Annual Multi-Trip Travel Insurance

Product Disclosure Statement
Atención – Este documento está escrito en inglés. Es importante que Vd entienda los puntos, las condiciones, las limitaciones y las exclusiones que se encuentran en esta política de seguro así como la Declaración de Revelación del Producto. Si no entiende el inglés escrito organícese con alguien que le pueda traducir el documento.

Attenzione – Questo documento è scritto in inglese. È importante che Lei comprenda i termini, le condizioni, i limiti e le esclusioni contenute in questa polizza di assicurazione ed il documento intitolato Product Disclosure Statement. Se Lei non comprende bene l’inglese, Le raccomandiamo di cercare qualcuno che possa tradurLe il documento.

«Προσοχή» - Αυτό το έγγραφο είναι στην Αγγλική γλώσσα και είναι εξαιρετικά σημαντικό να εννοήσετε τους όρους, τις αιρέσεις, τους περιορισμούς και τις αποκλεισμούς (ή αρνήσεις εκδοχής) που εμπεριέχονται σ’ αυτό το ασφαλιστικό συμβόλαιο, και στην Αποκαλυπτική Δήλωση Προϊόντων. (Product Disclosure Statement). Αν δεν καταλαβαίνετε την Αγγλική γλώσσα, σας παρακαλούμε να κανονίσετε να σας μεταφράσει κάποιος αυτό το έγγραφο.

Xin lưu ý – Tài liệu này bằng tiếng Anh. Điều quan trọng là quý vị hiểu các quy định, điều kiện, giới hạn và những trường hợp bị loại ra trong hợp đồng bảo hiểm này và Bản Tường Trình Chỉ Tiết Sản Phẩm (Product Disclosure Statement). Nếu không hiểu tiếng Anh, xin quý vị nhờ người khác dịch tài liệu này giảm quá vị.

注意——本文件为英语文件。你了解本保险单和《产品披露说明书》中的条款、条件、限制和除外责任很重要。如果您不懂英语，请安排找人给您翻译。

注意 - 這份文件用英文書寫. 您明白這保險單的期限,條款和限制和除外責任很重要. 如果您不懂英文, 請安排他人為您翻譯這份文件。

PDS Date Prepared 16/03/2018
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Important Information

The purpose of the PDS

The purpose of this Product Disclosure Statement (PDS) is to help you understand the insurance policy and provide you with sufficient information to enable you to compare and make an informed decision about it.

This Product Disclosure Statement was completed on 13 March 2018.

The information in this PDS was current at the date of preparation. We may update some of the information in the PDS that is not materially adverse from time to time without needing to notify you. You can obtain a copy of any updated information by contacting us.

We will give you a free paper copy of any updates if you request them. In some circumstances this PDS may be amended by a Supplementary Product Disclosure Statement.

Who is the insurer

AAI Limited ABN 48 005 297 807, trading as Vero Insurance AFS Licence No. 230859 is the insurer and issuer of this Product Disclosure Statement. You may contact Vero Insurance by calling:

— the telephone number shown on your schedule;
— your insurance adviser; or
— 1800 285 712

or alternatively by writing to us at:

Vero Insurance
GPO Box 1619
Adelaide SA 5001

Vero is solely responsible for any insurance policy issued and for the contents of this PDS. Suncorp Insurance is a brand of AAI Limited.
Cooling off period

We understand that people may change their mind or decide that this insurance is not suited to their needs after all. You have the right to cancel this insurance policy within 30 days of the date it was issued to you ("cooling off period"), unless you have already commenced your journey or you make a claim under the policy within the cooling off period. If it is cancelled in this time, we will return the amount you have paid.

How much protection do we provide?

The insurance we offer you is set out in this PDS.

It is important that you:

— read all of the PDS to make sure that it gives you the protection you need, and
— are aware of the limits on the amounts we will pay you under this PDS.

You will find these limits:

— stated in the PDS itself (these are our standard policy limits), and
— stated in your schedule.

Foreign currency exchange rates

If you are entitled to be compensated for a transaction that was made in a foreign currency, we will pay you in Australian dollars using the exchange rate that applied at the time of your transaction. If you are unable to provide us with evidence of the applicable exchange rate (for example, using credit card or bank statements), we will apply an exchange rate recommended by our financial advisors. Details of this exchange rate will be provided to you when payment is made.
Choosing the insurance you need

When you buy this travel policy, you must select either a Single Policy or a Family Policy.

