



Internship Travel Insurance

Product Disclosure Statement and Policy Wording



CONTENTS

Who are you dealing with?	2
About QBE travel insurance	2
Enquiries and assistance	2
About guard.me	3
Remuneration arrangements	3
Part 1 - Important Information	4
Significant risks	4
The cost of this insurance	4
Cooling off period	5
Duty of disclosure	6
Schedule of benefits	11
Guidelines	12
Excesses	12
Part 2-Policy wording	13
Terms and conditions	13
General exclusions	18
SECTION A - CANCELLATION AND ADDITIONAL EXPENSES	20
SECTION B - MEDICAL AND DENTAL EXPENSES	24
SECTION C - EVACUATION AND REPATRIATION	26
SECTION D - TRAVEL DELAY	28
SECTION E - LUGGAGE AND PERSONAL EFFECTS	29
SECTION F - DEATH EXPENSES AND PERMANENT DISABILITY	32
SECTION G - PERSONAL LIABILITY AND LEGAL EXPENSES	34
SECTION H - MAKING A CLAIM	35

Who are you dealing with?

You can rely on us

QBE Insurance (Australia) Limited is a member of the QBE Insurance Group (ASX QBE). QBE Insurance Group is Australia's largest international general insurer and reinsurance group, and one of the top 25 insurers and reinsurers worldwide. The company has been operating in Australia since 1886. QBE is a household name in Australian insurance, backed by sizeable assets and well known as a strong and financially secure organisation. QBE is exempt from the requirement to hold Professional Indemnity Insurance as we are regulated by the Australian Prudential Regulation Authority (APRA). These compensation arrangements comply with ASIC's requirements.

If you require further information in relation to these arrangements, please contact ORF

About QBE travel insurance

QBE Insurance (Australia) Limited

ABN 78 003 191 035 A.F.S.L. 239545

Enquiries and assistance

For any enquiries and assistance please email admin@guardme.com.au

PDS and Policy Wording

The PDS is designed to assist you in your decision to purchase travel insurance. It contains information about key benefits and significant features.

Any advice in this document is of a general nature only and has not considered your objectives, financial situation or needs. This booklet contains the following sections which provide:

- Part 1 information about this travel insurance product (Important Information); and
- Part 2 the detailed terms and conditions (Policy wording).

•

About guard.me

This Travel Insurance Policy is arranged by guard.me International Insurance Pty Ltd. ABN 67155329338 trading as guard.me International Insurance Pty Ltd. In arranging this Travel Insurance Policy, guard.me is acting as a distributor of OBF.

guard.me can directly issue or vary QBE travel insurance under a binding authority in accordance with our underwriting guidelines. In some cases guard.me may need to arrange for us to do this if they are not able to act under the underwriting guidelines. We, as the insurer of the product, and guard.me, as our agent, do not act on your behalf. guard.me does not have any authority to give you any advice (i.e. recommendation or opinion about the financial product). They can provide you with factual information on the product to help you decide if it is right for you.

The choice is yours.

Remuneration arrangements

guard.me and the programme provider receive commission from us which is a percentage of the total premium paid by you to us for the product. The commission is paid monthly by us based on policies issued. You can request full details of the remuneration payable to guard.me and the programme provider for the issue of your policy by contacting guard.me at admin@guardme.com.au at any time until the end of your cooling off period. (refer Cooling off period).

Part 1 - Important Information

Applying for travel insurance

To apply for insurance please complete the relevant forms and submit to your programme provider. If your application is approved guard.me will issue your policy and provide you with a Certificate of Insurance. Your Certificate of Insurance confirms the cover that you have chosen, the total amount paid by you and information about the terms of your policy.

Significant risks

This policy may not match your expectations

This policy may not match your expectations (for example, because an exclusion applies). You should therefore read this PDS and Policy wording carefully.

This policy does not meet the minimum health insurance standard as specified by the Australian Government under condition 8501 for a range of visa types, including Student visas. Please refer to http://www.immi.gov.au for the current minimum standard of specific visa subclasses.

Please ask guard.me if you are unsure about any aspect of the policy.

Are you sure you have the right level of cover?

You need to make sure the limits of cover are appropriate for your needs. Otherwise you may be under insured and have to bear part of any loss that exceeds the limits yourself. Please refer to the applicable limits as set out in the Schedule of benefits and the Policy wording.

A claim may be refused

We may refuse to pay or reduce the amount we pay under a claim if you do not comply with the policy conditions, if you do not comply with your Duty of Disclosure or make a misrepresentation, or if you make a fraudulent claim.

Unattended luggage and personal effects

There is no cover under this policy for luggage and personal effects that are left unattended. Please refer to the definition of unattended in the Policy wording and "What is not covered?" under Section E "Luggage and personal effects".

Existing Medical Condition(s)

There is no cover under this policy for an existing medical condition.

The cost of this insurance

What you have to pay

The length of your trip will be taken into account when calculating the cost of your policy.

The premium paid by you will be shown on your Certificate of Insurance, including compulsory government charges (including Stamp Duty and GST where applicable). This policy is only valid when you pay the premium and guard.me issues a Certificate of Insurance to you.

Amendment of travel details

If you wish to change your personal details or travel dates after your Certificate of Insurance has been issued, please contact guard.me. They may ask you to complete and submit to guard.me a Policy Change Request Form which needs to be assessed and approved prior to any amendment to your policy. Also refer to section headed "Changing the period of insurance" in the Policy wording.

Updating this PDS

We will update the information in this PDS when necessary. A copy of any updated information is available to you at no cost by contacting guard.me. We will issue you with a new PDS or a supplementary PDS, where the update is to correct a misleading or deceptive statement or an omission which is materially adverse from the point of view of a reasonable person deciding whether to obtain this insurance.

Jurisdiction

The terms and conditions of the policy are subject to the laws of the Australian state or territory where the Certificate of Insurance is issued. You agree to the jurisdiction of the courts of that state or territory for any legal proceedings relating to this policy.

Cooling off period

If, having purchased the policy, you want to return it, you can do so within 21 days of the date of issue of the Certificate of Insurance and obtain a full refund, provided no right or power has been exercised under it by you (e.g. no claim has been made) and your trip has not commenced. The Cooling off period does not apply to policy or trip extensions.

guard.me will arrange for a refund of any premium entitlement within 15 business days of you cancelling your policy.

Confirming transactions

A Certificate of Insurance must be issued once you have completed the application process and you have paid the appropriate premium. If you want to confirm a transaction, for example whether the Certificate of Insurance has been issued, you may contact guard.me at admin@guardme.com.au.

Duty of disclosure

Before you enter into an eligible contract of insurance with us, you have a duty of disclosure under the Insurance Contracts Act 1984 (Cth).

We may ask you questions that are relevant to our decision to insure you and on what terms. If we do, you must tell us anything that you know and that a reasonable person in the circumstances would include in their answer.

You have this duty until we agree to insure you.

