

PLEASE SEE VALIDATION CERTIFICATE FOR COVER LEVEL DETAILS

## IMPORTANT NOTICE

Please do not Curtail any Trip or incur inpatient medical expenses without first contacting MAWDY Assistance Emergency Assistance Service +353 91 560 637.

## TRAVEL INSURANCE COVER SCHEDULE

NEW SUPER PLUS  
Now automatically includes excess Waiver and winter sports\*\*--

Section / Description	Economy Cover Limit (per Insured Person)	Excess (per Insured Person)	Super Cover Limit (per Insured Person)	Excess (per Insured Person)	Super Plus Cover Limit (per Insured Person)	Excess (per Insured Person)	Backpacker Cover Limit (per Insured Person)	Excess (per Insured Person)
<b>A. Cancellation or Curtailment</b>	Up to €1,200	€150 (Loss of deposit €75)	Up to €5,000	€75 (Loss of deposit €30)	Up to €10,000	N/A	Up to €2,000	€75 (Loss of deposit €30)
<b>B. Emergency Medical and other Expenses*</b>	Up to €10,000,000	€150	Up to €20,000,000	€75 (€125 Over 65's)	Up to €20,000,000	N/A	Up to €5,000,000	€75
Including Emergency Assistance Services								
Emergency Dental Pain Relief	Up to €250		Up to €250		Up to €250		Up to €250	
<b>C. Hospital Benefit*</b>	N/A	N/A	€150 (€15 per day)	N/A	€260 (€20 per day)	N/A	€200 (€10 per day)	N/A
<b>D. Personal Accident*</b>	Maximum Benefit	N/A	Maximum Benefit	N/A	Maximum Benefit	N/A	Maximum Benefit	N/A
Loss of Limbs or Sight (Aged under 66yrs)	€5,000		€25,000		€40,000		€15,000	
Permanent Total Disablement (Aged under 66yrs)	€10,000		€40,000		€40,000		€38,000	
Death Benefit (Aged 18 to 65yrs)	€5,000		€5,000		€10,000		€5,000	
Death Benefit (Under 18yrs or 66yrs and over)	€3,000		€3,000		€3,000		N/A	
All Benefits (66yrs and over)	N/A		€3,000		€3,000		N/A	
<b>E. Baggage, Baggage Delay and Passport</b>	Up to €1,200	€150	Up to €2,000	€75	Up to €5,000	N/A	Up to €1,000	€75
Single Article or Set of Articles Limit	€130		€250		€350		€150	
Valuables Limit in Total	Up to €150		Up to €250		Up to €350		Up to €150	
Delayed Baggage (after 12hrs)	N/A	N/A	€250 (€50 per 24hrs)	N/A	€300 (€75 per 24hrs)	N/A	€250 (€50 per 24hrs)	N/A
Tobacco, Alcohol, Fragrances etc	Up to €100	N/A	Up to €100	N/A	Up to €100	N/A	Up to €100	N/A
Replacement of Passport	Up to €150	N/A	Up to €250	N/A	Up to €250	N/A	Up to €250	N/A
Emergency Passport Travel	Up to €150	N/A	Up to €250	N/A	Up to €250	N/A	Up to €250	N/A
<b>F. Personal Money and Travel Documents</b>	Up to €250	€100	Up to €500	€75	Up to €1,000	N/A	Up to €500	€75
Cash Limit (Currency notes and coins)	€150		€200		€400		€300	
Cash (Aged under 18yrs)	€100	N/A	€100	N/A	€100	N/A	€100	N/A
Travel Documents	Up to €150		Up to €250		Up to €300		Up to €150	
<b>G. Personal Liability*</b>	Up to €2,000,000	€300	Up to €2,000,000	€200	Up to €3,000,000	N/A	Up to €3,000,000	€300
<b>H. Hijack</b>	N/A	N/A	€500 (€50 per day)	N/A	€1,000 (€100 per day)	N/A	€1,000 (€100 per day)	N/A
<b>I. Missed Departure</b>	Up to €250	€150	Up to €750	€75	Up to €1,000	N/A	Up to €500	€75
<b>J. Catastrophe</b>	N/A	N/A	Up to €500	€75	Up to €1,000	N/A	Up to €500	€75
<b>K1. Delayed Departure</b>	€10 for each 12hrs (Up to Max €50)	N/A	€15 for each 12hrs (Up to Max €150)	N/A	€40 for each 12hrs (Up to Max €200)	N/A	€20 for each 12hrs (Up to Max €200)	N/A
<b>K2. Holiday Abandonment</b>	Up to €1,200 (after 24hrs)	€150	Up to €5,000 (after 24hrs)	€75	Up to €10,000 (after 24hrs)	N/A	Up to €2,000 (after 24hrs)	€75
<b>L. Third Party Supplier Insolvency</b>	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>M. Credit Card Fraud</b>	N/A	N/A	€300	€75	€500	N/A	N/A	N/A
<b>N. Overseas Legal Expenses and Assistance</b>	Up to €5,000	€300	Up to €15,000	€200	Up to €20,000	N/A	Up to €10,000	€300
<b>O. Scheduled Airline Failure</b>	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>P. Strike</b>	€100	N/A	Up to €200	N/A	Up to €300	N/A	Up to €200	N/A
<b>Q. Personal Travel Assistance</b>	N/A	N/A	Included	N/A	Included	N/A	Included	N/A
<b>R. Real-Time Flight Delay</b>	N/A	N/A	Included	N/A	Included	N/A	N/A	N/A
Wintersports (Available upon payment of additional premium unless you have selected Premier Plus on your Cover)	(per Insured Person)	(per Insured Person)	(per Insured Person)	(per Insured Person)	(per Insured person)	(per Insured person)	(per Insured person)	(per Insured person)
<b>S1. Ski Equipment* Owned</b>	Up to €300	€100	Up to €400	€75	Up to €600	N/A	Up to €400	€75
<b>Ski Equipment* Hired</b>	Up to €300		Up to €400		Up to €600		Up to €300	
<b>Ski Equipment*-Single Article Limit</b>	€150		€200		€300		€200	
<b>S2. Ski Hire*</b>	€300 (€30)	N/A	€400 (€40)	N/A	€500 (€50)	N/A	€300 (€30)	N/A

Section / Description	Economy Cover Limit (per Insured Person)	Excess (per Insured Person)	Super Cover Limit (per Insured Person)	Excess (per Insured Person)	Super Plus Cover Limit (per Insured Person)	Excess (per Insured Person)	Backpacker Cover Limit (per Insured Person)	Excess (per Insured Person)
	per day)		per day)		per day)		per day)	
S3. Ski Pack*	€300 (€30 per day)	N/A	€300 (€30 per day)	N/A	€500 (€50 per day)	N/A	€300 (€50 per day)	N/A
S4. Piste Closure*	€300 (€30 per day)	N/A	€300 (€30 per day)	N/A	€500 (€50 per day)	N/A	€300 (€50 per day)	N/A
S5. Avalanche Closure*	Up to €300 (per Insured Person)	€125 (per Insured Person)	Up to €300 (per Insured Person)	€75 (per Insured Person)	Up to €500 (per Insured person)	N/A (per Insured person)	Up to €400 (per Insured person)	€75 (per Insured person)
Travel Disruption (Available upon payment of additional premium)								
T1. Extended Cancellation	Up to €1,000	€50	Up to €1,000	€50	Up to €1,000	N/A	N/A	N/A
T2. Extended Delay Departure	€20 for first 12hrs (€10 each 12hrs thereafter up to €200)	N/A	€20 for first 12hrs (€10 each 12hrs thereafter up to €200)	N/A	€20 for first 12hrs (€10 each 12hrs thereafter up to €200)	N/A	N/A	N/A
T3. Extended Holiday Abandonment	Up to €1,000	€50	Up to €1,000	€50	Up to €1,000	N/A	N/A	N/A
T4. Extended Missed Departure	Up to €500	€50	Up to €500	€50	Up to €500	N/A	N/A	N/A
T5. Accommodation	Up to €1,000	€50	Up to €1,000	€50	Up to €1,000	N/A	N/A	N/A
Optional Extras (Available upon payment of additional premium)								
U. Flight Cancellation	N/A	N/A	Up to €750	€75	Up to €1,000	N/A	Up to €500	€75
V. Cruise Connection	N/A	N/A	Up to €750	€75	Up to €1,500	N/A	N/A	N/A
W. Wedding/Civil Partnership	N/A	N/A	Up to €1,000	€75	Up to €2,000	N/A	N/A	N/A
Single Article or Set of Articles Limit			€250		€300			
X. Business Cover	N/A	N/A	Up to €1,000	€75	Up to €2,000	N/A	N/A	N/A
Y1. Golf Equipment	N/A	N/A	Up to €1,000	€75	Up to €2,000	N/A	N/A	N/A
Single Article or Set of Articles Limit			€150		€200			
Y2. Golf Equipment Hire	N/A	N/A	€200 (€50 per day)	N/A	€400 (€75 per day)	N/A	N/A	N/A
Y3. Green Fees	N/A	N/A	€200 (€50 per day)	N/A	€400 (75 per day)	N/A	N/A	N/A
Z. Exam Failure	N/A	N/A	N/A	N/A	N/A	N/A	Up to €750	€75
Z1. Gadget Cover	Up to €500	€150	Up to €750	€75	€1,000	N/A	N/A	N/A

\* **You** are not covered under sections B, C, D, G and S for **Winter Sports** activities unless an additional premium has been paid or **You** have selected Super Plus cover and it is shown on the validation certificate.

\*\* No cover is available for Winter Sports if **You** are aged over 65 yrs.

## TRAVEL INSURANCE COVER

### Introduction

This is **Your** travel insurance Cover. It contains details of cover, conditions and exclusions relating to each **Insured Person** and is the basis on which all claims will be settled. It is validated by the issue of the validation certificate which must be attached to this Cover handbook.

In return for having accepted **Your** premium **We** will in the event of **Bodily Injury**, death, illness, disease, loss, theft, damage or other specified events happening within the **Period of Insurance** provide insurance in accordance with the operative sections of **Your** Cover as referred to in **Your** validation certificate.

The validation certificate and any endorsements are all part of **Your** Cover.

**Your** Cover is evidence of the contract of insurance.

### Important Information

This insurance policy is not designed to cover known or publicly announced events. Cover for **COVID**, which is subject to the exclusions, is detailed in subsection 2 and 3 of Section A (Cancellation or Curtailment) and Section B (Emergency Medical and other Expenses).

### Cover Excess

Under most sections of the Cover, claims will be subject to an **Excess**. This means that **You** will be responsible for paying the first part of each claim, per section, for each separate incident, payable for each **Insured Person**, unless the additional premium has been paid to waive the **Excess** or **You** have

selected Super Plus on **Your** Cover as shown in the validation certificate or the Travel Insurance Cover Schedule specifically states that one is not applicable (N/A). The **Excess** in Sports and Activities: Grade 2-4 will still apply regardless of selecting Super Plus on **Your** Cover or including **Excess** waiver.

### Cover Information

If **You** would like more information or if **You** feel the insurance may not meet **Your** needs, please contact **Your** issuing agent.

### Residency

This Cover is only available to **You** if **You** are permanently resident in **Ireland** and have been for the past six months prior to the date of issue.

### The Law Applicable to this Contract

**You** and **We** can choose the law which applies to this Cover. **We** propose that the law of Republic of **Ireland** applies. Unless **We** and **You** agree otherwise the law of Republic of **Ireland** will apply to this Cover.

### Type of Insurance and Cover

Travel insurance for Single, Annual Multi **Trip** or Backpacker – Please refer to **Your** validation certificate for **Your** selected cover

Some **Winter Sports** may also be included upon payment of an appropriate additional premium or if **You** have selected Super Plus on **Your** Cover – **Your** validation certificate will show if **You** selected this option.

Travel Disruption, Flight Cancellation, Cruise Connection, Wedding, Golf and Business Cover may also be included upon payment of an appropriate additional premium – **Your** validation certificate will show if **You** selected these options.

### Stamp Duties Consolidation Act 1999

The appropriate stamp duty has been or will be paid by **Us** to the Revenue Commissioner in accordance with the provisions of the composition agreement entered into with them under section 5 of the Stamp Duties Consolidation Act 1999. All monies which may become due or payable by **Us** shall be payable from **Our** offices in the **United Kingdom** to **You** at the address **You** have notified to **Us** in **Ireland**.

## UNDERWRITER

MAPFRE ASISTENCIA Compañia Internacional De Seguros Y Reaseguros, S.A., trading as MAWDY, is authorised by Dirección General de Seguros y Fondos de Pensiones del Ministerio de Economía y Hacienda in Spain and is regulated by the Central Bank of Ireland for consumer protection rules. Company Registration Number 903874.

The principal place of business of MAWDY is at 22-26 Prospect Hill, Galway. MAWDY conducts business in Ireland in accordance with the Code of Conduct for Insurance Undertakings published by the Central Bank of Ireland.

## ARRANGED BY

This exclusive travel insurance has been organised by Cover-More Blue Insurance Services Limited. Suite 11, Fifth Floor, No. 2 Stemple Exchange, Blanchardstown Corporate Park D15 E4FN. Cover-More Blue Insurance Services Limited trading as Annualtravelinsurance.com is regulated by the Central Bank of Ireland.

## MASTER POLICY DOCUMENT

This evidence of insurance is to confirm that those persons who have paid the appropriate premium are insured under the Master Policy Document **BLUE/MAWDY/annualtravelinsurance.com/2026** issued to Cover-More Blue Insurance Services Limited. Reference throughout this document to “Policy” shall be constituted to mean Master Policy Document BLUE/MAWDY/annualtravelinsurance.com/ 2026

## PERIOD OF COVER

This document only constitutes a valid evidence of insurance when it is issued in conjunction with a validation certificate/invoice issued from 01.02.2026.

## TERRITORIAL LIMITS

- Area 1 The **United Kingdom**, Channel Islands and the Isle of Man
- Area 2 The Continent of Europe west of the Ural Mountains, Madeira, Canary Islands, Iceland, the Azores, Mediterranean Islands, and non-European countries bordering the Mediterranean (except Algeria, Israel, Jordan, Libya, Lebanon and Syria)
- Area 3 Australia/New Zealand
- Area 4 Worldwide including the Caribbean but excluding The United States of America and Canada
- Area 5 Worldwide including The United States of America and Canada

This policy will not cover any loss, injury, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Cuba, Iran, Syria, North Korea or the Crimea, Donetsk People’s Republic (DNR), or Luhansk People’s Republic (LNR) regions of Ukraine.

## DEFINITIONS

Any word or expression to which a specific meaning has been attached will bear the same meaning throughout this Cover handbook. For ease of reading the definitions are highlighted by the use of **bold** print and will start with a capital letter.

### **Baggage**

– means luggage, clothing, personal effects, **Valuables, Golf Equipment** and other articles which belong to **You** (or for which **You** are legally responsible) which are worn, used or carried by **You** for **Your** individual use during any **Trip** (excluding **Ski Equipment** and **Personal Money and Travel Documents**).

### **Bodily Injury**

– means an identifiable physical injury sustained by **You** due to a sudden, external, unexpected and specific event. Injury as a result of **Your** unavoidable exposure to the elements shall be deemed to have been caused by **Bodily Injury**.

### **Business Equipment**

– means items used by **You** in support of **Your** business activity including office equipment which is portable by design such as but not restricted to, personal computers, telephones and calculators forming part of **Your Baggage**.

### **Business Trip**

– means a **Trip** taken wholly or in part for business purposes but excluding manual work.

**Cancellation Period**

– means the 14 days following the date this Cover is received at new business or the 14 days from the renewal date.

If the **period of insurance** is less than 31 days, the cooling-off period does not apply.

**Close Business Associate**

– means any person whose absence from business for one or more complete days at the same time as **Your** absence prevents the proper continuation of that business.

**Close Relative**

- means mother, father, sister, brother, wife, husband, daughter, son, grandparent, grandchild, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, aunt, uncle, niece, nephew, stepparent, stepchild, stepsister, stepbrother, foster child, legal guardian, next of kin, fiancé/fiancée, partner (any couple in a common law relationship or who have co-habited for at least 6 months) or civil partner resident in **Ireland**.

**Complications of Pregnancy and Childbirth**

– means

- Toxaemia (toxins in the blood)
- Gestational diabetes (diabetes arising as a result of pregnancy)
- Gestational hypertension (high blood pressure arising as a result of pregnancy)
- Pre-eclampsia (where **You** develop high blood pressure, carry abnormal fluid and have protein in **Your** urine during the second half of pregnancy)
- Ectopic pregnancy (a pregnancy that develops outside of the uterus)
- Molar pregnancy or hydatidiform mole (a pregnancy in which tumour develops from the placental tissue)
- Post-partum haemorrhage (excessive bleeding following childbirth)
- Retained placenta membrane (part or all of the placenta is left behind in the uterus after delivery)
- Placental abruption (part or all of the placenta separates from the wall of the uterus)
- Hyperemesis gravidarum (excessive vomiting as a result of pregnancy)
- Placenta praevia (when the placenta is in the lower part of the uterus and covers part or all of the cervix)
- Stillbirth
- Miscarriage
- Emergency Caesarean section
- A termination needed for medical reasons
- Premature birth more than 8 weeks (or 16 weeks if **You** know **You** are having more than one baby) before the expected delivery date

**Cover Schedule**

– means the details of cover as outlined at the start of this document.

**COVID**

– means COVID-19, coronavirus disease, severe acute respiratory syndrome coronavirus (SARSCOV-2) or any mutation or variation of these.

**Cruise**

- means a **Trip** involving a sea voyage of more than three days total duration, where transportation and accommodation is primarily on an ocean-going passenger ship.

