member**. Independent travel in respect of **Dependant Children** shall only apply to those children that normally reside with the **Insured Member**. If the **Dependant Child(ren)** has a disability either mental or physical which is substantial and long-term as defined by the Equality Act 2010 then no **Age Limit** shall apply.

Europe

The **Channel Islands**, The Republic of Ireland, the Continent of Europe West of the Ural Mountains, the Azores, the Canary Islands, the Mediterranean Islands, Madeira, Turkey and Iceland.

Excess Period

The period prior to the commencement of the **Benefit Period** for which no benefit is payable.

Fraud/Fraudulent

Wrongful or criminal deception intended to result in financial or personal gain.

Hi-jack

The unlawful seizure or wrongful exercise of control of an aircraft or conveyance, or the crew thereof, in which the **Insured Person** is travelling as a passenger.

Illness

A disease or sickness of the **Insured Person**.

Insured Member

Any member of the **Master Policyholder's** Insurance Scheme for whom a premium has been paid.

Insured Person

The **Insured Member**, their **Partner**, and **Dependant Children**.

Kidnap

The unlawful seizure, abduction and detention by force or **Fraud** of an **Insured Person** against their will by an individual or group.

Loss of Limb

Permanent loss by physical separation of a hand at or above the wrist, or of a foot at or above the ankle, and includes permanent total and irrecoverable loss of use of a hand, arm, foot or leg.

Major Natural Disaster

Earthquake, Volcanic eruption, Tsunami, Hurricane, Tropical cyclone, Typhoon, Storm, Ice storm, Snowstorm, Tornado, Landslide, High water, Floods and Wildfire.

Master Policyholder

The association, company or organisation named in the Member Schedule. The **Master Policyholder** is the contracting party for this insurance.

Medical Expenses

Expenses necessarily and reasonably incurred by the **Insured Person** for medical, hospital, surgical, manipulative, massage, physiotherapy, therapeutic, X-ray or nursing treatment, including the cost of medical supplies and ambulance hire.

Money

Cash, traveller's cheques, passports, green card, travel tickets, credit cards, charge cards, or banker's cards.

Operative Time

Holiday trips commencing during the **Period of Insurance** having a destination outside the United Kingdom, (or within the United Kingdom for trips that include a **Pre-Booked** overnight stay in publicly available accommodation or an internal flight), called a **Period of Travel**.

Our, Us, We, Underwriters

The insurer(s) as per the details in the Member Schedule.

Partner

The **Insured Member's** spouse, civil partner, or any person they are co-habiting with as a couple.

Period of Insurance

The period beginning with the effective date and ending with the expiry date as shown in the Member schedule.

Period of Travel

The time the **Insured Person** leaves their home or place of employment (whichever occurs last) during the whole time away and until return to home or place of employment (whichever occurs first). The maximum trip duration of any one **Period of Travel** shall be as stated in the Member schedule, unless specifically agreed otherwise by us in writing and any additional premium due having been paid.

Permanent Total Disablement

Disablement which entirely prevents the **Insured Person** from attending to any business or occupation of any and every kind and which lasts twelve consecutive months and at the expiry of that period is beyond hope of improvement.

Pre-Booked

Booked by **You** prior to commencement of the **Period of Travel** and for which payment has or will be made.

Radiation

The emission, discharge, dispersal, release or escape of fissile material emitting a level of radioactivity capable of causing incapacitating disablement or death.

Temporary Partial Disablement

Disablement which temporarily prevents the **Insured Person** from attending to a substantial part of the duties of his usual business or occupation.

Temporary Total Disablement

Disablement which temporarily and totally prevents the **Insured Person** from attending to the duties of his usual business or occupation.

Travel Documents

Passports, green card, visa, travel tickets, driving licence or any other essential **Travel Documents** belonging to **You** or the **Insured Person**.

Unattended

When the **Insured Person** is not in full view of and not in a position to prevent interference with the **Insured Person's** property.

United Kingdom

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

Valuables

Watches, binoculars, furs, jewellery, gold and silver items, photographic, video, musical instruments, audio and computer equipment, games consoles and their software.

War

Any activity or conflict where military force is used and includes one of the following:

1. Hostilities or warlike operations (whether **War** be declared or not)
2. Invasion, civil **War**, rebellion, insurrection, revolution
3. Act of an enemy foreign to the nationality of the **Insured Person** or the country in or over which the act occurs
4. Civil commotion assuming the proportions of, or amounting to, an uprising
5. Overthrow of the legally constituted government
6. Military or usurped power
7. Explosions of **War** weapons
8. An **Act of Terrorism**
9. Murder or assault subsequently proved beyond reasonable doubt to have been the act of agents of a state foreign to the nationality of the **Insured Person** whether **War** be declared with that state or not.

Withdrawal of Services

The withdrawal of:

1. All water or electrical facilities in **Your** accommodation; or
2. Waiter/Waitress services at meals; or
3. Kitchen services of such nature that no food is served; or
4. Room cleaning services.

Winter Sports Equipment

Skis, snowboards, ski helmets, ski poles and bindings.

You, Your, Yours

The **Insured Person**.

General Conditions

Each section of this Insurance has conditions and they must be read in conjunction with the following General Conditions which apply to all Sections unless otherwise stated.

If any term, condition or exclusion or endorsement or part thereof is found to be invalid or unenforceable the remainder will be in full force and effect.

Applicable to ALL Sections of this Insured Persons' Policy Wording

The following Conditions apply to all Sections of this Insurance and all clauses, extensions and endorsements unless otherwise stated.

1. In the event of any one occurrence giving rise to claims under more than one Section of this **Policy**, only one monetary excess of the amount specified in the "Excess" column in the **Policy** each **Insured Person** shall be deducted from the total amount of the claim.
2. No Endorsement or Amendment to this **Policy** shall override the Exclusions applicable to Section 6, Personal Liability.
3. **You** must take all reasonable steps to avoid or reduce any loss which may result in a claim under this Insurance.
4. In the event of **You** suffering an **Accident** or **Illness** abroad which may lead to hospital treatment or the curtailment of the trip, **You** must contact the Emergency Assistance Company for advice as soon as reasonably practicable (see Page 1 for details). Failure to do so may prejudice any claim made under this section.