If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

Privacy

We'll collect personal information when you deal with us, our agents, other companies in the QBE group or suppliers acting on our behalf. We use your personal information so we can do business with you, which includes issuing and administering our products and services and processing claims. Sometimes we might send your personal information overseas. The locations we send it to can vary but include the Philippines, India, Ireland, the UK, the US, China and countries within the European Union.

Our Privacy Policy describes in detail where and from whom we collect personal information, as well as where we store it and the full list of ways we could use it. To get a free copy of it please visit qbe.com.au/privacy or contact QBE Customer Care.

It's up to you to decide whether to give us your personal information, but without it we might not be able to do business with you, including not paying your claim.

Resolving Complaints and Disputes

At QBE we're committed to providing you with quality products and delivering the highest level of service.

We also do everything we can to safeguard your privacy and the confidentiality of your personal information.

Something not right?

We know sometimes there might be something you're not totally happy about, whether it be about our staff, representatives, products, services or how we've handled your personal information.

Step 1 - Talk to us

If there's something you'd like to talk to us about, or if you'd like to make a complaint, speak to one of our staff. When you make your complaint please

provide as much information as possible. They're ready to help resolve your issue.

You can also contact our Customer Care Unit directly to make your complaint. Our aim is to resolve all complaints within 15 business days.

Step 2 - Escalate your complaint

If we haven't responded to your complaint within 15 days, or if you're not happy with how we've tried to resolve it, you can ask for your complaint to be escalated for an Internal Dispute Resolution (IDR) review by a Dispute Resolution Specialist.

The Dispute Resolution Specialist will provide QBE's final decision within 15 business days of your complaint being escalated, unless they've requested and you've agreed to give us more time.

Step 3 - Still not resolved?

If you're not happy with the final decision, or if we've taken more than 45 days to respond to you from the date you first made your complaint, you can contact the Financial Ombudsman Service Australia (FOS Australia). FOS Australia is an ASIC approved external dispute resolution body.

FOS Australia resolves insurance disputes between consumers and insurers, at no cost to you. QBE is bound by FOS Australia's decisions - but you're not.

You can contact FOS Australia directly and they'll advise you if your dispute falls within their Terms of Reference.

Disputes not covered by the FOS Australia Terms of Reference

If your dispute doesn't fall within the FOS Australia Terms of Reference, and you're not satisfied with our decision then you may wish to seek independent legal advice.

Privacy complaints

If you're not satisfied with our final decision and it relates to your privacy or how we've handled your personal information, you can contact the Office of the Australian Information Commissioner (OAIC).

Contacting QBE's CCU, FOS or the OAIC

How to Contact QBE Customer Care		
Phone	1300 650 503 (Monday to Friday from 9am to 5pm, Sydney time, except or	
	Calls from mobiles, public telephones or hotel rooms may attract additional	
Email	 complaints@qbe.com, to make a complaint. privacy@qbe.com, to contact us about privacy or your personal inform customercare@qbe.com, to give feedback or pay a compliment. 	
Post	Customer Care, GPO Box 219, PARRAMATTA NSW 2124	

How to contact FOS Australia	
Phone	1800 367 287 (Monday to Friday from 9am to 5pm, Melbourne time, except on public holidays)
Email	info@fos.org.au
Online	www.fos.org.au

How to contact the OAIC	
Phone	1300 363 992 (Monday to Friday from 9am to 5pm, Sydney time, except on public holidays). Calls from mobiles, public telephones or hotel rooms may attract additional charges.
Email	Enquiries@oaic.gov.au
Online	www.oaic.gov.au

The General Insurance Code of Practice

QBE Australia is a signatory to the General Insurance Code of Practice.

The Code aims to:

- Commit us to high standards of service
- · Promote better, more informed relations between us and you
- Maintain and promote trust and confidence in the general insurance industry
- Provide fair and effective mechanisms for the resolution of complaints and disputes between us and you
- Promote continuous improvement of the general insurance industry through education and training.

Financial Claims Scheme

This policy is a protected policy under the Financial Claims Scheme (FCS), which protects certain insureds and claimants in the event of an insurer becoming insolvent. In the unlikely event of QBE becoming insolvent you may be entitled to access the FCS, provided you meet the eligibility criteria.

More information may be obtained from the Australian Prudential Regulation Authority (APRA).

How to contact APRA	
Phone	1300 558 849 (Monday to Friday from 9am to 5pm, Sydney time, except on public holidays). Calls from mobiles, public telephones or hotel rooms may attract additional charges.
Online	www.apra.gov.au

QBE Assist.

QBE Assist is a wholly owned division of QBE and it provides emergency assistance, medical evacuation and repatriation services for persons covered under QBE travel insurance policies worldwide. All cases are managed from start to finish by our experienced insurance and medical

specialists who are available by telephone 24 hours a day for advice and assistance in the event of a medical emergency.

Specific services provided by QBE Assist to persons covered under this Policy who sustain an injuryInjury or suffer an illness or mishap while travelling outside their country of residence include:

- Medical transfer to an appropriate specialist hospital
- Repatriation to Australia
- Intra hospital transfer should specialist care be required
- Road ambulance transportation services
- Repatriation of mortal remains.

Additional services include:

- Providing a message service to enable persons covered under the Policy to keep in touch with their family, employees and travel agents
- Organising an evacuation in the event of a political or environmental event which necessitates a persons covered under the Policy to be evacuated.

How to contact QBE Assist

If you're in the following countries - these numbers are toll free from a landline. Calls from mobiles will be at your cost.

Country	Telephone	Country	Telephone
New Zealand	0800 441 678	United Kingdom	0800 899 813
Canada	1800 665 387	United States	1800 765 8631

This list is a summary of some of the benefits covered by this policy and the applicable limits.

Please refer to the relevant section of the Policy wording for full details of cover.

Other applicable limits may apply.

Schedule of benefits

	Section	Applicable Limit
Trip cancellation, interruption and disruption	Section A1	\$10,000
Emergency travel arrangements and accommodation expenses	Section A2	\$20,000
Medical and dental expenses	Section B1	Unlimited
Dental injury limit		\$1,000
Family transportation and accommodation expenses	Section B2	\$20,000
Dental expenses due to sudden and acute pain	Section B3	\$600
Medical evacuation and repatriation	Section C1	Unlimited
Non-medical evacuation and repatriation	Section C2	\$25,000
Travel delay	Section D1	\$1,000
Luggage and personal effects maximum item limit total	Section E1	\$2,000
Personal computer individual item	limit	\$2,000
Camera & video individual item limit		\$2,000
Other individual item limit		\$750
Emergency luggage	Section E2	\$300
Replacement passport and travel documents	Section E3	\$1,000
Accidental death	Section F1	\$50,000

	Section	Applicable Limit
Funeral expenses or repatriation	Section F2	\$20,000
Disablement (any occupation)	Section F3	\$50,000
Personal liability	Section G1	\$2,000,000
Legal expenses	Section G2	\$25,000

Guidelines

- This policy is available if you are travelling on an internship programme outside of your home country and are visiting Australia on a temporary basis.
- A waiting period of 7 days will apply to the entire Medical section for policies purchased after arrival into Australia.
- The premium payable is per person.
- This policy is not available to travellers 60 years of age or over at the time the Certificate of Insurance is to be issued.
- There is no cover under this policy for an existing medical condition.
- The policy can be purchased up to 24 months in advance.
- There is no provision to suspend this policy during the period of insurance.
- Your policy can be extended as many times as you like up to a maximum
 duration of 24 months from departure date. This is only available before the
 current policy expires. When applying for an extension you must tell
 guard.me if there is a claim made or pending, or you have seen a medical
 or dental practitioner, as an extension may not be available or special terms
 may be imposed. If you wish to extend your policy please go to
 www.guardme.com.au. The premium for an extension is calculated at the
 amount current at the time of the extension.