**Curtailed/Curtail**

– means either:

- a) abandoning or cutting short the **Trip** by immediate direct early return to **Ireland** or the **United Kingdom**, in which case claims will be calculated from the day **You** returned to **Ireland** or the **United Kingdom** and based on the number of complete days of **Your Trip You** have not used, or
- b) by attending a hospital as an in-patient or being confined to **Your** accommodation or on the

orders of a **Medical Practitioner**, in either case for a period in excess of 48 hours. Claims will be calculated from the day **You** were admitted to hospital or confined to **Your** accommodation and based on the number of complete days for which **You** were hospitalised, or confined to **Your** accommodation.

### Excess

– means where applicable the **Excess** is the first amount of each claim, per section, for each separate incident payable for each **Insured Person**.

### Family Cover

– means up to two adults and any number of their children, stepchildren or foster children aged under 19 (or under 24yrs if living at **Home** and in full time education), accompanying the parents or legal guardian insured on the same Cover travelling on any **Trip** to the same destination. Under Annual Multi **Trip** Cover any child under 16 is also insured to travel independently from their parents provided each child is accompanied by a responsible adult 18 years or over. Any child 16 years or over is covered to travel independently from their parents provided they are travelling on an organised school or college **Trip** only and with a responsible adult 18 years or over.

### Gadget

– means the item(s) insured by this Gadget Cover additional upgrade. Only item(s) from the following list shall be covered: MP3 Players, Smartphones, DVD Players, iPads, Games Consoles, Digital Cameras, Video Cameras, Mobile Phones, PDAs, Laptops, Bluetooth Headsets, Satellite Navigation Devices, E-Readers, Camera Lenses, In-Car Computers, Head/Ear Phones, Ear Buds, and Tablets.

### Golf Equipment

– means golf clubs, golf balls, golf bag, golf shoes and non-motorised golf trolley forming part of **Your** **Baggage**.

### Hijack

– means the unlawful seizure or wrongful exercise of control of an aircraft or conveyance that **You** are travelling in as a passenger.

### Home

– means **Your** normal place of residence in the Republic of **Ireland**.

### Incidental

– means happening on a casual or occasional basis.

### Irrecoverable

– means that **We** will only cover costs that **You** have not already recovered, for which reasonable remedy was not offered or provided by another source and which **You** are not entitled to recover or regain from another source.

### Ireland/IRL

– means the Republic of **Ireland**.

### Medical Condition

– means any disease, illness, injury or symptoms.

### Medical Practitioner

– means a registered practising member of the medical profession recognised by the law of the country where they are practising, who is not related to **You** or any person who **You** are travelling with.

### Period of Insurance

– means if Annual Multi **Trip** Cover is selected:  
the period for which **We** have accepted the premium as stated in the validation certificate.  
During this period any **Trip** not exceeding  
31 days – Under 66yrs (Economy Cover)

60 days – Under 66yrs (Super & Super Plus Cover)  
 31 days – 66-69yrs (Super & Super Plus Cover)  
 21 days – 70-75yrs (Super & Super Plus Cover)

Under Annual Multi **Trip** Cover Section A – Cancellation cover shall be operative from the start date this insurance is effected by **You** or at the time of booking any **Trip** (whichever is the later) and terminates on commencement of any **Trip**.

**Winter Sports** cover is limited to 14 days on Economy Cover up to 49yrs or 17 days on Super and Super Plus Cover up to 65yrs.

- **means** if Single **Trip** cover is selected:

The Period of the **Trip** and termination upon its completion but not in any case exceeding The period shown on the validation certificate.

365 days – Under 66yrs (Economy)  
 365 days – Under 70yrs (Super & Super Plus)  
 35 days – 70-79yrs (Super & Super Plus Cover)

- **means** if Backpacker cover is selected:

The Period of the **Trip** and termination upon its completion but not in any case exceeding The period shown on the validation certificate.

365 days – Up to 49yrs

This Cover also entitles **You** to a maximum of two return visits to **Your Home** before **Your** intended return date (as specified on **Your** validation certificate) for up to a maximum duration of 21 days excluding any return for which a claim is being made as a result of Emergency Medical, Repatriation or **Curtailment**. Cover is suspended from the time **You** arrive at **Your** departure point to **Your Home** and starts again when **You** exit the airport at **Your** overseas destination. During this period no cover is provided by the Cover. In any event **Winter Sports** cover is limited to 31 days in total in each **Period of Insurance** (if **You** have paid the appropriate **Winter Sports** premium to include this cover).

If Single **Trip** or Backpacker Cover is selected Section A – Cancellation Cover shall be operative from the time **You** pay the premium and evidence of insurance is issued and will cease upon departure of **Your Trip** and in the event of a Cancellation or Curtailment claim all remaining cover will cease and the Cover will become void.

For the above Cover types; All other sections of the Cover, whichever cover is selected, the insurance commences when **You** leave **Your Home** or in respect of a **Business Trip** **Your** place of business in **Ireland** or the **United Kingdom** (whichever is the later) to commence the **Trip** and terminates at the time of **Your** return to **Your Home** or place of business in **Ireland** or the **United Kingdom** (whichever is the earlier) on completion of the **Trip**. Any **Trip** that had already begun when **You** purchased this insurance will not be covered, except where **You** renew an existing Annual Multi **Trip** Cover which fell due for renewal during the **Trip**.

**Please note:** if, due to unexpected circumstances beyond **Your** control and included in the conditions of this cover, **You** cannot finish **Your Trip** within the **Period of Insurance** set out on **Your** validation certificate, **We** will extend **Your** cover for up to 30 days at no extra charge. If the reason **You** cannot finish **Your Trip** is related to **COVID**, **We** will still extend **Your** cover for up to 30 days at no extra charge. However, **We** will only cover claims that are not related to **COVID** apart from Section B – Emergency Medical and other Expenses, provided that **You** are not travelling to a country or specific area or event to which the Travel Advice Unit of the Department of Foreign Affairs (DFA) [www.dfa.ie/travel/traveladvice](http://www.dfa.ie/travel/traveladvice) or the World Health Organisation (WHO) or similar body has advised against all or all but essential travel. All other general exclusions will continue to apply.

- **means** if one way **Trip** cover is selected: the period of a single outward **Trip** (max 7 days) and terminating upon its completion, but not in any case exceeding 24 hours after the time **You** first leave the immigration control of **Your** final destination country. Under one way **Trip** Cover Section A – Cancellation Cover shall be operative from the time **You** pay the premium and evidence of insurance is

issued and will cease upon departure of **Your Trip** or in the event of a cancellation claim on **Your Cover** all remaining cover will cease for the planned **Trip**. All other sections of the Cover, the insurance commences when **You** leave **Your Home** to commence the **Trip** and terminates 24 hours after the time **You** first leave the immigration control of **Your** final destination country.

### Permanent Total Disablement

– means disablement which entirely prevents the **Insured Person** from attending to business or occupation of any and every kind for at least 12 months, and at the end of that time being beyond the hope of improvement.

### Personal Money and Travel Documents

– means bank notes currency notes and coins in current use, travellers' and other cheques, travel tickets, event and entertainment tickets, money cards and credit/debit or charge cards all held for private purposes.

### Primary Contact

– means the designated **Insured Person** on **Your Real-Time Flight Delay** account, aged 18 years and over, capable of receiving SMS text messages and e-mail on a mobile device.

### Public Transport

– means any publicly licensed aircraft, sea vessel, train or coach on which **You** are booked to travel.

### Real-Time Flight Delay

– means **Our** value-added product offering a real-time benefit if **Your** flight is delayed by 3 hours or more.

### Recoverable

– means costs that **You** have already recovered or for which reasonable remedy was offered or provided by another source, and which **You** are entitled to recover or regain from another source.

### Registered Traveller

– means an **Insured Person** registered on a flight in **Your Real-Time Flight Delay** account.

### Single Item

– means any one article pair or set of articles (including golf clubs) or collection which are used or worn together. The single item limit applies except when the additional **Golf Equipment** section is purchased and shown in the validation certificate then the single item limit under the **Golf Equipment** section applies to each individual golf club and not the set as a whole.

### Ski Equipment

– means skis (including bindings), ski boots, ski poles, snowboards, snowboard bindings and snowboard boots forming part of **Your Baggage**.

### Strike or Industrial Action

– means any form of Industrial Action, whether organised by a trade union, which is carried on with the intention of preventing, restricting or otherwise interfering with the production of goods or the provision of services.

### Terrorism

– means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisations(s) or governments, committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.

### Travelling Companion

– means a person(s) with whom **You** have booked to travel or are travelling with on the same booking invoice and without whom **Your** travel plans would be impossible.

**Trip**

– means any holiday, business or pleasure **Trip** or journey made by **You** within the area of travel shown in the validation certificate which begins and ends in **Your Home** country during the **Period of Insurance** unless the **Trip** is a one-way **Trip** or journey as defined under **Period of Insurance**.

If Annual Multi **Trip** Cover is selected any such **Trip** over 60, 31 or 21 days (whichever is stated on the validation certificate) is not insured. The Cover does not extend to cover trips within **Ireland** with the exception of Section A Cancellation or Curtailment where **You** have pre-booked at least two nights accommodation in a hotel, motel, holiday camp, bed and breakfast, holiday cottage or similar accommodation rented for a fee. In any event **Winter Sports** is limited to 14 days on Economy Cover and 17 days on Super and Super Plus cover in total (if **You** have paid the appropriate **Winter Sports** premium to include this cover or **You** selected Super Plus on **Your** Cover). Each **Trip** under Annual Multi **Trip** Cover is deemed to be a separate insurance, each being subject to the terms, definitions, exclusions and conditions contained in this Cover.

If **You** travel for more than the number of days for which **You** have paid for cover, **You** will not be covered after the last day for which **You** have paid.

**Unattended**

– means when **You** are not in full view of and not in a position to prevent unauthorised interference with **Your** property or vehicle.

**United Kingdom (UK)**

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

**Valuables**

– means jewellery, gold, silver, precious metal or precious or semiprecious stone articles, watches, furs, leather goods, cameras, camcorders, photo-graphic, audio, video, computer, game console, television (including CD's, DVD's, tapes, films, cassettes, cartridges and headphones), computer games and associated equipment, telescopes and binoculars, portable DVD players, ipods, MP3/4 players and portable satellite navigation equipment.

**We/Us/Our**

– means MAPFRE ASISTENCIA Compania Internacional De Seguros Y Reaseguros, S.A., trading as MAWDY, is authorised by Direccion General de Seguros y Fondos de Pensiones del Ministerio de Economia y Hacienda in Spain and is regulated by the Central Bank of Ireland for consumer protection rules. Company Registration Number 903874.

**Winter Sports**

– means guided cross-country skiing (Nordic skiing), mono skiing, off-piste skiing or snowboarding except in areas designated as unsafe by local resort management unless accompanied by a locally qualified guide, recreational racing, skiing, snowboarding, snowmobiling and snow sledging.

**You/Your/Insured Person(s)**

– means each person travelling on a **Trip** whose name appears in the validation certificate.

**IMPORTANT CONDITIONS RELATING TO HEALTH**

 **0818 444 555**

**Quoting Reference: Annualtravelinsurance.com (ROI)**

**Please note certain medical conditions will incur an additional premium.**

**You** must comply with the following conditions to have full protection of **Your** Cover. If **You** do not comply **We** may at **Our** option cancel the Cover or refuse to deal with **Your** claim or reduce the amount of any claim payment.

### **Non-Private Health Insurance Members**

At the time of taking out this Cover do **You** have or have **You** had any **Medical Condition(s)** for which **You** are taking or have taken prescribed medication or are waiting to receive, or have received treatment (including surgery, tests, or investigations) within the last 2 years?

If Yes

Telephone **0818 444 555** and declare all **Medical Condition(s)**.

**You** will not be covered under Section A – Cancellation or Curtailment Charges, Section B – Emergency Medical and Other Expenses, Section C – Hospital Benefit, Section D – Personal Accident and Section X3 - Green Fees for any claims arising directly or indirectly from this **Medical Condition(s)** unless **You** contact **Us** on the above telephone number and **We** have agreed in writing to cover **Your Medical Condition(s)**.

If **You** have only **ONE Medical Condition** and it is one of those shown in the table of **Medical Condition(s)** listed below which do not require screening then this will be covered under this Cover without the need to contact **Us**.

If No

Please read the below exclusions applying to all **Insured Persons**

(If none of them apply then **Your Medical Condition(s)** will be covered)

### **Private Health Insurance Members**

If **You** hold a valid private health insurance with a minimum of €55,000 of inpatient medical cover abroad and have declared **Your** Private Health Insurance details to **Your** issuing Agent, then **You** do not need to contact the medical screening line as detailed above.

Important note: **Your** Private Health Insurance cover must include a minimum of €55,000 of inpatient medical cover abroad. It must cover all **Insured Person(s)** and cover the full duration of **Your** planned **Trip** otherwise **You** will still be required to contact the medical screening line to declare **Your Medical Condition(s)**.

### **Exclusions that apply to all Insured Persons**

(These exclusions apply to all Insured Persons irrespective of whether they are a Private Health Insurance or Non Private Health Insurance holder)

The following exclusions apply to all **Insured Persons** at the time of taking out this Cover or at the time of booking the **trip**.

**You** will not be covered under Section A – Cancellation or Curtailment Charges, Section B – Emergency Medical and Other Expenses and Section C – Personal Accident for any claims arising directly or indirectly from:

- i) Any **Medical Condition** for which **You** are aware of but have not had a diagnosis.
- ii) Any **Medical Condition** for which **You** have received a terminal prognosis.
- iii) Any **Medical Condition** for which **You** are receiving or are on a waiting list for or have the knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home.

The following exclusions apply to all **Insured Persons** at all times:

- i) Any **Medical Condition** **You** have in respect of which a **Medical Practitioner** has advised **You** not to travel or would have done so had **You** sought his/her advice but despite this **You** still travel.
- ii) Any surgery, treatment or investigations for which **You** intend to travel outside of **Ireland** to receive (including any expenses incurred due to the discovery of other **Medical Conditions** during and/or complications arising from these procedures).
- iii) Any **Medical Condition** for which **You** are not taking the recommended treatment or prescribed

medication as directed by a **Medical Practitioner**.

- iv) **You** travel against any health requirements stipulated by the carrier, their handling agents or any other **Public Transport** provider.
- v) Any surgery, treatment or investigations arising from investigations or tests for which **You** were pending the results of prior to **Your** departure from **Ireland**.

**You** should also refer to the general exclusions.

### Exclusions that apply if a Close Relative or Travelling Companion has Medical Conditions

If any of the below exclusions apply to **Your Close Relative(s)** or **Travel Companion(s)** at the time of taking out this Cover or at the time of booking the **trip**, **You** will not be covered under Section A – Cancellation or Curtailment Charges, Section B – Emergency Medical and Other Expenses and Section C – Personal Accident for any claims arising directly or indirectly from:

- i) Any **Medical Condition** for which a **Close Relative** or **Travelling Companion** have received a terminal prognosis.
- ii) Any **Medical Condition** for which a **Close Relative** or **Travelling Companion** are receiving or on a waiting list for or have the knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home.
- iii) Any **Medical Condition** for which a **Close Relative** or a **Travelling Companion** are aware of but for which they have not had a diagnosis

**You** should also refer to the general exclusions.

### Medical Conditions which do not require screening.

(**You** do not have to contact **Us** if **You** only have **ONE** of these)

Important Note:

If **You** have more than one of the following conditions **You** must contact the Medical Screening Line or if **You** have any other condition in addition to any of the following conditions **You** must declare all conditions to Medical Screening.

- |   |  |   |
|---|--|---|
| • Achilles Tendon Injury                              | • Epididymitis   | • Myalgia (Muscular Rheumatism)                                 |
| • Acid Reflux   | • Essential Tremor   | • Myalgic   |
| • Acne  | • Fungal Nail Infection                                      | • Encephalomyelitis (ME)  |
| • Anal Fissure/Fistula                                | • Gall Bladder Removal (if more than 3 months ago)           | • (if the only symptom is fatigue)                              |
| • Allergy (requiring non prescriptive treatment only) | • Gastric Reflux   | • Nasal Polyp(s)  |
| • Bells Palsy (in isolation only)                     | • Glandular Fever  | • Neuralgia, Neuritis   |
| • Benign Prostatic Enlargement                        | • Glaucoma   | • Nut Allergy   |
| • Blindness   | • Gout   | • Osteochondritis   |
| • Broken/Fractured Bones (not head or spine)          | • Hayfever   | • Osteoporosis,   |
| • Carpal Tunnel Syndrome                              | • Hemorrhoids (Piles)  | • Osteopaenia (fragile bones) NO vertebral (backbone) fractures |
| • Cataracts   | • Hernia (not Hiatus)  | • Pelvic Inflammatory Disease                                   |
| • Colds or Influenza                                  | • Hip Replacement  | • Psoriasis   |
| • Colitis (no hospital admissions in last 12 months)  | • Hyperthyroidism (Overactive Thyroid)                       | • Reflex Oesophagitis   |
| • Corneal Graft                                       | • Hypothyroidism (Underactive Thyroid)                       | • Rheumatism  |
| • Cuts & Abrasions (non self-inflicted)               | • Hypercholesterolaemia (high cholesterol)                   | • Rhinitis (Allergic)   |
|   | • Hysterectomy (provided carried out more than 6 months ago) | • Shingles (Herpes Zoster)                                      |
|   | • Irritable Bowel Syndrome                                   | • Shoulder Injury   |
|   |  | • Sinusitis   |
|   |  | • Sleep Apnoea  |

- Cyst Breast (Benign)
- Cyst Testicular (Benign)
- Cystitis
- Diarrhoea and/or vomiting (resolved)
- Dislocated Hip
- Dyspepsia
- Eczema
- Macular Degeneration
- Menorrhagia
- Migraine (confirmed diagnosis, no on-going investigations)
- Tendon Injury
- Tonsillitis
- Underactive Thyroid
- Urticaria
- Varicose Veins legs only (if GP has confirmed that client is fit to travel)

## GENERAL CONDITIONS

### Applicable to All Sections of Your Cover

**You** must comply with the following conditions to have the full protection of **Your** Cover.

If **You** do not comply **We** may at **Our** option cancel the Cover or refuse to deal with **Your** claim or reduce the amount of any claim payment.