Cancellation

Your Rights to Cancel

Withdrawal by the Insured Member during the Cooling off Period

The **Insured Member** within thirty (30) days of joining the **Master Policyholder's** Travel Insurance Scheme (Scheme) has a right to withdraw from this insurance and provided no claim has been made are entitled to a full refund of premium. To exercise their right to cancel an **Insured Member** must contact the **Broker**.

Withdrawal outside the Cooling off Period

After the cooling off period the **Insured Member** may withdraw from this insurance at any time by stopping the monthly salary deductions and cover shall terminate at midnight of the day before the next monthly salary deduction is due.

An **Insured Member** is entitled to re-join the Scheme at a later date at the **Master Policyholder's** discretion but premiums may be increased and/or specific exclusions applied subject to the terms of the Scheme and this Insurance

Termination of Membership

If an **Insured Member** terminates their membership of the Scheme for any cause then it will terminate cover under this **Policy**. If an **Insured Member** resigns or is dismissed, their cover ends at the same time as their employment.

In the event of withdrawal by the **Insured Member** or termination of membership or employment, cover in respect of all **Insured Persons** shall automatically terminate.

Cancellation by the Master Policyholder

The **Master Policy Holder** may cancel this insurance, at any time, by giving 30 days' notice to **Us** in writing.

Our Rights to Cancel

We may cancel this insurance by giving thirty (30) days' notice in writing to the **Master Policyholder** at their last known address stating the reasons for cancellation such as:

- non-payment of premium
- failure on the part of the **Master Policyholder** to comply with the terms and conditions of this insurance.

In the event of cancellation by the **Master Policyholder** or **Us** cover in respect of all **Insured Persons** shall automatically terminate.

Contracts (Rights to Third Parties) Act 1999

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

Failure to Comply with Conditions

If **You** fail to comply with any obligation to act in a certain way specified in the terms, provisions, conditions and endorsements of this insurance, it may prejudice **Your** position to recover any claim under this insurance.

Interest on Benefit Payable

We will not pay interest on any benefit payable.

Maximum Period of Travel

The maximum duration for any one continuous **Period of Travel** shall not exceed that noted in the Member Schedule.

Other Insurances

If at the time of a claim there is another insurance policy in **Your** name which covers **You** for the same expense or loss, **We** will only pay a proportion of the claim, determined by reference to the cover provided by each section except for Section 10 – Personal Accident, Items 10a to 10d as shown on the Member schedule which will be paid in full..

Reasonable Care

You must take all reasonable care and steps to:

1. avoid and prevent **Bodily Injury** or **Illness**,
2. safeguard Personal Baggage and **Money**, and
3. recover any lost Personal Baggage or **Money**.

Sanctions Notice

We will not provide any cover or be liable to pay any claim or provide any benefit under this Insurance 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.

Trust Assignment

We will not automatically accept or be affected by notice of any trust assignment or the like which relate to this Insurance.

Your Duty of Care

Under the terms of the Consumer Insurance (Disclosure and Representations) Act 2012 **You** have a duty of care not to make a misrepresentation.

You must take all reasonable care to answer all the questions honestly and to the best of **Your** knowledge. If **You** do not, **Your** cover may be cancelled, or treated as if it never existed, or **Your** claim rejected or not fully paid.

When making a claim **You** must not misrepresent, which at worst may lead to the cancellation of your cover as if it never existed and no claims being paid.

Claims Conditions

The following claims conditions apply to this insurance.

Claims Co-operation

You shall provide assistance and co-operate with **Us** or **Our** representatives in obtaining any other records **We** deem necessary to evaluate the claim.

In no event will **We** be liable to pay any claim unless **You** co-operate with **Us** and/or **Our** representatives in the investigation of a claim.

Claim Notification

Notice of any **Accident**, **Illness**, loss or mishap to an **Insured Person** must be sent to **Us** as soon as practicable upon **Your** return of the trip. In the event of **Illness** or **Accident** abroad which may lead to Hospital treatment or Curtailment of the trip, **You** or someone on behalf of the **Insured Person** must contact **Ortus Assistance**, 24 Hour Emergency Service.

Failure to comply with this condition may prejudice any claim made under this section.

Claim Payment

There may be jurisdictions in which local law precludes **Us** from paying, defending or otherwise responding to a claim locally. If **We** are so precluded, **We** will reimburse the **Insured Person** for amounts due under the policy in lieu of responding locally. Moreover, **We** are not providing legal, regulatory or tax advice in connection with this transaction.

Fraudulent Claims

If an **Insured Person** makes a fraudulent claim under this insurance, **We**:

- a) are not liable to pay the claim; and
- b) may recover from the **Insured Person** any sums paid by **Us** to the **Insured Person** in respect of the claim; and
- c) may by notice to the **Insured Person** treat their cover as having been terminated with effect from the time of the fraudulent act.

If **We** exercise **Our** rights under c) above:

1. **We** will not be liable to the **Insured Person** in respect of a relevant event occurring after the time of the fraudulent act. A relevant event is whatever gives rise to **Our** liability under this insurance, for example the occurrence of a loss, the making of a claim, or the notification of a potential claim; and

This condition will only apply to that specific **Insured Person** as an individual and not the entire group if the fraud was committed by a single **Insured Person** and not the **Master Policyholder**.

Right to Medical Records and Medical examination

Following notice of a claim, the **Insured Person** shall provide when requested by **Us** all authorisations necessary to obtain an **Insured Persons** medical records. **We** have the right to have an **Insured Person** examined by a physician or vocational expert of **Our** choice and at **Our** expense when **We** may reasonably request.

General Exclusions

Applicable to ALL Sections of this Insured Persons' Policy Wording

The following exclusions apply to all Sections of this Insurance and all clauses, extensions and endorsements unless otherwise stated.

We shall not be liable for the following:

1. The first amount as shown in the "Excess" column in the schedules of benefit within the Member schedule, each and every claim.