Excesses

The amount of the excess will be shown on your Certificate of Insurance. This excess will apply to each claim you make under this policy except on the applicable section of the policy wording listed as "No excess applies to claims under this benefit". The excess is an amount that will be subtracted from the amount paid to you if you should make a claim under a section of the policy where the excess is applicable. If you make more than one claim under your policy the excess will apply to each claim which arises as a result of each separate set of circumstances.

Part 2 - Policy wording

Terms and conditions

Word with special meanings

The words and terms used throughout this Policy have special meanings set out below. Where other words and terms are only used in one section of the Policy, we'll describe their special meaning in that section.

Word or term	Meaning
Applicable limits(s)	The sum insured specified in the schedule of benefits or Policy wording for the travel plan selected as shown on the Certificate of Insurance.
Carrier(s)	The scheduled airline, vessel, train or motor coach transport in which you are to travel to or from your intended destination.
Electronic equipment	Portable game consoles, portable media players and satellite navigation units.
Existing medical condition(s)	 (a) any chronic or ongoing (whether chronic or otherwise) medical or dental condition, Illness or disease of which you were aware or should reasonably have been aware, or which is medically documented within the last 12 months or under investigation in the 12 months prior to the issue of the Certificate of Insurance; or (b) any physical, Mental Illness or medical condition (including pregnancy), defect, Illness or disease of which you were aware or should reasonably have been aware, or for which treatment, medication, preventative medication, advice, preventative advice or investigation have been received or prescribed by a medical or dental adviser in the 60 days prior to the issue of the Certificate of Insurance Note: Where any condition, Illness or disease is the subject of an investigation, that condition, Illness or disease falls within this definition, regardless of whether or not a diagnosis of the condition, illness or disease has been made. This definition applies regardless of whether or not the condition, illness or disease displays symptoms. This definition applies to you, your travelling party, your relatives, your business colleague, or any other person you have a relationship with whose state of health could impact on your travel plans.

Financial default	the insolvency, bankruptcy, provisional liquidation, financial collapse, appointment of receivers or any other form of insolvency administration of any person, company or organisation.
Home country	the country were you permanently reside.
Illness	any disease or sickness affecting the body or mind. This includes a Mental Illness.
Injury	a bodily Injury that is caused solely and directly by external and visible means as a result of an accident and which does not result from an Illness.
Medically necessary	treatment that's appropriate for your Illness or Injury, consistent with your symptoms, and that can be safely provided to you. It meets the standards of good medical practice and isn't for your convenience or the providers convenience.
Medical Practitioner	a medical professional registered and certified by the National and/or State Health Board either in Australia or in the country in which you are being treated whilst on you trip, and who is licensed to provide treatment, medication/prescriptions and medical opinions and reports - for example, doctors, physiotherapists and dentists.
	in the case of a Mental Illness, Medical Practitioner means a mental health professional registered and certified by the National and/or State Health Board either in Australia or in the country in which you are being treated whilst you are on your trip, and who is licensed to provide treatment, medication/prescriptions and medical opinions and reports for example, psychologists, general practitioners, and psychiatrists.
	a Medical Practitioner does not include a person you is related to you or a member of your travelling party.
Mental illness	any sickness, disorder or condition recognised or provided for in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders, where a clinical diagnosis has been made and Mental Health Treatment Plan has been prescribed by a Medical Practitioner.

Mental Health Treatment Plan	the evidence based assessment and medical treatment plan, referred to and required by Australian Medicare, which includes, the patient's diagnosed Mental Illness, their Mental Illness medical history and their mental state and medical needs following diagnosis, as well as details of any medications prescribed, the patient's actions to be undertaken to treat their Mental Illness and details of any medical referrals for the diagnosed Mental Illness.
Period of insurance	the period of cover specified in the Certificate of Insurance.
Personal computer	laptops, notebooks, tablet PCs, personal digital assistants (PDA's), smartphones, and any other hand-held wireless devices that have the capacity to convey data or information.
Premium	the total amount payable for the insurance. It includes commission, stamp duty and GST if applicable.
Professional sporting activity	an activity for which you receive financial reward, sponsorship or benefits from participating in or training for that activity, regardless of whether or not you are a professional sportsperson.
Relative(s)	is limited to a relative of yours, or of a member of the travelling party, who is resident in your home country. It means a spouse, defacto partner, parent, parent in-law, daughter, son, daughter-in-law, son-in-law, brother, sister, brother-in-law, sister-in-law, grandchildren, grandparent, stepparent, stepchildren, fiance or fiancee, or guardian.
Repatriate(d) or repatriation	travel arrangements made by us for your return to your home country or where we consider to be the nearest suitable alternative.
Scheduled public transport	a public transport system that runs to a timetable.
Terrorist act	an act or threat of force or violence by any person acting alone or in association with an organisation or foreign government, where the purpose, by its nature or context, is to put the public or a section of the public in fear, to resist or influence a government or, to further an ideological, religious, ethnic or similar act.
Total permanent disability	you have lost any part of your arm between the shoulder and wrist or any part of your leg between the hip and ankle or use of the above, or lost sight in one or both eyes for at least 12 months and after consultation with an appropriate medical specialist and, in our opinion, that loss will continue indefinitely.

Travelling party	you and any travelling companion who has made arrangements to accompany you for at least 50% of the trip.
Trip(s)	the period of travel stated in the Certificate of Insurance. The period begins on the date of departure, as stated in the Certificate of Insurance, and ends when you return to your home country or when the period of the trip set out in the Certificate of Insurance ends, whichever happens first. The period of travel cannot be altered without our consent.
Unattended	leaving your luggage or personal effects either with a person you have not previously met, or, in a public place where it can be taken without your knowledge or at a distance from which you cannot prevent it from being taken.
We, our(s), us	QBE Insurance (Australia) Limited ABN 78 003 191 035.
You, your, yours, yourself	the person listed in the Certificate of Insurance.