#### 1. Dual Insurance

If at the time of any incident which results in a claim under this Cover, there is another insurance covering the same loss, damage, expense or liability **We** will not pay more than **Our** proportional share (not applicable to Section C – Personal Accident). Under Section B – Medical Expenses – In the event of private health insurance **Your** private health insurer must pay the first amount as stated in their Cover and **We** will commence cover once that limit has been reached.

#### 2. Reasonable Precautions

**You** must take and cause to be taken all reasonable precautions to avoid injury, illness, disease, loss, theft or damage and take and cause to be taken all practicable steps to safe guard **Your** property from loss or damage and to recover property lost or stolen.

#### 3. Maximum Age Limit

- Economy Cover – 65yrs.
- Super Cover – Single **Trip** 79yrs or Annual Multi **Trip** 75yrs.
- Super Plus Cover – Single **Trip** 79yrs or Annual Multi **Trip** 75yrs.
- Backpacker – 49yrs.
- Wintersports Cover – 65yrs

#### 4. Statutory Cancellation Rights

**You** may cancel this Cover within 14 days of receipt of this Cover documents (new business) or for Annual Multi **Trip** Cover the renewal date (the **Cancellation Period**) by writing to the issuing agent at the address shown on **Your** validation certificate during the **Cancellation Period**. Any premium already paid will be refunded to **You** providing **You** have not travelled and no claim has been made or is intended to be made and no incident likely to give rise to a claim has occurred.

If the **period of insurance** is less than 31 days, the cooling-off period does not apply.

The Cover will be cancelled with effect from its date of issue.

#### CANCELLATION OUTSIDE THE STATUTORY PERIOD

**You** may cancel this Cover at any time after the **Cancellation Period** by writing to the issuing agent at the address shown on **Your** validation certificate. If **You** cancel after the **Cancellation Period** no premium refund will be made.

**We** reserve the right to cancel the Cover by providing 21 days notice by registered post to **Your** last known address. No refund of premium will be made.

**NON-PAYMENT OF PREMIUMS**

**We** reserve the right to cancel this Cover immediately in the event of non-payment of the premium or in the event that the payment is made by fraudulent use of a credit/debit card or other payment method then this Cover automatically becomes null and void.

**GENERAL EXCLUSIONS****Applicable to All Sections of Your Cover**

**We** will not pay for claims arising directly or indirectly from:

1. War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, **Terrorism**, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power but this exclusion shall not apply to losses under Section B – Emergency Medical and Other Expenses and Section C – Personal Accident unless such losses are caused by nuclear, chemical or biological attack, or the disturbances were already taking place at the beginning of any **Trip**.
2. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste, from combustion of nuclear fuel, the radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly.
3. Loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.
4. The failure or fear of failure or inability of any equipment or any computer programme, whether or not **You** own it, to recognise or to interpret correctly or process any date as its true calendar date, or to continue to function correctly beyond that date.
5. **Your** pursuit of **Winter Sports** unless Sections S1 – S5 are shown as operative in the validation certificate and appropriate premium paid unless **You** have selected Super Plus on **Your** Cover which automatically includes **Winter Sports** once **You** are under 66yrs.
6. The following **Winter Sports** activities even if Sections S1 – S5 are shown as operative in the validation certificate: Off-piste skiing or snowboarding in areas designated as unsafe by local resort management unless accompanied by a locally qualified guide, skiing against local authoritative warning or advice, ski stunting, free-style skiing, ice hockey, bobbing, tobogganing, heli skiing, ski acrobatics, ski flying, ski jumping, ski mountaineering, snowcat skiing, glacier skiing, snow carting or the use of bob sleighs, luges or skeletons.
7. **Your** engagement in or practice of manual work including:
  - hands-on involvement with the installation, assembly, maintenance or repair of electrical, mechanical or hydraulic plant (other than in a purely managerial/ supervisory, sales or administrative capacity).
  - work in connection with a profession, business or trade for example: plumber, electrician, lighting or sound technician, carpenter, painter/decorator or builder.
  - working with wild animals of any kind.
  - work of any other kind except where shown as covered under Sports and Activities Grade 1.
8. **Your** engagement in or practice of: flying except as a fare paying passenger in a fully licensed passenger- carrying aircraft, the use of a motorised vehicle unless a full Irish or **United Kingdom** driving licence is held permitting the use of such vehicles in **Ireland** or the **United Kingdom**, professional entertaining, professional sports, racing (other than on foot), motor rallies and motor competitions.
9. **Your** participation in or practice of any sport or activity unless:
  - a) Shown as covered without charge in the Grade 1 list or
  - b) Shown as operative in **Your** validation certificate.
10. Any claim arising directly or indirectly from drug addiction, alcohol or solvent abuse by **You** or by reason of **You** being under the influence of alcohol (where a person in authority such as an officer of the law, or a **Medical Practitioner** or **Our** Senior Medical Officer confirms that Your intoxication was significant to the claim occurring) or drug(s) (other than drugs taken in accordance with treatment prescribed and directed by a **Medical Practitioner**, but not for the treatment of drug addiction), **Your** wilfully, self-inflicted injury or illness, suicide or attempted suicide, sexually transmitted diseases, self-exposure to needless peril (except in an attempt to save human life).

11. Any circumstances **You** are aware of at the time of taking out this cover or at the time of booking any **Trip** or any element of any **Trip** that could reasonably be expected to give rise to a claim on this cover.
12. **Your** own unlawful action or any criminal proceedings against **You**.
13. Any other loss, damage or additional expense following on from the event for which **You** are claiming unless **We** provide cover under this insurance. Examples of such loss, damage or additional expense would be the cost of replacing locks after losing keys, costs incurred in preparing a claim or loss of earnings following **Bodily Injury** or illness.
14. Operational duties as a member of the Armed Forces (other than claims arising from authorised leave being cancelled due to operational reasons, as provided for under sub section 4. of Section A – Cancellation or curtailment Charges.
15. Loss of enjoyment.
16. Costs which would have been payable if the event being the subject of a claim had not occurred (for example, the cost of meals which **You** would have paid for in any case).
17. Consequential losses of any nature, including, but not exclusively, phone calls and taxi fares, other than as specifically provided within the terms of this Cover.
18. A **Natural Disaster** unless **You** have purchased the optional **Travel Disruption** extension and this is indicated on **Your** validation certificate. This exclusion shall not apply to the **Catastrophe** cover outlined in **Your** Cover.
19. **Your** planned or actual travel to, through, or within the following locations - Cuba, Iran, Syria, North Korea, or the Crimea, Donetsk People's Republic (DNR), or Luhansk People's Republic (LNR) regions of Ukraine.
20. **Your** travel to a country or specific area or event to which the Travel Advice Unit of the Department of Foreign Affairs\* or the World Health Organisation (WHO) or similar body has advised against all or all but essential travel unless this advice relates only to **COVID**. In this instance, only claims relating to **COVID** will not be considered.  
\* **Contact details are:** 80 St. Stephen's Green, Dublin 2.  
Telephone: (01) 4780822 or refer to: [www.dfa.ie/services/traveladvice](http://www.dfa.ie/services/traveladvice)
21. **We** will not cover any claims caused by or relating to **COVID**. Nor will **We** cover any claims relating to any fear or threat of **COVID**. This general exclusion applies to all sections of cover apart from; subsection 2 and 3 of Section A - Cancellation or curtailment and Section B – Emergency Medical and other Expenses, provided that **You** meet the conditions outlined in these sections and that **You** have not travelled to a country or specific area or event for which the Travel Advice Unit of the Department of Foreign Affairs (DFA) <https://www.dfa.ie/travel/travel-advice/> or the World Health Organisation (WHO) or similar body has advised against all or all but essential travel.
22. Events where coverage may imply that the Insurer must make any provision or payment of any nature, return of premiums included, to the extent that said provision or said payments may expose the Insurer to any sanction, prohibition or restriction by virtue of United Nations resolutions or trade or economic sanctions, laws or regulations of the European Union, the United Kingdom or the United States of America, or any others that currently exist or may exist in the future.
23. Events that take place in those countries which the Irish Department of Foreign Affairs, the World Health Organisation (WHO) or other similar body has advised against all or all but essential travel, that are subject to an embargo by the UN Security Council or other international organisations, or events that occurred in any conflict zone whether war has been declared or not, or if there have been national or international interventions with the use of force or coercion.

## CLAIMS CONDITIONS

**You** must comply with the following conditions to have the full protection of **Your** Cover.

If **You** do not comply **We** may at **Our** option cancel the Cover or refuse to deal with **Your** claim or reduce the amount of any claim payment.

When contacting the claims department, please have the following information to hand:

Ref: [BlueAnnualtravelinsurance.com](http://BlueAnnualtravelinsurance.com) ROI

- Name of **Your** Cover and where it was purchased
- Cover number
- Date insurance purchased z Resort and country visited
- Value of claim
- Brief circumstances
- Travel dates
- Incident date

Failure to have the above information to hand may result in **Your** claim being delayed.

### 1. Claims

#### **MAWDY Travel Claims**

22-26 Prospect Hill, Galway.

Tel: 091 560 638 or from outside **Ireland** +353 91 560 638

#### **Legal Expenses Claims**

**You** must notify **Us** in respect of claims made under the Legal Expenses Section by E-mail:

[LegalAssistance@mawdy.com](mailto:LegalAssistance@mawdy.com) or Tel: 091 545 962

The notification must be made within 31 days or as soon as possible thereafter following any **Bodily Injury**, illness, disease, incident, event, redundancy or the discovery of any loss, theft or damage which may give rise to a claim under this Cover.

**You** must also inform **Us** if **You** are aware of any writ, summons or impending prosecution. Every communication relating to a claim must be sent to **Us** without delay.

**You** or anyone acting on **Your** behalf must not negotiate admit or repudiate any claim without **Our** written consent.

**We** may also pursue any claim to recover any amount due from a third party in the name of anyone claiming cover under this Cover.

**You** or **Your** legal representatives must supply at **Your** own expense all information, evidence, details of household insurance and medical certificates as required by **Us**. **We** reserve the right to require **You** to undergo an independent medical examination at **Our** expense. **We** may also request and will pay for a postmortem examination.

**You** must retain any property which is damaged, and, if requested, send it to **Us** at **Your** own expense. If **We** pay a claim for the full value of the property and it is subsequently recovered or there is any salvage then it will become **Our** property. **We** may refuse to reimburse **You** for any expenses for which **You** cannot provide receipts or bills.

### 2. Subrogation

**We** are entitled to take over and conduct in **Your** name the defence and settlement of any legal action. **We** may also take proceedings at **Our** own expense and for **Our** own benefit, but in **Your** name, to recover any payment **We** have made under this Cover to anyone else.

### 3. Fraud

**You** must not act in a fraudulent manner.

If **You** or anyone acting for **You**:

- a) Make a claim under the Cover knowing the claim to be false or fraudulently exaggerated in any respect or
- b) Make a statement in support of a claim knowing the statement to be false in any respect or
- c) Submit a document in support of a claim knowing the document to be forged or false in any respect or
- d) Make a claim in respect of any loss or damage caused by **Your** wilful act or with **Your** connivance

Then

- a) **We** shall not pay the claim
- b) **We** shall not pay any other claim which has been or will be made under this Cover
- c) **We** may at **Our** option declare the Cover void
- d) **We** shall be entitled to recover from **You** the amount of any claim already paid under this Cover
- e) **We** shall not make any return of premium
- f) **We** may inform the Police of the circumstances.

## SPORTS AND ACTIVITIES – GRADE 1

**(No Additional Charge)**

**You** are covered under Section B – Emergency Medical Expenses and Section C – Personal Accident sections for the following activities automatically, provided that the activity is on an **Incidental** basis **You** do not need to contact **Your** issuing agent.

- Archery
- Badminton
- Baseball
- Basketball
- Beach Games
- Bungee Jump (1)
- Camel/Elephant Riding +
- Canoeing (Grades 1 to 3) – Life jacket and helmet must be worn
- Clay Pigeon Shooting +
- Cricket
- Cycling – helmet recommended (Mountain Biking / Cycle Touring – see Grade 2)
- Dinghy Sailing +
- Fell Walking
- Fencing
- Fishing
- Flying as a fare paying passenger in a fully licensed passenger carrying aircraft
- Football
- GAA Football
- Golf
- Hiking (under 2,000 metres altitude)
- Hockey
- Horse Riding (up to 7 days, no Polo, Hunting, Jumping) – wearing a helmet
- Ice Skating (Rink)
- Jet Boating +
- Jet Ski-ing +
- Jogging
- Kayaking (Grades 1 to 3) – Life jacket and helmet must be worn
- Work (see definitions)
- Marathon Running
- Motorcycling up to 125cc (with the appropriate Irish motorcycle licence, wearing a crash helmet, no racing) +
- Netball
- Orienteering
- Paintballing +
- Parascending/Parasailing (over water)
- Pony Trekking – wearing a helmet
- Quad biking up to 50cc (wearing a crash helmet, no racing) +
- Racquetball
- Rambling
- River Canoeing (Up to Grade 3) – Life jacket and helmet must be worn
- Roller Skating
- Roller Blading
- Rounders
- Rowing
- Running – sprint/ long distance
- Safari (Irl/UK organised)
- Sail Boarding
- Sailing within territorial waters +
- Scuba Diving\* down to 30 metres if qualified and not diving alone or accompanied by a qualified instructor (see notes below)
- Skateboarding
- Snorkelling
- Squash
- Surfing (under 14 days)
- Tennis
- Tour Operator Safari
- Track Events
- Trekking (under 2,000 metres altitude)
- Volleyball
- War Games + (with eye protection)
- Water Polo
- Water Skiing
- White Water Rafting (Grades 1 to 3) – Life jacket and helmet must be worn
- Windsurfing
- Yachting (racing/crewing inside territorial waters) +

\* Scuba diving – scuba diving to the following depths. Provided **You** are diving under the direction of an accredited dive marshal, instructor or guide. Alternatively, if qualified, within the guidelines of the relevant diving or training agency or organisation and not diving alone:

- PADI Open Water – 18 metres
- PADI Advanced Open Water – 30 metres\*
- BSAC Ocean Diver – 20 metres
- BSAC Sports Diver – 30 metres\*
- BSAC Dive Leader – 30 metres\*

**We** must agree with any equivalent qualification. If **You** do not hold a qualification, **We** will only cover **You** to dive to a depth of 18 metres.

**You** will not be covered under this Cover if **You** travel by air within 24 hours after participating in Scuba Diving.

\* For the purposes of diving under Sports and Activities Grade 1.

\*\* Please see paragraph 7. in the General exclusions applicable to all sections of **Your** Cover for details of manual work which cannot be covered under this Cover.

+ Cover under Section F – Personal Liability for those sports and activities marked with a + is excluded.

## SPORTS AND ACTIVITIES – GRADE 2

### Subject to Additional Premium

50% Loading to cover all activities or €30 per activity

**You** can be covered under Section B – Emergency Medical Expenses and Section C – Personal Accident sections for the following activities provided that the activity is on an **Incidental** basis (unless stated otherwise below) and subject to an additional premium being paid and shown on the validation certificate.

Medical **Excess** increased to €320

Personal Accident Sum insured reduced by 50%

Personal Liability Cover is Excluded

- |  |  |
|--|--|
| • Boxing Training (no contact)   | • Parascending/Parasailing (over water, non- <b>Incidental</b> )   |
| • Bungee Jump (up to 3 additional)   | • Rambling/Trekking between 2,001m and 4,200m  |
| • Black Water Rafting (Grade 1 to 4) Life jacket and helmet must be worn       | • Safari (non <b>Irl/UK</b> organised)   |
| • Camel/Elephant Riding/Trekking (non- <b>Incidental</b> )                     | • Scuba Diving* (non- <b>Incidental</b> / down to 50m if qualified and not diving alone or accompanied by a qualified instructor (see notes below) |
| • Cycle Touring / Cycling Holiday – helmet must be worn                        | • Sea Canoeing   |
| • Go Karting – wearing a crash helmet  | • Sea Fishing (non- <b>Incidental</b> )  |
| • Horse Riding – wearing a helmet (no Polo, Hunting, Jumping)                  | • Surfing  |
| • Hot Air Ballooning – organised pleasure rides only (non- <b>Incidental</b> ) | • Tandem Skydive (up to 2 jumps max)   |
| • Hurling  | • Triathlon  |
| • Jet Skiing (non- <b>Incidental</b> )   | • White Water Rafting (Grade 4 ) – Life jacket and helmet must be worn   |
| • Martial Arts (Training only)   | • Waterskiing/Wind- surfing/Snorkelling (non- <b>Incidental</b> )  |
| • Mountain Biking – helmet must be worn  |  |

\* Scuba diving – scuba diving to the following depths. Provided **You** are diving under the direction of an accredited dive marshal, instructor or guide. Alternatively, if qualified, within the guidelines of the relevant diving or training agency or organisation and not diving alone:

- PADI Open Water – 18 metres
- PADI Advanced Open Water – 30 metres\*

- BSAC Ocean Diver – 20 metres
- BSAC Sports Diver – 35 metres\*
- BSAC Dive Leader – 50 metres\*

**We** must agree with any equivalent qualification. If **You** do not hold a qualification, **We** will only cover **You** to dive to a depth of 18 metres.