2. Claims arising out of any trip which is booked or commenced by **You**:
 - (a) contrary to medical advice
 - (b) contrary to health and safety restriction(s) from an airline or carrier with whom **You** have booked to travel
 - (c) to obtain medical treatment or convalescent care
 - (d) after a terminal prognosis has been made.
3. Any claims arising out of a medical condition for which **You** are on a hospital waiting list for in-patient treatment at the time of taking out this insurance (or booking the trip whichever is the later).
4. Any claim if **You** have attained or exceed the **Age Limit**, other than where the **Age Limit** is attained during a **Period of Travel** in which case cover shall apply for the duration of that **Period of Travel**.
5. Any claim directly caused by or indirectly arising from suicide or intentional self injury or deliberate exposure to exceptional danger (except in an attempt to save human life).
6. Any claim directly or indirectly arising from **You** whilst **You** are undertaking manual work, voluntary or otherwise.
7. In respect of Winter Sporting Activities, any claim directly or indirectly arising from participation in:
 - (a) ski and ski bob racing in international or national events, services or interservices championships or heats or officially organised practice or training for these events, ski jumping, ice hockey or the use of skeletons, bob-sleighs, ski diving or lugging.
 - (b) off-piste skiing or off-piste snowboarding undertaken within resort boundaries, if such areas have been deemed unsafe by resort management or by local ski-patrol guidelines.
 - (c) off-piste skiing or off-piste snowboarding undertaken outside of resort boundaries unless accompanied by an official and experienced guide who is employed at **Your** ski resort and provided such areas have been deemed safe by resort management or by local ski-patrol guidelines.
8. Death, disablement, loss or expense from **Your** participation in the following Activities and Sports: any form of operational duties as a member of the armed forces, mountaineering or rock climbing normally requiring the use of ropes or guides or special equipment, steeplechasing, polo, hunting, any professional sport(s), pot holing, canyoning, quad biking (except than with engines smaller than 125cc), fighting (except in self-defence), scuba-diving below a depth of 30 metres (or 40 metres if suitably qualified), parachuting, riding or driving in any kind of race, speed or endurance tests or practising for such events or any form of organised team sport.
9. Any claim arising from **You** engaging in aviation except when travelling by air as a passenger.
10. Any claim arising from **Your** use of a 2 wheeled motor vehicle where the driver does not have the appropriate driving licence and/or **You** are not wearing a crash helmet.
11. Claims where medical or other suitable evidence is not provided.
12. Any part of any trip, which is booked or commenced by **You** in the knowledge that the **Period of Travel** will be longer than the maximum duration any one trip as stated in the Member schedule.
13. Any claim resulting directly from the influence of alcohol, drugs or solvents (other than drugs taken under medical supervision but not for the treatment of drug addiction).
14. Any claim resulting from **Your** participation in a criminal act.
15. Any loss, damage or any legal liability of whatsoever nature, directly or indirectly caused by or contributed to, by or arising from:
 - (a) ionising **Radiation** or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof, or
 - (b) pressure waves caused by aircraft or other aerial devices travelling at sonic or supersonic speeds.
16. Any loss, damage, liability, cost or expense caused deliberately or accidentally by:
 - 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.
 However, subject to the terms and conditions of this insurance, **You** are covered up to the amount(s) stated in the Member schedule for:
 - Cancellation or Curtailment (Section 1),
 - Medical, Repatriation and Additional Expenses (Section 4) and
 - Personal Accident (Section 10)
 as a result of **Your** serious illness or injury or death, or that of a **Close Relative** for claims arising under Section 1 (Cancellation or Curtailment), due to any of a), b) or c) above.
17. Any claims attributable to any set of circumstances known to **You** at the time of joining this Insurance scheme or booking a trip, whichever is the later, where such set of circumstances could reasonably have been expected to give rise to a claim.
18. In any way caused by or resulting from **COVID-19** other than as stated under Section 1 of the cover given.
19. Any claim in respect of Sections 1 to 3 of the cover given:
 - (a) As a result of **You** deciding not to travel or deciding to curtail a trip;
 - (b) If the travel provider or their agent with whom **You** have booked transport or accommodation through defaults;

- (c) Due to **Your** financial circumstances;
 - (d) Resulting from any regulations made by any Public Authority or Government other than in respect of regulations directly consequent upon the occurrence of a **Major Natural Disaster**;
 - (e) For delay of, or for cancellation following the delay of, a ship, aircraft or train, if:
 - (i) **You** or any member of the travel party fails to check in according to the itinerary supplied unless the failure was itself due to strike or industrial action
 - (ii) The delay is due to the withdrawal from service temporarily or permanently of any ship, aircraft or train on the orders or recommendation of any Port Authority or Civil Aviation or any similar body in any Country.
20. Any claim consequent upon venereal disease or any expenses incurred either directly or indirectly in the treatment of, diagnosis or counselling of either Acquired Immune Deficiency Syndrome (AIDS), AIDS related complex (ARC), or Human Immunodeficiency Virus (HIV), howsoever these may have been acquired or may be named.
21. Any claims for any other person on whose health the trip may depend, if at the time of taking out this Insurance (or booking the trip whichever is later) they have a medical condition for which they:
- (a) Are receiving treatment at hospital (other than regular hospital check-ups for a stable condition where the medication dosage remains unchanged)
 - (b) Are awaiting for a hospital consultation or treatment (other than regular hospital check ups for a stable condition where the medication dosage remains unchanged)
 - (c) Has been given a terminal prognosis, or been told that their condition is likely to get worse in the next twelve months
22. Any claims in respect of travel to any country or destination that the Foreign, Commonwealth & Development Office (FCDO) has advised against "all but essential travel" or "all travel".

Pre-existing Medical Conditions

You are advised that claims arising from Pre-existing Medical Conditions are excluded in certain circumstances. The exclusions are contained within the General Exclusions or specific Sections of this insurance and **You** should familiarise yourself with them. For ease of reference, the circumstances and location of the applicable exclusions are shown below.