A Single Policy, covers only the person named as the insured on your schedule, and up to one child or grandchild who accompanies them on the journey.

A Family Policy, covers the person(s) named as the insured on your schedule, and their husband, wife or de-facto partner, and their children or grandchildren who accompany them on the journey.

The policy type you select is shown on your schedule.

The amount you pay for this insurance

The premium is the amount we calculate that reflects the likelihood of you making a claim together with other factors related to our cost of doing business.

Your premium also includes any applicable goods and services tax (GST), stamp duty and levy.

You must pay the premium by the due date to get this insurance cover.

If you make changes to your policy, it may affect the premium you need to pay.

We consider a number of factors in calculating your premium. For further details of the factors which impact your premium, please refer to our Secure TM Travel Insurance Premium, Excess and Claims Guide available at www.vero.com.au/PED. A copy of the Secure TM Travel Insurance Premium, Excess and Claims Guide is also available on request, at no charge, if you contact Vero Insurance on 1800 285 712.
Our contract with you

The contract

In the contract between you and us:

— we agree to provide you with the insurance you select and which is shown in your schedule, and
— in return, you agree to pay us your premium.

The premium is shown as the amount payable on your schedule.

You must pay this total amount when you take out your policy.

Your insurance only starts when you pay this total amount. If you have not paid, you have no insurance.

Terms and conditions of the contract

All the terms and conditions of the insurance contract are set out in:

— this PDS, and
— your schedule. Your schedule is the most recent schedule we have given you.

These terms and conditions apply if you have to make a claim – so it is important that you:

— read this PDS and the schedule carefully,
— check that your details on the schedule are correct and up to date,
— keep proof of ownership and receipts for items you take on the journey or obtain during the journey (it is best to keep these documents separate from the items they relate to), and
— keep the PDS and schedule together in a safe place.

About authorised representatives and distributors

If an authorised representative or distributor of ours arranges this policy:

— they will be acting with the authority of Vero and be our authorised representative or distributor, not
your agent, in all matters concerning this insurance,
— they will receive a commission, and
— neither the authorised representative or distributor nor
any of its related companies guarantees the benefits
payable under the contract.

Where you are covered

We will cover you when you travel:
— anywhere outside Australia, and
— in a State or Territory of Australia other than the State or
Territory where your home or usual place of business or
employment is located when the event giving rise to the
claim occurs.

Period of insurance

The period of insurance begins from the time you
commence each journey or the travel start date shown on
your schedule (whichever happens last), and ends at the
earliest of the following times:
— when you complete the journey, or
— the expiry of 90 days following commencement of the
journey, or
— on the expiry date shown on your schedule,

Cover for Section 1 - Cancelled travel and accommodation
expenses, begins from the date we issue you this policy.

There is no limit to the number of journeys you can make
during the period of insurance, but cover is limited to the
first 90 days of each journey.
When cover is provided

You can claim as described under the “What you are covered for” column of each Section, up to the amount specified in the “How much you are covered for” column, if:

— the event that gives rise to the claim occurs during the period of insurance, and
— with the exception of Section 1, the event that gives rise to the claim occurs while you are on your journey, and
— the claim is not excluded as described under the “What you are not covered for” column, and
— the claim is not excluded as described by the General Exclusions listed on pages 58 to 60.

You may also have to pay an excess for each claim.

Pre-existing medical conditions

Disclosure of pre-existing medical conditions

When you apply for a policy you are required to disclose:

1. the following medical conditions which you or your travelling companion(s) have ever had, prior to the policy issue date shown on your schedule, even if you or your travelling companion(s) do not wish to be covered for them or no longer receive treatment for them:
   — heart (cardiac) condition;
   — lung or respiratory condition (other than asthma if it meets the criteria under the Tier 1 category – see below);
   — kidney (renal) condition;
   — reduced immunity;
   — dementia or documented memory problems; and
   — metastatic (secondary) cancer.

2. any pre-existing medical condition(s) (defined on pages 68 to 69 of the PDS) suffered by you or your travelling companion and that you wish to be covered for – apart from conditions that meet the criteria under the Tier 1 category (see below) which are automatically covered for no additional premium.
We will endorse your policy to specify each condition that we agree to cover. Cover for the condition(s) will only apply after you pay any additional premium that we require.

In each case, you will need to complete an Assessment Form (available by contacting Vero on 1800 285 712) before we agree to issue a policy. Depending on the condition(s), we may decline or limit cover, or agree to provide cover for an additional premium.