**You** will not be covered under this Cover if **You** travel by air within 24 hours after participating in Scuba Diving.

\* For the purposes of diving under Sports and Activities Grade 2.

## SPORTS AND ACTIVITIES – GRADE 3

### Subject to Additional Premium

100% Loading to cover all activities or €75 per activity

**You** can be covered under Section B – Emergency Medical Expenses and Section C – Personal Accident sections for the following activities provided that the activity is on an **Incidental** basis (unless stated otherwise below) and subject to an additional premium being paid and shown on the validation certificate.

Medical **Excess** increased to €650

Personal Accident Sum insured reduced by 50%

Personal Liability Cover is Excluded

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>• Abseiling</li> <li>• American Football</li> <li>• Canoeing (Grade 4) – Life jacket and helmet must be worn</li> <li>• Gliding</li> <li>• Kayaking (Grade 4) – Life jacket and helmet must be worn</li> <li>• Motorcycling over 125cc (with the appropriate Irish motorcycle licence, wearing a crash helmet, no racing)</li> <li>• Paragliding</li> </ul> | <ul style="list-style-type: none"> <li>• Rambling/Trekking between 4,201m and 6,000m (professionally organised <b>Trips</b> with experienced operators, maximum age 45 years)</li> <li>• Rugby</li> <li>• Sand Yachting</li> <li>• Yachting (racing/ crewing) – outside territorial waters</li> <li>• Zip Lining/Trekking (safety harness must be worn)</li> </ul> |
|--|--|

## SPORTS AND ACTIVITIES – GRADE 4

### Subject to Additional Premium

200% Loading to cover all activities or €112.50 per activity

**You** can be covered under Section B – Emergency Medical Expenses and Section C – Personal Accident sections for the following activities provided that the activity is on an **Incidental** basis (unless stated otherwise below) and subject to an additional premium being paid and shown on the validation certificate.

Medical **Excess** increased to €650

Personal Accident Sum insured reduced by 50%

Personal Liability Cover is Excluded

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>• Canyoning</li> <li>• Hang Gliding</li> <li>• High Diving under 5m (excluding cliff diving)</li> <li>• Horse Jumping – wearing a helmet (no Polo, Hunting)</li> </ul> | <ul style="list-style-type: none"> <li>• Kite Surfing</li> <li>• Micro Lighting</li> <li>• Parasailing/Parascending (over land, non-<b>Incidental</b>)</li> <li>• Rock Climbing (under 2,000m)</li> </ul> |
|---|---|

- Rock Scrambling (under 4,000m)

## EMERGENCY AND MEDICAL SERVICE

**Contact the MAWDY Emergency Assistance Service on +353 91 560 637**  
**Ref: Annualtravelinsurance.com ROI Cover**

In the event of **Your Bodily Injury** or Illness which may lead to in-patient hospital treatment or incur expenses over €500 or before any arrangements are made to extend **Your Trip** or before any arrangements are made for repatriation or in the event of **Curtailement** necessitating Your early return to **Your Home** area **You** must contact the Emergency Assistance Service. The service is available to **You** and operates 24 hours a day, 365 days a year for advice, assistance, making arrangements for hospital admission, repatriation and authorisation of medical expenses. If this is not possible because the condition requires immediate emergency treatment **You** must contact the Emergency Assistance Service as soon as possible.

Private medical treatment is not covered unless authorised specifically by the Emergency Assistance Service.

### Medical Assistance Abroad

The Emergency Assistance Service has the medical expertise, contacts and facilities to help should **You** be injured in an accident or fall ill. The Emergency Assistance Service will also arrange transport to **Your Home** area when this is considered to be medically necessary or when **You** have notice of serious illness or death of a **Close Relative** at **Home**.

### Repatriation of Patients

If, in the opinion of **Our** Medical Adviser, it would be preferable to repatriate a patient to **Ireland**, **We** will organise the repatriation. If **You** do not comply with this decision **We** reserve the right to withdraw cover with immediate effect.

**The decision on the method of repatriation will be at the discretion of Our Senior Medical Officer subject to consultation with the doctor in attendance.**

Remember that in the case of patients requiring repatriation, the attending doctor must provide a certificate confirming that the patient is fit to travel, since without this the airline company operators reserve the right to refuse to carry any sick or injured person.

### Payment for Medical Treatment Abroad

If **You** are admitted to a hospital/clinic while abroad, the Emergency Assistance Service will arrange for medical expenses covered by this Cover to be paid direct to the hospital/clinic. To take advantage of this benefit someone must contact the Emergency Assistance Service for **You** as soon as possible.

### Reciprocal Health Agreements

If **You** are an Irish resident **You** are entitled to health care through the public system in countries of the European union (EU), European Economic Area (EEA) and Switzerland if **You** become ill or injured while on a temporary stay there.

If **You** are travelling to another EU /EEA country or Switzerland, **We** strongly recommend **You** apply for and obtain a European Health Insurance Card for yourself and/or family and make sure that any medical treatment is provided at hospitals or by doctors working within the terms of the reciprocal health care agreement, unless the Emergency Assistance Service agree otherwise. If **You** are admitted to a private clinic **You** may be transferred to a public hospital as soon as the transfer can be arranged safely.

If **You** are currently a VHI, Irish Life and Laya Healthcare member **You** must notify the relevant private medical insurance assistance company at the time of claiming as per contact details below.

VHI Assistance: Tel +353 1 448 2444

VHI Assistance USA & Canada: Tel 1800 364 9022  
 Laya Healthcare Assistance: Tel +353 21 422 2204  
 Irish Life: Tel +353 1 481 7840

### Australia

If **You** require medical treatment in Australia **You** must enrol with a local MEDICARE office. **You** do not need to enrol on arrival but **You** must do this after the first occasion **You** receive treatment.

In-patient and out-patient treatment at a public hospital is then available free of charge. Details of how to enrol and the free treatment available can be obtained by the Australian Embassy in **Ireland** by contacting 01 664 5300 or [www.australianembassy.ie](http://www.australianembassy.ie).

If **You** are visiting Australia on a Student Visa **You** are not covered by MEDICARE. Alternatively please call the Emergency Assistance Service for guidance.

If **You** are admitted to hospital contact must be made with the Emergency Assistance Service as soon as possible and their authority obtained in respect of any treatment NOT available under MEDICARE.

## INSURANCE

### Section A: Cancellation Or Curtailment Charges

#### What is Covered

**We** will pay **You**, up to the amount shown in the **Cover Schedule** for:

- a) **Your Irrecoverable** unused travel and accommodation costs and other pre-paid charges (including sports, concert and entertainment tickets) which **You** have paid or are contracted to pay if Cancellation of the **Trip** is necessary and unavoidable as a result of any of the following events occurring after payment of the premium relating to **Your** Cover and occurring within the **Period of Insurance**;
- or
- b) **Your** reasonable additional travel expenses and loss of **Irrecoverable** unused accommodation costs and other unused pre-paid charges (including sports, concert and entertainment tickets) which **You** have paid or are contracted to pay if **Your Trip** is **Curtailed** as a result of any of the following events occurring after payment of the premium relating to **Your** cover and occurring within the **Period of Insurance**;
1. The death, **Bodily Injury**, illness of;
    - a) **You**
    - b) **Your Travelling Companion**
    - c) any person with whom **You** have arranged to reside temporarily
    - d) **Your Close Relative**
    - e) **Your Close Business Associate**
  2. **You, Your Travelling Companion** or any person with whom **You** have arranged to stay with during **Your Trip** receiving a **COVID** diagnosis within 14 days of the start of the **Trip** or in the case of being admitted to hospital with a **COVID** diagnosis within 28 days of the start of the **Trip**.
  3. **Your Close Relative** or **Close Business Associate** being admitted to hospital with a **COVID** diagnosis at the time of the **Trip** and/or the death of **Your Close Relative** or **Close Business Associate** due to **COVID** at the time of the **Trip**.
  4. If **You** become pregnant after **We** have sold **You** this Cover, and **You** will be more than 32 weeks pregnant (or 24 weeks if **You** know **You** are having more than one baby) at the start of, or during, **Your Trip**. Or, **Your** doctor advises that **You** are not fit to travel because **You** are suffering from **Complications of Pregnancy and Childbirth**. If **You** will be more than 32 weeks pregnant (or 24 weeks if **You** know **You** are having more than one baby) at the start of, or during, **Your Trip** and **You** still choose to travel, **You** may not claim for cutting short **Your Trip** unless as a result of the **Complications of Pregnancy and Childbirth**.
  5. Jury service attendance or being called as a witness at a Court of Law of **You** or **Your Travelling Companion**.
  6. Redundancy (which qualifies for payment under the current Irish redundancy payment legislation and at the time of booking the **Trip** there was no reason to believe anyone would be made redundant) of **You** or **Your Travelling Companion**.

7. **You** or any person who **You** are travelling or have arranged to travel with are a member of the Armed Forces, Territorial Army, Police, Fire, Nursing or Ambulance Services or employees of a Government Department and have **You**/their authorised leave cancelled or are called up for operational reasons, provided that such cancellation or **Curtailement** could not reasonably have been expected at the time when **You** purchased this insurance or at the time of booking any **Trip**.
8. In the event of Burglary at **Your Home** within 48 hours of **Your** departure or the Police requesting **You** to return to **Your Home** due to serious damage to **Your Home** caused by fire, aircraft, explosion, storm, flood, subsidence, malicious persons or theft.

### Special Conditions Relating to Claims

1. **You** must obtain a medical certificate from a **Medical Practitioner** abroad and prior approval of the Emergency Assistance Service to confirm the necessity to return **Home** prior to **Curtailement** of the **Trip** due to death, **Bodily Injury**, illness or **Complications of Pregnancy and Childbirth**.
2. If **You** fail to notify the travel agent, tour operator or provider of transport/accommodation, at the time it is found necessary to cancel the **Trip**, the amount **We** will pay will be limited to the cancellation charges that would have otherwise applied.
3. All claims relating to cancellation due to a medical reason or **Complications of Pregnancy and Childbirth** must be supported by relevant documentation confirming that attendance to a **Medical Practitioner** occurred and that advice was given by that **Medical Practitioner** (in the case of stress, anxiety, depression or any other mental or nervous disorder a consultant specialising in the relevant field) to cancel a **Trip** prior to cancellation of that **Trip**.
4. As often as **We** require **You** shall submit to medical examination at **Our** expense. In case of the death of an **Insured Person** **We** shall be entitled to have a postmortem examination carried out at **Our** expense. **You** must supply **Us** with a written statement substantiating **Your** claim, together with (at **Your** own expense) all certificates, information, evidence and receipts that **We** require.
5. **You** will be required to reimburse to **Us**, within one month of **Our** request to **You**, any costs or expenses **We** have paid out on **Your** behalf which are not covered under the terms of the Insurance.

### What is Not Covered

1. Under point 2 or 3 of 'What is Covered', **You** will not be covered for any claim event occurring within 14 days of the date **You** purchased this insurance or the time of booking any **Trip**, whichever is the later, except where the insurance is purchased within 48 hours of booking the **Trip**.
2. There will be no cover for Cancelling or **Curtailement** of **Your Trip** due to: (a) restrictions implemented by any government or administration; or (b) actions taken by a transport or accommodation provider; if those restrictions or actions relate to a pandemic illness (as declared by the World Health Organisation), including **COVID**.
3. The **Excess** as shown in the **Cover Schedule**.
4. The cost of **Recoverable** airport charges and levies.
5. Any claims arising directly or indirectly from:
  - a) Redundancy caused by or resulting from misconduct leading to dismissal or from resignation or voluntary redundancy or where a warning or notification of redundancy was given prior to the date this insurance is affected by **You** or the time of booking any **Trip**.
  - b) Circumstances known to **You** prior to the date this insurance is effected by **You** or the time of booking any **Trip** which could reasonably have been expected to give rise to cancellation or **Curtailement** of the **Trip**.
  - c) Any claim that comes from pregnancy or childbirth, unless a qualified **Medical Practitioner** confirms that the claim comes from the **Complications of Pregnancy and Childbirth**.
6. Claims arising directly or indirectly as a result of **Your** failure to comply with the Important conditions relating to health.
7. Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
8. Travel tickets paid for using any mileage or supermarket reward scheme for example Air Miles.
9. **Your** failure to obtain the required passport or visa.
10. **Your** disinclination to travel for any reason.
11. Anything mentioned in the general exclusions.

**YOU SHOULD ALWAYS CONTACT THE EMERGENCY ASSISTANCE SERVICE BEFORE CURTAILMENT.**

## Section B: Emergency Medical and Other Expenses

### What is Covered

**We** will pay **You**, up to the amount shown in the **Cover Schedule**, for the following expenses which are necessarily incurred as a result of **You** suffering unforeseen **Bodily Injury**, illness, disease or **Complications of Pregnancy and Childbirth**:

1. Emergency medical, surgical, hospital, ambulance and nursing fees and charges incurred:
  - a) outside **Ireland** or the **United Kingdom** or
  - b) within the Channel Islands.
2. Emergency dental treatment for the immediate relief of pain (to natural teeth only) up to a limit of €250 incurred:
  - a) outside **Ireland** or the **United Kingdom** or
  - b) within the Channel Islands.
3. In the event of **Your** death:
  - a) outside **Ireland** or the **United Kingdom** the reasonable additional cost of funeral expenses abroad up to a maximum of €7,000 plus the reasonable cost of conveying **Your** ashes to **Your Home**, or the additional costs of returning **Your** remains to **Your Home**.
  - b) within **Ireland** or the **United Kingdom** the reasonable additional cost of returning **Your** body to **Your Home**.
4. Reasonable additional transport (economy class) or accommodation expenses incurred, up to the standard of **Your** original booking, if it is medically necessary for **You** to stay beyond **Your** scheduled return date. This includes, with the prior authorisation of the Emergency Assistance Service, reasonable additional transport or accommodation expenses for a friend, **Travelling Companion** or **Close Relative** to remain with **You** or travel to **You** from **Ireland** or the **United Kingdom** or escort **You** and additional travel expenses to return **You** to **Your Home** if **You** are unable to use the return ticket.
5. In the event of a positive diagnosis of **COVID** abroad, the policy will cover reasonable additional transport (economy class) or accommodation expenses incurred, up to the standard of **Your** original booking if **You** must extend **Your** stay up to the amounts of €2,000. This is €2,000 per **Trip**, not per person.
6. With the prior authorisation of the Emergency Assistance Service, the additional costs incurred in the use of air transport or other suitable means, including qualified attendants, to repatriate **You** to **Your Home** if it is medically necessary. Repatriation expenses will be in respect only of the identical class of travel utilised on the outward journey unless the Emergency Assistance Service agree otherwise.

### Special Conditions Relating to Claims

1. **You** must give notice immediately to the Emergency Assistance Service of any **Bodily Injury** or illness which necessitates **Your** admittance to hospital as an in-patient. **You** must obtain prior authorisation from the Emergency Assistance Service before any arrangements are made for **Your** repatriation or before any arrangements are made to extend **Your Trip** due to **Your Bodily Injury** or illness.
2. In the event of **Your Bodily Injury** or illness **We** reserve the right to relocate **You** from one hospital to another and arrange for **Your** repatriation to **Ireland** or the **United Kingdom** at any time during the **Trip**. **We** will do this if in the opinion of the **Medical Practitioner** in attendance or the Emergency Assistance Service **You** can be moved safely and/or travel safely to **Ireland** or the **United Kingdom** to continue treatment.
3. **You** must claim against **Your** private health insurer first for any inpatient medical expenses abroad up to **Your** Cover limit.
4. As often as **We** require **You** shall submit to medical examination at **Our** expense. In case of the death of an **Insured Person** **We** shall be entitled to have a postmortem examination carried out at **Our** expense. **You** must supply **Us** with a written statement substantiating **Your** claim, together with (at **Your** own expense) all certificates, information, evidence and receipts that **We** require. **You** will be required to reimburse to **Us**, within one month of **Our** request to **You**, any costs or expenses **We** have paid out on **Your** behalf which are not covered under the terms of the Insurance.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Any claims arising directly or indirectly in respect of:
  - a) Costs of telephone calls other than:
    - i) Calls to the Emergency Assistance Service notifying and dealing with the problem for which **You** are able to provide receipts or other reasonable evidence to show the cost of the calls and the numbers **You** telephoned
    - ii) Any costs incurred by **You** when **You** receive calls on **Your** mobile telephone from the Emergency Assistance Service for which **You** are able to provide receipts or other reasonable evidence to show the cost of the calls.
  - b) The cost of taxi fares, other than those for travel to or from hospital relating to **Your** admission, discharge, attendance for outpatient treatment or appointments or for collection of medication prescribed by the hospital.
  - c) The cost of treatment or surgery, including exploratory tests, which are not directly related to the **Bodily Injury** or illness which necessitated **Your** admittance into hospital.
  - d) Any expenses which are not usual, reasonable or customary to treat **Your Bodily Injury** or illness.
  - e) Any form of treatment or surgery which in the opinion of the **Medical Practitioner** in attendance and the Emergency Assistance Service can be delayed reasonably until **You** return to **Ireland** or the **United Kingdom**.
  - f) Expenses incurred in obtaining or replacing medication, which at the time of departure is known to be required or to be continued outside **Ireland** or the **United Kingdom**.
  - g) Additional costs arising from single or private room accommodation.
  - h) Treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre unless agreed by the Emergency Assistance Service.
  - i) Any expenses incurred after **You** have returned to **Ireland** or the **United Kingdom**.
  - j) Expenses incurred as a result of a tropical disease where **You** have not had the recommended inoculations and/or taken the recommended medication.
  - k) Expenses incurred as a result of **Your** decision not to be repatriated after the date when in the opinion of the Emergency Assistance Service it is safe to do so.
  - l) Any claim that comes from pregnancy or childbirth, unless a qualified **Medical Practitioner** confirms that the claim comes from the **Complications of Pregnancy and Childbirth**.
3. Claims arising directly or indirectly as a result of **Your** failure to comply with the Important conditions relating to health.
4. Any amount **Recoverable** under any National or Private Health Insurance Scheme, Reciprocal Health Arrangement (such as European Health Insurance Card – previously E111) or any other source.
5. Anything mentioned in the general exclusions.