We shall not pay any claim in respect of any trip where **You** are or would be travelling:

1. against medical advice (General Exclusion 2(a))
2. contrary to health and safety restriction(s) from an airline or carrier (General Exclusion 2(b))
3. to obtain medical treatment or convalescent care (General Exclusion 2(c))
4. after a terminal prognosis has been made (General Exclusion 2(d)).

Any claims arising out of a medical condition for which **You** are on a hospital waiting list for in-patient treatment at the time of taking out this insurance (or booking the trip whichever is the later) (General Exclusion 3).

Any claim relating to any other person on whose health the trip may depend, if at the time of taking out this insurance (or booking the trip whichever is later) they have a medical condition for which they are receiving hospital treatment, are awaiting a hospital consultation or treatment or have been given a terminal prognosis (General Exclusion 21).

Any claim for the cost of continuing regular medication (page 15, Section 4, Exclusion 1).

War Exclusion Clause applying to all Sections

The following exclusion clause shall be operative at all times within the **United Kingdom** and at all times during the **Period of Travel** whilst **You** are within the confines of, or travelling to and from, any country or area that, at the commencement of the **Period of Travel**, was publicly known to be in a state of, or faced with the threat of, **War**, invasion, civil **War**, armed hostility, armed revolt or insurrection. **We** shall not be liable for death, disablement, expense, loss or indemnity directly or indirectly resulting from or attributable to **War** as defined.

Notwithstanding the foregoing, this **War** Exclusion shall automatically be deemed inoperative if **Your** presence in such country or area is attributable to:

1. The scheduled transit or stopover not exceeding 24 hours of an aircraft or sea vessel in which **You** are travelling, or
2. Involuntary diversion or transit due to force majeure or to **Hi-jack**, kidnap or the like, terrorist or criminal act, provided always that at the time of the original occurrence or act **You** are not within the confines of any country or area to which this **War** Exclusion was applicable, nor travelling to or from such country or area other than as provided for under 1).

Nuclear, Chemical and Biological Terrorism Exclusion Clause

Regardless of any contributory cause(s), this Insurance does not cover any claim(s) in any way caused or contributed to by an **Act of Terrorism** involving the use or release or the threat thereof of any nuclear weapon or device or chemical or biological agent. If **We** allege that, by reason of this exclusion, any claim is not covered by this Insurance, the burden of proving the contrary shall be upon **You**.

Note

1. **Your** attention is drawn to General Policy Exclusion 15, which applies at all times.

Travel Cover

What is Covered

We will insure **You** against **Accident, Illness**, loss, damage or mishap, for trips taken during the **Operative Time** within the **Period of Insurance**.

This Insurance is to cover holiday trips commencing during the **Period of Insurance**, having a destination outside the **United Kingdom**, or within the **United Kingdom** (subject to at least 1 night's **Pre-Booked** accommodation or an internal flight), called a "**Period of Travel**". The **Period of Travel** operates from the time of leaving home, or place of employment (whichever is the later), during the whole time away and until return to home, or place of employment (whichever occurs first). The maximum duration of any one **Period of Travel** shall be as stated in the Member schedule. Each **Period of Travel** is deemed to be a separate insurance, each being subject to the terms, Definitions, Exclusions and Conditions contained herein. Cover in respect of Section 1, Cancellation, operates from the date of booking a trip or commencement date of the **Period of Insurance** whichever is the later.

Extension to the Policy

If **You** have not returned to the **United Kingdom** before the expiration of a trip for reasons which are beyond **Your** control, this Insurance will remain in force for a further 21 days or until return, whichever is the earlier, without additional premium but in the event of **Your Hijack**, cover shall continue whilst **You** are subject to the control of the person(s) or their associates making the **Hi-jack** and during travel direct to **Your Country of Domicile** and/or original destination up to twelve months from the date of **Hi-jack**.

Section 1 - Cancellation or Curtailment

Cover

We will pay up to the limit shown in the Member schedule for any irrecoverable payments paid or contracted to be paid for travel, accommodation and unused **Pre-Booked** excursions (including reasonable additional travel and accommodation expenses incurred for return to **Your Country of Domicile**) should the projected trip be cancelled before commencement or curtailed before completion, directly and necessarily as a result of:

1. Death, **Bodily Injury**, or **Illness** of:-
 - (a) **You**, or
 - (b) any member of the travel party, or
 - (c) any person with whom **You** intend to reside with during the **Period of Travel**, or
 - (d) any **Close Relative** or **Business Associate**.
2. Summoning to jury service or witness attendance in a court of the **United Kingdom** of:-
 - (a) **You**, or
 - (b) any member of the travel party.
3. Major damage or burglary at the home or place of business of:-
 - (a) **You**, or
 - (b) any member of the travel party, or
 - (c) any person with whom **You** intend to reside or conduct business during the **Period of Travel**.
4. **You** being made involuntarily redundant if **You** have at least 2 years' continuous employment with the same employer and are under 65 years of age.
5. Agreed leave being cancelled by emergency services or armed forces for operational reasons, other than leave being cancelled as a consequence of **War, Act of Terrorism**, civil unrest, rebellion, act of a foreign enemy or any similar event, in respect of:-
 - (a) **You**, or
 - (b) any member of the travel party.
6. A **Major Natural Disaster** occurring which directly results in regulations being made by a Public Authority or Government, in the country **You** are travelling to, or are in, resulting in an inability to commence the **Period of Travel** or necessitating **Your** immediate evacuation in order to avoid personal risk of **Bodily Injury** or **Illness**.
7. Strike, labour dispute, mechanical breakdown or failure of the means of transport (other than disruption of road or rail services by avalanche snow or flood) where the departure of such means of transport on which **You** are booked to travel is delayed by at least 24 hours.
8. **COVID-19** when a trip is:
 - (a) cancelled before commencement or curtailed before completion directly and necessarily as a result of **Illness** caused by **COVID-19** of an **Insured Person**, any member of the travel party, any person with

- whom an **Insured Person** intends to reside or conduct business with during the **Period of Travel**, any **Close Relative**, or,
- (b) cancelled before commencement directly and necessarily as a result of an **Insured Person** or any member of the travel party receiving a positive diagnosis of **COVID-19** following an official PCR test.

