



PILGRIMAGE TRAVEL INSURANCE

Policy Document



INSURANCE.IE

Better Insurance starts with YES

Each insured person must be fit to travel. The important conditions relating to health contained within this policy apply to all insured persons.

Each insured person who has a medical condition or who is taking medication for any medical condition must have their General Practitioner complete the Medical Declaration Form and they must bring it with them on their trip.

The Medical Declaration Form is located at the back of this policy.

Compare Now Limited trading as Yes Insurance is regulated by the Central Bank of Ireland

WELCOME TO





IMPORTANT INFORMATION

This travel insurance policy confirms the cover, the conditions and the exclusions relating to each **insured person** and is the basis on which all claims will be settled. Please read this policy wording carefully. **You** must give a copy of this policy wording to each **insured person** and keep it for reference. Please note the Important Conditions Relating to Health contained within this policy wording apply to each **insured person**.

To be eligible for this policy, each **insured person** must be 94 years old or younger on both the policy **purchase date** and the start date of **their trip**. Persons aged 80 to 94 years must advise their Pilgrimage Tour Operator of their age as an additional premium is payable.

In the event an **insured person** requires medical assistance or advice during a **trip**, they should immediately contact the Emergency Assistance Service. Do not cut short a **trip** or incur **inpatient** medical costs without first consulting the Emergency Assistance Service. For emergency assistance, call +44 1733 224 854.

Important Health Warranty and Medical Declaration Form

The **insured person** must be fit to undertake and complete the booked **trip** itinerary, must not be travelling against the advice of a **medical practitioner** and must not be travelling with the intention of receiving medical treatment.

The **insured person** must complete the Medical Declaration Form if they have any **medical condition(s)** and bring the completed form with them on their **trip**. The Medical Declaration Form must be completed by the **insured person's general practitioner (GP)** within 45 days of the **trip** start date and it must accompany them on their **trip**. If the **insured person** has any **medical condition(s)** and the Medical Declaration Form is not completed by their **general practitioner (GP)** before the **trip** starts, their **medical condition(s)** will be excluded and they will not be covered for any claims directly or indirectly linked to their **medical condition(s)**. The Medical Declaration Form is available from the issuing agent, the Pilgrimage Tour Operator and included at the back of this policy wording.

We strongly recommend **you** apply for and obtain a European Health Insurance Card (EHIC) or a Global Health Insurance Card (GHIC) and bring this with you when travelling.

SCHEDULE OF BENEFITS

This table shows the limits of cover that each **insured person** can claim per **trip**. All limits of cover are per **insured person**, except Personal Liability, which is per policy. Under most sections of **your policy** **you** are responsible for paying the first amount of each and every claim, per incident, per section for each **insured person** claiming. This amount is known as the excess.

Description	Limits	Excess
1. Curtailment	Up to €4,000	€90
2. Emergency Medical and Other Expenses Emergency Dental Expenses (pain relief)	Up to €5,000,000 Up to €300	€90 €90
3. Hospital Benefit (payment per complete 24-hour period in hospital)	Up to €200 (€25 per 24 hrs up to €200)	Nil
4. Personal Accident Loss of limbs or sight - (Aged 18 to 65 years) Permanent total disablement - (Aged 18 to 65 years) Loss of limbs or sight - (Aged 17 years and under or age 66 years and over) Permanent total disablement - (Aged 17 years and under or age 66 years and over)	Up to €10,000 €10,000 €5,000 €3,000 €3,000	Nil

5. Baggage, Baggage Delay and Passport		
Single Item Limit	Up to €1,500	€90
Valuables Limit (in Total)	€200	€90
Pair or Set Limit	€250	€90
Mobility Aid(s)	€200	€90
Replacement of Passport	€300	Nil
Emergency Passport Travel	€300	Nil
Delayed Baggage (payment per complete 12-hour period)	Up to €270 (€45 per 12 hrs up to €270)	Nil
6. Personal Money and Travel Documents		
Cash Limit (Aged 19 years and over)	Up to €300	€90
Cash Limit (Aged 18 years and under)	Up to €200	€90
Travel Documents (excluding passport)	Up to €100	€90
	Up to €200	Nil
7. Delayed Departure (payment per complete 12 hours' delay)	Up to €200 (€25 per 12 hrs up to €200)	Nil
8. Missed Departure	Up to €300	€90
9. Natural Catastrophe	Up to €1,000	€90
10. Personal Liability	€2,000,000	€250
11. Overseas Legal Advice and Expenses	Up to €10,000	€250
12. Government Travel Advice	€250	€90

Policy Introduction

Understanding This Policy

This is **your** travel insurance policy. It contains details of cover, conditions and exclusions relating to each **insured person** and is the basis on which **we** settle all claims. It is only valid if **we** have given **you** a **certificate of insurance** and which should be read in conjunction with this policy wording. Cover applies to the **insured person(s)** named on the **certificate of insurance**.

In return for having accepted **your** premium **we** will, in the **event** of **bodily injury**, death, **serious illness**, disease, loss, **theft**, damage, legal liability or other specified **events** happening within the **period of insurance**, provide insurance in line with the sections of **your** policy that apply. **We** want **you** to get the most from **your** policy and to do this, **you** should take time to read all parts of this policy wording, Insurance Product Information Document (IPID) and **certificate of insurance**. **You** must make sure that **you** understand the exclusions and conditions which apply to **your** policy, because if **you** do not meet these conditions, it may affect any claim **you** make. If **you** have any queries about **your** cover, please contact the issuing agent, particularly if **you** feel this insurance policy may not meet **your** needs. Remember, no policy covers everything. **We** do not cover certain things such as, but not limited to:

- **Medical conditions** as described in the Important Conditions Relating to Health section
- **You** must not be travelling against the advice of a **medical practitioner**, travelling specifically to receive medical treatment during the **trip**, or travelling with the knowledge that **you** are likely to need medical treatment
- Losses that **we** do not state are specifically covered under 'What is covered' in each section of cover
- The 'General exclusions applying to all sections of the policy'
- Any circumstances known to **you** before the **purchase date** of this policy or at the time of booking any **trip** which could reasonably have been expected to lead to a claim under this policy
- The intention of this policy is to cover **your** entire **trip**. The policy will need to cover the date that **your** trip begins until the date **you** return to **Ireland**
- Any **trip** that has already begun when **you** purchased this insurance
- If **we** do not state that something is covered, **you** should assume that it is not covered.

Your Responsibilities

This policy has been sold to **you** on a non-advised basis and **you** should read this information to ensure that it meets **your** requirements. **You** may already possess alternative insurance(s) for some, or all the features and benefits provided by this product, it is **your** responsibility to investigate this. When taking out or making changes to this policy, **you** must take reasonable care to provide accurate and complete answers to all questions asked by the issuing agent. **We** may ask **you** to provide additional information and/

or documentation to ensure that the information **you** provided when taking out or making changes to this policy was accurate and complete. If any information **you** provide is not accurate and complete, this may mean **your** policy is invalid and that it will not provide cover in the event of a claim, or **we** may not pay any claim in full. If **you** need to make any changes to the details contained in **your certificate of insurance**, **you** should contact **your** issuing agent as soon as possible. **Your** issuing agent will advise if those changes can be made and whether any additional premium is required.

Important Health Warranty and Medical Declaration Form – Important Note

The insured **person** must be fit to undertake and complete the booked **trip** itinerary, must not be travelling against the advice of a **medical practitioner** and must not be travelling with the intention of receiving medical treatment.

The insured **person** must complete the Medical Declaration Form if they have any **medical condition(s)** and bring the completed form with them on their **trip**. The Medical Declaration Form must be completed by the insured **person's** general practitioner (GP) within 45 days of the **trip** start date and it must accompany them on their **trip**. If the insured **person** has any **medical condition(s)** and the Medical Declaration Form is not completed by their general practitioner (GP) before the **trip** starts, their **medical condition(s)** will be excluded and they will not be covered for any claims directly or indirectly linked to their **medical condition(s)**. The Medical Declaration Form is available from the issuing agent, the Pilgrimage Tour Operator and included at the back of this policy wording.

We strongly recommend **you** apply for and obtain a European Health Insurance Card (EHIC) or a Global Health Insurance Card (GHIC) and bring this with you when travelling.

Cover Eligibility Requirements

This policy is only available to **you** if the following conditions are met:

A. Maximum Age

You must be 94 years old or younger on both the policy **purchase date** and the start date of **your trip**.

Persons aged 80 to 94 years must advise their issuing agent or Pilgrimage Tour Operator of their age as an additional premium is payable.

B. Residency

This policy is only available to **you** if on the **purchase date** of this policy:

- a) **you** permanently live in **Ireland**; and
- b) have been for the six months prior to the **purchase date** of this insurance; and
- c) **you** are registered with a **medical practitioner** in **Ireland**.

Medical Conditions, Medical Declaration Form and Important Conditions Relating to Health

We have the right to refuse to pay any claim if, at the time **you** applied for this cover, one or more of the 'Important Conditions Relating to Health' are not met. If **you** have any **medical condition(s)** and the Medical Declaration Form is not completed by **your general practitioner (GP)** before **your trip** starts, **your medical condition(s)** will be excluded, and **you** will not be covered for any claims directly or indirectly linked to **your medical condition(s)**. The Medical Declaration Form must be completed by **your general practitioner (GP)** within 45 days of the **trip** start date and it must accompany **you** on **your trip**. The Medical Declaration Form is available from the issuing agent, the Pilgrimage Tour Operator and included at the back of this policy wording.

Special Notice - This is not a private medical insurance policy

This is not a private medical insurance policy and only provides cover if **you** have an **accident** or a sudden **serious illness** that needs emergency treatment while **you** are **abroad**. If **you** plan to receive elective treatment (treatment that is not necessary, but which **you** have chosen to have) when **you** travel or choose to have any treatment **abroad** which is not an emergency, this will not be covered under the policy. If **you** need any medical treatment which results in a claim under this insurance, **we** will expect **you** to allow **us** or **our** representatives unrestricted and reasonable access to all of **your** medical records and information.

Pregnancy

This policy is designed to provide cover for unforeseen **events**. Pregnancy and childbirth are not considered as unforeseen **events**. This policy does not intend to cover the normal costs or losses otherwise associated with pregnancy (including multiple pregnancy) or childbirth. This policy will, however, cover **you** should complications arise with **your** pregnancy which fall within the definition of **complications of pregnancy and childbirth** which occurs during a **trip**.

Personal Liability

There is no cover for Personal Liability claims arising directly or indirectly from, happening through or in consequence of ownership, possession or use of any vehicle, automobile, aircraft, watercraft, **mobility aid(s)** or any mechanically propelled conveyance.

Policy Excesses (Applicable per Person)

Under most sections of the policy, claims will be subject to an excess. This means that **you** will be responsible for the first amount of each claim, per section and payable for each **insured person**. The amount **you** have to pay is the excess.

Complaints Procedure

If **you** have any cause for complaint regarding this insurance, please refer to the Making a Complaint section of this policy for the complaints procedure.

Cooling Off Period

If, after reading this policy **you** are not satisfied with it for any reason, **you** must return the **certificate of insurance** to the issuing agent within 14 days of issue in order to receive a full refund of premium, provided that a claim does not exist, and that travel has not taken place.

Important Contact Details

We recommend that **you** save these important contact details into **your** mobile phone.

Customer Service

If **you** have any questions about **your** policy, please contact the issuing agent who sold **you** **your** policy.

Emergency Assistance Service - Tel. +44 1733 224 854

If **you** (or anyone insured under this policy) needs medical assistance or advice during a trip, they should call the Emergency Assistance Service. When **you** call the Emergency Assistance Service, please have the following information ready:

- Insured's full name, home address, telephone number and date of birth
- Caller's contact number
- Certificate/policy number, **issue date** and issuing agent
- Hospital abroad, the treating doctor's name and telephone number
- Holiday dates/Flight numbers
- Medical Declaration Form details (if available)

The Emergency Assistance Service should only be contacted in a medical emergency.

All Claims (Other than a Medical Emergency) - Tel: +353 1 533 7356

To make a claim other than any claim for medical emergencies please contact White Horse Insurance Ireland dac by either:

- Telephone: +353 1 533 7356
- Email: claims@white-horse.ie
- Write: White Horse Insurance Ireland dac, Rineanna House, Shannon Free Zone, Shannon, County Clare, Republic of Ireland

Quoting Reference: YES INSURANCE PILGRIMAGE

Telephone calls are recorded and may be monitored.

Insurer - White Horse Insurance Ireland dac

This insurance is underwritten by White Horse Insurance Ireland dac. White Horse Insurance Ireland dac is registered in Ireland No. 306045. White Horse Insurance Ireland dac's registered office is Rineanna House, Shannon Free Zone, Shannon, County Clare, Republic of Ireland. White Horse Insurance Ireland dac is regulated by the Central Bank of Ireland. This can be checked by visiting their website at www.centralbank.ie

Arranged by - Yes Insurance

This exclusive travel insurance has been organised by Compare Now Limited t/a Yes Insurance, Third Floor, Latin Hall, Golden Lane, Dublin 8. Compare Now Limited t/a Yes Insurance is regulated by the Central Bank of Ireland.