Pre-existing medical condition exclusion:

This policy excludes claims arising from pre-existing medical conditions (defined on pages 68 to 69 of the PDS) you or other people have, unless:

— the condition meets the criteria under the Tier 1 category (see below), where it is automatically covered; or
— the condition has been disclosed to us, and we have endorsed your policy to cover the condition and you have paid any additional premium that we require.

Tier 1 – Pre-existing medical conditions:

You do not need to disclose the following pre-existing medical conditions, which are automatically covered for no additional premium where you or your travelling companion meet the specified criteria:

Asthma — if the person is under 60 years of age and there has not been any exacerbation requiring treatment by a medical practitioner in the last 12 months.

Breast Cancer / Prostate Cancer — if the person was diagnosed over 12 months ago, has not had any chemotherapy or radiotherapy in the last 12 months, the cancer has not spread beyond the breast or prostate at any time, and your journey is less than 6 months. In respect of Prostate Cancer the person must also have a P.S.A. of 3.0 or less.

Cataracts / Glaucoma — if the person has no ongoing complications, is not on a waiting list for eye surgery and has not had eye surgery in the last 30 days.
Coeliac Disease — if the condition has not required treatment by a medical practitioner in the last 6 months.

Diabetes / Glucose Intolerance — if the person was diagnosed over 12 months ago and has not had any complications in the last 12 months. The person must also have a Blood Sugar Level reading between 4 and 10 and also be under 50 years of age.

Ear Grommets — with no current infection.

Epilepsy — if there are no underlying medical conditions (e.g. previous head trauma, stroke) and the person has not required treatment by a medical practitioner for a seizure in the last 2 years.

Gastric Reflux — if the condition does not relate to another underlying diagnosis (e.g. Hernia/Gastric Ulcer).

Gout — if the gout has remained stable for the last 6 months.

Hay Fever (Allergic Rhinitis) — if the condition has not required treatment by a medical practitioner in the last 6 months and the person has no known respiratory conditions e.g. Asthma.

Hiatus Hernia — if no hernia surgery is planned.

Hip / Knee Replacement — if performed more than 6 months ago and less than 10 years ago.

Hypercholesterolemia (High Cholesterol) — if the person has no known heart conditions.

Hypertension (High Blood Pressure) — if the person has
no known heart conditions and the current Blood Pressure reading is lower than 165/95.

Menopause — provided the person does not suffer from Osteoporosis.

Peptic Ulcer — if the condition has remained stable for the last 6 months.

Underactive Thyroid — if not as a result of a tumour.

How the health of relatives and business partners not travelling with you impact the cover of your policy

You are not covered under any section of the policy for loss, cost or liability caused by or arising from or involving a pre-existing medical condition of a relative or business partner. The relevant definition of pre-existing medical conditions is on pages 68 to 69.

We may require medical reports and medical history for your claims triggered by the health of a relative or business partner in order to assess your claim.

24-hour emergency medical and travel assistance

All insured persons have access to our emergency medical and travel assistance team. This experienced team work around the clock assisting our customers when they are in need of help. The majority of requests for assistance are for customers requiring:

— Medical treatment
  Our team of doctors, nurses and case managers can assist in helping you to find medical facilities and monitor your medical care.

— Payment of hospital bills
  Once your claim is approved we will pay your hospital bills directly to the hospital where possible.

— Evacuation or repatriation
  We can assist with and co-ordinate an evacuation or repatriation where we determine it is appropriate.
— Assistance when passports, travel documents or credit cards are lost or stolen. If you need assistance in contacting the issuer of the document, we can help.
— Assistance with rescheduling travel arrangements as a result of an emergency.

Where relevant all services are subject to a claim being accepted under the policy.

Emergency medical and travel assistance services are managed by an external provider on our behalf.