Exclusions

We shall not be liable to pay for:

1. Any claim that exceeds **Your** contractual liability.
2. Any additional costs incurred as a result of **Your** failure to advise the Tour Operator of the cancellation of the trip.

Section 2 - Journey Continuation

Cover

We will pay up to the limit shown in the Member schedule for:

1. Outward Journey
 - (a) Reasonable additional travel and accommodation expenses incurred in meeting a **Pre-Booked** travel connection or reaching **Pre-Booked** accommodation, if at commencement of, or during the **Period of Travel You** miss a **Pre-Booked** air, sea, coach or rail journey through any of the following contingencies directly affecting the means of transport in which **You** are travelling or intending to travel:
 - (i) If travel is by non-scheduled transport, interruption caused by strike, locked out workers, industrial action, bomb scare, criminal action, **Hi-Jack**, fire, avalanche, landslide, earthquake, flood, or **Accident** to or mechanical breakdown of such non-scheduled transport in which **You** travel.
 - (ii) If travel is by scheduled public transport, the contingencies specified in (i) above and also adverse weather conditions.
 - (b) Reasonable additional travel and accommodation expenses incurred in meeting a **Pre-Booked** travel connection or reaching **Pre-Booked** accommodation, if at commencement of or during the **Period of Travel You** miss a **Pre-Booked** air, sea, coach or rail journey due to **Your** failure to reach the departure point due to circumstances which **You** can realistically demonstrate were beyond **Your** reasonable control.
2. Return Journey
 - (a) Reasonable additional travel and accommodation expenses incurred in returning to **Your** home, or place of employment (whichever occurs first), if subsequent to **You** leaving **Your** accommodation such additional and reasonable travel expenses are incurred as a result of the following:
 - (i) If travel is by non-scheduled transport, interruption caused by strike, locked out workers, industrial action, bomb scare, criminal action, **Hi-Jack**, fire, avalanche, landslide, earthquake, flood, or **Accident** to or mechanical breakdown of such non-scheduled transport in which **You** travel.
 - (ii) If travel is by scheduled public transport, the contingencies specified in (i) above and also adverse weather conditions.
 - (b) Reasonable additional travel and accommodation expenses incurred in meeting a **Pre-Booked** travel connection, if **You** miss a **Pre-Booked** air, sea, coach or rail journey due to **Your** failure to reach the departure point due to circumstances which **You** can realistically demonstrate were beyond **Your** reasonable control.

Exclusion

We shall not be liable to pay for:

1. Any claim arising out of any of the contingencies specified above, if such contingencies had already started or been forecast before the trip was booked or the insurance was effected, whichever is the later.

Conditions

1. In the selection of the route, means of travel and time of departure, **You** shall do all things reasonable and practical to minimise the possibility of late arrival at the departure point and allow reasonable time to make onward connections.
2. **We** shall only be liable for claims attributable to mechanical breakdown of non-scheduled transport if **You** have obtained a garage or motoring organisation report confirming the date, time and cause of such breakdown.

Section 3 – Travel Delay

Cover

We will pay the limit shown in the Member schedule for delays of more than 12 hours, should the aircraft, sea vessel, coach or train on which **You** are booked to travel be delayed as a result of strike, locked out workers, industrial action, bomb scare, criminal action, **Hi-jack**, fire, avalanche, landslide, earthquake, flood, adverse weather conditions or **Accident** to or mechanical breakdown of such passenger transport:

1. £20 for each full twelve hour period of delay.

Exclusion

We shall not be liable to pay for: -

1. Any claim arising directly or indirectly out of **You** failure to check in according to the itinerary supplied to **You**.

Conditions

1. **We** shall only be liable under this section if **You** have obtained written confirmation from the carrier(s), or their Agent(s) stating the actual date and time of departure and the reasons for delay.
2. For the purposes of claims payment the period of delay shall be taken as commencing at the departure time of the conveyance as specified in the booking confirmation supplied to **You**.

Section 4 – Medical, Repatriation and Additional Expenses

Cover

Should **You** suffer **Bodily Injury** or **Illness** (including compulsory quarantine) during the **Period of Travel**, **We** will pay up to the limit shown in the Member schedule for normal and necessary expenses incurred for medical or surgical treatment including specialists fees, hospital, nursing home and nursing attendance charges, massage and manipulative treatment, surgical and medical requisites, ambulance charges, emergency dental treatment (for the immediate relief of pain only) up to the limit as stated in the **Policy**, and emergency ophthalmic fees, plus:

1. Reasonable additional accommodation and repatriation expenses incurred by **You** and any one member of the travel party who has to remain or travel with **You** where their doing so have been approved by **Ortus Assistance**.
2. Reasonable travel and hotel expenses of one person to travel from the **United Kingdom** if their presence with **You** is necessary on medical grounds.
3. Reasonable additional accommodation and travel expenses authorised by **Ortus Assistance** and incurred in order that **You** reach the next docking port to enable **You** to re-join a **Pre-Booked** cruise, or to reach the final destination of the **Pre-Booked** cruise, as a result of **You** requiring hospital treatment on dry land.
4. Up to the limit as stated in the Member schedule for the reasonable cost of transporting **Your** remains or ashes to **Your** former place of residence in the **United Kingdom** or up to the limit as stated in the Member schedule for reasonable funeral expenses incurred abroad.
5. The charter of an air ambulance or the use of air transport including qualified attendants certified by a registered doctor and authorised by **Ortus Assistance** to be necessary for **Your** repatriation or treatment.

Extensions applicable to Medical, Repatriation and Additional Expenses

Continuation of Medical Expenses

We will continue to pay **Medical Expenses** (excluding any dental expenses), up to the limit as stated in the Member schedule, that are reasonably and necessarily incurred in the **Insured Person's Country of Domicile** for a maximum period of six months immediately following the **Insured Persons** date of return to their **Country of Domicile** provided that expenses had already been incurred at the overseas location during the **Period of Travel** and are the subject of a valid claim under this Insurance.