Governing Law, Legal Interpretation and Language

Your policy is a legal contract between **you** and **us**. Current legislation allows the parties to this contract to choose which law is used to interpret this cover. **You** and **we** agree that this cover will be governed and interpreted in accordance with the Laws of Ireland and only the Irish Courts will have jurisdiction in any dispute. Communication of and in connection with this cover shall be in the English language.

Stamp Duty & Moneys payable in Ireland

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 the Stamp Duties Consolidation

Act 1999 or any future law, enactment or regulation. All moneys which become due and payable by us under this cover shall be in accordance with Section 93 of the Insurance Act 1936, payable and paid in Ireland.

Territorial Limits

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

We will not pay for claims arising directly or indirectly from **your** travel to a country, specific area or event to which the Department of Foreign Affairs (www.dfa.ie/travel/travel-advice) has issued travel restrictions which are not **COVID** specific. If the Department of Foreign Affairs has issued travel restrictions specifically related to **COVID** and **you** commence **your trip** whilst **COVID travel restrictions** are in effect, **you** are insured to travel however there is no cover whatsoever under any section of this policy for claims directly or indirectly related to **COVID** during **your trip**.

Important Conditions Relating to Health

This insurance is designed to cover **you** for unforeseen **events, accidents** and **serious illness** which happen during **your period of insurance**. **You** must comply with the conditions in this section to have the full protection of **your** policy. If **you** do not comply, **we** may, at **our** option, cancel the policy or refuse to deal with **your** claim or reduce the amount of any claim payment. **You** must not be travelling against the advice of a **medical practitioner**, travelling to receive **medical treatment** during the **trip**, or travelling with the knowledge that **you** are likely to need medical treatment.

Medical Declaration Form

If **you** have any **medical condition(s)**, the Medical Declaration Form must be completed by **your general practitioner (GP)** before **your trip** starts. The Medical Declaration Form must be completed by **your general practitioner (GP)** within 45 days of the **trip** start date and it must accompany **you** on **your trip**. In the event of a medical or curtailment claim **you** will be asked to produce a copy of **your** completed Medical Declaration Form. The Medical Declaration Form is available from the issuing agent, the Pilgrimage Tour Operator and included at the back of this policy wording.

Important Note: If **you** have any **medical condition(s)** and the Medical Declaration Form is not completed before **your trip** starts, **your medical condition(s)** will be excluded, and **you** will not be covered for any claims directly or indirectly linked to **your medical condition(s)**.

What is Not Covered

Your policy does not provide coverage for any claims resulting, either directly or indirectly, from the following circumstances.

- i. Any **medical condition** for which **you** are travelling against the advice of a **general practitioner** or would be travelling against the advice of a **general practitioner** had **you** sought their advice.
- ii. Any **medical condition** for which **you** are travelling with the intention of obtaining medical, dental or cosmetic treatment (including surgery or investigation) or advice outside **Ireland**.
- iii. Any **medical condition** for which **you** are not taking the recommended treatment or prescribed medication as directed by a **general practitioner (GP)** and/or **medical practitioner**.
- iv. Travelling against any health requirements stipulated by **your** carrier, their handling agents, or any other **public transport** provider.
- v. **You** are waiting for the results of any medical investigations, treatments, or surgical procedures related to a diagnosed or undiagnosed **medical condition**, where the results were still pending before **you** departed from **Ireland**.
- vi. Any **medical condition** for which **you** are waiting for investigation or referral, or are on a waiting list at a **hospital** or clinic.
- vii. **You** have been diagnosed with a terminal condition.

Important Conditions Relating to Health Note: **You** must comply with the following requirements to have the full protection of **your** policy, and they apply at the time of booking each **trip** or the **purchase date** of this insurance whichever is latest.

Pre-Requirements for Cover to Apply

1. At the time of purchasing this cover **you** must be fit to undertake and complete the booked **trip** itinerary, and **you** must be aged 94 years or under on the **purchase date** of this policy and on the start date of **your trip**.
2. **You** should apply for and obtain a European Health Insurance Card (EHIC) or a Global Health Insurance

Card (GHIC) and bring this with **you** when travelling.

3. **You** or any person acting on **your** behalf, must not be aware at the time of booking of any reason why the **trip** might be **curtailed**.
4. **You** or any person acting on **your** behalf, must not be buying this cover after the **trip** has started.
5. **You** must not have been:
 - a. refused insurance, or had an insurer refuse to renew or impose special terms on, insurance on the grounds of fraud, attempted fraud or the provision of misleading or incomplete information with intent to defraud.
 - b. convicted of, or have a prosecution pending for, any offence involving dishonesty of any kind.

Note: Children aged under 18 are covered on an organised school, college or university trip; or

6. **Children** aged under 18 will be insured only if they are travelling:
 - a. in the company of an adult (i.e. someone not defined as a **child** under this cover) known to their parent(s).
 - b. as an unaccompanied minor on a scheduled air service which operates an unaccompanied minor scheme, and then only if they are travelling with the intention of joining, or being subsequently joined by, another adult insured under this cover.
 - c. **Children** aged 18 or over, but under 23 and in full time education are covered to travel alone.
7. **You** should also refer to the general exclusions section.

Cover Relating to the Health of Others

This insurance does not cover claims arising from any **medical condition** of any person on whom travel depends unless the person's **medical practitioner** can state that, on the **purchase date** of this insurance policy or booking **your trip** (whichever is later) **they** would have seen no substantial likelihood of the patient's **medical condition** deteriorating to such a degree to cause a necessary **curtailment** claim. If a **medical practitioner** will not confirm this, any claim arising from their **medical condition** will be excluded.

All claims arising from a terminal prognosis, any set of symptoms where a diagnosis has not been made and any **medical condition** for which a non-traveller is on a waiting list for or has knowledge of the need for surgery, treatment or investigation at a **hospital**, clinic or nursing home at the time of **you** buying this insurance policy or booking **your trip** (whichever is later) are excluded.

Reciprocal Health Agreements

Residents of **Ireland** 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. **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. For Northern Ireland residents, **we** strongly recommend **you** apply for and obtain a Global Health Insurance Card (GHIC) through the NHS website and bring this with **you** when travelling.

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, Laya Healthcare or Irish Life 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
- Laya Healthcare Assistance: Tel +353 21 422 2204
- Irish Life Health Assistance: Tel +353 1 481 7840

Further information on Reciprocal Health Agreements is included in the Additional Information - Reciprocal Health Agreements section within the **Are you ready for your trip?** page of this document.

HOW TO CLAIM

You must keep to the conditions in the Claims Conditions section to be protected by **your** policy. If **you** do not keep to the conditions **we** may cancel **your** policy, refuse to deal with **your** claim or reduce the amount of any claim payment.

Telephone calls are recorded and may be monitored.

All Claims (Other than a Medical Emergency)

If **you** want to make a claim under this policy, **you** must phone **us** on +353 1 533 7356 or email **us** at

claims@white-horse.ie.

You need to tell us about your claim as soon as possible after any **bodily injury, serious illness**, incident, **event** or redundancy, or discovering any loss, **theft** or damage which may give rise to a claim under this policy.

What To Do In The Event Of An Emergency

Emergency Assistance Service

In the **event of your bodily injury or serious illness** which may lead to **inpatient hospital** treatment, incurring expenses over €500 or before any arrangements are made for repatriation, **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, otherwise **we** may not pay **your** claim.

Private medical treatment is not covered unless authorised specifically by the Emergency Assistance Service. The phone number of **our** Emergency Assistance Service is +44 1733 224 854.

Emergency 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. **They** 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**. The phone number of **our** Emergency Assistance Service is +44 1733 224 854.

Repatriation to Ireland

If, in the opinion of **our** Emergency Assistance Service, it would be preferable to repatriate **you** to **Ireland**, **we** will arrange 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** Emergency Assistance Service subject to consultation with the treating doctor in attendance.

In the case of patients requiring repatriation, the treating doctor must provide a certificate confirming that the patient is fit to travel, without this the airline company operators reserve the right to refuse to transport any sick or injured person. The phone number of **our** Emergency Assistance Service is +44 1733 224 854.

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 the policy 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. The phone number of **our** Emergency Assistance Service is +44 1733 224 854.

Outpatient Treatment

For simple **outpatient** treatment, **you** should pay the **hospital/clinic** yourself and claim back medical expenses from **us** on **your** return to **your home area**. Beware of requests for **you** to sign for excessive treatment or charges. If in doubt regarding any such requests, please call the Emergency Assistance Service for guidance on +353 1 533 7356 or email **us** at claims@white-horse.ie

Private Medical Insurance - Important Note: In addition to contacting our Emergency Assistance Service in the event of a claim, if you hold any private medical insurance such as VHI, LAYA Healthcare or Irish Life Health, **you** must notify the relevant private medical insurance assistance company at the time of claiming as per contact details below. Under the Medical Expenses Section, the private health insurer (if any) must pay the first amount as stated in the insured persons cover and we will commence cover once that limit has been reached.

- VHI Assistance: Tel +353 1 448 2444
- Laya Healthcare Assistance: Tel +353 21 422 2204
- Irish Life Health Assistance: Tel +353 1 481 7840

Claim Conditions

You must keep to the following conditions to be protected by **your** policy. If **you** do not keep to the conditions, **we** may cancel **your** policy, refuse to deal with **your** claim or reduce the amount of any claim payment. **You** must contact **us** if **you** want to make a claim using the contact details given below.

1. Claims (Other than a Medical Emergency)

If **you** want to make a claim under this policy, **you** must phone **us** on +353 1 533 7356 or email **us** at claims@white-horse.ie

You need to tell **us** about **your** claim as soon as possible after any **bodily injury, serious illness**, incident, **event** or redundancy, or discovering any loss, **theft** or damage which may give rise to a claim under this policy.

You must also tell **us** if **you** are aware of any writ, summons or possible prosecution against **you**. **You** must

send **us** every communication relating to a claim without delay. **You** or anyone acting on **your** behalf must not negotiate, admit or reject any claim without **our** permission in writing.

You or **your legal representatives** must provide **us** with, at **your** own expense, all information, evidence, details of household insurance and medical certificates **we** ask for. **We** can ask **you** to have an independent medical examination, which **we** will pay for. **We** may also ask for, and will pay for, a post-mortem examination.

You must keep any property which is damaged and, if **we** ask, send it to **us** at **your** own expense. Once **we** have settled **your** claim, all items will become **our** property and if the property is later recovered, it will become **our** property.

We may refuse to refund **you** any expenses for which **you** cannot provide receipts, bills or proof of ownership such as an original receipt, bank or credit card statement(s).

All claim payments will be made in Euro.

2. Transferring of rights - Subrogation

We are entitled to take over any rights in defending or settling any claim and to take proceedings in **your** name for **our** benefit against any other person or organisation.

3. Fraud

You must not act in a fraudulent manner. If **you** or anyone acting for **you**:

- makes a claim under the policy knowing the claim to be false or fraudulently exaggerated in any way;
- makes a statement in support of a claim knowing the statement to be false in any way;
- submits a document in support of a claim knowing the document to be forged or false in any way; or
- makes a claim relating to any loss or damage caused by **your** wilful act or with **your** agreement;

We will do the following:

- we** will not pay the claim.
- we** will not pay any other claim which has been or will be made under the policy.
- we** may declare the policy void (not valid).
- we** will be entitled to recover from **you** the amount of any claim already paid under the policy.
- we** will not return any premiums.
- we** may tell the Gardai/police.

We, **our** agents and fraud-prevention agencies get and share information with each other to prevent and detect fraudulent claims, to help protect **our** customers and ourselves.

General Conditions (Conditions Applicable to the Whole Policy)

You must keep to the following conditions to be protected by **your** policy. If **you** do not keep to the conditions **we** may cancel **your** policy, refuse to deal with **your** claim or reduce the amount of any claim payment.

1. Contract

This policy, **your certificate of insurance** and insurance product information document (IPID) and any information provided to the issuing agent will be read together as one contract. All information provided in purchasing this insurance shall form the basis of the contract. **You** should keep a record (including copies of letters) of all information provided to the issuing agent for the purpose of entering into this contract. **We** will not be liable to make any payment under this cover if **you**, or **your** personal representative(s) do not observe and fulfil its terms, exclusions and conditions.

2. Dual Insurance

If, at the time of any incident which results in a claim under this policy, there is another insurance covering the same loss, damage, expense or liability, then **you** must disclose this to **us** at the time of submitting a claim. In these circumstances, **we** will not be liable to pay or contribute more than **our** proportional share (not applicable to the Personal Accident section). Under the Medical Expenses Section, **your** private health insurer (if any) must pay the first amount as stated in their cover and **we** will commence cover once that limit has been reached.

3. Reasonable Precautions

You must take all reasonable precautions to avoid **bodily injury**, **serious illness**, loss, **theft** or damage. **You** must also take all practical steps to protect **your** property from loss or damage and to recover property that has been lost or **stolen**.

4. Cancellation of the Policy

Cancellation within 14 days - Statutory Cancellation Rights

You may cancel this policy within 14 days of receipt of the policy by writing to the issuing agent at the address shown on the Cover Schedule/**certificate of insurance** during the cancellation period. Any premium already paid will be refunded to **you** providing **you** have not travelled, no claim has

been made or is intended to be made and no incident likely to result in a claim has occurred. Please contact **your** issuing agent as detailed within **your** policyholder cover letter to cancel **your** policy.