To obtain Emergency Assistance

Should you require emergency medical or travel assistance you can contact our emergency assistance team on the number below. When you call please advise us of your:
— policy number, and
— contact phone number

Please call an international operator and request that they call Australia reverse charge on:

Phone: +61 (7) 3305 7057 (24 hrs/7 days a week)

Free extension of the period of insurance

If we agree that you are unable to return to your home in Australia within the period of insurance, and that inability arises from a claimable event that occurred under Section 1, 2, 3, 5 or 6 of this PDS, we will extend the period of insurance to allow you to complete your journey by the next available and convenient means of transportation. The maximum duration we will extend the period of insurance is 6 months from the time that you intended to complete your journey.
Section 1 – Cancelled travel and accommodation expenses

A standard **excess** applies to any claim paid under this Section. This **excess** will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
</table>
| **Benefits of this Section.**  
This Section has 3 sub-sections. | **Benefit Limits** |
| 1.1 **We** will pay **your** cancelled travel and accommodation expenses if: | **Single Policy** |
| a. these expenses are incurred due to any unforeseen circumstances outside **your** control, and | Unlimited reasonable expenses. |
| b. **you** have already paid the expenses **you** are claiming for, and | |
| c. **you** cannot recover these expenses from anyone else, and | |
| d. these expenses are incurred during the **period of insurance**, and | |
| e. **you** have not already undertaken that part of the **journey you** are claiming for, and | |
| f. **we** have not already paid a claim under Section 3 that arises from the same event. | |
## Section 1 – Cancelled travel and accommodation expenses

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

### What you are covered for:

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>What you are not covered for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Policy</td>
<td>Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.</td>
</tr>
</tbody>
</table>

Unlimited reasonable expenses.

**Benefits of this Section.**

This Section has 3 sub-sections.

### Benefit Limits

#### Single Policy

1.1 We will pay your cancelled travel and accommodation expenses if:

- a. these expenses are incurred due to any unforeseen circumstances outside your control, and
- b. you have already paid the expenses you are claiming for, and
- c. you cannot recover these expenses from anyone else, and
- d. these expenses are incurred during the period of insurance, and
- e. you have not already undertaken that part of the journey you are claiming for, and
- f. we have not already paid a claim under Section 3 that arises from the same event.

#### Family Policy

Unlimited reasonable expenses.

**We will not pay a claim for your cancelled travel and accommodation expenses that arise because:**

a. **you** change **your** mind or are disinclined to proceed, or

b. of **your** financial circumstances, or

c. of any request or direction of **your** employer, or any business or contractual obligation, or

d. of a delay, rescheduling or cancellation caused by the **transport provider**, or

e. the travel agent, tour operator, or travel wholesaler is at fault or has made a mistake in **your** travel arrangements, or

f. there were not enough people to go on a group travel or tour, or

h. of transport or traffic delays, or

i. **illness** or **injury** of someone other than **you**, **your travelling companion** or a **relative**, or...
Section 1 – Cancelled travel and accommodation expenses (continued)

A standard **excess** applies to any claim paid under this Section. This **excess** will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
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</thead>
<tbody>
<tr>
<td>Benefits of this Section. This Section has 3 sub-sections.</td>
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</tr>
<tr>
<td></td>
<td>Single Policy</td>
</tr>
<tr>
<td></td>
<td>Unlimited reasonable expenses.</td>
</tr>
</tbody>
</table>

1.2 **We** will pay your actual travel agent’s cancellation fee if **we** have agreed to pay a claim under Section 1.1. The actual travel agent’s cancellation fee up to $1,000 or 10% of the cost of the cancelled travel and accommodation expenses, whichever is less.

1.3 If your airline tickets were purchased using frequent flyer or similar scheme points, **we** will pay you the cash equivalent of your frequent flyer or similar scheme points that are lost following cancellation of your airline ticket(s). Unlimited reasonable expenses.
<table>
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<th>Benefit Limits</th>
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<td>Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.</td>
</tr>
<tr>
<td>Unlimited reasonable expenses.</td>
<td>j. you failed to obtain a valid passport or visa, or k. of the death, injury, illness, sickness or disease of you, your travelling companion or a relative first occurring after the policy issue date shown on your schedule unless you provide us with documentation from the treating doctor confirming that you, your travelling companion or the relative cannot start or continue the journey.</td>
</tr>
<tr>
<td>The actual travel agent’s cancellation fee up to $1,000 or 10% of the cost of the cancelled travel and accommodation expenses, whichever is less.</td>
<td>We will not pay a claim under Section 1.2 if you do not provide us with a written report from your travel agent confirming their actual cancellation fee. We will also not pay a claim under Section 1.2 if your claim is excluded under Section 1.1.</td>
</tr>
<tr>
<td>Unlimited reasonable expenses.</td>
<td>We will not pay a claim under Section 1.3 if you do not provide us with a written report from your frequent flyer or similar scheme points provider, showing the cash equivalent of your lost points. You cannot claim under Section 1.3 if we have already paid your claim for cancellation expenses that arises from the same event, under Section 1.1. We will not pay a claim under Section 1.3 if your claim is excluded under Section 1.1.</td>
</tr>
</tbody>
</table>
Section 2 – Overseas medical and dental expenses