Search and Rescue Expenses

We will pay up to the limit as stated in the Member schedule for reasonable additional costs that are necessarily incurred to conduct a search and rescue operation to locate an **Insured Person** reported as missing to the police, coastguard or other authority responsible for rescue service where:

1. It is known or suspected that the **Insured Person** may have sustained **Bodily Injury** or become ill; or
2. Weather or safety conditions are such that it becomes necessary to do so to prevent the **Insured Person** from sustaining **Bodily Injury** or becoming ill.

Exclusions

We shall not be liable to pay for:

1. The cost of continuing regular medication for any condition for which medical advice or treatment is being followed at the time of booking a trip or commencement of a **Period of Travel**, whichever is the later.
2. Any expenses incurred more than twelve months after the date of the incident which gave rise to the claim.
3. **Medical Expenses** incurred in the **United Kingdom** or **Your Country of Domicile**.

Conditions

1. In the event of a claim under the Search and Rescue Expenses, a written statement must be obtained from the Police, Coastguard, or other rescue authority that were responsible for the search and rescue operation.

Section 5 – Hospital Benefit

Cover

We will pay the limit shown in the Member schedule for each completed 24 hour period up to the limit shown in the Member schedule should **You** suffer **Bodily Injury** or **Illness** during the **Period of Travel** which necessitates in-patient treatment outside of the **United Kingdom** or **Your Country of Domicile**.

If **You** suffer **Bodily Injury** during the **Period of Travel** outside the **United Kingdom** or **Your Country of Domicile** which results in **You** being in a **Coma** **We** will pay **You** up to the limit shown and maximum duration shown in the Member schedule.

Section 6 – Personal Liability

Cover

We will indemnify up to the limit as stated in the Member schedule, any one event or series of events and in all (including Legal Expenses), should **You** become legally liable to pay compensation for **Bodily Injury** to the public or **Accidental** loss of or damage to property, occurring during the **Period of Travel**.

Exclusions

We shall not be liable to pay for:

1. Any claim arising out of **Bodily Injury** to any member of **Your** family or household, or to any employee.
2. Any claim arising out of **Accidental** loss or damage to property belonging to or in **Your** care, custody or control of or any member of **Your** family or household or of an employee.
3. Any claim arising out of the ownership, possession or use of any horse drawn or mechanically propelled vehicle (other than golf buggies), aircraft, waterborne craft (other than sailboards, surfboards, canoes, rowing dinghies, foot or hand propelled paddle boats, and inflatable dinghies), firearms or animals.
4. Any claim arising out of the ownership, possession, occupation or use of land or buildings (other than temporarily for the purpose of the trip).
5. Any claim arising out of **Your** profession, occupation or business or arising out of liability assumed under a contract if such a liability would not otherwise have attached.
6. Any costs recoverable under any other Insurance in force.
- 7.

Conditions

1. **You** must not make any admission of liability whatsoever, or make any arrangements, offer or promise of payment without the written consent of the **Underwriters**.
2. **Underwriters** shall be entitled, if they so desire, to take over and conduct, in **Your** name, a defence of any claim or to prosecute in their name for their own benefit any claims for indemnity or damages or otherwise against any third party, and have discretion in the conduct of any negotiations or proceedings or the settlement of any claim. **You** shall, whenever possible, give all such information and assistance as **We** may require.

Section 7 – Legal Expenses

Cover

We will pay up to the limit as stated in the Member schedule, for Legal Expenses incurred by **You** or on **Your** behalf in the pursuit of a claim for damages against a third party who has caused **You Bodily Injury, Illness** or **Death** by an **Accident** during the **Period of Travel**.

Exclusions

We shall not be liable to pay for:

1. Legal Expenses incurred without **Our** written consent (which shall not be unreasonably withheld).
2. Legal Expenses for actions against Travel Agents, Tour Operators, **Underwriters** or their Agents, or **Your** spouse, immediate family or employer.
3. Any costs recoverable under any other Insurance in force.

Conditions

1. **Ortus Travel Claims** shall be entitled to nominate and appoint a Legal Representative to act on **Your** behalf and to have direct access at all times to the Legal Representative.
2. **We** reserve the right to withdraw at any stage and thereafter **We** shall not be liable for any further expenses.

Section 8 – Personal Baggage and Money

Cover

We will pay up to the limits as stated in the Member schedule for loss, theft or damage occurring during the **Period of Travel** to accompanied Personal Baggage and **Money**, subject to the following inner limits:-

- **Single Article or Pair or Set of Article Limit**
Up to the limit as shown in the Member schedule.
- **Valuable items**
Up to the limit as shown in the Member schedule and subject to the Single Article or Pair or Set of Articles Limit as stated in the Member schedule.
- **Loss of Keys**
Up to the limit as shown in the Member schedule.
- **Cash**
Up to the limit as shown in the Member schedule.
- **Loss of Passport**
Up to the limit as shown in the Member schedule.

Extensions applicable to Personal Baggage, and Money

Loss of Keys

If during a **Period of Travel**, **You** lose **Your** house keys to **Your** main permanent residence in **Your** usual **Country of Domicile**, **We** will pay for the parts and labour costs of replacing the locks up to the sum insured as stated in the Member schedule for any one occurrence and in the aggregate during the **Period of Insurance**.

Financial Card or Cheque Misuse

If during a **Period of Travel**, **You** sustain financial loss as a direct result of a credit charge, debit or bankers card being lost or stolen and it being fraudulently used by someone other than the **You**, **We** will indemnify **You** for such loss up to the sum insured stated in the Member schedule provided that **You** have fully complied with all terms and conditions under which such cards have been issued.

Loss of Travel Documents

In addition, in the event of loss, theft or damage to **Travel Documents**, **We** will pay for any reasonable additional expenses incurred for travel, accommodation and other associated costs, up to the sum insured stated in the Member schedule to enable **You** to obtain essential replacement **Travel Documents**, for a period of up to 120 hours prior to commencement of the **Period of Travel** or up to 120 hours after completion of the **Period of Travel**.