Your policy is a contract of insurance

Your policy is a contract of insurance between you and us. You pay us the premium, and in return we provide you with cover.

Your contract consists of:

- these terms and conditions;
- the Schedule of benefits;
- your Certificate of Insurance; and
- any written endorsements we give you.

Together these documents make up your policy.

It is important that you read your policy carefully, and keep this booklet in a safe place for future reference.

If you have any questions regarding your policy, please contact guard.me at admin@quardme.com.au

You must co-operate with us

You must co-operate with us and give us all the information and assistance we need to deal with your claim. If you do not, we may not be able to settle your claim.

When does the policy begin and end?

Your policy will be valid for the period of insurance when you have paid the premium and you have been provided with a Certificate of Insurance. The period of insurance will start and end on the dates shown in your Certificate of Insurance or when you return to your home country whichever happens first.

When does the cover under each benefit begin and end?

This policy contains a number of different benefits. Cover under those benefits may begin and end at different times. Each section of the policy sets out when the cover begins and ends.

Changing the period of insurance

The period of insurance cannot be changed without our consent. If you wish to defer or alter the period of insurance, we may ask you to submit to guard.me, a Policy Change Request Form. We will decide whether or not to agree to alter the period of insurance based on the information you give us, together with any additional information we ask for. If we agree to defer or alter that period of insurance you will be issued with a new Certificate of Insurance which will show the change of the period of insurance and any premium adjustment.

Automatic Extensions

If the scheduled transport in which you are to travel is delayed, or your trip is delayed by an event that entitles you to make a claim under this policy, the period of insurance is automatically extended beyond the period of your original trip. This extension lasts until you are capable of travelling to your final destination via the most efficient and direct route, including the journey there, or for a period of 6 months beyond the period of insurance, whichever happens first.

Cancellation of insurance cover

By you

Once the Certificate of Insurance has been issued you are not entitled to a refund of any part of the premium except as provided for in the section headed "Cooling off period". See the Cooling off period Section for further details.

By us

We can cancel your insurance in any way permitted by law, including if you have:

- failed to comply with your Duty of Disclosure; or
- made a misrepresentation to us before the policy was entered in to; or
- failed to comply with a provision of a policy, including failure to pay the premium; or
- made a fraudulent claim under this policy or any other current policy; or
- failed to notify us of a specific act or omission as required by the policy.

If we cancel your policy, we will do so by giving you written notice. We will deduct from the premium an amount to cover the shortened period for which you have been insured by us, and refund to you what is left.

General exclusions

These are the general exclusions which apply to all sections of this policy. You should read them, together with the cover and the specific exclusions referred to under each section of cover. There is no cover under any section of this policy for any claim arising directly or indirectly because of any of the following:

- you travel:
 - (a) even though you know you are unfit to travel; or
 - (b) against medical advice; or
 - (c) when you know you will have to consult a Medical Practitioner; or
 - (d) for the purpose of obtaining medical advice or treatment.
- you fail to maintain a course of treatment you were on at the time your trip commenced.
- the death, Illness or Injury caused or exacerbated by, or consequential upon, an existing medical condition of you, a member of the travelling party or a non-travelling relative or business partner.
- 4. the death, Illness or Injury of you, a member of the travelling party or a non-travelling relative or business partner is caused or exacerbated by or consequential upon, any condition which has been the subject of a medical investigation within the period of 12 months prior to the issue of the Certificate of Insurance, in respect of which no diagnosis has been made.
- any medical charges in excess of reasonable and necessary expenses, or charges caused directly or indirectly by an error of the medical provider.
- your treatment in a health spa, convalescent or nursing home or any rehabilitation centre unless agreed by us.
- any medically related claims for 7 days from the date the Certificate of Insurance was issued, if you purchase your policy after arrival into Australia.
- 8. any cover under this policy if you are 60 years of age or over at the time the Certificate of Insurance is to be issued.
- a member of the travelling party decides to alter their plans or not to continue with the trip.
- the death, Illness or Injury of a person who is not a member of your travelling party and is 80 years of age or over at the time the Certificate of Insurance is issued.
- 11. a member of the travelling party:
 - intentionally and recklessly places themselves in circumstances, or undertakes activities, which pose a risk to their personal safety (except in an attempt to save a human life); or
 - (b) deliberately injures themselves; or
 - being under the influence of, or is addicted to, intoxicating liquor or a drug, except a drug taken in accordance with the advice of a registered Medical Practitioner; or
 - (d) has AIDS or an AIDS defining illness; or
 - (e) takes part in a riot or civil commotion; or
 - (f) acts maliciously; or
 - hunts, plays polo, races (except on foot), mountaineers using support ropes, rock climbs, abseils, participates in base jumping, running with the bulls, or pot holing; or
 - travels in international waters in a private sail vessel or privately registered sail vessel; or

- (i) participates in, or trains for, a professional sporting activity; or
- scuba dives unless you hold an open water diving licence or you were diving under licensed instruction; or
- (k) without an unrestricted licence valid for the country you are travelling in, or with an engine capacity greater than 250cc, or rides a motor cycle without wearing a helmet; or
- (l) rides a 4 wheel motor cycle even as a pillion passenger.
- 12. a loss which is recoverable under some other scheme that provides coverage for any medical treatment. For example, Medicare, a private health fund, national reciprocal health fund or scheme, workers' compensation scheme, travel compensation fund or accident compensation scheme.
- 13. any consequential loss or loss of enjoyment.
- 14. a loss caused by, or in any way connected with a criminal or dishonest act by you or by a person with whom you are in collusion.
- 15. a loss caused by, or in any way connected with war, invasion, act of a foreign enemy, hostilities (whether war is declared or not), civil war, rebellion, revolution, military or usurped power or civil insurrection, except as provided for in event 2 under "What are the events that will be covered under Section A?".
- 16. a loss caused by, or in any way connected with the use, existence or escape of nuclear weapons material, or ionising radiation from, or contamination by, radioactivity from any nuclear fuel, or nuclear waste from the combustion of nuclear fuel.
- 17. a loss caused by, or in any way connected with any government intervention, prohibition, or regulation except as provided for in event 6 under "What are the events that will be covered under Section A?".
- 18. a government authority seizing, withholding or destroying anything of yours or any prohibition by or regulation or intervention of any government or any government not allowing you to enter or to stay in that country.
- 19. an act or threat of terrorism. This exclusion does not apply to Section B1 "Medical and dental expenses", Section E1 "Luggage and personal effects" or under Section C1 "Medical evacuation and repatriation" for the cost of repatriation to, if the carrier requires you to be brought back with a medical escort.
- the cancellation or delay of travel arrangements due to mechanical breakdown of transportation or failure of the carrier to operate the service.
 This exclusion does not apply to Section D1 "Travel delay".
- 21. you fail to take reasonable precautions to avoid a financial loss after a public warning of a strike, riot, civil commotion, or natural disaster.
- 22. the financial default of a travel agent, scheduled serviced airlines, hotel and resort operators, car and campervan hire companies, cruise lines, railway operators and theme park operators to the extent that your loss is covered by a scheme or fund (not a contract of insurance), or would be covered but for this insurance.
- the financial default of any person, company or organisation involved in your travel arrangements and that financial default occurred prior to the issue of the Certificate of Insurance

- 24. credit card conversion fees or any other bank charges.
- 25. you are not insured under any section of this policy where a claim payment breaches any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of Australia, the European Union, United Kingdom or United States of America.