Cancellation after 14 days - Cancellation Outside the Statutory Period

You may cancel this policy at any time after the cancellation period by writing to the issuing agent at the address shown on the Cover Schedule/**certificate of insurance**, however if the insured cancels after 14 days, no premium refund will be made.

Non-payment of Premiums

We can cancel the policy immediately by sending **you** written notice if **you** do not pay the premium.

5. Duty of Care

You must answer all questions honestly and to the best of **your** knowledge. **You** must not misrepresent any fact that could influence **us** in accepting **your** insurance. This includes **your** destination, the length of **your** trip and the ages and state of health of all the people named on this policy. If **you** are in any doubt, **you** should tell **your** issuing agent as detailed within **your** policyholder cover letter.

6. Buying this Cover

You can buy this cover before **you** depart for **your** trip. There is no cover for any claims that arise from circumstances that **you** were aware of (or could reasonably be expected to be aware of) at the **purchase date** of this insurance policy. If **you** have any questions, please call **your** issuing agent as detailed within **your** policyholder cover letter.

7. Our Right to Change the Cover

We reserve the right to make changes, add to the cover terms and/or to change the total amount payable for this insurance:

- i) for legal, regulatory or taxation reasons; or
- ii) to reflect new industry guidelines and codes of practice.

General Exclusions Applicable to All Sections of the Policy

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

1. **You** travelling to a country or specific area or event to which the Department of Foreign Affairs (www.dfa.ie/travel/travel-advice) or the World Health Organization has issued travel restrictions. If the Department of Foreign Affairs has issued travel restrictions specifically related to **COVID** and **you** commence **your** trip whilst **COVID** travel restrictions are in effect, **you** are insured to travel, however there is no cover whatsoever under any section of this policy for claims directly or indirectly related to **COVID** during **your** trip.
2. Any circumstances **you** knew about before the **purchase date** of this insurance, or at the time **you** booked any trip, which could reasonably be expected to give rise to a claim.
3. **Your** failure to comply with the terms of the Important Conditions Relating to Health section.
4. Any claim resulting, either directly or indirectly, from the following circumstances:
 - i. Any **medical condition** for which **you** are travelling against the advice of a **general practitioner** or would be travelling against the advice of a **general practitioner** had **you** sought their advice.
 - ii. Any **medical condition** for which **you** are travelling with the intention of obtaining medical, dental or cosmetic treatment (including surgery or investigation) or advice outside **Ireland**.
 - iii. Any **medical condition** for which **you** are not taking the recommended treatment or prescribed medication as directed by a **general practitioner (GP)** and/or **medical practitioner**.
 - iv. Travelling against any health requirements stipulated by **your** carrier, their handling agents, or any other **public transport** provider.
 - v. **You** are waiting for the results of any medical investigations, treatments, or surgical procedures related to a diagnosed or undiagnosed **medical condition**, where the results were still pending before **you** departed from **Ireland**.
 - vi. Any **medical condition** for which **you** are waiting for investigation or referral, or are on a waiting list at a **hospital** or clinic.
 - vii. **You** have been diagnosed with a terminal condition.
5. Deliberate, self-inflicted injury or **serious illness**, suicide or attempted suicide, solvent abuse, alcohol abuse or **your** alcohol dependency and use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a **medical practitioner**, but not for the treatment of drug addiction or alcohol dependency).
6. **You** drinking too much alcohol which is evidenced by one of the following:
 - i. a **medical practitioner** stating that **your** alcohol consumption has caused or actively contributed to **your** **bodily injury** or **serious illness**.
 - ii. a witness report from a third party or a police incident report.
 - iii. **Your** own admission.
 - iv. **You** having drunk so much alcohol that **your** judgement is affected, and **you** need to make a claim as a result.
7. **Your** self-exposure to needless peril (except in an attempt to save human life).
8. **You**:
 - i. jumping or diving from a pier, wall, bridge or rock, including tombstoning or shore diving;
 - ii. climbing on top of or jumping from a vehicle;

- iii. climbing or jumping from a building or balcony;
- iv. climbing or moving from any external part of any building to another part (not including if **you** are using stairs) and falling, regardless of the height; unless **you** do this because **your** life is in danger, or **you** are attempting to save a human life.
9. **Your** own unlawful action or any criminal proceedings against **you**.
10. Any other loss, damage or extra expense following on from the **event** **you** are claiming for, unless **we** provide cover for this under this insurance. Examples of loss, damage or extra expense would be the cost of replacing locks after losing keys, costs arising from preparing a claim or loss of earnings following **bodily injury** or **serious illness**.
11. **Your** illegal act(s) or any criminal proceedings against **you**.
12. 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).
13. Any claim that occurs outside of **your period of insurance**.
14. **You** placing **yourself** in unnecessary danger (for example, not wearing suitable head protection or protective clothing when taking part in a specific sport or activity, or not wearing a seatbelt while in a moving vehicle).
15. **You** using a motorised vehicle, unless **you** have a full and valid Republic of Ireland or United Kingdom driving licence that allows **you** to use the vehicle in the Republic of Ireland or United Kingdom.
16. **You** taking part in any professional sports or professional entertaining or professional work of any nature.
17. **You** taking part in any other sport or activity, manual work or racing, unless it is shown as covered under the sports and activities tables in this policy.
18. **Pandemic or epidemic**.
19. **COVID** where **you** have not received a positive **COVID** diagnosis, certified by a **medical practitioner** and/ or any **home** or self-administered **COVID** rapid antigen test(s).
20. Any consequences of cyber-terrorism including, but not limited to, the delay or cancellation of flights **due** to the failure of critical systems. Cyber-terrorism means the use of disruptive activities, or the threat thereof, against computers and/or networks, with the intention to cause real-world harm or severe disruption of infrastructure.
21. Any loss which has not been evidenced and the amounts substantiated.
22. **Your** loss of enjoyment.
23. Search and rescue costs.
24. Any unused or additional costs incurred by **you** which are recoverable from other sources, not limited to:
 - i. The providers of the **accommodation**, booking agents, travel agent or other compensation scheme.
 - ii. The providers of the transportation, booking agents, travel agent, compensation scheme or Air Travel Organisers' Licensing (ATOL).
 - iii. **Your** credit or debit card provider or PayPal.
25. **Your** engagement in, or practice of, flying, except as a fare paying passenger in a fully licensed passenger carrying aircraft.
26. Currency exchange.
27. Any claim which is directly or indirectly caused by results from, or is in connection with, a **natural catastrophe** (unless stated as covered under Section 9 Natural Catastrophe).
28. Any loss which, but for the existence of this insurance, would be covered under any other insurance policy(ies), including any amounts recovered by **you** from private health insurance, EHIC or GHIC payments, any reciprocal health agreements, airlines, hotels, home contents insurers or any other recovery by **you** which is the basis of a claim.
29. Any loss from the tour operator, airline or any other company, firm or person either becoming insolvent or being unable or unwilling to fulfil any part of their obligation.
30. **War**, risk of **war**, invasion, warfare operations, **terrorism**, civil commotion or unrest, assuming the proportions of or amounting to an uprising but this exclusion shall not apply to losses under Emergency Medical and Other Expenses, and Personal Accident cover, unless such losses are caused by **Nuclear, Chemical or Biological Weapons or Agents** or attack, or the disturbances were already taking place at the beginning of any trip.
31. 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.
32. **Nuclear, Chemical or Biological Weapons or Agents**.
33. Loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.
34. 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.
35. **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 1 - Curtailment and Section 5 - 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 Organization (WHO) or similar body has advised against all, or all but essential travel.

Definitions

Certain words used in this policy have been defined below. These have the same meanings wherever they are used in the policy. They appear in **bold print**.

Abroad means outside **Ireland**.

Accident/Accidental means an event that is sudden and unexpected, which is caused by external and visible means at a time that can be identified. **We** will consider an injury as a result of **your** unavoidable exposure to severe weather an **accident**.

Accommodation means accommodation or lodgings of a standard up to but not exceeding that in which the **insured** was or would have been staying during the course of the **trip**.

Adverse Weather means rain, flood, snow, sleet, hail, wind, fog, lightning storm or thunderstorm.

Baggage means luggage, clothing, personal effects and other articles which belong to **you** (or for which **you** are legally responsible) which are worn, used or carried by **you** during the **trip** for **your** personal use, but excluding any **valuables**, **mobility aid(s)** and **personal money**.

Baggage important notes:

- (i) **Baggage** claims are paid on the value of the purchase price, less a deduction for wear, tear and depreciation as shown below. This cover, therefore, is not on a "new for old" basis and means that a deduction per item will be made during the assessment of **your** claim.
- (ii) If **you** are planning to take expensive items such as certain items of jewellery, photographic or telecommunications equipment or other items that **we** define as **valuables** on **your** **trip**, then **you** should check that **you** have adequate cover under an alternative insurance policy.
- (iii) All claims for **baggage** are settled on the purchase price less a deduction for wear, tear and depreciation as follows:
 - Up to 1 year old - **We** will pay 85% of the purchase price.
 - Up to 2 years old - **We** will pay 70% of the purchase price.
 - Up to 3 years old - **We** will pay 50% of the purchase price.
 - Up to 4 years old - **We** will pay 25% of the purchase price.
 - Up to 5 years old - **We** will pay 10% of the purchase price.
 - Over 5 years old - Nil.

Bodily Injury means an identifiable physical injury **you** suffer, which is caused by sudden, unexpected, external and visible means. **We** will consider an injury as a result of **your** unavoidable exposure to the elements a **bodily injury**.

Certificate of Insurance means the document issued to **you** that confirms **your** unique insurance policy number, the dates of **your** **trip** and the names of all **insured person(s)** under this insurance policy.

Child/Children means the **lead insured's** and/or their **partner's** child(ren), step-child(ren), legally adopted child(ren), foster child(ren) and child(ren) for whom the **lead insured** or the **partner** is the parent or legal guardian, each **child** must:

1. be under 18 years of age (or under 23 years of age if still in full-time education) on the start date of the **trip**; and
2. be unmarried and dependent on the **lead insured** or their **partner**.

Close Relative means **partner**, mother, father, sister, brother, 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 or fiancé/fiancée.

Complications of Pregnancy and Childbirth means a diagnosis of toxæmia, gestational hypertension, pre-eclampsia, ectopic pregnancy, hydatidiform mole (molar pregnancy), post-partum haemorrhage, retained placenta membrane, placental abruption, hyperemesis gravidarum, placenta prævia, per vaginal bleeding, stillbirths, miscarriage or threatened miscarriage, medically necessary emergency caesarean section, medically necessary termination and premature births. This definition only applies if the complication happens more than eight weeks (or 16 weeks in the case of a known multiple pregnancy) before the expected delivery date.

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

Curtailment/Curtailed means either:

- a) Abandoning or cutting short the **trip** by immediate direct early return to **your home** in which case claims will be calculated from the day **you** returned to **your home** and based on the number of complete days of **your trip** **you** have not used; or;
- b) By attending a **hospital abroad** as an **inpatient** or being confined to **your accommodation abroad** 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**.

Curtailment/Curtailed Important Note: We will only reimburse **you** for additional travel costs incurred, not for any pre-booked arrangements **you** may lose. If **you** did not purchase a return flight, we will not cover the cost of **your** return flight.

Curtailment Costs means any **irrecoverable** unused travel and **accommodation** costs and other pre-paid charges (including sports, concert and entertainment tickets) which **you** have paid or are legally contracted to pay together with any reasonable additional travel expenses incurred.

Death means death caused by **bodily injury**.

Due To means directly or indirectly caused by, arising or resulting from, in connection with.

Event means all instances of loss arising out of and directly occasioned by one sudden, unexpected, unusual and specific event occurring at an identifiable time and place.

General Practitioner (GP) means a **medical practitioner** who provides primary care and specialises in family medicine.

Hijack means unlawful seizure or taking control of an aircraft or transport in which the insured is travelling as a passenger.

Home means **your** normal place of residence in **Ireland**.

Hospital(s) means any establishment which is registered or licensed as a medical or surgical hospital in the country in which it is located and where the **insured person** is under the constant supervision of a **medical practitioner**.

Incidental Basis means that the sport or activity **you** are taking part in on **your trip** is on a strictly amateur basis and is not the specific reason for **you** going on **your trip**.

Inpatient means an insured whose **hospital** confinement is as a resident bed patient, for whom a clinical case record has been opened and whose confinement is necessary for the medical care, diagnosis and treatment of a **serious illness** or **bodily injury** covered by this policy and not merely for any form of nursing, convalescence, rehabilitation, rest or extended care.

International Departure Point means the final departure point in **Ireland** on **your** outward journey or **your** final departure point overseas to return **you** back to **Ireland** on **your** return journey.

Ireland means the island of Ireland.

Irrecoverable means that **we** will only cover costs that **you** have not already recovered and which **you** are not entitled to recover from another third party.

Lead Insured means the **insured person** who applies for this insurance on their own behalf and on behalf of others.

Legal Expenses means:

1. fees, expenses, costs/expenses of expert witnesses and other disbursements reasonably incurred by the **legal representatives** in pursuing a claim or legal proceedings for damages and/or compensation against a third party who has caused **accidental bodily injury** to or **serious illness** of an **insured person** or in appealing or resisting an appeal against the judgement of a court, tribunal or arbitrator; and/or
2. costs for which an insured is legally liable following an award of costs by any court or tribunal or an out of court settlement made in connection with any claim or legal proceedings.