A standard **excess** applies to any claim paid under this Section. This **excess** will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section. This Section has 4 sub-sections.</td>
<td>Benefit Limits</td>
</tr>
<tr>
<td></td>
<td>Single Policy</td>
</tr>
</tbody>
</table>

2.1 **We** will pay your medical expenses if, during your journey:

a. they are incurred outside Australia, and

b. **you** have contracted an **illness**, or sustained an **injury**, and

c. they are incurred within 12 months from the date the **injury** or **illness** first occurred, and

d. **you** allow **us** the option, at **our** expense and subject to medical advice, of returning **you** to **your** home.

**You** must provide us with a written report from **your** treating doctor that provides details of the **illness** or **injury**.

Unlimited reasonable expenses.
## Section 2 – Overseas medical and dental expenses

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

### What you are covered for:

**Benefits of this Section.**

This Section has 4 sub-sections.

**Benefit Limits**

**Family Policy**

Unlimited reasonable expenses.

### What you are not covered for:

Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.

**We** will not pay a claim under Section 2.1 if the expenses:

- are incurred in Australia, or
- are recoverable from Medicare, a medical or hospital benefit fund, or
- are recoverable under any Reciprocal Health Agreement.
Section 2 – Overseas medical and dental expenses (continued)

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

<table>
<thead>
<tr>
<th>Benefits of this Section.</th>
<th>Benefit Limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>This Section has 4 sub-sections.</td>
<td>Single Policy</td>
</tr>
</tbody>
</table>

2.2 We will pay your dental expenses if:
   a. they are incurred outside Australia, and
   b. they are incurred during your journey, and
   c. they are incurred because you have sustained an injury, and
   d. we have agreed that these expenses are necessary to repair the damage.

You must provide us with a written report from your treating dentist that provides details of the injury.

2.3 We will pay the reasonable travel and accommodation expenses of another person to travel to your location and either stay with you or escort you home, if your overseas treating medical practitioner advises you in writing:
   a. to suspend your journey; and
   b. that a companion or escort is necessary.

Unlimited reasonable expenses.
<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>What you are not covered for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000</td>
<td></td>
</tr>
<tr>
<td>$2,000</td>
<td></td>
</tr>
<tr>
<td>Unlimited reasonable expenses.</td>
<td></td>
</tr>
</tbody>
</table>

**Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.**

**Benefit Limits**

**Family Policy**

**We** will not pay a claim under Section 2.2 for dental expenses that are incurred for any reason other than through injury.

**We** will also not pay a claim under Section 2.2 if the dental expenses:

- are incurred in Australia, or
- are recoverable from Medicare, a medical or hospital benefit fund, or
- are recoverable under any Reciprocal Health Agreement.

**We** will not pay a claim under Section 2.3 for any travel and accommodation expenses:

- once **your** overseas treating medical practitioner advises **you** that **you** are able to resume **your journey**, or
- that are incurred once **you** have returned home.
Section 2 – Overseas medical and dental expenses (continued)

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.4 If we agree to pay a claim for your medical expenses under Section 2.1, we will also pay for the expenses you incur in caring for any of your children and grandchildren who are travelling with you, if:</td>
<td>$2,000</td>
</tr>
<tr>
<td>a. your overseas treating medical practitioner advises you in writing to suspend your journey, and</td>
<td></td>
</tr>
<tr>
<td>b. you are incapacitated or hospitalised.</td>
<td></td>
</tr>
</tbody>
</table>

Note: when travelling within Australia the cover provided under this Section does not apply.
<table>
<thead>
<tr>
<th>What you are not covered for:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000</td>
<td>We will not pay a claim under Section 2.4 for any expenses that are incurred:</td>
</tr>
<tr>
<td></td>
<td>a. once your overseas treating medical practitioner advises that you are able to resume your journey, or</td>
</tr>
<tr>
<td></td>
<td>b. once you or your children and grandchildren have returned home.</td>
</tr>
</tbody>
</table>
### Section 3 – Additional transport and accommodation expenses

A standard **excess** applies to any claim paid under this Section. This **excess** will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section. This Section has 7 sub-sections.</td>
<td>Benefit Limits</td>
</tr>
</tbody>
</table>

#### 3.1 We will pay your reasonable additional transport and accommodation expenses if:

- **a.** you cannot complete your intended journey because you suffer an injury, illness, sickness or disease during your journey, or

- **b.** you have to return to your home in Australia because of the unexpected death, injury, illness, sickness or disease of a relative or travelling companion during your journey.