SECTION A - CANCELLATION AND ADDITIONAL EXPENSES

Am I covered under Section A?

Section A is divided into different benefits.

SECTION A

Sections A1-A2

You must read Section A together with the General exclusions,

as these may affect your cover.

What are the events that will be covered under Section A?

We will cover you under Section A in respect of your planned trip, if one of the following events occurs after the issue of the Certificate of Insurance:

- you are unable to start or finish the trip because of the death, sudden serious illness or serious injury arising before or during the trip of:
 - you; or
 - a member of your travelling party; or
 - a relative, who is a resident in your home country.

But before we will cover you, you must provide us with proof that:

- the death has occurred or the Illness or Injury requires hospitalisation or confinement; or
- you or a member of your travelling party are certified medically unfit to travel by a Medical Practitioner; or
- in the case of a Mental Illness.
 - i. a diagnosis has been made by a Medical Practitioner; and
 - ii. the diagnosed individual has been assigned a Mental Health Treatment Plan: and
 - iii. the Mental Illness prevents you from travelling.
- 2. you are unable to start or finish the trip because of the death, sudden serious Illness or serious Injury arising before or during the trip of a business partner or co-worker. But before we will cover you, you must provide us with proof that the business partner or co-worker's absence due to death, sudden serious Illness or serious Injury made the cancellation or ending of the trip necessary and you have written confirmation of that fact from a senior representative or director of the business.
- your pre-paid scheduled public transport services or pre-paid tour have been cancelled or restricted because of severe weather, natural disaster, riot, strike or civil insurrection.

- you make reasonable additional travel arrangements within 48 hours of a public warning of severe weather, natural disaster, riot, strike or civil insurrection that could impact your travel arrangements. This cover is limited to \$1,000.
- your pre-paid accommodation has been destroyed or is uninhabitable due to severe weather or natural disaster and no alternative equivalent accommodation is available in the vicinity. You must have done everything reasonable to obtain alternative accommodation.
- 6. a member of the travelling party is required to do jury service or has received a summons to give evidence in a court of law.
- 7. a member of the travelling party is confined in compulsory quarantine.
- 8. you have been involved in, or your travel arrangements have been cancelled or delayed by, a motor vehicle, railway, air or marine accident or incident. You must have written confirmation of the accident or incident from an official body in the country where the accident or incident happened.
- 9. your passport, travel documents or credit cards are lost or damaged.
- a member of your travelling party, who is a full time student, is required to sit supplementary examinations conducted by their educational institution.
- 11. a member of your travelling party has been made redundant from full-time permanent employment in your home country.
- 12. the cancellation of pre-arranged leave by an employer for a member of your travelling party who is a full-time permanent employee of the police, fire, ambulance or emergency services.
- 13. you are unable to start the trip because your employer cancels your pre-arranged leave and you are in full-time permanent employment. Cover is only available if you purchased this travel insurance no later than 7 days after paying final monies for your prepaid travel arrangements and is limited to \$1,000 per person.
- 14. your normal place of residence or business premises in your home country has been destroyed or rendered insecure due to a natural disaster, fire or malicious damage. Cover is limited to expenses incurred in returning you to the nearest practical accommodation to your home country.
- 15. a member of your travelling party has been affected by any form of insolvency, administration or bankruptcy of their employer.
- 16. the financial default of scheduled service airlines, hotel and resort operators, car and campervan hire companies, cruise lines, railways operators and theme park operators excluding travel agents or wholesalers. Cover is limited to the amount set out in the Schedule of benefits.
- 17. a member of the travelling party has their Visa Application rejected by the Australian Government, subject to the following -
 - you or your travelling companion were eligible to make such an application, and
 - you or your travelling companion were not applying for an immigration or employment visa, and
 - the non-issuance is due to reasons beyond your or your travelling companion's control, other than due to late application or a subsequent attempt for a visa that had already been refused in the past.

Section A1- Trip cancellation, interruption and disruption

When does the cover begin and end?

The cover under this benefit begins from the time the Certificate of Insurance is issued to you, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will pay the value of unused pre-paid travel arrangements for anyone named on your policy, less any refunds you are entitled to, if you have to cancel these arrangements because of an event set out under "What are the events that will be covered under Section A?", or the reasonable cost of rearranging your trip, provided that this cost is not greater than the cancellation fees or lost deposits which would have been incurred had the trip been cancelled. We will also pay the value of pre-paid tuition fees and related school accommodation expenses that cannot be used, less any refunds you are entitled to, if you have to cancel these arrangements. If cancellation is due to an Illness or Injury you must provide us with documentation from your Medical Practitioner to confirm you are medically unfit to commence or continue with your trip. We will not pay for cancellation or holiday deferment costs unless these costs are medically justified and if you have already commenced your trip you must have our consent.

What is not covered?

- 1. We will not pay for any event other than those listed under "What are the events that will be covered under Section A?"
- We will not pay for the value of unused pre-paid transport costs where we have repatriated you a distance equivalent to, or greater than, the total distance remaining on your itinerary at the point of repatriation. Where the total distance of the repatriation is less than the unused travel arrangements we will calculate your entitlement on a pro rata basis, taking into account the cost of your original ticket.
- Any cover where you have made a claim for the same costs under any other section of the policy.
- We will not pay for any non-refundable costs for anyone not named on your policy.

What is the most we will pay?

The most we will pay per person, is the applicable limit set out in the section in the Schedule of benefits. If you are claiming for prepaid theme park and event tickets, golf green fees or programme fees that cannot be used because of an event set out under "What are the events that will be covered under Section A?" the applicable limit is \$500 per person.

Section A2 - Emergency travel arrangements and accommodation expenses (Catastrophe)

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you for expenses you incur for reasonable additional travel, accommodation, meals and internet use and emergency telephone calls less any refunds you are entitled to, if you have to interrupt your trip after it has begun, because of an event set out under "What are the events that will be covered under Section A?". We will pay the higher of the non refundable cancellation fees (Under Section A1) or the additional rearrangement costs that have been incurred as a result of the same event. If the interruption to your trip requires repatriation refer to Section C for details of cover. You must not organise any additional travel or accommodation in excess of \$2,000 without prior consent from us.

What is not covered?