Legal Representative(s) means the solicitor, firm of solicitors, lawyer, advocate or other appropriately qualified person firm or company appointed to act on behalf of the **insured person**.

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 the **insured person's** name is added to Vision Ireland or the RNIB's 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.

Medical Condition(s) means any disease, symptom, illness, or injury which **you** have or has required medical advice, surgery, treatment or investigations in a **hospital** or in a clinic (including a doctor's surgery, a medical specialist's or physiotherapist's clinic or a nursing home), or been prescribed medication for which has been received prior to the **issue date** of this insurance or start date of **your trip** (whichever is the later).

Medical Practitioner means a registered practising member of the medical profession, a doctor or specialist, registered or licensed to practice medicine under the laws of the country in which they practice, who is neither an **insured person** or related to **you** or any person who **you** are travelling with, unless approved by **us**.

Mobility Aid/Mobility Aids means any crutch, walking stick, walking frame, wheeled walking frame, walking trolley, evacuation chair, wheelchair, powered wheelchair or mobility scooter constructed specifically to aid persons suffering from restricted mobility which belong to **you** (or for which **you** are legally responsible), but excluding any item covered under **baggage**.

Mobility Aid/Mobility Aids Important Note: Mobility Aid/Mobility Aids claims are paid on the value of the purchase price less a deduction for wear, tear and depreciation. This cover, therefore, is not on a "new for

old" basis and means that a deduction per item will be made during the assessment of your claim.

Natural Catastrophe means volcanic eruption, avalanche, tsunami, earthquake, landslide, hurricane, tornado, tropical cyclone or wildfire, or named (by an appropriate and relevant meteorological authority) storm.

Nuclear, Chemical or Biological Weapons or Agents means the use of any nuclear weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical agent and/or biological agent.

Outpatient means an **insured person** whose treatment for a **serious illness** or **bodily injury** does not necessitate confinement in a **hospital**.

Pair or Set means two or more items of **baggage** which are complimentary or used or worn together.

Pandemic/Epidemic means any event(s) declared as an **epidemic** or **pandemic** by the World Health Organization or by a relevant national government body.

Partner means an **insured person** who is the **lead insured's** spouse, civil partner, or cohabiting partner.

Period of Insurance means the period of cover between and inclusive of the start date and the return date as shown in your **certificate of insurance**. Insurance commences when the **insured person** leaves their **home** or business in **Ireland** (whichever is the later) to commence the **trip** described in the Territorial Limits section and shall cease with whichever occurs first of the following:

1. The expiry of the policy period as shown on the **certificate of insurance**;
2. The return of the **insured person** to their **home** as planned, at the end of a **trip**;
3. The first return of the **insured person** to **Ireland** prior to the planned return at the end of a **trip**.

Any **trip** that had already begun when **you** purchased this insurance will not be covered. In the **event** of a **curtailment** claim, all remaining cover under this policy will end.

Period of Insurance Important Note: The **period of insurance** will be extended day by day, up to a maximum of 30 days, after the expiry of the period stated on the **certificate of insurance** when the return to **Ireland** is necessarily delayed due to unexpected circumstances beyond your control and included in the conditions of this cover provided that Emergency Assistance Service has been notified. 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 5 – 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/travel-advice) or the World Health Organization (WHO) or similar body has advised against all, or all but essential travel. All other general exclusions will continue to apply.

Permanent Total Disablement means a physical or mental impairment that has a substantial and long-term adverse effect on your ability to carry out any form of employment and all of the following normal day-to-day activities:

- dressing and undressing
- getting up and down a flight of stairs
- getting in and out of a bed or chair
- general household duties, including cleaning, ironing or shopping

We will consider that **you** are unable to do any of the above activities when both of the following apply:

- **you** are unable to carry out the activity even with the use of equipment
- **you** always need the help of another person to do the activity.

Personal Money means bank notes, currency notes and coins in current use, travellers' and other cheques, cards and credit/debit or charge cards all held for private purposes.

Public Transport means any publicly licensed aircraft, sea vessel, train or coach on which **you** are booked to travel.

Repair and Replacement Costs means the cost of repairing partially damaged property, or, if property is totally lost or destroyed or uneconomical to repair, the cost of replacing property as new, less a deduction for wear, tear or depreciation. This insurance, therefore, is not on a "new for old" basis and means that a deduction per item will be made during the assessment of your claim. (Note: We will pay a reasonable proportion of the total value of a **pair or set** to repair or replace an item that is part of a **pair or set**.)

Serious Illness means any illness, disease, infection and/or **bodily injury** which is unexpectedly contracted by **you** or unexpectedly manifests itself for the first time during your **trip**.

Single Item means any one article, **pair or set** of articles or collection which are used or worn together.

Start Date, Issue Date, Purchase Date means the date shown on the **certificate of insurance** when this policy was purchased, whether by **you** directly or on **your** behalf through an issuing agent or **your** pilgrimage tour operator.

Start Date, Issue Date, Purchase Date Important Note: This date is important, as it is the date coverage under this policy begins. It may differ from the date your **trip** was arranged and actual start date of your **trip**, however it is the date we will use to process any claims.

Stolen means the unauthorised taking of **your baggage** and personal belongings by another person (i.e. a person who is not a relative, **close relative** or **travelling companion**) with the intention of permanently depriving **you** of it.

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 organisation(s) or government(s), committed for political, religious, ideological or ethnic purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

Theft means any **theft** committed by violence, threat of violence, mugging, assault or through break in by a third party (i.e. a person who is not a relative, **close relative** or **travelling companion**).

Travelling Companion(s) 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 a holiday **abroad** devoted to participation in a pilgrimage, leisure, rest and relaxation, where travel begins and ends in **Ireland** during the **period of insurance**. 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** cannot see or are not close enough to **your baggage**, personal belongings, **valuables**, money, property, or vehicle to stop it being damaged or **stolen**.

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

Valuables Important Note: The most we will pay for **valuable** items in total is shown on the Schedule of Benefits. If **you** are planning to take expensive items such as certain items of jewellery, photographic or telecommunications equipment or other items that **we** define as **valuables** on **your trip**, then **you** should check that **you** have adequate cover under an alternative insurance policy.

War means armed conflict between nations, invasion, act of foreign enemy, hostilities (whether **war** declared or not), civil **war**, rebellion, revolution, insurrection or military or usurped power.

We, Us, Our(s), Underwriter means White Horse Insurance Ireland dac or **our** agents or sub-agents.

You, Your(s), Yourself, Insured Person, Insured means each person covered by this policy whose name appears on the **certificate of insurance** and has paid the appropriate premium.

Sports and Activities

The following tables show the sports and activities that this policy will cover on an **incidental basis** (which means that the sport or activity **you** are taking part in on **your trip** is on a strictly amateur basis and is not the specific reason for **you** going on **your trip**). If **you** are taking part in any other sports or activities not mentioned in the Sports and Activities table, **you** will not be covered by this policy.

Important note for all sports and activities - If **you** take part in any of the activities listed, **you** must wear the appropriate safety equipment for that activity (for example, protective clothing, suitable head protection, etc.) at all times. There is a general exclusion under **your** policy with **us** for claims arising directly or indirectly from putting **yourself** in unnecessary danger. **We** will not pay **your** claim if **you** do not meet this policy condition.

If **you** use a motorised vehicle during **your trip**, **you** must hold a full and valid Republic of Ireland or United Kingdom driving licence that allows **you** to use that vehicle.

If **you** participate in any sports or activities not mentioned in these tables, **you** will not be covered by this policy.

Sports and Activities

Covers all of the following activities

	Personal accident sum insured is reduced by	Personal liability cover
Archery	Standard	Standard
Badminton	Standard	Standard
Baseball	Standard	Standard
Basketball	Standard	Standard
Beach Games	Standard	Standard

Bungee Jump (1 per trip)	Standard	Standard
Camel/Elephant Riding +	Standard	Excluded
Canoeing (Grade 1 – 3) – Life jacket and helmet must be worn	Standard	Standard
Clay Pigeon Shooting +	Standard	Excluded
Cricket	Standard	Excluded
Cycling (excluding Mountain Biking) – helmet recommended	Standard	Standard
Dinghy Sailing +	Standard	Excluded
Fell Walking	Standard	Standard
Fishing	Standard	Standard
Flying as a fare paying passenger in a fully licensed passenger carrying aircraft	Standard	Standard
Football/Soccer	Standard	Standard
GAA Football/Gaelic Football	Standard	Standard
Golf	Standard	Standard
Hiking (under 2,000 metres altitude)	Standard	Standard
Hockey	Standard	Standard
Horse Riding (up to 7 days, no Polo, Hunting, Jumping) – wearing a helmet and using tack equipment	Standard	Standard
Ice Skating (Rink)	Standard	Standard
Jet Boating +	Standard	Excluded
Jet Skiing+	Standard	Excluded
Jogging	Standard	Standard
Kayaking (Grades 1 to 3) – Life jacket and helmet must be worn	Standard	Standard
Marathon Running	Standard	Standard
Motorcycling up to 125cc (with the appropriate ROI/UK motorcycle licence, wearing a crash helmet, no racing) +	Standard	Excluded
Netball	Standard	Standard
Orienteering	Standard	Standard
Paintballing +	Standard	Excluded
Parascending/Parasailing (over water)	Standard	Standard
Pony Trekking – wearing a helmet	Standard	Standard
Quad biking up to 50cc (wearing a crash helmet, no racing) +	Standard	Excluded
Racquetball	Standard	Standard
Rambling	Standard	Standard
River Canoeing (Up to Grade 3) – Lifejacket and helmet must be worn	Standard	Standard
Roller Skating	Standard	Standard
Roller Blading	Standard	Standard
Rounders	Standard	Standard

Rowing	Standard	Standard
Running – sprint/long distance	Standard	Standard
Safari (ROI/UK organised)	Standard	Standard
Sail Boarding	Standard	Standard
Sailing within territorial waters +	Standard	Excluded
Scuba Diving* down to 30 metres if qualified and not diving alone or accompanied by a qualified instructor (see notes below)	Standard	Standard
Skateboarding	Standard	Standard
Snorkelling	Standard	Standard
Squash	Standard	Standard
Surfing (under 14 days)	Standard	Standard
Tennis	Standard	Standard
Tour Operator Safari	Standard	Standard
Track Events	Standard	Standard
Trekking (under 2,000 metres altitude)	Standard	Standard
Volleyball	Standard	Standard
War Games (with eye protection) +	Standard	Excluded
Water Polo	Standard	Standard
Water Skiing	Standard	Standard
White Water Rafting (Grades 1 to 3)	Standard	Standard
Windsurfing	Standard	Standard
Yachting (crewing inside territorial waters) +	Standard	Excluded

*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 insurance policy if **you** travel by air within 24 hours after participating in scuba diving.

+ Cover under Section 10 - Personal Liability for those sports and activities marked with a + is excluded.

What This Policy Covers

The cover provided by these sections or sub-sections will apply only to losses occurring during the period of insurance and if a benefit amount is shown in the relevant section or sub-sections in the Schedule of Benefits.

Section 1: Curtailment

This insurance policy provides cover for **curtailment** for specific reasons only. Please note that even if **you** claim for a reason that is unforeseen or out of **your** control, there is no cover under this insurance policy unless the reason is listed under the "What is Covered" section below.

What is covered

If **your trip** is **curtailed due to** one of the reasons below, **we** will pay **you** up to the amounts shown in the Schedule of Benefits for any **irrecoverable** unused travel and **accommodation** costs that **you** cannot recover. **We** will also cover other charges (for example, car parking charges or excursions) which **you** have paid or are contracted to pay.

Reasons for curtailment:

1. The death, **bodily injury**, **serious illness** or **complications of pregnancy and childbirth** of:
 - a. **You**;
 - b. **Your travelling companion**;
 - c. Any person with whom **you** have arranged to reside temporarily during **your trip**; or
 - d. **Your close relative**.
2. **You** or **your travelling companion** or any person with whom **you** have arranged to reside temporarily during **your trip**:
 - a. receiving a positive **COVID** diagnosis within 14 days of the start of **your trip** as certified by a **medical practitioner**; or
 - b. being admitted to **hospital** with a positive **COVID** diagnosis within 28 days of the start of **your trip** as certified by a **medical practitioner**.
3. **Your close relative**:
 - a. being admitted to **hospital** with a **COVID** diagnosis during the **trip**; and/or
 - b. the death of **your close relative due to COVID** during the **trip**.
4. **You**, or **your travelling companion**, doing jury service, or attending as a witness at a court of law or **hijack** of the **public transport** in which they are travelling.
5. The police have asked **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 tell **your** travel agent, tour operator, transport or **accommodation** provider as soon as **you** know it is necessary to curtail **your trip**. If **you** do not, **we** are only responsible for the **curtailment charges** that would have applied at that date.
2. If **you** cut short **your trip due to** any **bodily injury** or **serious illness**, **you** must get a medical certificate from a **medical practitioner** immediately to confirm **you** need to return **home** before **your** booked return date.
3. This policy does not cover any claims arising from a **medical condition** of any person on whom **your trip** depends unless their **medical practitioner** can confirm that at the **purchase date** of buying this insurance policy or booking **your trip** (whichever is later) they would have seen no substantial likelihood of the patient's **medical condition** deteriorating to such a degree to cause a necessary claim for
4. **You**, or **your travelling companion**, doing jury service, or attending as a witness at a court of law or **hijack** of the **public transport** in which they are travelling.
5. The police have asked **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 tell **your** travel agent, tour operator, transport or **accommodation** provider as soon as **you** know it is necessary to curtail **your trip**. If **you** do not, **we** are only responsible for the **curtailment charges** that would have applied at that date.
2. If **you** cut short **your trip due to** any **bodily injury** or **serious illness**, **you** must get a medical certificate from a **medical practitioner** immediately to confirm **you** need to return **home** before **your** booked return date.