## Section C: Hospital Benefit

### What is Covered

**We** will pay **You**, the amount shown in the **Cover Schedule**, for every complete 24 hours **You** have to stay in hospital as an in-patient or are confined to **Your** accommodation on the order of a **Medical Practitioner** outside **Ireland** and the **United Kingdom** as a result of **Bodily Injury** or illness **You** sustain. **We** will pay the amount above in addition to any amount payable under Section B – Emergency Medical and Other Expenses. This payment is meant to help **You** pay for additional expenses such as taxi fares and phone calls incurred during **Your** stay in hospital.

### Special Conditions Relating to Claims

**You** must give notice as soon as possible to the Emergency Assistance Service of any **Bodily Injury** or illness which necessitates **Your** admittance to hospital as an in-patient, or confinement to **Your** accommodation on the orders of a **Medical Practitioner**.

### What is Not Covered

1. Any claims arising directly or indirectly from:
  - a) Any additional period of hospitalisation relating to treatment or surgery, including exploratory

- tests, which are not directly related to the **Bodily Injury** or illness which necessitated **Your** admittance into hospital.
- b) Hospitalisation relating to any form of treatment or surgery which in the opinion of the **Medical Practitioner** in attendance and the Emergency Assistance Service can be delayed reasonably until **Your** return to **Ireland** or the **United Kingdom**.
  - c) Any additional period of hospitalisation relating to treatment or services provided by a convalescent or nursing home or any rehabilitation centre.
  - d) Hospitalisation, or confinement to **Your** accommodation on the orders of a **Medical Practitioner** as a result of a tropical disease where **You** have not had the recommended inoculations and/or taken the recommended medication.
  - e) Any additional period of hospitalization, or confinement to **Your** accommodation on the orders of a **Medical Practitioner** following **Your** decision not to be repatriated after the date when in the opinion of the Emergency Assistance Service it is safe to do so.
2. Any claim that comes from pregnancy or childbirth, unless a qualified **Medical Practitioner** confirms that the claim comes from the **Complications of Pregnancy and Childbirth**.
  3. Claims arising directly or indirectly as a result of **Your** failure to comply with the Important conditions relating to **Your** health.
  4. Anything mentioned in the general exclusions.

## Section D: Personal Accident

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

*Loss of limb* – means loss by permanent severance of an entire hand or foot or the total and permanent loss of use of an entire hand or foot.

*Loss of sight* – means total and irrecoverable loss of sight which shall be considered as having occurred:

- a) in both eyes if **Your** name is added to the NCBI Register of Blind Persons on the authority of a fully qualified ophthalmic specialist and
- b) in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen scale.

### What is Covered

**We** will pay **You**, the amount shown in the **Cover Schedule**, if **You** sustain **Bodily Injury** which shall solely and independently of any other cause, result within two years in **Your** death, *Loss of limb*, *Loss of sight* or **Permanent Total Disablement**.

### Special Conditions Relating to Claims

**Our Medical Practitioner** may examine **You** as often as they deem necessary in the event of a claim.

### Provisions

1. Benefit is not payable to **You**:
  - a) Under more than one of items shown in the **Cover Schedule**.
  - b) Under **Permanent Total Disablement**, until one year after the date **You** sustain **Bodily Injury**.
  - c) Under **Permanent Total Disablement**, if **You** are able or may be able to carry out any relevant employment or relevant occupation.
2. The death benefit payment will be paid into the deceased's estate.

### What is Not Covered

1. Claims arising directly or indirectly as a result of **Your** failure to comply with the Important conditions relating to health.
2. **Your** disablement caused by mental or psychological trauma not involving **Your Bodily Injury**.
3. Disease or any physical defect, infirmity or Illness which existed prior to the commencement of the **Trip**.
4. Anything mentioned in the general exclusions.

## Section E: Baggage, Baggage Delay and Passport

### What is Covered

1. **We** will pay **You** up to the amount shown in the **Cover Schedule** for the accidental loss of, theft of or damage to **Baggage**. The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (or **We** may at **Our** option replace, reinstate or repair the lost or damaged

**Baggage**). The maximum **We** will pay for any **Single Item**, and in total for **Valuables** is as shown in the **Cover Schedule**.

2. **We** will also pay **You** up to the amounts shown in the **Cover Schedule** for:
  - a) **Delayed Baggage** – The emergency replacement of clothing, medication and toiletries if the **Baggage** is temporarily lost in transit during the outward journey and not returned to **You** within 12 hours, provided written confirmation is obtained and sent to **Us** from the carrier, confirming the number of hours the **Baggage** was delayed. Payment of the relevant benefit is subject to receipts for emergency items being submitted. If the loss is permanent the amount paid will be deducted from the final amount to be paid under this section.
  - b) **Replacement of Passport** – reasonable additional travel and accommodation expenses necessarily incurred outside **Ireland** or the **United Kingdom** to obtain a replacement of **Your** lost or stolen passport or visa which has been lost or stolen outside **Ireland** or the **United Kingdom**.
  - c) **Emergency Passport Travel** – reasonable additional transport costs if **You** are unable to make **Your** pre booked return flight **Home** following the loss or theft of **Your** passport within 48 hours of **Your** pre booked return flight **Home**.

**You** may claim only under one of either Section E – **Baggage, Baggage Delay and Passport** or Section V – **Wedding/Civil Partnership Cover** for the same event, not both.

### Duty to Take Care

**You** must take proper and due care of **Your** property including examination of **Your** luggage on arrival at **Your** destination. In the event of loss or damage, **You** must take all reasonable steps to safeguard and recover **Your** property. **You** must not leave **Your** property unsecured or outside **Your** reach or unattended at any time in a place to which the public have access or in the custody of a person who is not a **Travelling Companion**.

### Special Conditions Relating to Claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Baggage**. A Holiday Representatives Report is not sufficient.
2. If **Baggage** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **You** must report to them, in writing, details of the loss, theft or damage and obtain an official report from an appropriate local authority. If **Baggage** is lost, stolen or damaged whilst in the care of an airline **You** must:
  - a) obtain a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this Cover.
3. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help **You** to substantiate **Your** claim.
4. If **You** are claiming for damaged or destroyed goods **You** must produce an estimate of repair from a reputable dealer confirming the estimated cost of repair (salvage to be retained until claim completed)

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule** (except claims under subsection 2. a) above).
2. Loss, theft of or damage to **Valuables** or **Your** passport left **Unattended** at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe or safety deposit box.
3. Loss, theft of or damage to **Baggage** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
  - a) anytime between 9pm and 8am local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a Police report.
4. Loss or damage due to delay, confiscation or detention by customs or other authority.
5. Loss, theft of or damage to unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, mobile telephones or telecommunications equipment

- of any kind, deeds, manuscripts, securities, perishable goods, surfboards/sailboards, bicycles, marine equipment or craft or any related equipment or fittings of any kind, **Ski Equipment** and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).
6. Loss or damage due to cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or accident to the aircraft, sea vessel, train or vehicle in which they are being carried. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **Baggage**.
  7. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **Baggage**.
  8. Claims arising for **Personal Money and Travel Documents**.
  9. Loss or damage due to breakage of sports equipment or damage to sports clothing whilst in use.
  10. Loss, theft of or damage to business goods, samples, tools of trade, motor accessories and other Items used in connection with **Your** business, trade, profession or occupation.
  11. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
  12. Cover for temporary or permanent loss of **Baggage** for which **You** have received full compensation from someone else. Any partial compensation from another source will be deducted from the final amount payable under this section.
  13. Anything mentioned in the general exclusions.

## Section F: Personal Money and Travel Documents

### What is Covered

**We** will pay **You**, up to the amount shown in the **Cover Schedule**, for the accidental loss of, theft of or damage to **Personal Money and Travel Documents** (including driving licence).

### Special Conditions Relating to Claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Personal Money and Travel Documents**. A Holiday Representatives report is not sufficient.
2. Receipts for items lost, stolen or damaged should be retained, including foreign currency exchange receipts showing the amount, as these will help **You** to substantiate **Your** claim.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Loss, theft of or damage to **Personal Money and Travel Documents** and documents left **Unattended** at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe or safety deposit box.
3. Loss, theft of or damage to travellers' cheques if **You** have not complied with the issuers conditions or where the issuer provides a replacement service.
4. Loss or damage due to delay, confiscation or detention by customs or other authority.
5. Loss or damage due to depreciation in value, variations in exchange rates or shortages due to error or omission.
6. Anything mentioned in the general exclusions.

## Section G: Personal Liability

### What is Covered

On condition no other insurance is in place, **We** will pay **You** up to the amount shown in the **Cover Schedule**, (inclusive of legal costs and expenses) against any amount **You** become legally liable to pay as compensation for any claim or series of claims arising from any one event or source of original cause in respect of accidental:

1. **Bodily Injury** death illness or disease to any person who is not in **Your** employment or who is not a **Close Relative**, or member of **Your** household or **Travelling Companion**.
2. Loss of or damage to property that does not belong to and is neither in the charge of or under the

control of **You**, a **Close Relative**, **Travelling Companion**, anyone in **Your** employment or any member of **Your** household other than any temporary holiday accommodation occupied (but not owned) by **You**.

### Special Conditions Relating to Claims

1. **You** must give **Us** written notice as soon as possible of any incident, which may give rise to a claim.
2. **You** must forward every letter, writ, summons and process to **Us** as soon as **You** receive it.
3. **You** must not admit any liability or pay, offer to pay, promise to pay or negotiate any claim without **Our** written consent.
4. **We** will be entitled if **We** so desire to take over and conduct in **Your** name the defence of any claims for indemnity or damages or otherwise against any third party. **We** shall have full discretion in the conduct of any negotiation or proceedings or in the settlement of any claim and **You** shall give **Us** all necessary information and assistance which **We** may require.
5. In the event of **Your** death, **Your** legal representative(s) will have the protection of this Cover provided that such representative(s) comply(ies) with the terms and conditions outlined in this Cover Handbook.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Compensation or legal costs arising directly or indirectly from:
  - a) Liability which has been assumed by **You** under agreement unless the liability would have attached in the absence of such agreement.
  - b) Pursuit of any business, trade, profession or occupation or the supply of goods or services.
  - c) Ownership possession or use of vehicles, aircraft or watercraft (other than surfboards or manually propelled rowboats, punts, canoes and where the appropriate **Golf Equipment** premium has been paid, golf buggies whilst in use on a golf course), animals (other than domestic dogs or cats); firearms (other than sporting guns).
  - d) The transmission of any communicable disease or virus.
  - e) Ownership or occupation of land or buildings (other than occupation only of any temporary holiday accommodation where **We** will not pay for the **Excess** as outlined in the **Cover Schedule** of each and every claim arising from the same incident).
3. Accidental injury or loss not caused through **Your** negligence in respect of property damage caused to temporary holiday accommodation
4. Wilful or malicious acts of the **Insured Person**.
5. Liability or material damage for which indemnity is provided under any other insurance.
6. Anything mentioned in the general exclusions.

## Section H: Hijack

### What is Covered

**We** will pay **You**, up to the amount shown in the **Cover Schedule**, for every completed period of 24 hours in the event of **Hijack** of the transport on which **You** are travelling.

### What is Not Covered

1. Claims not substantiated by a written Police report confirming the length and exact nature of the incident
2. Anything mentioned in the general exclusions.

## Section I: Missed Departure

### What is Covered

**We** will pay **You** up to the amount shown in the **Cover Schedule** for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **Your** overseas destination or returning to **Ireland** or the **United Kingdom** (including missing onward connecting flights between **Ireland** or the **United Kingdom** or mainland Europe only) if **You** fail to arrive at the international departure point in time to board the **Public Transport** on which **You** are booked to travel on **Your** outward journey from **Ireland** or the **United Kingdom** or on the final part of **Your** return journey to **Ireland** or the **United Kingdom**, as a direct result of:

1. the failure of other scheduled **Public Transport** or

2. an accident to or breakdown of the vehicle which **You** are travelling or
3. an accident or breakdown occurring ahead of **You** on a motorway or dual carriage way which causes an unexpected delay to the vehicle in which **You** are travelling or
4. **Strike or Industrial Action** or adverse weather conditions.

**You** may claim only under Section O1 – Delayed Departure or Section G – Missed Departure for the same event, not both.

### Special Conditions Relating to Claims

1. In the event of a claim arising from any delay occurring on a motorway or dual carriage way **You** must obtain written confirmation from the Police or emergency breakdown services of the location, reason for and duration of the delay.
2. **You** must allow sufficient time for the scheduled **Public Transport** or other transport to arrive on schedule and to deliver **You** to the departure point.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Claims arising directly or indirectly from:
  - a) **Strike or Industrial Action**, adverse weather, cancellation of **Public Transport** or a directive prohibiting all travel or all but essential travel, to the country or specific area or event to which **You** were travelling, existing or being publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip**.
  - b) An accident to or breakdown of the vehicle in which **You** are travelling for which a professional repairers report is not provided.
  - c) Breakdown of any vehicle in which **You** are travelling if the vehicle is owned by **You** and has not been serviced properly and maintained in accordance with manufacturer's instructions
  - d) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Irish Aviation Authority or a Port Authority or any such regulatory body in a country to/from which **You** are travelling.
3. Claims where **You** fail to arrive at the embarkment point of **Your Cruise** unless Cruise Connection Cover is shown as operative on **Your** Validation Certificate.
4. Additional expenses where the scheduled **Public Transport** operator has offered reasonable alternative travel arrangements.
5. Anything mentioned in the general exclusions.

## Section J: Catastrophe

### What is Covered

**We** will pay **You**, up to the amount shown in the **Cover Schedule**, in the event that the tour company is unable to assist and **You** are forced to move from the prebooked accommodation as a result of fire, lightning, explosion, earthquake, storm, tempest, hurricane, flood, tsunami, medical epidemic or local Government directive which is confirmed in writing by local or national authority for **Irrecoverable** travel or accommodation costs necessarily incurred to continue with the **Trip** or, if the **Trip** cannot be continued for **Your** return **Home**.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Claims where a report from local or national authority is not obtained stating that it was not acceptable for **You** to remain in **Your** booked accommodation.
3. Claims where the tour company has made alternative arrangements.
4. Anything mentioned in the general exclusions.

## Section K1/K2: Delayed Departure/Holiday Abandonment

### What is Covered

If departure of the scheduled **Public Transport** on which **You** are booked to travel is delayed at the final departure point from or to **Ireland** or the **United Kingdom** for:

- i) at least 12 hours from the scheduled time of departure in respect of subsection O1 – Delayed Departure (see below) due to: or

- ii) at least 24 hours from the scheduled time of departure in respect of subsection O2 – Holiday Abandonment (see below) due to:
- Strike or Industrial Action** or
  - adverse weather conditions or
  - mechanical breakdown of or a technical fault occurring in the scheduled **Public Transport** on which **You** are booked to travel.

**We will pay You:**

K.1 Delayed Departure – The amount shown in the **Cover Schedule** for the first completed 12 hours delay and an additional amount for each full 12 hours delay thereafter up to the maximum amount shown in the **Cover Schedule**

K.2 Holiday Abandonment – Up to the amount shown in the **Cover Schedule** for any **Irrecoverable** unused travel and accommodation costs and other pre-paid charges which **You** have paid or are contracted to pay if after a minimum 24 hours has elapsed, **You** choose to cancel **Your Trip** before departing from **Ireland** or the **United Kingdom**.

**You** may claim only under subsection K1. or K2O2. above for the same event, not both.

**You** may claim only under Section K1 – Delayed Departure or Section I – Missed Departure for the same event, not both.

### Special Conditions Relating to Claims

- You** must check in according to the itinerary supplied to **You**.
- You** must obtain confirmation from the carriers (or their handling agents) in writing of the number of hours of delay and the reason for the delay.
- You** must comply with the terms of contract of the travel agent, tour operator or provider of transport.
- In the case of a claim under sub section K2 – Holiday Abandonment **You** must provide **Your** booking confirmation together with written details from **Your** travel agent, tour operator or provider of transport/accommodation of the separate costs of transport, accommodation and other pre-paid costs or charges that made up the total cost of the **Trip**.

### What is Not Covered

- The **Excess** as shown in the **Cover Schedule**.
- Claims arising directly or indirectly from:
  - Strike or Industrial Action**, adverse weather, cancellation of **Public Transport** or a directive prohibiting all travel or all but essential travel, to the country or specific area or event to which **You** were travelling, existing or being publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip**.
  - Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Irish Aviation Authority or a Port Authority or any such regulatory body in a country to/from which **You** are travelling.
- Claims arising directly or indirectly from **Public Transport** cancellations. Claims for **Public Transport** cancellations will be considered under the Travel Disruption cover if operative and indicated in **Your** Validation Certificate and the appropriate additional premium has been paid.
- Travel tickets paid for using any mileage or supermarket reward scheme, for example Air Miles.
- Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
- Anything mentioned in the general exclusions.

## Section M: Credit Card Fraud

### What is Covered

**We** will pay **You** up to the amount shown in the **Cover Schedule** for losses suffered solely as a result of any credit or cash card for which **You** are responsible, being stolen or lost and/or fraudulently used outside **Ireland** or the **United Kingdom** by any person other than **You** or a **Close Relative** or **Your Travelling Companion**.

### What is Not Covered

- The **Excess** as shown in the **Cover Schedule**.
- Claims where **You** can or could have recovered **Your** losses from any other source.
- Claims where the card's reporting of loss procedures have not been followed.