- We will not pay for any event other than those listed under "What are the events that will be covered under Section A?"
- Any additional travel you undertake must be at the fare class that you originally chose, except where written approval is provide by us.
- 3. If you return to your home country because of an event listed under "What are the events that will be covered under Section A?" and you do not have a return ticket at the time of the event that causes a claim under this section, we will deduct from the amount we pay you the cost of an economy class airfare at the carrier's regular published rates for the return journey.
- 4. We will not pay for any expenses you incur to resume your trip after you have returned to your home country.
- We will not pay for additional accommodation where you have claimed for cancelled accommodation expenses covering the same period of time or for additional transport costs in excess of the distance of the cancelled travel arrangements.
- We will not pay for accommodation expenses for periods where you have not forfeited pre-paid accommodation arrangements.
- Any cover where you have made a claim for the same event under any other section of the policy.

What is the most we will pay?

The most we will pay under this benefit for the reasonable cost of additional meals is \$75 per person, for each 24 hour period up to a maximum of \$500 per person. For additional travel and accommodation the most we will pay you under this benefit is the applicable limit set out in the Schedule of benefits. We will also pay you for necessary emergency internet use and telephone calls up to a maximum of \$250.

SECTION B - MEDICAL AND DENTAL EXPENSES

Am I covered under Section B?

Section B is divided into different benefits.

SECTION B Sections B1 - B3

You must read Section B together with the General exclusions, as these may affect your cover.

Section B1 - Medical and dental expenses

When does the cover begin and end?

The cover under this benefit, begins when you leave on your trip and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you for:

- medical, hospital and ambulance expenses you incur as a result of death, Illness or Injury; or
- dental treatment expenses you incur as a result of an Injury to healthy natural teeth:

that you suffer while you are on your trip.

We will pay medical and dental expenses which we believe are medically necessary to treat the Illness or Injury. Any treatment you receive must be given by a Medical Practitioner, physiotherapist, chiropractor, osteopath, dentist or oral surgeon who is registered to practice in the country or jurisdiction where you receive treatment. Where you need treatment for an injury by a physiotherapist, chiropractor, osteopath or emergency dental treatment, you may have the first 6 treatments without asking us. Any treatments after that must be with our consent.

To determine if expenses are reasonable and necessary, we may consider all relevant factors, including the average reimbursement received by the provider for similar treatment.

All expenses under this section must be incurred within 12 months of the date of the Illness or Injury.

What is not covered?

- There is no cover under this benefit because of an Illness or Injury, the signs and symptoms of which you first became aware of before you went on your trip.
- 2. There is no cover for any person whose date of birth is after the date that the Certificate of Insurance was issued.

- There is no cover for ongoing payments under this benefit if we decide
 that you are capable of being repatriated to your home country. If you do
 not agree to return to your home country we will not make any further
 payment for medical expenses and associated costs as determined by
 us.
- 4. Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person under this benefit, is the applicable limit set out in the Schedule of benefits. The most we will pay per person, for an event solely requiring dental treatment is \$1,000.

Section B2 - Family transportation and accommodation Benefit

When does the cover begin and end?

The cover under this benefit begins when you are hospitalised overseas and ends when you are discharged from hospital.

What is covered?

We will cover you if you have no family members within 500 kilometres of your location while you are outside your home country and you are hospitalised, and your hospitalisation is expected to last a minimum of 7 days. We will pay for the cost of round-trip transportation based on the lowest available fare for the most direct route for up to two persons nominated by you or your next of kin, to travel to your bedside. We will also pay for reasonable accommodation and meals up to \$250 per day per person for a maximum period of 14 days.

What is not covered?

 Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person is \$10,000 up to a maximum of \$20,000.

Section B3 - Dental expenses due to sudden and acute pain

When does the cover begin and end?

The cover under this benefit, begins when you leave on your trip and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you for dental treatment expenses you incur overseas to relieve sudden and acute pain. We will pay expenses which we believe are reasonable and necessary to treat the pain. Before we will pay this you must give us written certification from your treating dentist that treatment is necessary to alleviate your pain and provide itemised costs detailing the extend of treatment required. Any treatment you receive must be given by a dentist or oral surgeon who is registered to practice in the country where you receive treatment.

What is not covered?

- There is no cover for expenses incurred for dental treatment due to normal wear and tear or the normal maintenance of dental health.
- There is also no cover for any dental expenses you incur in your home country.
- Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person, under this benefit, is the applicable limit set out in the Schedule of benefits.

SECTION C - EVACUATION AND REPATRIATION

Am I covered under Section C?

Section C is divided into different benefits.

SECTION C	Sections C1 - C2
-----------	------------------

You must read Section C together with the General Exclusions as these may affect your cover.

Section C1 - Medical evacuation and repatriation

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you if you have to interrupt your trip after it has begun because you have suffered an Illness or Injury while you are on your trip, and in our opinion you need to be evacuated or repatriated. We will pay expenses which we believe are reasonable and necessary to bring you back to your home country or to another destination of our choice. The decision to evacuate or repatriate you is ours, and we will not pay for any evacuation or repatriation expenses unless it is medically justified and you have received our consent.

We will either:

- return you to your home country with a medical attendant; or
- pay for a return economy class airfare, reasonable accommodation and additional expenses for a friend or relative to fly to, remain with and escort you in place of a medical attendant; or
- return you to your home country without an attendant.

What is not covered?

- We will not cover you if you evacuate or repatriate when it is not deemed medically necessary by us or without our consent.
- 2. We will not pay for any expenses you incur to resume your trip after you have returned to your home country.
- For repatriation, we will not pay more than the cost of repatriation to your home country.
- There is no cover under this benefit because of an Illness or Injury, the signs and symptoms of which you first became aware of before you went on your trip.
- 5. Any additional costs for travel you undertake that is not at the fare class that you originally chose, unless undertaken with our consent.
- If you do not have a return ticket at the time of the event that causes a claim under this section, we will deduct from the amount we pay you the cost of an economy class airfare at the carrier's regular published rates for the return journey.
- Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person under this benefit, is the applicable limit set out in the Schedule of benefits.

Section C2 - Non-medical evacuation and repatriation

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you if you have to interrupt your trip after it has begun because of one of the events listed in "What are the events that will be covered under Section A?", while you are on your trip, and in our opinion you need to be evacuated or repatriated. We will pay expenses which we believe are reasonable and necessary to bring you back to your home country or to another destination of our choice. The decision to evacuate or repatriate you is ours, and we will not pay for any evacuation or repatriation expenses unless you have received our prior consent.

What is not covered?

- 1. We will not cover you if you evacuate or repatriate without our consent.
- We will not pay for any expenses you incur to resume your trip after you have returned to your home country.
- 3. For repatriation, we will not pay more than the cost of repatriation to your home country.
- Any additional travel you undertake must be at the fare class that you originally chose unless you have our consent.
- If you do not have a return ticket at the time of the event that causes a claim under this section, we will deduct from the amount we pay you the cost of an economy class airfare at the carrier's regular published rates for the return journey.
- 6. Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person under this benefit, is the applicable limit set out in the Schedule of benefits.