3. This policy does not cover any claims arising from a **medical condition** of any person on whom **your trip** depends unless their **medical practitioner** can confirm that at the **purchase date** of buying this insurance policy or booking **your trip** (whichever is later) they would have seen no substantial likelihood of the patient's **medical condition** deteriorating to such a degree to cause a necessary claim for cutting short **your trip**. If the **medical practitioner** will not confirm this, any claim arising from a **medical condition** will not be covered.
4. All claims arising from a terminal prognosis, any set of symptoms where a diagnosis has not been made and any **medical condition** for which a non-traveller is on a waiting list for, or has knowledge of the need for, surgery, treatment or investigation at a **hospital** (as an **inpatient** or **outpatient**), clinic (a doctor's surgery, a medical specialist's or physiotherapist's clinic or a nursing home) at the time of booking a **trip** (whichever is later) are not covered.

What is not covered

1. Any claims arising directly or indirectly as a result of **your medical condition**, unless **you** have completed the Medical Declaration Form.
2. Claims arising directly or indirectly as a result of **your medical condition**, unless **you** are fit to undertake and complete the booked **trip** itinerary.
3. **You** failing to keep to the terms of the 'Important Conditions Relating to Health' section.
4. Any **medical condition** if **your general practitioner** has not completed section C on **your** Medical Declaration Form.
5. Any claim(s) if **you** are unable to reach the **international departure** point of the booked travel itinerary on the initial outward or final return journey as a consequence of the failure of **public transport** services or the **accident/breakdown** of a private motor car in which **you** are travelling.
6. Any claim relating to a cancellation, a delay or a missed departure involving **public transport**.
7. Under point 2 or 3 of 'What is covered' above, **you** will not be covered for any claim **event** occurring within 28 days of the **purchase date** of this insurance, except where the insurance is purchased within 48 hours of booking the **trip**.
8. There will be no cover for **curtailment of your trip due to**:
 - a. restrictions implemented by any government or administration; or
 - b. actions taken by a **public transport** or **accommodation** provider if those restrictions or actions relate to a **pandemic or epidemic**, including **COVID**.
9. **Curtailment due to injury and/or illness** where the **curtailment** has not been confirmed as medically necessary by a **medical practitioner abroad** and has not been authorised by the Emergency Assistance Service.
10. Any claim for pregnancy which falls outside of the definition of **complications of pregnancy and childbirth**.
11. **Curtailment costs** where such **curtailment** results from a **medical condition** affecting a **close relative** or **travelling companion(s)**, or any person with whom **you** have arranged to reside temporarily if:
 - a. the **medical condition** was diagnosed before the **purchase date** of this insurance; and
 - b. at the **purchase date** of this insurance was bought, the diagnosed **medical condition** could reasonably have been expected to result in:
 - i. death, **bodily injury** or **serious illness**; or
 - ii. a sudden deterioration in health.
12. If an aircraft, sea vessel or train is withdrawn from service on the orders of the recognised regulatory authority in any country.
13. If **you** are called as an expert witness or if **your** occupation would normally require a court attendance.
14. If **you** were unemployed or knew that **you** might become unemployed at the time a booking was made.
15. If any other adverse financial situation necessitates **curtailment of a trip**.
16. Any loss, charge or expense **due to**:
 - a. a delay in notifying the tour operator, travel agent, or transport or **accommodation** provider that it is necessary to curtail a booking;
 - b. disinclination to continue with a **trip**; or
 - c. prohibitive regulations by the government of any country.
17. A charge or expense paid for, or to be discharged with, any kind of promotional voucher, timeshare, holiday property bonds, frequent flyer points, air miles or other points scheme.
18. If **you**, or any others **insured persons**, were aware of any reason, either at the time a **trip** was booked or at the time the **lead insured** purchased this cover, why that **trip** might have to be **curtailed**.
19. Losing or not having the correct documents (passport, visa, inoculation certificates, travel tickets and so on) that **you** need to travel.



20. If a **trip** is **curtailed** as the result of regulations made by any government or public authority.
21. Any claim for **irrecoverable** payments for unused flight tickets to return **home** where a claim is also made under section 1 or 5 for the additional return travel expenses.
22. Any claim for travel costs incurred to reach **your home** if **you** had not purchased a return ticket.
23. Insolvency of the travel or **accommodation** provider.
24. Anything mentioned in the General Exclusions Applicable to All Sections of the Policy section.

Section 2: Emergency Medical and Other Expenses

Cover under this section does not apply to a **trip** in **Ireland**.

Emergency Medical Expenses - Important Note: Should an insured be admitted to **hospital**, then immediate contact must be made with the Emergency Assistance Service. This is not private medical insurance. In the event of an insured dying, incurring medical expenses in excess of €500, being involved in an **accident**, being admitted to **hospital**, or curtailing for medical reasons, the Emergency Assistance Service must be advised as soon as possible, and liability shall only attach for expenses agreed by them. Failure to notify the Emergency Assistance Service will prejudice us and will result in our non-acceptance of liability of such claims.

The use of **your** European Health Insurance Card (EHIC) or **your** Global Health Insurance Card (GHIC) will waive the policy excess under this section, **inpatient** and **outpatient** treatment at a public **hospital** is then available free of charge. All original receipts must be kept and provided to support a claim.

What is covered

We will pay **you** up to the amount shown in the Schedule of Benefits table for the following expenses which are necessary and reasonably incurred as a result of **you** suffering unforeseen **bodily injury, serious illness** or **your** death during a **trip abroad**.

1. Emergency medical, surgical, **hospital**, ambulance and nursing fees and charges.
2. Emergency dental treatment for the immediate relief of pain (to natural teeth only), provided that such treatment is necessarily incurred by reason of a medical or dental emergency.
3. If **you** die outside **Ireland**, the cost of funeral expenses **abroad** and the reasonable cost of transporting **your** ashes to **your home**, or the extra costs of returning **your** body to **your home**, up to a maximum of €7,000.
4. Reasonable extra transport (economy class) and **accommodation** expenses (room only) **you** have to pay, up to the standard of **your** original booking, if it is medically necessary for **you** to stay beyond **your** scheduled return date. This includes, as long as our Emergency Assistance Service have authorised it, reasonable extra transport or **accommodation** expenses for either a **close relative** or a **travelling companion** to stay with **you** or travel to **you** from **Ireland** to escort **you home**, and extra travel expenses to return **you** to **your home** if **you** are unable to use the return ticket. If **you** are delayed returning to **Ireland** because of an **event** insured under this section of **your** policy, **we** will automatically extend **your** policy with **us** (at no extra premium) until **you** return **home**. If a **close relative** or a **travelling companion** travels to **you** from **Ireland** to escort **you home**, **they** will need to make sure that **they** have taken out adequate travel insurance for their own needs.
5. In the event of a positive diagnosis of **COVID abroad**, **we** will cover reasonable extra transport (economy class) or **accommodation** (room only) expenses incurred, up to the standard of **your** original booking if **you** must extend **your** stay, up to €2,000.
6. The extra costs **you** have to pay for air transport or other suitable transport, including qualified attendants, to return **you** to **Ireland** if it is medically necessary, as long as **our** Emergency Assistance Service have authorised this beforehand. **We** will only pay to transport **you home** in the same class of travel as **you** used on the outward journey, unless **our** 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 **serious illness** which necessitates **your** admittance to **hospital** as an **inpatient**. **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 **serious illness**. There is no cover under this policy for expenses run up by **you** without getting Emergency Assistance Service approval beforehand.
2. If **you** suffer a **bodily injury** or **serious illness**, **we** have the right to move **you** from one **hospital** to another and arrange for **you** to be returned to **Ireland** at any time during **your trip**. **We** will do this if, in the opinion of the doctor treating **you** overseas or **our** Emergency Assistance Service, **you** can be moved safely and travel safely to **Ireland** to continue treatment.
3. **You** must claim against **your** private health insurer first for any **inpatient** medical expenses **abroad** up to the limit specified in **your** cover.

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.
5. **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.
6. **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

Any claims arising directly or indirectly from the following:

1. The excess shown in the Schedule of Benefits for each and every claim, per incident, per section, for each **insured person**, unless **you** have successfully reduced **your** medical expenses bill by more than **your** excess amount by using **your** European Health Insurance Card (EHIC), a Global Health Insurance Card (GHIC), reciprocal health agreement or private health insurance policy.
2. Claims arising directly or indirectly as a result of **your medical condition**, unless **you** are fit to undertake and complete the booked **trip** itinerary.
3. **You** failing to keep to the terms of the 'Important Conditions Relating to Health' section.
4. Any **medical condition** if **your General Practitioner (GP)** has not completed section C on **your** Medical Declaration Form.
5. Any expenses for private medical treatment unless pre-authorised by **our** Emergency Assistance Service.
6. Any claim for pregnancy which falls outside of the definition of **complications of pregnancy and childbirth**.
7. The cost of treatment or surgery, including exploratory tests, which is not directly related to the **bodily injury or serious illness** which **you** were admitted to **hospital** for.
8. Any expenses which are not usual or reasonable to treat **your bodily injury or serious illness**.
9. Any treatment or surgery which, in the opinion of the doctor treating **you** overseas, or **our** Emergency Assistance Service, is not medically necessary or can be reasonably delayed until **you** return to **Ireland**.
10. Any dental expenses other than for the immediate relief of pain.
11. **Your** expenses for getting or replacing medication which, at the time of **your** departure, **you** knew **you** would need or would need to be continued outside **Ireland**.
12. Treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre, unless **our** Emergency Assistance Service agree to this.
13. Any expenses for single or private room **accommodation**.
14. Any expenses **you** have on **your** return to **Ireland**.
15. Any expenses **you** have outside **Ireland** that can be recovered from the health authority in **Ireland** or through a reciprocal health agreement.
16. Expenses run up as a result of a **medical condition** if **you** have not had the recommended inoculations or taken the recommended medication (or both).
17. Expenses incurred as a result of **your** decision not to be returned to **Ireland** on the date **our** Emergency Assistance Service believe it is safe to do so.
18. Any extra travel or hotel expenses incurred which have not been authorised in advance by the Emergency Assistance service.
19. Any extra travelling expenses not authorised by the Emergency Assistance Service if **you** have to return **home** earlier than planned or be repatriated from a **trip**.
20. Funeral, cremation or burial costs in **Ireland**.
21. The cost of phone calls, other than the cost of **your** first call to **our** Emergency Assistance Service telling them about **your bodily injury or serious illness** and for which **you** are able to provide a receipt or other reasonable evidence to show the cost of the call and the phone number dialled. **We** will also cover the cost of phone calls **you** receive from **our** Emergency Assistance Service and for which **you** are able to provide a receipt or other reasonable evidence to show **your** costs.
22. The cost of taxi fares, other than the cost of **your** first taxi fare that takes **you** to a **hospital** or an appropriate medical establishment to receive medical attention.
23. Anything mentioned in the General Exclusions Applicable to All Sections of the Policy section.

Section 3: Hospital Benefit

What is covered

We will pay **you**, up to the amount shown in the Schedule of Benefits, for every complete 24 hours **you** have to stay in **hospital** as an **inpatient** on the order of a **medical practitioner** outside of **Ireland** as a result of **bodily**

injury or serious 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 Condition Relating to Claims

You must give notice as soon as possible to the Emergency Assistance Service or **us** of any **bodily injury** or **serious illness** which necessitates **your** admittance to **hospital** as an **inpatient** on the orders of a **medical practitioner**.

What is Not Covered

1. Any claims arising directly or indirectly from **COVID**.
2. 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 **serious 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**.
 - c. Any additional period of hospitalisation relating to treatment or services provided by a convalescent or nursing **home** or any rehabilitation centre.
 - d. Hospitalisation 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 hospitalisation 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.
3. Claims arising directly or indirectly as a result of **your** failure to comply with the Important Conditions Relating to Health section.
4. Anything mentioned in the General Exclusions Applicable to All Sections of the Policy section.

Section 4: Personal Accident

What is covered

We will pay **you** one of the amounts shown in the Schedule of Benefits, if **you** suffer a **bodily injury** which, solely and independent of any other cause, within 2 years results in **your**:

1. **Loss of sight**; or
2. **Loss of limb(s)**; or
3. **Permanent total disablement**.