4. Any costs incurred in the replacement or return of the lost or stolen card.
5. Claims occurring outside of 31 days from the date of return to **Your** normal country of residence.
6. Claims where the card's pin is written down or kept in proximity to the card.  
Anything mentioned in the general exclusions.

## Section N: Overseas Legal Expenses and Assistance

### What is Covered

**We** will pay up to the amount shown in the **Cover Schedule** for legal costs to pursue a civil action for compensation if someone else causes **You Bodily Injury**, illness or death. Where there are two or more **Insured Person(s)** insured by this Cover, then the maximum amount payable by **Us** for all such claims shall not exceed double the amount shown in the **Cover Schedule**.

### Special Conditions Relating to Claims

1. **We** shall have complete control over the legal case through agents **We** nominate, by appointing agents of **Our** choice on **Your** behalf with the expertise to pursue **Your** claim.
2. **You** must follow **Our** agent's advice and provide any information and assistance required within a reasonable timescale.
3. **You** must advise **Us** of any offers of settlement made by the negligent third party and **You** must not accept any such offer without **Our** consent.
4. **We** will decide the point at which **Your** legal case cannot usefully be pursued further. After that no further claims can be made against the **Us**.
5. **We** may include a claim for **Our** legal cost and other related expenses.
6. **We** may, at **Our** own expense, take proceedings in **Your** name to recover compensation from any third party in respect of any indemnity paid under this Cover. **You** must give such assistance as **We** shall reasonably require and any amount recovered shall belong to the **Us**.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Any claim where in **Our** opinion there is insufficient prospect of success in obtaining reasonable compensation.
3. Legal costs and expenses incurred in pursuit of any claim against a travel agent, tour operator, carrier, **Us**, the Emergency Assistance Service or their agents, Cover-More Blue Insurance Services Limited, someone **You** were travelling with, a person related to **You**, or another **Insured Person**.
4. Legal costs and expenses incurred prior to **Our** written acceptance of the case.
5. Any claim where the legal costs and expenses are likely to be greater than the anticipated amount of compensation.
6. Any claim where legal costs and expenses are based directly or indirectly on the amount of compensation awarded on the condition that **Your** action is successful (for example a Contingency Fee Agreement).
7. Legal costs and expenses incurred in any claim which is capable of being pursued under a Conditional Fee Agreement.
8. Legal costs and expenses incurred if an action is brought in more than one country.
9. Any claim where in the **Our** opinion the estimated amount of compensation payment is less than €1,000 for each **Insured Person**.
10. Travel, accommodation and incidental costs incurred to pursue a civil action for compensation.
11. Costs of any Appeal.
12. Claims occurring within **Ireland** or the **United Kingdom**.
13. Claims by **You** other than in **Your** private capacity.
14. Costs or expenses incurred without prior authorisation from **Us**.
15. Anything mentioned in the general exclusions.

## Section P: Strike

### What is Covered

**We** will pay **You** up to the amount shown in the **Cover Schedule** for any **Irrecoverable** overseas accommodation costs at **Your Trip** destination which **You** have paid or are contracted to pay as a result of the cancellation of **Your** flight due to **Strike or Industrial Action** taken by the airline on which **You** are due to travel.

### Special Conditions Relating to Claims

1. In the event of **Strike or Industrial Action** You must:
  - a) obtain written confirmation from the airline of the date and duration on which this occurred.
  - b) provide **Your** unused travel tickets.
  - c) provide receipts or bills for any accommodation cost claimed for.
2. **You** may claim only under Section K1 – Delayed Departure or Section P – Strike for the same event, not both.

### What is Not Covered

1. In the event of **Strike or Industrial Action** any additional accommodation costs incurred by **You**:
  - a) where the airline has offered reasonable alternative travel arrangements.
  - b) which are **Recoverable** from the airline or for which **You** receive or are expecting to receive compensation.
2. Claims arising directly or indirectly from **Strike or Industrial Action** existing or being publicly announced prior to the date this insurance is effected by **You** or the time of booking any **Trip** whichever is the later.
3. Anything mentioned in the general exclusions.

## Section Q: Personal Travel Assistance

### Transfer of Emergency Funds

In the event of an emergency the Emergency Assistance Service will assist in contacting a friend or **Close Relative** in **Your Home** country to make arrangements for the transfer of funds to **You** in **Your** overseas destination. The Emergency Assistance Service will not advance or supply the funds.

### Message Relay

The Emergency Assistance Service will assist in the transmission of urgent messages to a **Close Relative** or **Close Business Associate** if medical or travel problems disrupt a **Trip**.

### Drug Replacement

The Emergency Assistance Service will assist with the following:

- a) replacement of lost drugs or other essential medication, or lost or broken prescription glasses, or contact lenses, which are unobtainable abroad.
- b) sourcing and delivery of compatible blood supplies.

The Emergency Assistance Service will not pay for the replacement costs of any item or the costs of sourcing and delivering blood supplies.

### Tracing Personal Property

The Emergency Assistance Service will assist in tracing and re-delivery of personal property that has been lost or misdirected in transit if the carrier has failed to resolve the problem. To be able to provide this service the **Insured Person** must have his/her personal property tag number available.

### Replacement Travel

The Emergency Assistance Service will assist with the replacement of lost or stolen tickets and travel documents, and provide a referral to suitable travel agencies. The Emergency Assistance Service will not pay for any item.

### Lost Credit Cards

The Emergency Assistance Service will provide advice of how to contact the appropriate card issuers if credit or charge cards are lost or stolen.

### Emergency Translation Facility

The Emergency Assistance Service will provide a translation service in the event of an emergency if the local provider of an assistance service does not speak English.

### Legal Help

The Emergency Assistance Service will provide a referral to a local English-speaking lawyer, embassy

or consulate if legal advice is needed.

### Medical Referral

In a medical emergency the Emergency Assistance Service will provide the following:

- a) provision of the names and addresses of local doctors, hospitals, clinics and dentists when consultation or treatment is required.
- b) if possible arrange for a doctor to call and if necessary, for the **Insured Person** to be admitted to hospital.

In the event that **You** need to contact the Emergency Assistance Service in connection with the above please call: +353 91 560 637

## Section R: Real-Time Flight Delay

**Only operative if a Super Cover or Super Plus Cover product has been purchased**

### What is Covered:

If **Your** flight is delayed for more than 3 hours after the original scheduled departure time, You will receive an SMS text message and an email to **Your** registered mobile device with:

1. access to a VIP lounge pass for each **Registered Traveller**; or where a VIP lounge is not available, then
2. a €30 cash payment for each **Registered Traveller**.

### Special Conditions Relating to Claims

1. To access **Our** services, **You** must create and use **Your Real-Time Flight Delay** account.
2. **You** must be listed as an **Insured Person** on an active Super or Super Plus Policy.
3. While waiting for **Your** flight, **You** must have access to the internet and **Your** email inbox or access to a mobile device capable of receiving SMS text messages at the telephone number that **You** provided in **Your Real-Time Flight Delay** account.
4. The flight delay must be in relation to a flight that has been registered by **You** in the **Real-Time Flight Delay** portal and must depart during **Your Period of Insurance**.
5. **You** must register **Your** flight at least 2 hours before the flight's original scheduled departure time.
6. For a Single Trip Policy, **You** can register up to 4 flights.
7. For an Annual Multi-trip Policy, **You** can register up to 12 flights.
8. Only one account needs to be created for all **Insured Persons** under **Your Policy**. If there is more than one **Insured Person**, then one of the **Insured Persons** must be designated as the Primary Contact in **Your Real-Time Flight Delay** account.
9. If **You** qualify for a VIP lounge pass, **You** will receive a QR entry code on **Your** registered mobile device which **You** must present at the VIP lounge to gain access.
10. Access to a VIP lounge is subject to the hours of operation, rules and age restrictions of each VIP lounge. Children may need to be accompanied by an adult and some VIP lounges may not permit access to children.
11. If the VIP lounge is not available, **You** will receive €30 cash payment per **Registered Traveller** to the bank account registered on **Your Real-Time Flight Delay** account.
12. All **Registered Travellers** will receive the same benefit, either a VIP lounge pass or a €30 cash payment.

### What is Not Covered

1. Any delays related to flights that are not registered in **Your Real-Time Flight Delay** account.
2. Any delay which is directly or indirectly caused by, results from, or is in connection with a Natural Disaster.
3. Any benefits for flights with less than a 3-hour delay.
4. Any benefits for **Insured Persons** not listed as a **Registered Traveller**.
5. Any cash payment, if **You** choose not to use **Your** VIP lounge pass where one is available.
6. Any data, roaming or cellular charges (including SMS or internet charges) that may be required to access the service.
7. Any charges related to the mobile device plan used to access the service.
8. Any fees charged by your financial institution.

## 9. Anything mentioned in the **General Exclusions**.

If you have any questions about our Real-Time Flight Delay benefit or how to access the services under Real-Time Flight Delay, please call 0818 444 555 or email [info@annualtravelinsurance.com](mailto:info@annualtravelinsurance.com).

### Sections S1 – S5: Winter Sports

(Only operative if indicated in the validation certificate, the appropriate additional premium has been paid or **You** selected Super Plus on **Your** Cover and **You** are under 66yrs at the time this Cover is issued).

#### COVER IN RESPECT OF SECTIONS S1 – S5 ONLY OPERATES:

1. UNDER SINGLE **TRIP** COVER IF THE APPROPRIATE **WINTER SPORTS** EXTENSION HAS BEEN CHOSEN AND THE APPROPRIATE ADDITIONAL PREMIUM HAS BEEN PAID OR **YOU** SELECTED SUPER PLUS ON **YOUR** COVER.
2. UNDER ANNUAL MULTI **TRIP** COVER FOR A PERIOD NOT EXCEEDING 14 DAYS ECONOMY COVER OR 17 DAYS SUPER OR SUPER PLUS COVER IN TOTAL IN EACH **PERIOD OF INSURANCE**, IF THE APPROPRIATE **WINTER SPORTS** EXTENSION HAS BEEN CHOSEN AND THE APPROPRIATE ADDITIONAL PREMIUM HAS BEEN PAID. (SUPER PLUS COVERS **WINTER SPORTS** AT NO ADDITIONAL CHARGE IF **YOU** ARE UNDER 66 YEARS.)
3. UNDER BACKPACKER COVER FOR A PERIOD NOT EXCEEDING 31 DAYS IN TOTAL IN EACH **PERIOD OF INSURANCE**, IF THE APPROPRIATE **WINTER SPORTS** EXTENSION HAS BEEN CHOSEN AND THE APPROPRIATE ADDITIONAL PREMIUM HAS BEEN PAID.

### Section S1: Ski Equipment

(Only operative if indicated in the validation certificate, the appropriate additional premium has been paid or **You** selected Super Plus on **Your** Cover).

#### What is Covered

**We** will pay **You**, up to the amount shown in the **Cover Schedule**, for the accidental loss of, theft of or damage to **Your** own **Ski Equipment**, or for hired **Ski Equipment**. The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (calculated from the table below) or **We** may at **Our** option replace, re-instate or repair the lost or damaged **Ski Equipment**.

Age of Item	Amount Payable
Up to 1 year old	– 90% of purchase price
Up to 2 years old	– 70% of purchase price
Up to 3 years old	– 50% of purchase price
Up to 4 years old	– 30% of purchase price
Up to 5 years old	– 20% of purchase price
Over 5 years old	– No payment

The maximum **We** will pay for any **Single Item** calculated from the table above or shown in the **Cover Schedule**, whichever is the less.

#### Special Conditions Relating to Claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Ski Equipment**.
2. For items damaged whilst on **Your Trip**, **You** must obtain an official report from a retailer confirming the item is damaged and beyond repair.
3. If **Ski Equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **You** must report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If **Ski Equipment** is lost, stolen or damaged whilst in the care of an airline **You** must:
  - a) obtain a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this Cover.
4. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will

help **You** to substantiate **Your** claim.

**Our** liability for **Ski Equipment** hired by **You** shall be further limited to the **Insured Persons** liability for such loss or damage.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Loss, theft of or damage to **Ski Equipment** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
  - a) anytime between 9pm and 8am (local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a Police report.
3. Loss or damage due to delay, confiscation or detention by customs or other authority.
4. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
5. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **Ski Equipment**.
6. Claims arising from loss or theft from **Your** accommodation unless there is evidence of forced entry which is confirmed by a Police report.
7. Claims arising from loss or theft or damage of **Ski Equipment** carried on a vehicle roof rack unless secured by a lockable ski rack.
8. Anything mentioned in the general exclusions.

## Section S2: Ski Equipment Hire

(Only operative if indicated in the validation certificate and the appropriate additional premium has been paid or **You** selected Super Plus on **Your** Cover).

### What is Covered

**We** will pay **You**, up to the amount shown in the **Cover Schedule**, for the reasonable cost of hiring replacement **Ski Equipment** as a result of the accidental loss of, theft of or damage to or temporary loss in transit for more than 12 hours of **Your** own **Ski Equipment**.

### Special Conditions Relating to Claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Ski Equipment**.
2. For items damaged whilst on **Your Trip**, **You** must obtain an official report from a retailer confirming the item is damaged and beyond repair.
3. If **Ski Equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **You** must report to them, in writing, details of the theft or damage and obtain written confirmation. If **Ski Equipment** is lost, stolen or damaged whilst in the care of an airline **You** must:
  - a) obtain a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this Cover.
4. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help **You** to substantiate **Your** claim.

### What is Not Covered

1. Loss, theft of or damage to **Ski Equipment** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
  - a) anytime between 9pm and 8am (local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and

violent entry to the vehicle confirmed by a Police report.

2. Loss or damage due to delay, confiscation or detention by customs or other authority.
3. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
4. Anything mentioned in the general exclusions.

### Section S3: Ski Pack

(Only operative if indicated in the validation certificate and the appropriate additional premium has been paid or **You** selected Super Plus on **Your** Cover).

#### What is Covered

**We** will pay **You**, up to the amount shown in the **Cover Schedule**:

- a) For the unused portion of **Your** ski pack (ski school fees, lift passes and hired **Ski Equipment**) following **Your Bodily Injury** or illness.
- b) For the unused portion of **Your** lift pass if **You** lose it.

#### Special Conditions Relating to Claims

1. **You** must provide written confirmation from a **Medical Practitioner** that such **Bodily Injury** or illness prevented **You** from using **Your** ski pack.
2. **You** must report to an appropriate authority within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss or theft of **Your** ski pass.

#### What is Not Covered

Anything mentioned in the general exclusions.

### Section S4: Piste Closure

(Only operative if indicated in the validation certificate and the appropriate additional premium has been paid or **You** selected Super Plus on **Your** Cover).

#### What is Covered

**We** will pay **You**, up to the amount shown in the **Cover Schedule**, for the cost of transport organised by the tour operator to an alternative site if due to lack of snow conditions results in the closure of skiing facilities (excluding cross-country skiing) in **Your** resort and it is not possible to ski. The cover only applies:

- a) To the resort which **You** have pre-booked for a period exceeding 12 hours and for so long as such conditions prevail at the resort, but not exceeding the pre-booked period of **Your Trip** and
- b) To **Trips** taken outside **Ireland** or the **United Kingdom** during the published ski season for **Your** resort.

#### Special Conditions Relating to Claims

**You** must obtain written confirmation from the resort management of the piste conditions, confirming the closure of facilities and the dates applicable.

#### What is Not Covered

1. Any circumstances where transport costs, compensation or alternative skiing facilities are provided to **You**.
2. Anything mentioned in the general exclusions.

### Section S5: Avalanche Closure

(Only operative if indicated in the validation certificate and the appropriate additional premium has been paid or **You** selected Super Plus on **Your** Cover).

#### What is Covered

**We** will pay **You** up to the amount shown in the **Cover Schedule** for the cost of transport organised by the tour operator to an alternative site if an avalanche results in the closure of skiing facilities (excluding cross-country skiing) in **Your** resort and it is not possible to ski. The cover only applies:

- a) To the resort which **You** have pre-booked for a period exceeding 12 hours and for so long as

- such conditions prevail at the resort, but not exceeding the pre-booked period of **Your Trip** and
- b) To **Trips** taken outside **Ireland** or the **United Kingdom** during the published ski season for **Your** resort.

### Special Conditions Relating to Claims

**You** must obtain written confirmation from the resort management of the piste conditions, confirming the closure of facilities and the dates applicable.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Anything mentioned in the general exclusions.

## Section T1-T5: Travel Disruption

(only operative if indicated in the validation certificate and appropriate premium paid)

This extension to the Cover provides the following amendments to the insurance, specifically for costs and expenses that are not **Recoverable** from any other source.

## Section T1: Extended Cancellation Or Curtailment Charges Cover

### What is Covered

Section A Cancellation or Curtailment charges is extended to include the following cover.

**We** will pay **You**, up to €1000 for:

- a. **Your Irrecoverable** unused travel and accommodation costs and other pre-paid charges (including sports, concert and entertainment tickets) which **You** have paid or are contracted to pay if cancellation of the **Trip** is necessary and unavoidable as a result of any of the following events occurring after payment of the premium relating to **Your** Cover and occurring within the **Period of Insurance**;
- or
- b. **Your** reasonable additional travel expenses and loss of **Irrecoverable** unused accommodation costs and other unused pre-paid charges (including sports, concert and entertainment tickets) which **You** have paid or are contracted to pay if **Your Trip** is **Curtailed** as a result of any of the following events occurring after payment of the premium relating to **Your** Cover and occurring within the **Period of Insurance**;
1. The Travel Advice Unit of the Department of Foreign Affairs (DFA) or the World Health Organisation (WHO) or regulatory authority in a country to/from which **You** are travelling issuing a directive as follows:
    - a) prohibiting all travel or all but essential travel to or
    - b) recommending evacuation from the country or specific area or event to which **You** were travelling, providing the directive came into force after **You** purchased this insurance or booked the **Trip** (whichever is the later), or in the case of Curtailment after **You** had left **Ireland** or the **United Kingdom** to commence the **Trip**.