Exclusions

We shall not be liable to pay for:

1. Any claim in respect of damage due to wear and tear and gradual deterioration, or **Money** shortages due to error, omission or depreciation in value.
2. Any claim in respect of loss of and/or theft of **Money** or Personal Baggage not reported to the police within 24 hours of discovery, and a police statement obtained.
3. Losses arising from confiscation or detention by customs or any other authority.
4. Any claim in respect of property or **Money** otherwise insured.
5. Any loss or damage whilst in the custody of a carrier, unless reported to the carrier within 24 hours of discovery and a report obtained.
6. Any claim in respect of **Valuables** or **Money** whilst in the custody of a carrier.
7. Any loss or damage whilst left **Unattended**, unless in a locked hotel room, safe, apartment, holiday residence or motor vehicle. If left in a motor vehicle overnight, **We** shall not be liable for any claims unless such motor vehicle is contained in a securely locked garage, or secure compound.
8. Any claim arising out of electrical and/or mechanical breakdown.
9. The **Fraudulent** use of credit cards, charge cards, banker's cards or cheques, if **You** have not reported the loss of the card to the issuing bank or company, and have not complied with the terms and conditions under which the card was issued. **Our** liability shall be limited to any loss not covered by any guarantee given by the issuing bank or company to **You**.
10. Any loss or damage of fragile articles unless caused by fire or by an **Accident** to the aeroplane, ship or vehicle in which they are being carried.
11. Loss or theft or damage to contact or corneal lenses, dentures, hearing aids, bonds, coupons, securities, stamps or documents of any kind, antiques, pictures, sports equipment whilst in use, boats and/or ancillary equipment including windsurfing equipment and sailboards.
12. Personal Baggage that is left **Unattended** in a public place.
13. Damage caused by leaking powder or fluid carried within **Your** baggage.

Note

1. **Money** and Travellers Cheques shall be covered from the time of collection from a bank or travel agent or from 72 hours prior to commencement of the **Period of Travel**, whichever is the later, and up to 48 hours after completion of the **Period of Travel**, or time of conversion or encashment, whichever is the earlier.

Conditions

1. **You** shall at all times exercise reasonable care in the supervision of the insured property.
2. **You** shall in the event of any loss, take all reasonable steps to recover such item(s).
3. If **You** purchase a comparable replacement for a lost or damaged article, **We** shall pay for the replacement cost, providing that such article was less than 2 years old at the time, and that evidence of the original purchase is provided. For articles of 2 years old or more, or if the article is not actually replaced, or evidence of the original purchase cannot be provided, payment shall be based upon the value of such article at the time of loss, or the cost of repair, whichever is the lesser.

Section 9 - Delayed Baggage

Cover

In the event that personal effects are temporarily lost for more than twelve hours by the carrier, **We** will pay the amount stated in the Member schedule per 24 hours up to the limit as stated in the Member schedule for the purchase of immediate necessities, but such payment will be deducted from any claim submitted under Section 8, Personal Baggage and **Money** if the loss becomes permanent. Receipts for such purchases must be provided.

Section 10 – Personal Accident

Cover

If **You** suffer **Bodily Injury** which is the sole cause of death or disablement then **We** will pay the appropriate sum insured as stated on the Member schedule for such death or disablement.

Maximum Sum Insured Any One Occurrence: £500,000

Exclusions

1. **We** will not be liable to pay for any claim directly or indirectly resulting from disease or natural causes or surgical treatment (unless rendered necessary by **Bodily Injury** covered hereunder).

Conditions

1. Benefit shall not be payable under more than one of the Items stated on the **Policy** schedule in respect of the consequences of one **Accident**.
2. Any benefits payable under Item 10h or 10i shall cease upon:
 - (a) The expiry of the **Benefit Period** as stated in the Member schedule.
 - (b) The death of the **Insured Person**.
 - (c) The date the **Insured Person** ceases to fulfil the definition of **Temporary Total Disablement** or **Temporary Partial Disablement**.
 - (d) The retirement of the **Insured Person**.
 - (e) The date the **Insured Person** returns to duties or their usual occupation.
 - (f) Termination of employment of the **Insured Person**.
 - (g) The **Insured Person** declining any reasonable recuperative duties.
3. If the **Insured Person** is under 16 years of age:
 - (a) The sum insured under Item 10a shall be restricted to £1,000
 - (b) No benefit shall be payable under Items 10h and 10i.
4. In the event of an **Accident** involving more than one **Insured Person** where the claims exceed the Maximum Sum Insured Any One Occurrence specified above, the amount payable in respect of each **Insured Person** shall be proportionately reduced until the total does not exceed that limit.

Section 11 – Car Hire Excess Waiver

Cover

We will pay **You** up to the sum insured stated in the Member schedule for any monetary excess or deductible that **You** are legally liable to pay in respect of loss or damage to a rental vehicle hired by **You** during the **Period of Travel**.

Exclusions

We shall not be liable to pay for:

1. Any claims arising out of loss or damage due to the operation of the rental vehicle in violation of the terms of the rental agreement.
2. Any claims due to wear and tear, gradual deterioration, damage from insects or vermin, inherent vice, latent defect or damage.

Conditions

1. The rental car must be rented from a licensed rental agency.
2. **You** must comply with all the requirements of the rental organisation under the hiring agreement and of the vehicle insurer.

Section 12 – Hijack & Kidnap

Cover

In the event of the detention, internment, **Hi-jack** or **Kidnapping** of an **Insured Person** during the **Period of Travel**, **We** will pay the amount specified in the Member schedule per day or part thereof until release, up to the maximum specified in the **Policy** schedule.

Exclusions

We shall not be liable to pay for:

1. Any claim relating to payment of ransom monies and the like.
2. Any claim arising out of any act(s) by **You** that would be considered an offence by a court of the **United Kingdom** if committed in the **United Kingdom**.