SECTION D - TRAVEL DELAY

Am I covered under Section D?

SECTION D	Section D1
-----------	------------

You must read Section D together with the General exclusions, as these may affect your cover.

Section D1 - Travel delay

No excess applies to claims under this benefit.

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you if your scheduled public transport from or within Australia or overseas in respect of any individual leg of your trip is delayed for at least 6 hours for a reason outside your control, and for each subsequent 24 hours (or part of that time) from the original departure time.

What is not covered?

 Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay under this benefit, is the applicable limit which is the total of:

- (a) the reasonable cost of rearranging your travel arrangements, including additional accommodation and travel arrangements to resume your pre-paid arrangements; and
- (b) up to a maximum of \$250 per day for the cost of reasonable additional accommodation and \$50 per day for meals.

SECTION E - LUGGAGE AND PERSONAL EFFECTS

Am I covered under Section E?

Section E is divided into different benefits.

SECTION F

Sections E1 - E3

You must read Section E together with the General exclusions, as these may affect your cover.

Section E1 - Luggage and personal effects

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you for each of the following:

- accidental loss, theft of, or damage to, your luggage or personal effects including things you buy during the trip, while they are accompanying you during your trip.
- loss of, or damage to, dentures or dental prostheses whilst not on your person during your trip.
- the cost of medical consultation fees you incur to replace prescription medication which is accidentally lost, stolen or damaged, together with the cost of the medication itself.
- theft of, or damage to, your luggage or personal effects while they are left in a locked motor vehicle or a motor home during daylight hours and there is forced entry into the vehicle.
- theft of, or damage to, your luggage or personal effects while they are left in a locked storage facility and there is forced entry into the facility.

In the event of a claim under this section we will reinstate the applicable limit for an event that arises from any other set of circumstances.

What is not covered?

accidental loss or damage to or theft of:

- (a) cash, bank or currency notes, cheques or negotiable instruments;
- (b) fragile or brittle items (eg. glass or china), except loss or damage caused by fire, or by accident to the transport carrying them;
- damage to computer screens at any time, computer software or applications;
- (d) luggage or personal effects that are being transported independently of you;
- (e) property that you leave unattended or that occurs because you do not take reasonable care to protect it;
- (f) luggage or personal effects for which you are entitled to compensation from the carrier:
- (g) personal computer, communication or photographic equipment, electronic equipment, jewellery or watches left unattended by you in a motor vehicle or a motor home for any length of time, even if they are locked in the motor vehicle or motor home:
- (h) luggage or personal effects left unattended by you during non daylight hours in a motor vehicle or a motor home for any length of time:
- luggage or personal effects left unattended by you in a tent or caravan for any length of time;
- personal computer, communication or photographic equipment, electronic equipment, jewellery or watches checked in as luggage;
- (k) trade items, trade samples or your tools of trade or profession:
- (I) gold or precious metals, precious unset or uncut gemstones;
- (m) watercraft of any type;
- (n) sporting equipment whilst in use; or
- (o) luggage or personal effects that have been left in a locked storage facility for greater than 48 hours.
- wear and tear or depreciation of property or damage by the action of insects or vermin, mildew, rust or corrosion.
- 3. mechanical or electrical breakdown, or malfunction repair costs.
- 4. any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person, under this benefit, is the applicable limit set out in the Schedule of benefits. We will not pay more than the original price you paid for an item, even if the applicable limit set out in the Schedule of benefits is higher.

We will choose between:

- repairing or replacing your items to a condition no better than their condition at the time of loss, damage or theft; or
- paying you their value in cash, taking into account an allowance for age, wear and tear. The way in which we depreciate is set out in the Depreciation Schedule under Section H "Making a Claim".

The limits in total, for a camera, video camera or personal computer, set of golf clubs, watches, jewellery and for any other item are set out in the Schedule of benefits

A pair or related set of items - for example, a camera, lenses (attached or not), tripod and accessories or a chain and pendant - are only one item for this purpose.

Section E2 - Emergency luggage

No excess applies to claims under this benefit.

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you towards the cost of purchasing essential articles such as clothing, toiletries and personal requisites if your accompanied luggage is delayed, misdirected or temporarily misplaced by the carrier for a period in excess of 10 hours during your trip. If your luggage is not recovered, the amount paid by us for the loss will be reduced by the total of any amounts paid for under this section.

What is not covered?

- Any cover where you have made a claim for the same costs under any other section of the policy.
- 2. Any cover for purchase of jewellery, perfume, fragrances or alcohol.
- This benefit does not apply on the leg of your trip that returns you to your home country.

What is the most we will pay?

The most we will pay per person under this benefit, is the applicable limit set out in the section in the Schedule of benefits.

If after 72 hours your accompanied luggage is still missing, the applicable limit for this benefit are doubled.

Section E3 - Replacement passports and travel Documents

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will pay for the cost of reissuing or replacing your travel or personal documents, drivers licence, travellers' cheques, passport, or debit or credit cards, after they have been stolen, accidentally lost or damaged during your trip. We will also cover the reasonable cost of you travelling to the nearest location where the documents can be replaced. You must comply with any conditions of the issuing body of the travel documents, travellers' cheques, passport, or debit or credit cards.

What is not covered?

 Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person under this benefit, is the applicable limit set out in the Schedule of benefits.

SECTION F - DEATH EXPENSES AND PERMANENT DISABILITY

No excess applies to claims under this section.

Am I covered under Section F?

Section F is divided into different benefits.

SECTION F	Sections F1 - F3
-----------	------------------

You must read Section F together with the General exclusions, as these may affect your cover.

Section F1 - Accidental death

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will pay your Estate if during your trip:

- you suffer an Injury which results in your death within 12 months of the Injury being sustained; or
- you disappear because your means of transport disappeared, sank or was wrecked, and your body has still not been found 12 months after your disappearance.

What is not covered?

- There is no cover if your death is due to an Illness or your suicide.
- Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person under this benefit, is the applicable limit set out in the Schedule of benefits.

Section F2 - Funeral expenses overseas or repatriation of remains

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will pay for expenses for your burial or cremation overseas or the transporting of your remains to a funeral home in your home country if you die during the trip.

What is not covered?

 Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person under this benefit, is the applicable limit set out in the Schedule of benefits

Section F3 - Total permanent disability

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you if during your trip you suffer an Injury and as a result of that Injury you suffer total permanent disability within 12 months of sustaining the Injury.

What is not covered?

- There is no cover if you suffer total permanent disability as a result of an Illness.
- Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person under this benefit, is the applicable limit set out in the Schedule of benefits.

SECTION G-PERSONAL LIABILITY AND LEGAL EXPENSES

Am I covered under Section G?

Section G is divided into different benefits.

SECTION G Sections G1 - G2

You must read Section G together with the General exclusions, as these may affect your cover.

Section G1 - Personal liability

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip, and ends when you return to your home country or when the period of insurance ends, whichever happens first.