Provisions

1. If **you** were already disabled before the **accident** or already had a condition which is gradually getting worse, **we** may reduce the payment. Any reduced payment will be based on **our** medical assessment of the difference between:
 - a) the disability after the **accident**; and
 - b) the extent to which the disability is affected by the disability or condition before the **accident**.
2. **We** will not pay **you** benefit:
 - b) under more than one of items 1, 2, or 3;
 - c) under item 3 until one year after the date **you** suffer the **bodily injury**; or
 - d) under item 3 if **you** are able or may be able to carry out any form of employment.

Special conditions relating to claims

1. If **you** make a claim, **our medical practitioner** may examine **you** as often as **we** consider necessary.
2. Under **permanent total disability**, **you** need to be receiving the appropriate disability benefit from **your** local government department.
3. Under **permanent total disability**, **our medical practitioner** needs to confirm that **your** condition is not likely to improve.
4. Under **permanent total disability**, **our medical practitioner** needs to confirm that in their professional medical opinion, **you** are medically unable to carry out any form of employment.

What is not covered

1. Any benefit where **your** injury or loss does not occur within 2 years of the **bodily injury**.
2. Any claim for **permanent total disablement** where **you** are retired from gainful employment and receiving a pension of any kind.
3. **Your** disablement caused by mental or psychological trauma not involving **your bodily injury**.
4. **Your** failure to comply with the terms of the Important Conditions Relating to Health section.
5. Anything mentioned in the 'General Exclusions Applicable to All Sections of the Policy'.

Section 5: Baggage, Baggage Delay and Passport

What is covered

1. If **your baggage** is lost, damaged or **stolen** during a **trip**, **we** will pay **repair and replacement costs** up to the amount shown in the Schedule of Benefits.
2. If **your mobility aid** which is
 - a. owned by **you** or for which **you** are responsible; or
 - b. necessarily taken by **you** on **your trip**; or
 - c. hired by or loaned to **you** whilst on **your trip**, is lost, damaged or **stolen** during the **trip**, **we** will pay **repair and replacement costs** up to the amount shown in the Schedule of Benefits.
3. **We** will reimburse, up to the amounts shown in the Schedule of Benefits, for the cost of essential items of clothing, medication and toiletries that **you** have to purchase because **your baggage** is lost or misplaced in transit on outward journey only for more than 12 hours as long as **you** get and send **us** written confirmation from the carrier confirming the number of hours that **your baggage** was delayed and provide **us** with original receipts for emergency essential items. If the loss is permanent, **we** will deduct the amount paid from the final amount **we** will pay under this section. **You** are not covered with **us** if **you** successfully claim through the responsible carrier.

Point 3 Important Note: Reimbursement is subject to **you** providing **us** with original receipts for their emergency essential items.

Written confirmation from the airline must be obtained and submitted to **us** confirming the number of hours **your baggage** was delayed.

4. If during a **trip**, **your** passport is lost, **stolen** or damaged, **we** will pay **you** for reasonable additional travel or accommodation (room only) expenses incurred in replacing it with an Emergency Replacement Passport.

You can make a claim under either the Baggage, Baggage Delay and Passport section or the Personal Money And Travel Documents section, but not both, for the same event.

You must take proper and due care of **your** property including examination of **your baggage** 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 the loss, **theft** or attempted **theft** of all **baggage**, **your** passport and/or **mobility aid(s)** to the local police within 24 hours of discovering it has been lost or **stolen** and get a written report from them.
2. If **your baggage**, **your** passport and/or **mobility aid(s)** are lost, **stolen** or damaged while in the care of a carrier, transport company, authority or hotel, **you** must give them written details of the loss, **theft** or damage and get written confirmation from them that **you** reported the loss, **theft** or damage.
3. If **your baggage** and/or **mobility aid(s)** are lost, **stolen** or damaged while in the care of an airline, **you** must do the following:
 - a) get a Property Irregularity Report from the airline (there may be a delay before the airline will provide this).
 - b) **your** notice). If **you** do not do this, **you** will not be covered under this insurance policy.
 - c) keep all travel tickets, tags and original receipts for **your** emergency purchases as **you** will need these to make a claim under this policy.
4. **You** must supply original receipts for delayed, lost, **stolen** or damaged items as these will help **you** to support **your** claim.
5. If **you** are claiming for damaged or destroyed goods, **you** must produce an estimate for or, if damaged beyond repair, a letter confirming this, from a reputable dealer confirming the estimated cost of repair (salvage must be retained until claim completed).

6. All claims are settled on the purchase price, less a deduction for wear, tear and depreciation as follows:

Wear, Tear, and Depreciation Table	
Baggage up to 1 year old	85% of purchase price
Baggage up to 2 years old	70% of purchase price
Baggage up to 3 years old	50% of purchase price
Baggage up to 4 years old	25% of purchase price
Baggage up to 5 years old	10% of purchase price
Baggage over 5 years old	No payment
Baggage where there are no receipts	No payment

What is not covered

- The excess shown in the Schedule of Benefits for each and every claim, per incident, per section, for each **insured person**.
- More than the limit shown in the Schedule of Benefits for **valuables**, a **single item**, **pair or set**, or part of a **pair or set**.
- 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 they were in a locked hotel safe or locked safety deposit box or left in **your** locked (doors and all windows) **accommodation** and kept out of sight.
- Loss, **theft** of or damage to **your baggage** and/or **mobility aid(s)** left **unattended** at any time or contained in or **stolen** from an **unattended** vehicle:
 - overnight between 9pm and 8am (local time) or
 - 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 Garda/Police report.
- Claims covered under section 6: **Personal Money** and Travel Documents.
- Loss or damage **due to your baggage** and/or **mobility aid(s)** being delayed, confiscated or detained by customs or any other authority.
- We** will not pay any claim where:
 - Baggage, mobility aids** or essential medication have been lost or misplaced by an airline or other carrier unless **we** are provided with original written confirmation from such airline or other carrier or the tour representative that they were delayed for at least 12 hours after **you** arrived at **your** destination;
 - Mobility aids** have been lost or damaged unless such loss or damage is insured under Cover 2 of this section, and **you** have complied fully with the relevant terms and conditions of cover;
 - Baggage, mobility aids** or essential medication have been lost or misplaced on a journey returning **you** to Ireland.
- Any loss, **theft** or damage directly or indirectly for:
 - Baggage** more specifically insured or recoverable under any other insurance cover;
 - Baggage** left **unattended** in a public place;
 - Baggage due** to leaking powder or fluid carried within **your** luggage;
 - Baggage** in the custody of an airline or other carrier, unless the loss or damage is reported in writing to the airline or other carrier within 24 hours of discovery and **we** are provided with the original written airline or carrier report;
 - Household goods, perishable goods, contact or corneal lenses, sunglasses, dentures, dental or medical fittings, hearing aids, prescription glasses, contact or corneal lenses, samples or merchandise, manuscripts, deeds, bonds, securities or documents of any kind;
 - Antiques, musical instruments, pictures, typewriters, televisions, vehicles or their accessories, watercraft and ancillary equipment, unset precious stones, glass, china or similar fragile items and bicycles/pedal cycles;
 - Suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage) and **mobility aid(s)**, unless the **mobility aid(s)** are entirely unusable as a result of one single incidence of damage); or
 - Business goods, samples, tools of trade, motor accessories and other items used in connection with **your** business, trade, profession, or occupation.



9. 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.
10. Loss or damage **due to** breakage of sports equipment whilst in use or damage to sports clothing whilst in use.
11. Loss or damage caused by wear and tear, depreciation, denting or scratching, (other than denting or scratching of hired **mobility aids** for which **you** are legally responsible), deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
12. Hired **mobility aids** unless their condition has been inspected prior to hire and any defects noted.
13. For temporary or permanent loss of **your baggage** and/or **mobility aid(s)** 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.
14. Any loss, **theft** or damage directly or indirectly to **your** mobility scooter:
 - a) caused by either the **theft** or attempted **theft** or by malicious persons, whilst left **unattended**, unless it has been locked in a secure room or any key required to operate the mobility scooter has been removed and any manufacturers security devices employed, or it is otherwise secured from unauthorised removal.
 - b) Wheels or tyres and/or accessories unless the mobility scooter is damaged at the same time.
15. Anything mentioned in the 'General Exclusions Applicable to All Sections of the Policy'.

Section 6: Personal Money and Travel Documents

Cover under this section does not apply to a **trip** in Ireland.

What is covered

1. **We** will pay **you** up to the amounts shown in the Schedule of Benefits for the **theft** of or damage to **personal money** and travel documents (including visas, driving licences and green cards) that happens during **your trip**.
2. **We** will pay **you** up to the amounts shown in the Schedule of Benefits for the **accidental** loss of **personal money** and travel documents (including visas, driving licences and green cards) that happens during **your trip**.
3. **We** will pay **you** up to the amounts shown in the Schedule of Benefits for the **theft** or **accidental** loss of cash (currency notes and coins).

You can make a claim under either the Baggage, Baggage Delay and Passport section or the Personal Money And Travel Documents section, but not both, for the same **event**.

Special conditions relating to claims

1. **You** must report any loss, **theft** or attempted **theft** of all **personal money** or documents to the local police within 24 hours of discovering they have been lost or **stolen** and get a written report from them.
2. **You** must keep all travel tickets and tags as **you** will need them to make a claim under this policy.
3. **You** must keep all receipts as these will help **you** to support **your** claim.

What is not covered

1. The excess shown in the Schedule of Benefits for each and every claim, per incident, per section, for each **insured person**.
2. Loss or **theft** of or damage to **personal money**, driving licence, travel documents or visa left **unattended** at any time (including in a vehicle or in the care of a carrier), unless it was in a locked hotel safe or locked safety deposit box or left in **your** locked (doors and all windows) **accommodation** and kept out of sight.
3. Loss or **theft** of or damage to traveller's cheques if **you** have not kept to the issuer's conditions or if the issuer provides a replacement service.
4. Loss or damage **due to** **personal money** or documents being delayed, confiscated or detained by customs or any other authority.
5. Loss or damage **due to** loss in value, variations in exchange rates or shortages **due to** an error or **due to** fraudulent or attempted fraudulent use of credit cards.
6. Loss or **theft** which is not reported to the police (and the hotel management if the loss or **theft** occurs in a hotel) within 24 hours of discovery.
7. Loss or **theft** of or damage:
 - a. for traveller's cheques unless the loss or **theft** is reported immediately to the local branch or agent of the

- issuing company, or if the issuing company provides a replacement service;
- b. for depreciation in value or shortage **due to** any error or omission;
- c. for more than the limit specified in the Schedule of Benefits in total in for any one claim in respect of loss of or damage to **personal money** or fraudulent misuse of lost or **stolen** credit, charge or bankers cards.
- 8. Claims covered under section 5: Baggage, Baggage Delay and Passport.
- 9. Anything mentioned in the 'General Exclusions Applicable to All Sections of the Policy'.

Section 7: Delayed Departure

Cover under this section does not apply to a **trip** in **Ireland**.

What is covered

If **you** are delayed for at least 12 hours on the outbound or return journey because the scheduled departure of a **public transport** is affected by:

1. A strike or industrial action; or
2. **Adverse weather**; or
3. Mechanical breakdown/derangement, or grounding of an aircraft **due to** mechanical or structural defect **you** are booked to travel on, **we** will pay up to the amount shown in the Schedule of Benefits for the first full 12 hours delay and for each subsequent full 12 hours delay thereafter, up to the maximum limit amount shown in the Schedule of Benefits.

You can make a claim under either the Missed Departure section or the Delayed Departure section, but not both, for the same **event**.

Special conditions relating to claims

1. **You** must check in according to the itinerary **you** have been given.
2. **You** must get written confirmation from the carriers (or their handling agents) of the number of hours **you** were delayed and the reason for the delay.
3. **You** must get written confirmation from the carriers (or their handling agents) of the number of hours **you** were delayed and the reason for the delay.

What is not covered

1. Claims arising directly or indirectly from:
 - a. strike or industrial action taking place or being publicly announced by the **purchase date** of this insurance or the time **you** book any **trip** (whichever is later);
 - b. an aircraft being withdrawn from service (temporarily or permanently) on the recommendation of the Civil Aviation Authority or any similar body in any country; or
 - c. a sea vessel, coach or train is taken out of service on the instructions of a civil aviation authority, port authority or similar authority.
2. Claims arising directly or indirectly if **you** do not:
 - a. Check-in before the scheduled departure time shown on **your** travel itinerary; or
 - b. Provide **us** with written details from the airline, shipping company, coach or train operators describing the length of, and reason for the delay;
3. **Adverse weather**, mechanical breakdown/derangement, or grounding of an aircraft existing or being publicly announced by the **purchase date** of this insurance or at the time of booking any **trip** (whichever is later).
4. A charge or expense paid for or to be discharged with any kind of promotional voucher.
5. Anything mentioned in the 'General Exclusions Applicable to All Sections of the Policy'.

Section 8: Missed Departure

Cover under this section does not apply to a **trip** in **Ireland**.

What is covered

You are covered if **you** are unable to reach the **international departure point** where **your** booked travel itinerary departs on the initial outward or final return journey **due to**:

- a. the car **you** are using for travel breaking down or being involved in an **accident**; or
- b. the **public transport** failing to arrive on schedule.

We will pay up to the amount shown in the Schedule of Benefits for **your** reasonable extra **accommodation** (room only) and travel costs that are necessary to:

- a. reach **your** booked destination; or
- b. return **you** to **your home**.