Section 13 – Catastrophe

Cover

We will pay **You** up to the sum insured stated in the Member schedule for additional travel and accommodation expenses incurred as a result of:

1. **You** being forced to move from **Your Pre-Booked** accommodation following a **Major Natural Disaster**.
2. **You** being subject to compulsory quarantine, other than in order to gain access to or transit through any country, on the orders of a Public Authority or the Government of the country you are visiting as a result of a medical epidemic that commences during **Your Period of Travel**.

Exclusions

We shall not be liable to pay for:

1. Any costs or expenses recoverable from any other source.
2. **Your** disinclination to continue the **Period of Travel**.

Section 14 – Winter Sports

Cover

Winter Sports Equipment

Part 1

We will pay up to the limit shown in the Member schedule in respect of loss, theft of or **Accidental** damage to **Your Winter Sports Equipment** during the **Period of Travel**, for its replacement or repair, whichever is the lesser, after making an allowance for wear and tear and loss of value using the scale below:-

- i Up to 1 year old, up to 90% of the price you paid;
- ii Up to 2 years old, up to 70% of the price you paid;
- iii Up to 3 years old, up to 50% of the price you paid;
- iv Up to 4 years old, up to 50% of the price you paid;
- v Up to 5 years old, up to 20% of the price you paid;
- vi Over 5 years old, nothing.

Part 2

If **You** have hired **Winter Sports Equipment** **We** will pay up to the limit shown in the Member schedule in respect of loss, theft of or **Accidental** damage during the **Period of Travel**, for its replacement or repair, whichever is the lesser.

Part 3

If **We** pay under Part 1 or Part 2 above, **We** will also pay to hire replacement **Winter Sports Equipment** for the remainder of the **Period of Travel** up to the limit shown in the Member schedule.

Ski Pass

We will pay up to the limit shown in the Member schedule to replace **Your** ski pass if it is lost or stolen during the **Period of Travel**.

Ski Pack

We will pay the limit shown in the Member schedule per week up to the limit shown in the **Policy** for the proportional return of the **Pre-Booked** cost of ski pass, ski equipment hire or tuition fees, should **You** suffer **Bodily Injury** or **Illness**. This is subject to written confirmation from the doctor in the resort that the serious injury or **Illness** prevented **You** from using **Your** ski pass, ski hire equipment or attending tuition for the remainder of the **Period of Travel**.

Piste Closure

Valid for the period 1st December to 30th April only.

We will pay up to the limit shown in the Member schedule as follows, if as a result of not enough/too much snow in **Your Pre-Booked** holiday resort, all lift systems and tows are closed for a continuous period of more than 24 hours:

1. the costs of transport incurred to the nearest resort up to £50 for each continuous full 24 hour period, or
2. the limit shown in the Member schedule for each full 24 hour period if **You** are unable to ski and subject to no other ski resort being available where any lift systems and tows are open.

It is a condition of this cover that **You** obtain a written statement from the resort authorities confirming the reason for the closures and how long it lasted and that the **Pre-Booked** holiday resort where **You** are staying is at least 1000 metres above sea level.

Avalanche

We will pay up to the limit shown in the Member schedule for reasonable additional accommodation expenses incurred, if as a result of avalanche, landslip or landslide, **You** are unavoidably delayed from arriving at or leaving the **Pre-Booked** resort.

Inability to participate in Winter Sports Activities

We will pay up to the limit shown in the Member schedule if during the **Period of Travel** you suffer an **Accident** or **Illness** that prevents **You** from participating in winter sports activities.

It is a condition of this cover that **You** obtain a written report from a doctor at the start of **Your Bodily Injury** or **Illness** to confirm the dates **You** were unable to participate in winter sport activities.

Exclusions

We shall not be liable to pay for:

1. Any claim arising within the **United Kingdom**.
2. Any claim arising within **Europe** in respect of **Periods of Travel** commencing or ending during the period 1st May to 30th November inclusive.
3. Anything included within the General Exclusions of this insurance.
4. Any claim in respect of damage due to wear and tear and gradual deterioration.
5. Any claim in respect of loss of and/or theft not reported to the police within 24 hours of discovery, and a police statement obtained, unless **You** are able to provide other dependant proof of loss such as a letter from **Your** transport company or resort management.
6. **Winter Sports Equipment** that is damaged whilst it is being used.
7. Deliberate or malicious damage to **Winter Sports Equipment** caused by **You** or loss or damage caused by **Your** carelessness or neglect.
8. Any claim in respect of Piste Closure only, as a result of additional travel expenses incurred other than for travel arranged by the Tour Operator if travelling on a Tour Operator organised trip.
9. Any claim in respect of Piste Closure only, if **You** effect this Insurance or book the trip within 14 days of the date of departure and at that time there was a lack of snow in the planned resort such that it was unlikely that **You** would be able to ski.
10. Claims under Piste Closure if the resort where **You** are staying is less than 1000 metres above sea level.

Conditions

1. **You** must take reasonable care to keep the **Winter Sports Equipment** safe. If the **Winter Sports Equipment** is lost or stolen, **You** must take all reasonable steps to get it back.
2. If the **Winter Sports Equipment** is lost or damaged by an authority, a transport company or hotel, **You** must report the details of the loss or damage to them in writing and get written confirmation.
3. If the **Winter Sports Equipment** is lost or damaged by an airline **You** must:
 - (a) Get a property irregularity report;
 - (b) Give written notice of the claim to the airline within their conditions of carriage (**You** should also keep a copy);
 - (c) Keep all travel tickets and tags if **You** claim under this insurance;
 - (d) **You** must be able to prove that **You** were responsible for the lost, stolen or damaged items and the purchase price. If **You** do not do this, it may affect your claim.

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 the Insured Persons' 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 UK and wish to escalate your complaint to your local dispute resolution service, please contact your broker for guidance on which organization can assist you.

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** or an **Insured Person** 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 by visiting their website at www.fscs.org.uk

Contact Details:

Telephone: 0800 678 1100 or +44 (0)20 7741 4100 (Lines are open Monday to Friday 08.30 to 17.00 excluding public holidays).

Address: PO Box 300, Mitcheldean, GL17 1DY

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 **Member**.

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.

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

Company Number: 08142321

email: ah-enquiries@ortusunderwriting.com

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