## Section T2/T3: Extended Delayed Departure/Extended Holiday Abandonment

### What is Covered

Section **K1/K2** – Delayed Departure / Holiday Abandonment is extended to include the following cover.

**We** will pay **You** one of the following amounts:

1. If the scheduled **Public Transport** on which **You** are booked to travel is cancelled or delayed, leading to **Your** departure being delayed for more than 12 hours at the departure point of any connecting **Public Transport** in **Ireland** or the **United Kingdom** or to **Your** overseas destination or on the return journey to **Your Home** we will pay **You**
  - a) €20 for the first completed 12 hours delay and €10 for each full 12 hours delay after that, up to a maximum of €100 (which is meant to help **You** pay for telephone calls made and meals and refreshments purchased during the delay) provided **You** eventually continue the **Trip**.
2. **We** will pay **you** up to €1,000 for either:
  - a) any **Irrecoverable** unused accommodation and travel costs (and other pre-paid charges) which

You have paid or are contracted to pay because **You** were not able to travel and use **Your** booked accommodation as a result of:

- i) the scheduled **Public Transport** on which **You** were booked to travel from **Ireland** or the **United Kingdom** being cancelled or delayed for more than 12 hours or
  - ii) **You** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 12 hours and **You** choose to cancel **Your Trip** because the alternative transport to **Your** overseas destination offered by the **Public Transport** operator was not reasonable or
- b) suitable additional accommodation (room only) and travel expenses necessarily incurred in reaching **Your** overseas destination and/or in returning to **Ireland** or the **United Kingdom** as a result of:
- i) the **Public Transport** on which **You** were booked to travel being cancelled, delayed for more than 12 hours, diverted or re-directed after take-off or
  - ii) **You** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 12 hours and **You** choose to make other travel arrangements for **Your Trip** because the alternative transport offered by the scheduled **Public Transport** operator was not reasonable. The amount payable will be calculated after deduction of the amount of the refund on **Your** ticket(s) together with any compensation from the **Public Transport** operator. **You** can only claim under subsections 1. or 2. for the same event, not both. If the same costs, charges or expenses are also covered under any other section of this Cover **You** can only claim for these under one section for the same event.

## Section T4: Extended Missed Departure Cover

### What is Covered

Section I – Missed departure cover is extended to include the following cover.

- a) **We** will pay **You** up to €500 for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **Your** overseas destination or returning to **Ireland** or the **United Kingdom** if **You** fail to arrive at the departure point in time to board any onward connecting **Public Transport** on which **You** are booked to travel, following completion of the initial international journey, including connections within **Ireland** or the **United Kingdom** on the return journey to **Your Home** as a result of:
1. the failure of other scheduled **Public Transport** or
  2. Strike or Industrial Action or adverse weather conditions or
  3. **You** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 12 hours. If the same expenses are also covered under any other section of this Cover **You** can only claim for these under one section for the same event.

## Section T5: Accommodation Cover

### What is Covered

As a result of, fire, flood, earthquake, explosion, tsunami, landslide, avalanche, volcanic eruption, hurricane, storm or an outbreak of food poisoning or an infectious disease affecting **Your** accommodation or resort **We** will pay **You** up to €1,000 for either:

1. any **Irrecoverable** unused accommodation costs (and other pre-paid charges which **You** have paid or are contracted to pay because **You** were not able to travel and use **Your** booked accommodation or
2. reasonable additional accommodation and transport costs incurred:
  - a) up to the standard of **Your** original booking, if **You** need to move to other accommodation on arrival or at any other time during the **Trip** because **You** cannot use **Your** booked accommodation or
  - b) with the prior authorisation of the Emergency Assistance Service to repatriate **You** to **Your Home** if it becomes necessary to **Curtail** the **Trip**

**You** can only claim under one of subsections 1. or 2. of What is covered for the same event, not both. If the same costs and charges are also covered under any other section of this Cover **You** can only claim for these under one section for the same event.

### Special Conditions Relating to Claims (applicable to all extended sections of cover)

1. If **You** fail to notify the travel agent, tour operator or provider of transport or accommodation as soon as **You** find out it is necessary to cancel the **Trip**, the amount **We** will pay will be limited to the cancellation charges that would have otherwise applied.
2. **You** must get (at **Your** own expense) written confirmation from the provider of the accommodation (or their administrators), the local Police or relevant authority that **You** could not use **Your** accommodation and the reason for this.
3. For Curtailment claims only: **You** must tell the Emergency Assistance Service as soon as possible of any circumstances making it necessary for **You** to return **Home** and before any arrangements are made for **Your** repatriation.
4. **You** must check in, according to the itinerary supplied to **You** unless **Your** tour operator or airline has requested **You** not to travel to the airport.
5. **You** must get (at **Your** own expense) written confirmation from the scheduled **Public Transport** operator (or their handling agents) of the cancellation, number of hours of delay or involuntarily denied boarding and the reason for these together with details of any alternative transport offered.
6. **You** must comply with the terms of contract of the scheduled **Public Transport** operator and seek financial compensation, assistance or a refund of **Your** ticket from them, in accordance with the terms and/or (where applicable) Your rights under EU Air Passengers Rights legislation in the event of denied boarding, cancellation or long delay of flights.
7. For Missed Departure claims: **You** must allow sufficient time for the Scheduled **Public Transport** or other transport to arrive on schedule and to deliver **You** to the departure point.
8. **You** must get (at **Your** own expense) written confirmation from the scheduled **Public Transport** operator/accommodation provider that reimbursement will not be provided.

### What Is Not Covered (Applicable To All Section T Extended Sections Of Cover)

1. There will be no cover for cancelling or **Curtailment** of **Your Trip** due to:
  - a) restrictions implemented by any government or administration; or
  - b) actions taken by a transport or accommodation provider; if those restrictions or actions relate to a pandemic illness (as declared by the World Health Organisation), including Coronavirus disease (COVID-19) or severe acute respiratory syndrome coronavirus (SARSCOV-2) or any mutation or variation of these.
2. The first €50 of each and every claim, per incident claimed for, under this section by each **Insured Person** (except claims under subsection 1. a) of What is covered under the Extended delayed departure cover above) unless **You** have selected Super Plus on **Your** Cover.
3. The cost of Airport Departure Duty/Tax (whether **Irrecoverable** or not).
4. Travel tickets paid for using any airline mileage reward scheme, for example Air Miles.
5. Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
6. Claims arising directly or indirectly from:
  - a) **Strike or Industrial Action**, adverse weather, cancellation of **Public Transport** or a directive prohibiting all travel or all but essential travel, to the country or specific area or event to which **You** were travelling, existing or being publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip**.
  - b) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **You** are travelling.
  - c) Denied boarding due to **Your** drug use, alcohol or solvent abuse or **Your** inability to provide a valid passport, visa or other documentation required by the **Public Transport** operator or their handling agents.
7. Any costs incurred by **You** which are **Recoverable** from the providers of the accommodation (or their administrators) or for which **You** receive or are expected to receive compensation or reimbursement.
8. Any costs incurred by **You** which are **Recoverable** from the **Public Transport** operator or for which **You** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
9. Any accommodation costs, charges and expenses where the **Public Transport** operator has offered reasonable alternative travel arrangements.

10. Any costs for normal day to day living such as food and drink which **You** would have expected to pay during **Your Trip**.
11. Claims arising within 7 days of the date **You** purchased this insurance or the time of booking any **Trip**, whichever is the later.  
Anything mentioned in the general exclusions applicable to all sections of the Cover.

### Claims Evidence (Applicable To All Section S Extended Sections Of Cover)

**We** will require (at **Your** own expense) the following evidence where relevant:

- A copy of the advice against all travel or all but essential travel issued by the Travel Advice Unit of the Department of Foreign Affairs (DFA) or the World Health Organisation (WHO) or the regulatory authority in a country to/from which **You** are travelling.
- Booking confirmation together with a cancellation invoice from **Your** travel agent, tour operator or provider of transport/accommodation.
- In the case of **Curtailed** claims, written details from **Your** travel agent, tour operator or provider of transport/accommodation of the separate costs of transport, accommodation and other pre-paid costs or charges that made up the total cost of the **Trip**.
- **Your** unused travel tickets.
- A letter from the carriers (or their handling agents) confirming the number of hours delay, the reason for the delay and confirmation of **Your** check in times.
- Written confirmation from the scheduled **Public Transport** operator (or their handling agents) of the cancellation, number of hours of delay or involuntarily denied boarding and the reason for these together with details of any alternative transport offered.
- Written confirmation from the company providing the accommodation (or their administrators), the local Police or relevant authority that **You** could not use **Your** accommodation and the reason for this.
- Receipts or bills for any transport, accommodation or other costs, charges or expenses claimed for.
- Any other relevant information relating to **Your** claim under this section that **We** may ask **You** for.

### Optional Covers

(Only operative if indicated in the validation certificate and additional premium paid).

### COVER IN RESPECT OF SECTIONS U, V, W, X AND Y ONLY OPERATES:

IF THE APPROPRIATE OPTIONAL COVER EXTENSION HAS BEEN CHOSEN AND THE APPROPRIATE ADDITIONAL PREMIUM HAS BEEN PAID.

### Section U: Flight Cancellation

(Only operative if indicated in the validation certificate and additional premium paid).

#### What is Covered

**We** will pay **You**, up to the amount shown in the **Cover Schedule** for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **Your** overseas destination and/or in returning to **Ireland** or the **United Kingdom** as a result of the flight on which **You** were booked to travel being cancelled or delayed for more than 24 hours and **You** choose to make other travel arrangements for **Your Trip** because the alternative transport offered by the airline was not within 24 hours of **Your** original scheduled departure time. The amount payable will be calculated after deduction of the amount of the refund on **Your** ticket(s) together with any compensation from the airline.

**You** may claim only under Section U – Flight Cancellation or Section K1 – Delayed Departure for the same event not both.

#### Special Conditions Relating to Claims

1. **You** must check in according to the itinerary supplied to **You**.
2. **You** must get written confirmation from the airline (or their handling agents) of the cancellation or number of hours delay and the reason for these together with details of any alternative transport offered.
3. **You** must comply with the terms of contract of the airline and seek financial compensation,

assistance or a refund of **Your** ticket(s) from them in accordance with such terms and/ or (where applicable) **Your** rights under EU Air Passenger Rights legislation in the event of cancellation or long delay of flights. Details of **Your** rights can be downloaded from:  
[http://europa.eu.int/comm/transport/air/rights/index\\_en.htm](http://europa.eu.int/comm/transport/air/rights/index_en.htm)

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. The cost of **Recoverable** airport charges and levies.
3. Claims arising directly or indirectly from:
  - a) **Strike or Industrial Action**, adverse weather, cancellation of **Public Transport** or a directive prohibiting all travel or all but essential travel, to the country or specific area or event to which **You** were travelling, existing or being publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip**.
  - b) An aircraft being withdrawn from service (temporary or otherwise) on the recommendation of the Irish Aviation Authority or any similar body in any country.
4. Any costs incurred by **You** which are **Recoverable** from the airline or for which **You** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
5. Any accommodation costs, charges and expenses where the airline has offered alternative travel arrangements within 24 hours of **Your** original scheduled departure time.
6. Any costs which **You** would have expected to pay during **Your Trip**.
7. Anything mentioned in the general exclusions.

## Section V: Cruise Connection

(Only operative if indicated in the validation certificate and additional premium paid).

### What is Covered

1. **We** will pay **You** up to the amount shown in the **Cover Schedule** for reasonable additional onward travel expenses and accommodation (room only) necessarily incurred in reaching the next available embarkation point of **Your Cruise** itinerary if **You** fail to arrive at the original embarkation point in time to board **Your Cruise** ship on which **You** are booked to travel, or **Your** failure to disembark at the original disembarkation place and time to reach **Your** international flight departure point, as a direct result of:
  - a) the failure of any scheduled **Public Transport**
  - b) the failure of **Your** booked **Cruise** ship

**Strike or Industrial Action** or adverse weather conditions.

### Special Conditions Relating to Claims

**You** must allow sufficient time for the scheduled **Public Transport**, **Cruise** ship or other transport to arrive on schedule and to deliver **You** to **Your** embarkation point or International Departure point.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Claims arising directly or indirectly from:
  - a) **Strike or Industrial Action** or air traffic control delay existing or publicly announced by the date **You** purchased this insurance or at the time of booking any **Trip** whichever is the later.
  - b) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Irish Aviation Authority or a Port Authority or any similar body in any country.
3. Additional expenses where the scheduled **Public Transport** operator has offered reasonable alternative travel arrangements.
4. Any delay caused by quarantine on the **Cruise** ship due to contagious disease.
5. Anything mentioned in the general exclusions.

## Section W: Wedding/Civil Partnership

(Only operative if indicated in the validation certificate and additional premium paid).

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

*You/Your/Insured Person/Insured Couple* – means the couple travelling abroad to be married/entered into civil partnership whose names appear in the validation certificate

*Wedding/Civil Partnership attire* – means dress, suits, shoes and other accessories bought specially for the wedding/civil partnership and make-up, hair styling and flowers paid for or purchased for the wedding/civil partnership forming part of **Your Baggage**.

### What is Covered

1. **We** will pay up to the amounts shown in the **Cover Schedule** for the accidental loss of, theft of or damage to the items shown below forming part of **Your Baggage**:
  - a) for each wedding/civil partnership ring taken or purchased on the **Trip** for each *Insured Person*.
  - b) for wedding/civil partnership gifts taken or purchased on the **Trip** for the *Insured Couple*.
  - c) for *Your wedding/civil partnership attire* which is specifically to be worn by *You* on *Your* wedding/civil partnership day.

The maximum payment for any **Single Item** is shown in the **Cover Schedule**.

The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (or **We** may at **Our** option replace, reinstate or repair the lost or damaged **Baggage**).

2. **We** will pay the *Insured Couple* up to €300 for the reasonable additional costs incurred to reprint/make a copy of or retake the photographs/video recordings either at a later date during the **Trip** or at a venue in **Ireland** or the **United Kingdom** if:
  - a) the professional photographer who was booked to take the photographs/video recordings on *Your* wedding/civil partnership day is unable to fulfil such obligations due to **Bodily Injury**, illness or unavoidable and unforeseen transport problems, or
  - b) the photographs/video recordings of the wedding day taken by a professional photographer are lost, stolen or damaged within 14 days after the wedding/civil partnership day and whilst *You* are still at the holiday/honeymoon location.

*You* may claim only under one of either Section W – Wedding/Civil Partnership Cover or Section E – **Baggage**, **Baggage** Delay and Passport for the same event, not both.

### Special Conditions Relating to Claims

1. *You* must report to the local Police within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Baggage**.
2. If **Baggage** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel *You* must report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If **Baggage** is lost, stolen or damaged whilst in the care of an airline *You* must:
  - a) obtain a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this Cover.
3. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help *You* to substantiate *Your* claim.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Loss, theft of or damage to **Valuables** left **Unattended** at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe or safety deposit box.
3. Loss, theft of or damage to **Baggage** left **Unattended** at any time or contained in an **Unattended** vehicle:
  - a) anytime between 9pm and 8am local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a Police report.
4. Loss or damage due to delay, confiscation or detention by customs or other authority.
5. Loss, theft of or damage to unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, mobile telephones or telecommunications equipment of any kind, deeds, manuscripts, securities, perishable goods, surfboards/sailboards bicycles,

- marine equipment or craft or any related equipment or fittings of any kind, **Ski Equipment** and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).
6. Loss or damage due to cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or accident to the aircraft, sea vessel, train or vehicle in which they are being carried.
  7. Loss or damage due to breakage of sports equipment or damage to sports clothing whilst in use.
  8. Loss, theft of or damage to business goods, samples, tools of trade, motor accessories and other items used in connection with Your employment or occupation.
  9. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown or liquid damage.
  10. Anything mentioned in the general exclusions.

## Section X: Business Cover

(Only operative if indicated in the validation certificate and additional premium paid).

### What is Covered

1. In addition to the cover provided under Section E – **Baggage** and Passport **We** will pay **You** up to the amount shown in the **Cover Schedule** for the accidental loss of, theft of or damage to **Business Equipment** occurring during the **Period of Insurance**. The amount payable will be the current market value, which takes into account a deduction for wear tear and depreciation, (or **We** may at **Our** option replace, reinstate or repair the lost or damaged **Business Equipment**).
2. **We** will also pay reasonable additional accommodation and travelling expenses incurred in arranging for a colleague or business associate to take **Your** place on a pre- arranged **Business Trip** in the event that:
  - a) **You** die.
  - b) **You** are unable to make the **Business Trip** due to **You** being hospitalised or totally disabled as confirmed in writing by a **Medical Practitioner**.
  - c) **Your Close Relative** or **Close Business Associate** in **Ireland** or the **United Kingdom** dies, is seriously injured or falls seriously ill.

### Special Conditions Relating to Claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Business Equipment**.  
Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help **You** to substantiate **Your** claim.

### What is Not Covered

1. In respect of What is Covered point 1 above:
  - a) The **Excess** as shown in the **Cover Schedule**.
  - b) Loss, theft or damage to **Business Equipment** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
    - i) anytime between 9pm and 8am (local time) or
    - ii) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle is confirmed by a Police report.
  - c) Loss or damage due to delay, confiscation or detention by customs or other authority.
  - d) Wear and tear, depreciation, deterioration or loss or damage by atmospheric or climatic conditions by moth vermin by any process of cleaning, repairing or restoring mechanical or electrical breakdown.
  - e) Loss of, theft of or damage to films, tapes, cassettes, cartridges or discs other than for their value as unused materials unless purchased pre-recorded when **We** will pay up to the makers latest list price.