You can make a claim under either the Missed Departure section or the Delayed Departure section, but not both, for the same **event**.

Special conditions relating to claims

1. If **your** claim arises from any delay on a motorway or dual carriageway, **you** must get written confirmation from the Police/Gardaí or emergency breakdown services of the location of the delay, the reason for the delay and how long **you** were delayed for.
2. **You** must allow enough time for the **public transport** or other transport to arrive on schedule and to take **you** to the **international departure point**.
3. Cover under this section is only applicable if **you** have incurred additional travel and/or **accommodation** (room only) expenses in either:
 - a. reaching **your** booked destination; or
 - b. returning **you** to **your home**.

What is not covered

1. The excess shown in the Schedule of Benefits for each and every claim, per incident, per section, for each **insured person**.
2. **Accommodation** and travel expenses where the means of transport and/or **accommodation** used is of a standard superior to that of the booked journey or **trip**.
3. If **you** do not provide original written:
 - i. evidence from a motoring organisation or garage that the car used for travel is road worthy and properly maintained; or
 - ii. details from the operators of **public transport** used for travel of the length of, and reason for, the delay;
 - iii. accident/repairers report if the vehicle in which **you** are travelling is involved in an **accident** or breakdown which results in a claim being made under this section.
4. If **you** have not allowed sufficient time for the journey.
5. For a missed departure caused by strike or industrial action, **adverse weather** or air traffic control delay existing or publicly announced by the **purchase date** of this insurance or at the time of booking any **trip** (whichever is later).
6. Additional expenses where the **public transport** operator has offered reasonable alternative travel arrangements.
7. An aircraft or sea vessel being withdrawn from service (temporarily or permanently) on the recommendation of the Civil Aviation Authority, port authority, or any similar body in any country.
8. **Your** failure to provide evidence of **your** vehicle breakdown.
9. Anything mentioned in the 'General Exclusions Applicable to All Sections of the Policy'.

Section 9: Natural Catastrophe

Cover under this section does not apply to a **trip** in **Ireland**.

What is covered

We will pay **you** up to the amount shown in the Schedule of Benefits table for reasonable additional costs of **accommodation** (room only) and travel (economy class) **you** run up if as a result of a **natural catastrophe**:

1. **You** cannot use **your booked accommodation** and **you** need to move to other **accommodation** on arrival or at any other time during the **trip**; or
2. The Emergency Assistance Service is in agreement that it is necessary for **you** to curtail **your trip**.

Special Conditions Relating to Claims

1. **You** must get written confirmation from the provider of **your accommodation** (or their administrators), the local police or relevant authority that **you** could not use **your accommodation** and the reason for this.
2. **You** must give notice as soon as possible to the Emergency Assistance Service of any circumstances making it necessary for **you** to return **home** and before any arrangements are made for **your** repatriation.
3. **You** must check in according to the itinerary supplied to **you**.

What is Not Covered

1. The excess shown in the Schedule of Benefits table for each and every claim, per incident, per section, for each **insured person**.
2. Early return **home** claims when **we** did not authorise the travel arrangements.

3. Tour Operator's package holidays or package **trips**.
4. Any claim if alternative arrangements have been made by the hotel or tour operator.
5. **Accommodation** costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
6. 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.
7. Any **accommodation** or travel costs incurred by **you** which cannot be substantiated by a written report from the local or national authority who ordered **your** relocation, which confirms the exact cause for the relocation.
8. Any costs or expenses if **you** decide not to remain in **your** booked **accommodation**, although it is considered safe and acceptable to continue living there.
9. Any costs which **you** would have expected to pay during **your trip**.
10. **Trips in Ireland**.
11. Anything mentioned in the 'General Exclusions Applicable to All Sections of the Policy'.

Section 10: Personal Liability

This insurance policy provides personal liability cover for specific reasons only. If **you** are using a mechanical or motorised vehicle, **you** should ensure that **you** are adequately insured for third party liability, as **you** are not covered under this insurance.

What is covered

We will pay up to the amounts shown in the Schedule of Benefits table, including legal costs and expenses, towards any amount **you** become legally liable to pay as compensation for any claim or series of claims arising from any one **event** or cause in respect of **accidental**:

1. **Bodily injury, death or serious illness** to any person **you** do not employ or who is not a **close relative** or **travelling companion** or member of **your** household.
2. Loss of or damage to property that does not belong to and is not in the charge of or under the control of **you**, a **close relative**, a **travelling companion**, anyone **you** employ or any member of **your** household, other than any temporary holiday **accommodation** occupied (but not owned) by **you**.

The amount shown in the Schedule of Benefits table is the most **we** will pay per policy.

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. This cover is applicable only in respect of liability under the law of the country in which the **event** giving rise to the claim occurred, or under Irish law.
3. No liability shall be admitted and no admission, arrangement, offer, promise or payment shall be made by **you** without **our** written consent. **We** will be entitled, to take over and conduct, in **your** name, **your** defence of any claim or to prosecute for **your** own benefit any claims for indemnity, damages or otherwise against any third party. **We** will have full discretion in the conduct of any negotiations, proceedings or the settlement of any claims and **you** shall, wherever possible, give all such information and assistance as **we** may require. Every letter, claim, writ, summons and process must be forwarded **us** on receipt.
4. **We** may, at any time, pay **you** in connection with any claim or series of claims the Limit of Liability for this section (after deduction of any sum(s) already paid as compensation) or any lesser amount for which such claim(s) can be settled and upon such payment being made **we** shall relinquish the conduct and control of and be under no further liability in connection with such claim(s), except for the payment of costs and expenses recoverable or incurred prior to the date of such payment.
5. **You** shall, as though **you** were the insured observe, fulfil and be subject to the terms, Exclusions and Provisions of this section.

What is not covered

Any claims arising directly or indirectly from the following:

1. The excess as shown in the Schedule of Benefits for each and every claim, per incident, per section, for each **insured person**.
2. Liability in respect of **bodily injury** to any person who is:
 - a) under a contract of service with **you** when such injury arises out of and in the course of their employment by **you**;
 - b) a member of **your** family.
3. Liability in respect of loss of or damage to property in the care custody or control of **you**. However, this exclusion shall not apply in respect of loss of or damage to buildings and their contents not belonging to but temporarily occupied by **you** in the course of the **trip**.

4. Compensation or legal costs arising directly or indirectly from the following:
 - a) Mechanically propelled / motorised vehicles including **mobility aids** (other than golf buggies used on golf course and not on public roads); or
 - b) aircraft, hovercraft or watercraft ((other than surfboards or manually propelled rowboats, punts or canoes); or
 - c) firearms (other than sporting guns); or
 - d) the ownership, possession or use of land or building other than any building temporarily occupied by **you** in the course of a **trip**; or
 - e) any wilful or malicious act; or
 - f) any disease or virus (including **COVID**) being passed on; or
 - g) racing of any kind; or
 - h) **you** carrying out any business, trade, profession or occupation or supplying goods or services; or
 - i) liability covered under any other insurance.
5. Activities or volunteer work organised by, or under the auspices of, a charitable, voluntary, not for profit, social or similar organisation when liability for such activities or work should reasonably be included within the organisation's own Public Liability Cover.
6. Any liability assumed by **you** under any contract or agreement unless such liability would have attached in the absence of such contract or agreement.
7. Punitive or exemplary damages.
8. Anything mentioned in the 'General Exclusions Applicable to All Sections of the Policy'.

Section 11: Overseas Legal Advice and Expenses

Cover under this section does not apply to a **trip** in **Ireland**.

What is covered

If during a **trip** you sustain a **bodily injury** or **serious illness** which is caused by a third party, **we** will pay up to the amount shown in the Schedule of Benefits for the **legal expenses** in pursuit of compensation and/or damages arising out of Any One Claim.

Note: Any One Claim shall mean all claims or legal proceedings including any appeal against judgment consequent upon the same original cause, **event** or circumstance during a **trip**.

Special conditions relating to claims

1. **Legal representatives** must be qualified to practise in the courts of the country where the **event** giving rise to the claim occurred or where the proposed defendant under this section is resident.
2. **You** have the right to select and appoint a **legal representative** of **your** choice to represent **you** in any legal inquiry or legal proceedings (provided any appointment of a **legal representative** is not on a contingency fee basis, where the **legal representative** charges a proportion of the amount recovered as a fee). **You** shall provide **us** with details of the selected **legal representative's** name and address. **We** may provide information about **legal representative** in **your** local area if **you** ask **us**.
3. The **legal representative** and **you** must co-operate fully with and ensure that **we** are fully informed at all times in connection with any claim or legal proceedings for damages and or compensation from a third party. **We** are entitled to obtain from the **legal representative** any information, document or advice relating to a claim or legal proceedings under this insurance. On request **you** will give to the **legal representative** any instructions necessary to ensure such access.
4. Our authorisation to incur **legal expenses** will be given if **you** can satisfy **us** that:
 - a. there are reasonable grounds for pursuing or defending the claim or legal proceedings and the **legal expenses** will be proportionate to the value of the claim or legal proceedings; and
 - b. it is reasonable for **legal expenses** to be provided in a particular case. The decision to grant authorisation will take into account the opinion of the **legal representative** as well as that of **our** own advisers. If there is a dispute, **we** may request, at **your** expense, an opinion of a barrister as to the merits of the claim or legal proceedings. If the claim is admitted, **your** costs in obtaining this opinion will be covered by this insurance.
5. Any dispute between **you** and **us** (about **our** liability over a claim or the amount to be paid, where the amount of the claim is €5,000 or more) must be referred (within 12 months of the dispute arising) to an arbitrator appointed jointly by **you** and **us**. If **you** and **us** cannot agree on an arbitrator, the President of the Law Society of Ireland will decide on the arbitrator and the decision of that arbitrator will be final. **We** may not refer the dispute to arbitration without **your** consent where the amount of the claim is less than €5,000. If **you** do not refer such a dispute to arbitration (in the case of a claim for €5,000 or more) or to the courts of the Republic of Ireland (in the case of a claim for less than €5,000 or where **you** have agreed with **us**, after the dispute between **us** has arisen, that the claim will be dealt with by arbitration), within 12 months, **we** will treat the claim as abandoned.
6. **We** may, at **our** discretion, assume control at any time of any claim or legal proceedings in **your** name for damages and/or compensation from a third party.

7. All claims within this section must be submitted to **us** in writing within 90 days.
8. Any **legal expenses** incurred without the written agreement of **us** shall entitle **us** to withdraw cover immediately and to recover any fees or expenses paid to **you**.
9. **We** may, at **our** discretion, require **you** to obtain at **your** expense an opinion of a barrister agreed by **you** and **us** as to whether or not there are reasonable grounds for continuing to pursue or defend any claim or legal proceedings. **We** will pay such expense if the opinion indicates that there are reasonable grounds for pursuing or defending the claim or legal proceedings.
10. **We** may at **our** discretion offer to settle a counterclaim against **you** which it considers to be reasonable instead of continuing any claim or legal proceedings for damages and/or compensation by a third party.
11. **You** shall be responsible for the repayment to **us** of all sums paid by **us** in respect of the **legal expenses** where:
 - a. an award of costs is made in favour of **you** in the claim or legal proceedings; or
 - b. costs are agreed to be paid to **you** as part of any settlement of the claim or legal proceedings.
12. If a conflict of interest arises, where **we** are also the insurer of the third party or proposed defendant to the claim or legal proceedings, **you** have the right to select and appoint other **legal representatives** in accordance with Special Condition 2 of this section.
13. If the **legal representatives** refuse to continue acting for **you** with good reason, or if **you** dismisses the **legal representatives** without good reason, the cover we provide will end at once, unless **we** agree to appoint other **legal representatives**.

What is not covered

1. The excess as shown in the Schedule of Benefits for each and every claim, per incident, per section, for each **insured person**.
2. Any claim reported to **us** more than 24 months after the beginning of the incident which led to the claim.
3. Any claim where it is **our** opinion that the prospects for success in achieving a reasonable settlement are insufficient and/or where the laws, practices and/or financial regulations of the country in which the incident occurred would preclude the obtaining of a satisfactory settlement or the costs of doing so would be disproportionate to the value of the claim.
4. **Legal expenses** incurred before receiving **our** prior authorisation in writing unless such costs would have been incurred subsequent to **our** authorisation.
5. **Legal expenses** incurred in connection with any criminal or wilful act.
6. **Legal expenses** incurred in the defence against any civil claim or legal proceedings made or brought against **you** unless as a counter claim.
7. Fines, penalties compensation or damages imposed by a court or other authority.
8. **Legal expenses** incurred for any claim or legal proceedings brought against:
 - i. a tour operator, travel agent, carrier, insurer or their agents or any other person insured under the same policy where the subject matter of the claim or legal proceedings is eligible for consideration under an Arbitration Scheme or Complaint Procedure;
 - ii. **us** or **our** agents; or
 - iii. **your** employer.
9. Costs incurred in pursuance of a claim against any person with whom **you** had arranged to travel.
10. Any claim where **you** are insured for **legal expenses** under any other insurance policy.
11. Actions between **you** or pursued in order to obtain satisfaction of a judgement or legally binding decision.
12. **Legal expenses** incurred in pursuing any claim for compensation (either individually or as a member of a group or class action) against the manufacturer, distributor or supplier of any drug, medication or medicine.
13. **Legal expenses** chargeable by the **legal representatives** under contingency fee arrangements.
14. **Legal expenses** incurred where **you** have:
 - a. failed to co-operate fully with and ensure that **we** are fully informed at all times in connection with any claim or legal proceedings for damages and/or compensation from a third party; or
 - b. settled or withdrawn a claim in connection with any claim or legal proceedings for damages and/or compensation from a third party without **our** agreement. In such circumstances **we** shall be entitled to withdraw cover immediately and to recover any fees or expenses paid.
15. **Legal expenses** incurred after **you** have not:
 - a. accepted an offer from a third party to settle a claim or legal proceedings where the offer is considered reasonable by **us**; or
 - b. accepted an offer from **us** to settle a claim.
16. **Legal expenses** which **we** consider unreasonable or excessive or unreasonably incurred.
17. Anything mentioned in the 'General Exclusions Applicable to All Sections of the Policy'.