What is covered?

We will pay you for your legal liability to pay damages or compensation because your negligence during the trip causes:

- (a) Injury to a person who is not a member of your family or travelling party; or
- loss or damage to property that is not owned by you or a member of your family or travelling party, or which is not in your or their custody or control; or
- (c) loss or damage to property belonging to your employer.

We will also pay your legal costs in relation to that liability, but only if you get our consent before you take or are involved in any legal action.

What is not covered?

- 1. There is no cover for any liability:
 - (a) for any Injury arising out of your trade, business, employment; or
 - (b) arising out of your unlawful, wilful or malicious act; or
 - arising out of your ownership, possession or use (including as a passenger) of a mechanically propelled vehicle, for example; motor vehicle, motor cycle or any aircraft or watercraft, or firearm; or
 - (d) arising out of you passing on an Illness to another person.
- Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person under this benefit, is the applicable limit set out in the Schedule of benefits. The applicable limit is a combined total for your liability and your costs.

Section G2 - Legal Expenses

When does the cover begin and end?

The cover under this benefit begins from the time you leave on your trip, and ends when you return to your home country or the period of insurance ends, whichever happens first.

What is covered?

We will cover you for legal costs and expenses incurred in pursuit of compensation and/or damages arising from, or out of personal Injury or your death occurring during the trip.

Before we will cover you for any legal costs and expenses under this benefit you or your Estate must obtain our express consent in writing and we will have complete control over the selection and appointment of your lawyers and the conduct of the proceedings.

What is not covered?

- 1. There is no cover for:
 - any claims against a travel agent, tour operator, accommodation provider or carrier involved in the arrangement or provision of your travel or accommodation;
 - (b) any legal expenses incurred without our written consent;
 - any claims reported in excess of 180 days after the commencement of the incident giving rise to such a claim;
 - any claim in which we consider that no benefit would be achieved in pursuing such claim; or
 - (e) any claim against any insurance company.
- 2. Any cover where you have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most we will pay per person under this benefit is the applicable limit set out in the Schedule of benefits

SECTION H - MAKING A CLAIM

You must do everything reasonable to prevent a loss from occurring or, when a loss has occurred, from making the loss worse. In the event of a claim you must:

- (a) notify us promptly of a claim and complete a Claim Form;
- (b) give us any documents, letters or notices relating to a claim or possible claim, medical certificates, itemised medical accounts, original receipts, rental agreements, repair quotes, ticket and luggage checks or information that we reasonably ask for. This will be at your expense;
- forward immediately any letters or documents you receive from anyone else relating to a potential claim;

- (d) not make any promise or offer of payment, or admit fault to anyone, or become involved in any litigation in respect of an event that may result in a claim under this policy, without our consent;
- in the event of a claim caused by any medical condition, obtain evidence from the Medical Practitioner as soon as you are aware of signs or symptoms of the condition:
- (f) in the event of a claim caused by any Mental Illness, obtain evidence from the Medical Practitioner as soon as you are aware of signs and symptoms of the condition and provide details of your Mental Health Treatment Plan as assigned by your Medical Practitioner;
- (g) in cases of theft, damage or loss, report the matter to the police, transport provider, hotel or other authority within 24 hours and obtain a copy of that report; and
- (h) report any loss or damage to your accompanying luggage in writing to the carrier within 3 days and send to us a property irregularity report, along with details of any settlement that they make in relation to the loss or damage.
 - we may, at our expense, take proceedings in your name to recover compensation or enforce an indemnity against someone else in respect of a loss covered by this insurance in accordance with the law.
 - we may refuse to pay a claim under this policy if you do not comply with any condition of this policy
 - we may refuse to pay all or part of a claim if your claim is fraudulent.
 - if anyone else is legally responsible for your Illness, Injury or death
 we may seek compensation from them to recover any costs we have
 paid or seek reimbursement from you if you receive any payment
 from any other source for these expenses.

Proof of loss

If you make a claim under your policy we will ask you for evidence of the circumstances which gave rise to the claim and proof that you have suffered a loss. If you are claiming for loss of, or damage to any item we will ask you to provide:

- proof that you owned the item; and
- proof of its value and age.

Therefore you should keep all relevant receipts, accounts, valuations and police or medical reports. We will not pay any claim when the only proof of ownership is:

- a photograph; or
- a photocopy of any documentation; or
- a copy of the user's manual downloaded from the internet unless you also submit a Statutory Declaration.

If you cannot provide the evidence or proof that we ask for we may not pay you.

Paying the claim

An excess may apply to a claim you make under this policy. The amount
of the excess is shown on your Certificate of Insurance. This excess will

- apply to each event that results in a claim. Where applicable we will deduct the excess from any payment we make to you. This excess will be reimbursed to you if we successfully recover an amount exceeding the amount of the excess.
- Claims will be paid to you or your personal representative in Australian dollars on the basis of the exchange rate that applied at the time of the event that gave rise to the claim.
 We will not pay more than your actual loss.
- You must tell us if you are entitled to claim an input tax credit at the time
 of making the claim. If you do not provide us with this information we may
 deduct up to 1/11th of the amount otherwise payable in settlement of your
 claim.
- 4. If we agree to pay a claim under your policy, this policy covers GST inclusive costs (up to the relevant travel plan limit). However, we will reduce any claim payment by any input tax credit you are or would be entitled to for the repair or replacement of insured property or for other things covered by the policy.
- 5. At the time you make a claim you must tell us if your entitlement to an input tax credit which you have told us:
 - (a) is incorrect; or
 - (b) changes from what you have told us, when you extend or vary your policy.

Depreciation

The nominated depreciation rate will apply to each year of age up to a maximum of 80% of the original purchase price of that item.

10%	Camping, sporting and leisure equipment (not leisure clothing), and musical instruments.
15%	Clothing, footwear, personal effects, luggage, prescription glasses, sunglasses, costume jewellery and books.
23 %	Personal and or laptop computers, communication or photographic equipment, electronic equipment, ipods, mobile phones, CDs and DVDs.
55%	Toiletries including skin care, makeup, perfume, medication.

Claims Lodgement

Simply go to www.guardme.com.au, select "Making a Claim" and follow the easy instructions. To help us speed up the processing of your claim, follow the instructions and provide all requested documentation to support your claim. Alternatively, you can contact us for a claim form on 1300 555 017 and send your claim form and supporting documentation to:

QBE Travel Insurance PO Box 12090, Melbourne VIC 8006

Claims Enquiries: 1300 555 017 or (03) 8523 2777

Email: travel.claims@qbe.com

Claims service standard

Our claims service standard is to settle your claims within 10 working days upon the receipt of a completed Claim Form and all necessary supporting information. If more information is required we will contact you within 10 working days.

Insurance underwritten by QBE Insurance (Australia) Limited ABN 78 003 191 AFSL 239545. guard.me International Insurance Pty ABN 67 155 329 338 is a distributor of QBE.