2. In respect of What is covered point 2 above:
  - a) Additional costs under 2. b) above if **You** were totally disabled, hospitalised or **You** were on a waiting list to go into hospital at the time of arranging the **Business Trip**.
  - b) Additional costs under 2. b) and c) above if **You** were aware of circumstances at the time of arranging the **Business Trip** which could reasonable have been expected to give rise to Cancellation of the **Business Trip**.
3. In respect of What is Covered point 1 and 2 above:
  - a) Any loss or damage arising out of **You** engaging in manual work.
  - b) Any financial loss or costs incurred arising from the interruption of **Your** business.
  - c) Anything mentioned in the general exclusions.

## Section Y: Golf Cover

(Only operative if indicated in the validation certificate and additional premium paid).

### COVER IN RESPECT OF SECTIONS Y1 – Y3 ONLY OPERATES:

UNDER SINGLE **TRIP** COVER AND MULTI **TRIP** COVER IF THE APPROPRIATE GOLF COVER EXTENSION HAS BEEN CHOSEN AND THE APPROPRIATE ADDITIONAL PREMIUM HAS BEEN PAID AND IS SHOWN ON THE VALIDATION CERTIFICATE.

## Section Y1: Golf Equipment

(Only operative if indicated in the validation certificate and additional premium paid).

### What is Covered

**We** will pay **You** up to the amount as shown in the **Cover Schedule** for loss, theft, or damage to **Your Golf Equipment**. The amount payable will be at today's prices less a deduction for wear tear and depreciation (calculated from the table below), or **We** may at **Our** option replace, reinstate or repair the lost or damaged **Golf Equipment**. The maximum **We** will pay for any **Single Item** is shown in the **Cover Schedule**.

Age of Item	Amount Payable
Up to 1 year old	– 90% of purchase price
Up to 2 years old	– 70% of purchase price
Up to 3 years old	– 50% of purchase price
Up to 4 years old	– 30% of purchase price
Up to 5 years old	– 20% of purchase price
Over 5 years old	– No payment

### Special Conditions Relating to Claims

1. **You** must report to the Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss or theft of all **Golf Equipment**. A Holiday Representatives Report is not sufficient.
2. If **Golf Equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **You** must report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If **Golf Equipment** is lost, stolen or damaged whilst in the care of an airline **You** must:
  - a) obtain a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this Cover.
3. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help **You** to substantiate **Your** claim.

### What is Not Covered

1. The Excess as shown in the **Cover Schedule**.
2. Loss, theft or damage to **Golf Equipment** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
  - a) anytime between 9pm and 8am (local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a

separate boot, locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a Police report.

3. Loss or damage due to delay, confiscation or detention by customs or other authority.
4. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
5. Claims arising for loss, theft or damage of **Golf Equipment** carried on a vehicle roof rack.
6. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **Baggage**.
7. Anything mentioned in the general exclusions.

## Section Y2: Golf Equipment Hire

(Only operative if indicated in the validation certificate and additional premium paid).

### What is Covered

We will pay **You** up to the amount as shown in the **Cover Schedule** for each 24 hour period, for the cost of necessary hire of **Golf Equipment** following:

- a) accidental loss of, theft of or damage to **Your Golf Equipment**; or
- b) the temporary loss in transit during the outward journey for at least 24 hours of **Your Golf Equipment**.

### Special Conditions Relating to Claims

1. **You** must report to the Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, theft or attempted theft of all **Golf Equipment**.
2. For items damaged whilst on **Your Trip You** must obtain an official report from an appropriate retailer confirming the item is damaged and beyond repair.
3. If **Your Golf Equipment** is temporarily lost in transit **You** must obtain written confirmation from the carrier as to the exact nature and length of time temporarily lost.
4. If **Your Golf Equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **You** must report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If **Your Golf Equipment** is lost, stolen or damaged whilst in the care of an airline **You** must:
  - a) obtain a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
  - c) retain all travel tickets and tags for submission if a claim is to be made under this Cover.
5. Receipts for items lost, stolen or damaged or proof of ownership should be retained as these will help **You** to substantiate **Your** claim.

### What is Not Covered

1. Loss, theft or damage to **Golf Equipment** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
  - a) anytime between 9pm and 8am (local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a Police report.
2. Loss or damage due to delay, confiscation or detention by customs or other authority.
3. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
4. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **Baggage**.
5. Claims arising for loss, theft or damage of **Golf Equipment** carried on a vehicle roof rack.
6. Anything mentioned in the general exclusions.

## Section Y3: Green Fees

(Only operative if indicated in the validation certificate and additional premium paid).

### What is Covered

We will pay **You** up to the amount shown in the **Cover Schedule**, for the proportionate value of any non-refundable, pre-paid green fees, **Golf Equipment** hire or tuition fee necessarily unused due to the following:

1. **Your Bodily Injury** or illness, or
2. The loss or theft of **Your** pre-booked and pre-paid documentation which prevents **Your** participation in the pre-paid golfing activity.
3. The closure due to adverse weather conditions of the golf course.

### Special Conditions Relating to Claims

1. **You** must report to the Police in the country where the incident occurred within 24 hours of discovery and obtain a written report of the loss, theft or attempted theft of **Your** documentation.
2. For claims as a result of **Your Bodily Injury** or illness **You** must obtain a report substantiating **Your Medical Condition**, its occurrence and **Your** inability to play golf from the treating doctor.
3. **You** must obtain written confirmation from the golf club of the time(s) and date(s) of the golf course closure due to adverse weather conditions.

### What is Not Covered

1. Claims arising directly or indirectly as a result of **Your** failure to comply with the important conditions relating to health.
2. Anything mentioned in the general exclusions.

## Section Z: Exam Failure (Backpacker Cover Only)

(Only operative if indicated in the validation certificate and additional premium paid).

### What is Covered

We will pay **You** up to the amount shown in the **Cover Schedule** for additional travel and accommodation expenses incurred by **You** as a result of returning to **Ireland** or the **UK** to retake public or university exams and then return to **Your** destination, provided cover was issued before **You** sat **Your** initial exam.

### Special Conditions Relating to Claims

**You** must get an official exam report to substantiate **Your** claim.

### What is Not Covered

1. The **Excess** as shown in the **Cover Schedule**.
2. Expenses incurred if the results of **Your** examination are known or are available to **You** prior to **Your** original departure date or **Your** results are known prior to booking **Your Trip**.
3. Expenses incurred if they are more than the cost of the flight arranged by **Us** or the actual costs incurred by **You** (whichever is the lesser) if **You** chose not to accept the flight arranged by **Us**.
4. The cost of **Your** flight **Home** should **Your** original flight ticket allow **You** to return to **Ireland** or the **UK** at the required time.
5. Expenses incurred if **Your** return to **Ireland** or the **UK** is in respect of project work which forms part of **Your** exam result.
6. Anything mentioned in the general exclusions.

## Section Z1: Gadget Cover

(Only operative if indicated in the validation certificate and additional premium paid).

### What is Covered

We will pay **You** up to the amount shown in the **Cover Schedule**, based on the value at today's prices less a deduction for wear and tear and depreciation for:

1. **Accidental Damage** if **Your Gadget** is damaged as a result of an accident
2. **Theft** if **Your Gadget** is stolen

3. **Malicious Damage** if **Your Gadget** is damaged intentionally or deliberately by someone else
4. **Loss** if **Your Gadget** is lost
5. **Unauthorised Usage Charges** if **Your Gadget** is lost or stolen and You have a Valid Claim under Section X (2 or We will refund the cost of unauthorised calls, messages and downloads made from **Your Gadget** after the time it was lost or stolen. Cover will only apply to Unauthorised Usage Charges within 24 hours of discovery of the loss or theft of **Your Gadget**. Itemised bills must be provided to support **Your** claim.

### Special Conditions Relating to Claims

1. **You** must report to the police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and obtain a written report of the loss, **Theft** or attempted theft of the **Gadget**.
2. Receipts or proof of purchase for items lost, stolen or damaged or proof of ownership should be retained as these will help **You** to substantiate **Your** claim.
3. Gadgets must be purchased from a VAT registered supplier (on-line auctions excluded)
4. If **You** are claiming for damaged or destroyed goods **You** must produce an estimate of repair from a reputable dealer confirming the estimated cost of repair (salvage to be retained until claim completed)
5. Cover excludes payments **Recoverable** from any contract, guarantee, warranty, network provider or any other source.
6. The **Gadget** must be less than 36 months old at the start of the **Period of Insurance**.
7. For **Valid Claims** relating to **Accidental** or **Malicious Damage**, **We** will pay the repair or replacement costs of the **Gadget**. If the damaged part of the **Gadget** can be replaced, **We** will only pay for the repair and replacement of that part.
8. **You** and **Your Immediate Family** must take proper and due care of Your Gadgets during Your Trip and take reasonable precautions at all times.

### What is Not Covered

1. **The Excess** as shown in the **Policy Schedule**.
2. Any **Loss, Theft** or **Accidental Damage** of the **Gadget** left in **Baggage** while in the custody of carriers.
3. Any **Loss, Theft** or **Accidental Damage** to the **Gadget** due to delay, confiscation or detention by customs or other authority.
4. Loss, **Theft** of or damage to **Gadgets** left **Unattended** at any time or contained in or stolen from an **Unattended** vehicle:
  - a) anytime between 9pm and 8am local time) or
  - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a police report.
5. **Theft** or **Accidental Damage** to the **Gadget** while in the possession of anyone else other than **Your Immediate Family**.
6. **Theft** of or damage to the accessories other than SIM or PCIMA cards which were in the **Gadget** at the time of the damage or **Theft**.
7. Any claim resulting from the failure of any electrical or computer equipment, software, micro-controller, microchip or accessories.
8. Reconnection costs to the network provider or subscription fees of any kind.
9. Any expense incurred as a result of the **Theft, Loss** or damage of the **Gadget**, other than the repair or replacement cost of the **Gadget**.
10. Damage to the **Gadget** due to:
  - Wear and tear, depreciation, mechanical or electrical breakdown or a manufacturing fault; or
  - Cleaning, repairing or restoring the **Gadget**; or
  - leaking powder or fluid carried within **Your** baggage.

Anything mentioned in the general exclusions.

## COMPLAINTS PROCEDURE

### Making Yourself Heard

If **You** have cause for complaint, it is important that **You** know that **We** are committed to providing **You** with an exceptional level of service and customer care. **We** realise that things can go wrong and there may be occasions when **You** feel that **We** have not provided the service **You** expected. When this happens, **We** want to hear about it so that **We** can try to put things right.

### Who to Contact?

The most important factors in getting **Your** complaint dealt with as quickly and efficiently as possible are:

- to be sure **You** are talking to the right person, and;
- that **You** are giving them the right information.

### When You Contact Us:

- Please give **Us Your** name and contact telephone number.
- Please quote **Your** Cover and/or claim number and the type of Cover **You** hold.
- Please explain clearly and concisely the reason for **Your** complaint.

So **We** begin by establishing **Your** first point of contact:

### Step One – Initiating Your Complaint

Does **Your** complaint relate to:

- A. **Your** Cover?
- B. A claim on **Your** Cover?

If A, **You** need to contact the agent who sold **You Your** Cover.

If B, **You** need to contact MAWDY Travel Claims on 091 560 638 or from outside **Ireland** +353 91 560 638

**We** expect that the majority of complaints will be quickly and satisfactorily resolved at this stage, but if **You** are not satisfied, **You** can take the issue further:

### Step Two – Beyond MAWDY

If **We** have given **You Our** final response and **You** are still dissatisfied **You** may refer **Your** case to The Financial Services and Pensions Ombudsman (Ombudsman). The FSPO is an independent body that arbitrate on complaints about general insurance products. It will only consider complaints after **We** have provided **You** with written confirmation that **Our** internal complaints procedure has been exhausted:

The Ombudsman can be contacted at:

The Financial Services and Pensions Ombudsman,  
Lincoln House,  
Lincoln Place,  
Dublin 2,  
D02 VH29  
Phone: +353 1 567 7000  
Email: info@fspo.ie  
Website: www.fspo.ie

### Our Promise to You

Calls are recorded and monitored.

**We** will provide **You** with the name of one or more individuals appointed by **Us** to be **Your** point of contact in relation to **Your** complaint until the complaint is resolved or cannot be processed any further;

**We** will provide **You** with a regular written update on the progress of the investigation of **Your** complaint at intervals of not greater of 20 business days;

**We** will attempt to investigate and resolve **Your** complaint within 40 business days of having received **Your** complaint; where the 40 business days have elapsed and the complaint is not resolved, **We** will inform **You** of the anticipated time frame within which **We** hope to resolve **Your** complaint.

Within 5 business days of the completion of the investigation of **Your** complaint, **We** will advise **You** in writing of the outcome of the investigation and, where applicable, explain the terms of any offer or settlement being made. Step two above outlines **Your** right to contact The Financial Services and Pensions Ombudsman, should **You** be dissatisfied with the outcome of **Our** investigation.

## DATA PROTECTION

**We** will need to obtain personal information from **you** to provide **you** with the policy of insurance.

This means any information obtained from **you** in connection with this policy provided to you by **us** (or our subsidiaries) must be collected lawfully and in accordance with Data Protection Legislation.

**We** use your personal data in the following ways:

- to provide **you** with policy cover, including underwriting and claims handling. This may include disclosing information to other insurers, regulatory authorities, or to our agents who provide services on **your** behalf under the policy;
- to confirm, maintain, update and improve our customer records;
- to identify and market products and services that may be of interest to **you**, (subject to your prior consent);
- to analyse and develop our relationship with **you**;
- to help in processing any applications **you** may make;
- to carry out studies of statistics and claim rates;
- for the analysis and the prevention of fraud;
- for the analysis and the prevention of payment defaults;
- for statistical studies by **us** and/or any sectorial organisation in Europe.

Where **you** have given **your** consent, **we** may share some of **your** personal information with **our** partner companies or companies within **our** group so that they can provide **you** with information about other products, services and promotions that may be of interest to **you** by letter, telephone, SMS or e-mail.

**We** will only disclose **your** personal information to third parties if:

- it is necessary for the performance of **your** policy of insurance with **us**;
- **you** have given **your** consent, including marketing consent; or
- such disclosure is required or permitted by law.

**You** can change **your** mind about **your** marketing consent at any time by contacting our Data Protection Officer, 22-26 Prospect Hill, Galway.

Or email: [dpo.ireland@mawdy.com](mailto:dpo.ireland@mawdy.com)

**We** disclose **your** personal information to third parties where:

- it is necessary for the performance of **your** insurance policy;
- if **you** have given your consent; or
- if such disclosure is required or permitted by law.

**We** deal with third parties that **we** trust to treat our customers' personal information with the same stringent controls that **we** apply ourselves.

Some of the personal information required from **you** is sensitive information such as details of any current or past medical conditions for **you** and **your** fellow travellers on the policy. This is a 'special category of information' under Data Protection legislation. **We** will not use sensitive information about **you** except for the specific purpose for which **you** provide it including enabling **us** to quote for **your** policy cover, to confirm policy cover and to provide the services described in the policy. **You** must ensure that **you** only provide sensitive information about other people identified on the insurance policy where **you** have their consent or the legal right to disclose their personal information, including their sensitive personal information.

To assist with fraud prevention and detection **we** may:

- share information about **you** across our group, with other insurers and, where **we** are entitled to do so under the Data Protection legislation, the Police and other law enforcement agencies
- pass **your** details to a central insurance application and claims checking system, whereby it may

be checked against information held by that central insurance application and claims checking system and shared with other insurers

- check **your** details with fraud prevention agencies and, if **you** give **us** false or inaccurate information and **we** suspect fraud, **we** will record this with the fraud prevention agency and other organisations may also use and search these records to:
  - a) help make decisions about credit and credit related services for **you** and members of **your** household;
  - b) help make decisions on motor, household, credit, life and other insurance proposals and claims for **you** and members of **your** household;
  - c) trace debtors, recover debt, prevent fraud and to manage **your** insurance policies;
  - d) check **your** identity to prevent money laundering;
  - e) undertake credit searches and additional fraud searches.

**You** are entitled on request to receive a copy of the personal information **we** hold about **you**. This will be information that **you** have given **us** during **your** policy. **We** do not hold any information relating to **your** credit status. If **you** would like a copy of **your** information, please contact **our** Data Protection Officer, 22-26 Prospect Hill, Galway. Or email: [dpo.ireland@mawdy.com](mailto:dpo.ireland@mawdy.com)

**We** are hereby released from any liability for any claim if **you** refuse disclosure of the data to a third party, which in turn prevents **us** from providing cover under this policy.

**You** agree **we** will store the Personal Data according to Data Protection legislation.

**You** agree that if **you** travel outside the European Economic Area (“EEA”), it may be necessary for **us** to transfer **your** data outside of the EEA in order to fulfil **our** obligations to **you** in the provision of the services under the terms of this policy. The fulfilment of **our** obligations may include sharing **your** data with **our** service providers whom **we** may engage to ensure the provision of those services to **you**. **We** undertake not to transfer **your** data outside of the EEA or share **your** data with **our** service providers for any other reason than the fulfilment of **our** obligations under the terms of this policy. **You** have provided **your** consent for such transfer and sharing of data. Further details of how data is shared outside the EEA can be found in **our** Privacy policy on **our** website.

**We** keep records of any transactions **you** enter with **us** or **our** partner companies for up to six years. This is to enable a response to all claims under the policy, validation of policy cover, any enquiries, complaints or disputes that arise in that period and to comply with **our** legal and regulatory requirements.

**We** may keep other personal information about **you** if it is necessary for **us** to do so to comply with the law.



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