Section 12: Government Travel Advice

What is covered

We will pay **you** up to the amount shown in the Schedule of Benefits for any **irrecoverable** cancellation fees incurred in respect of **your** payment of travel and **accommodation** costs, if **you** have to cancel **your trip due** to a government travel restriction notice being issued for **your** destination within 14 days of the original travel date.

Special Conditions Relating to Claims

1. **You** must provide evidence of the government travel restriction notice and its date of issue.
2. This cover only applies to a government travel restriction notice that is issued after the **purchase date** of this **insurance** or after **you** have booked any **trip** (whichever is later).

What is Not Covered

1. Fees incurred by **you** if the airline or other carrier makes alternative arrangements to accommodate **you** or re-arrange flights.
2. Fees incurred by **you** if the country listed by the government notice is a transit stopover.
3. The cost of recoverable airport charges and levies.
4. Travel tickets paid for using any airline mileage reward scheme, for example Avios.
5. **Accommodation** costs paid for using any timeshare, holiday property bond or other holiday points scheme.
6. Claims arising directly or indirectly from a government travel restriction notice existing or being publicly announced by the **purchase date** of this insurance or at the time of booking any **trip** (whichever is later).
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. Anything mentioned in the 'general exclusions applicable to all sections of the policy' section.

Complaints Procedures

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 and type of cover?
- B. A claim on **your** cover?

If A, **you** need to contact the agent who sold **you** **your** cover.

If B, **you** have a complaint regarding the handling of **your** claim including any claim decision, please contact:

- The Customer Experience Manager, White Horse Insurance Ireland dac, Rineanna House, Shannon Free Zone, Shannon, County Clare, Republic of Ireland. Email: complaints@white-horse.ie

The Customer Experience Manager will issue a final response to **your** complaint. **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).

Step Two – The Financial Services and Pensions Ombudsman (FSPO)

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 (FSPO). 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 FSPO 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@fsp.ie, website: www.fspo.ie.

Referral to the FSPO will not affect **your** right to take legal action against **us**.

Our promise to you

- **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 three above outlines **your** right to contact The Financial Services and Pensions Ombudsman, should **you** be dissatisfied with the outcome of **our** investigation.
- Alternatively, if **you** have purchased **your** cover online, **you** can submit a complaint through the Online Dispute Resolution (ODR) platform <http://ec.europa.eu/odr>.

Data Protection

Data Protection Notice of White Horse Insurance Ireland Dac

White Horse Insurance Ireland dac holds **your** personal information in accordance with all applicable data protection laws.

To administer **your** policy White Horse Insurance Ireland dac will collect and use information about **you** provided by **you**. This notice applies to anyone who is insured under this insurance policy and whose personal information may be processed for the provision of insurance and related services.

Personal information may be used by **us** for the purposes of administering **your** policy including decision making on provision of insurance cover, underwriting, processing and claims handling. **We** may also use **your** personal information for other related matters such as customer service, analysis, complaints handling and the detection and prevention of crime. The information **you** have supplied may be passed to other insurers and reinsurers for underwriting and claims purposes or to other third party service providers used by **us** in fulfilling **your** insurance contract.

We may send **your** personal information in confidence to other companies who provide services to **us** for processing and storage. This may mean sending information to countries outside of the United Kingdom, European Union or European Economic Area that may not have the same levels of privacy legislation as in the United Kingdom, European Union or European Economic Area. When **we** do this, **we** will ensure that **we** transfer the data securely and accordingly to regulatory requirement. **You** have various rights in relation to personal information that is held by **us**, including the right to request access to **your** personal information, the right to correct inaccurate personal information or the right to request the deletion or suppression of personal information where this is not restricted by any conflicting legitimate interest.

This notice explains certain aspects of how **we** use **your** information and what rights **you** have in relation to **your** personal information, however **you** can obtain more information about how **we** use **your** data by reviewing **our** full privacy policy. **Our** privacy policy is available to read on **our** website www.whitehorseinsurance.eu.

Your data will be treated in accordance with **our** privacy policy.

Data Protection of Compare Now Limited Trading as Yes Insurance

Compare Now Limited trading as Yes Insurance and its associated companies are committed to protecting **your** privacy and personal information at all times and ensure that all personal data processed by Compare

Now Limited trading as Yes Insurance in the course of administering **your** policy is done so in compliance with the relevant data protection legislation.

To administer **your** policy Compare Now Limited trading as Yes Insurance will process and store information about **you** provided by **you**. This notice applies to anyone who is insured under this Yes Insurance policy and whose personal information may be processed for the provision of insurance and related services.

Personal information may be used by Compare Now Limited trading as Yes Insurance for the purposes of arranging **your** policy; including but not limited to customer service, analysis, complaints handling and the detection and prevention of crime. The information **you** have supplied will also be passed to the **underwriter** for fulfilment of **your** insurance contract and for claims purposes. Please refer to the data protection section contained further within the policy wording for further details on how the **underwriter** processes **your** data.

You have various rights in relation to personal information that is held by Compare Now Limited trading as Yes Insurance, including the right to request access to **your** personal information, the right to correct inaccurate personal information, or the right to request the deletion or suppression of personal information where this is not restricted by any conflicting legitimate interest.

This notice explains certain aspects of how Compare Now Limited trading as Yes Insurance use **your** information and what rights **you** have in relation to **your** personal information, however **you** can obtain more information about how Compare Now Limited trading as Yes Insurance use **your** data by reviewing Compare Now Limited trading as Yes Insurance full Privacy Policy. **Your** data will be treated in accordance with Compare Now Limited trading as Yes Insurance Privacy Policy.

Pilgrimage Travel Insurance Medical Declaration Form

We hope you are looking forward to your upcoming trip. If you have a medical condition and you are on prescribed medication, Section A and Section B of this Medical Declaration Form must be completed by you, and Section C must be completed by your GP. This form must be completed within 45 days of the trip start date otherwise your medical condition will be excluded. This form must accompany you on your trip. If there are any changes to your medical condition, prescribed medication, or if you receive or are awaiting any medical treatment, tests, or investigations after completing the form, you will need to have the form filled out again before your trip begins. You must give full and true answers to all questions on this form. Your cover could be invalid if you provide us with incorrect or incomplete information. Please complete the form in block capitals.

Note: If you have no medical conditions and you are not on prescribed medication, this Medical Declaration Form does not need to be completed.

Section A: Your Personal Details - To Be Completed By The Insured Person

Personal Details

Insured Title: Mr ☐ Mrs ☐ Ms ☐

Insured Name: _____

Address: _____

Telephone: _____ DOB: _____

Occupation: _____

Email: _____

GP Name: _____

GP's Address: _____

Trip Details

Dates of Trip: _____ From: _____ To: _____

Destination: _____

No. of Days: _____

Section B: Insured Declaration - To Be Completed By The Insured Person

1. I declare that I am not travelling against the advice of a medical practitioner and that I have consulted my regular GP concerning my medical conditions and the trip that I am planning to undertake. (If you have a medical condition, your GP must have signed Section C below)
2. I declare that my regular GP has declared that I am fit to travel and fully partake in the planned trip and that my medical records have been noted accordingly. (If you have a medical condition, your GP must have signed Section C below)
3. I declare that I am not travelling with the intention of having medical treatment abroad.
4. I declare that the above information is true and accurate and authorise the Underwriter/ Insurer to approach my GP and obtain any information they may require from my medical records.
5. I declare that I have received and reviewed the Pilgrimage Travel Insurance policy documents, including the policy wording, Insurance Product Information Document, and certificate of Insurance. I understand and agree to the associated terms and conditions.

Signature: _____

PLEASE PRINT NAME HERE: _____ Date: _____

This Declaration Form MUST be submitted to White Horse Insurance Ireland dac or your claims handler in the event of a claim.

Completed By Your General Practitioner (GP) (Within 45 Days of the Trip Start Date)

General Practitioner Use Only

Please **DO NOT** sign this form if, in your professional opinion, your patient may not be able to undertake the complete trip or if your patient is travelling with the intention of receiving medical treatment. Please consider that your patient may be travelling by Air and the impact that their travel arrangements may have where your patient has a condition such as COPD.

- I am the patient's general practitioner and at the time of signing, I know of no medical reason why my patient should not fly and partake in the intended trip. I confirm that the medical records of my patient have been noted accordingly.

Signature of GP: _____

PLEASE PRINT NAME HERE: _____ Date: _____

**Under no circumstances should
you back date this form.**

**THE PROVISION OF OR SIGNING THIS FORM
DOES NOT CONSTITUTE AN ADMISSION OF
OUR LIABILITY UNDER THIS POLICY.**

WH/YPII/MedDec/0824v1

GP STAMP: Full Surgery Address including eircode/
postcode and Telephone Number(s):

Date

**Are you ready
for your trip?**

**Now that you are about to head off
on your trip, make sure that you have got
everything covered with our checklist below.**

Your last-minute holiday checklist

✓ Medical Declaration Form

- If you have any medical conditions, you must have your general practitioner (GP) complete and sign the Medical Declaration Form no later than 45 days before your trip start date.
- This signed form must accompany you on your trip. If you need to make a medical or curtailment claim, you will be required to provide a copy of the completed Medical Declaration Form. You can obtain the form from the issuing agent, the Pilgrimage Tour Operator, and it is included at the back of this policy.
- If the Medical Declaration Form is not signed by your general practitioner (GP) before your trip, any medical conditions you have will be excluded from coverage, and you will not be covered for any related claims.
- Bring copies of the documents with you and store them separately from the originals, in case the originals are lost or stolen.

✓ Comprehensive Insurance

- Make sure your policy covers the full duration of your trip and any activities you may want to do.

✓ Get all of your documents ready

- **Ireland/EU passports:** check that your passport is valid up to your date of return.
- **UK passports:** check that your passport was issued within the last 10 years and that it has 3 months validity left from the return date from the EU. **Other nationalities:** It is your responsibility to check entry requirements for the country you are travelling to.
- Make photocopies of your passport, tickets and insurance documents, and leave them at home. Also take copies with you and keep separately to your originals in case of loss or theft.
- Find out how your traveller's cheques and credit cards can be replaced if lost and take emergency numbers with you.

✓ Vaccinations

- Check with your GP as soon as possible to find out which vaccinations or medication you might need.

✓ Know your destination

- Find out about local laws and customs and pack a guidebook. It's also a good idea to check out the Department of Foreign Affairs website - www.ireland.ie/en/dfa/overseas-travel/advice
- The Department of Foreign Affairs (DFA) and the World Health Organization (WHO) periodically issue guidelines about locations around the world and whether it is advisable to travel to, or within, such locations. The contact details are Department of Foreign Affairs, Iveagh House, 80 St. Stephen's Green Dublin 2, D02 VY53. Tel: +353 01 408 2000. Website: www.dfa.ie

✓ Tell others about your trip

- Make sure somebody knows where you're going and knows how to get hold of you in case of an emergency.

✓ Some handy holiday tips

- We want you to have the best holiday possible, so we've included a few simple tips to help you relax once you've reached your destination.

✓ When you're abroad

- Make sure that all of your travel documents, including your currency, passport and insurance are safe.
- Try and stick to bottled water and keep well hydrated if you're out in the sun.
- Always wear sun lotion when you're out and about, even on the ski slopes!
- Check your guidebook for local information. Try and be aware of local laws, public holidays and nearby medical services.
- It's a good idea to keep all of your receipts for reference.

Additional Information - Reciprocal Health Agreements

European Health Insurance Card (EHIC)

If the insured intends to travel within the European Economic Area, we advise the insured must obtain a European Health Insurance Card (EHIC) to take with the insured when the insured travels.

For more information on the European Health Insurance Card, the insured should contact:

- Their local post office or their local health office.
- Further information about the EHIC can be obtained on the government information website www.citizensinformation.ie under the section "Travel and Recreation".
- You can apply for an EHIC if you're living in Ireland and intend to live in Ireland for at least 1 year. You can apply:
 - in person - visit your local public EHIC office.
 - online - if you have a medical card or Drugs Payment Scheme card.
 - by post - if you live in Dublin North West, Cork North & South Lee.

UK Global Health Insurance Card (GHIC)

You can apply for a UK GHIC through the NHS website if you're a resident in Northern Ireland.





T: +353 1 270 9774
E: info@yesinsurance.ie
W: yesinsurance.ie

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