**We** will only pay for these additional transport and accommodation expenses if they are actually incurred by you and are additional to your prepaid and pre-arranged transport and accommodation.

<p>| | |</p>
<table>
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<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Unlimited reasonable expenses, less any amounts that are recoverable on unused transport and accommodation vouchers or tickets.</td>
</tr>
</tbody>
</table>

#### 3.2 If you die during your journey, we will pay, (at your estate administrators option) for either your overseas funeral or cremation expenses or the cost of returning your remains to your home.

$10,000
Section 3 – Additional transport and accommodation expenses

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

What you are covered for:

How much you are covered for

What you are not covered for:

Benefits of this Section.

This Section has 7 sub-sections. Benefit Limits

Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.

Family Policy

Unlimited reasonable expenses, less any amounts that are recoverable on unused transport and accommodation vouchers or tickets.

We will not pay a claim under Section 3.1 if:

a. you do not provide us with a written report from your treating medical practitioner stating that you are unfit to continue your intended journey, or

b. you do not provide us with a written report from the treating medical practitioner of your relative or travelling companion to confirm their unexpected death, injury, illness, sickness or disease, or

c. the injury, illness, sickness or disease suffered is not of such significance to require a reasonable person to return to Australia.

We will also not pay for consequential living expenses including but not limited to food, laundry services or telephone calls.

$15,000

We will not pay for funeral or cremation expenses incurred in Australia.
## Section 3 – Additional transport and accommodation expenses (continued)

A standard **excess** applies to any claim paid under this Section. This **excess** will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section. This Section has 7 sub-sections.</td>
<td>Benefit Limits</td>
</tr>
<tr>
<td>3.3 If your business partner unexpectedly dies, or suffers from an <strong>injury, illness, sickness or disease</strong> during your journey, we will pay your reasonable additional transport and accommodation expenses if it is necessary for you to return to your home in Australia for the purposes of business continuation.</td>
<td><strong>Unlimited reasonable expenses, less any amounts that are recoverable on unused transport and accommodation vouchers or tickets.</strong></td>
</tr>
<tr>
<td>3.4 If your home is destroyed by a <strong>natural disaster</strong> during your journey, we will pay your additional transport and accommodation expenses in returning you to your home.</td>
<td><strong>Unlimited reasonable expenses, less any amounts that are recoverable on unused transport and accommodation vouchers or tickets.</strong></td>
</tr>
<tr>
<td>3.5 If your scheduled public transport provider services are interrupted due to an unforeseen: a. strike, b. riot, c. civil commotion, d. <strong>natural disaster</strong>, or e. severe weather event; We will pay your reasonable additional transport and accommodation expenses, if they are actually incurred by you during your journey and are additional to your pre-paid and pre-arranged transport and accommodation.</td>
<td><strong>Unlimited reasonable expenses, less any amounts that are recoverable on unused transport and accommodation vouchers or tickets.</strong></td>
</tr>
</tbody>
</table>
### What you are not covered for:

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Policy</td>
<td>We will not pay a claim under Section 3.3 if you do not provide us a written report from your business partner’s medical practitioner that they are unfit to perform their normal business duties. We will also not pay for consequential living expenses including but not limited to food, laundry services or telephone calls.</td>
</tr>
<tr>
<td></td>
<td>We will not pay a claim under Section 3.4 if your home is destroyed by any event other than natural disaster. We will also not pay for consequential living expenses, including but not limited to food, laundry services or telephone calls.</td>
</tr>
<tr>
<td></td>
<td>We will not pay a claim under Section 3.5 if you do not provide us a written report from your scheduled public transport provider, confirming the circumstances of the interruption. We will also not pay a claim under Section 3.5 where the interruption was caused by any event other than those listed in Section 3.5 under ‘what you are covered for’. We will also not pay for consequential living expenses including but not limited to food, laundry services or telephone calls.</td>
</tr>
</tbody>
</table>
Section 3 – Additional transport and accommodation expenses (continued)

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
</table>
| **Benefits of this Section.**  
**This Section has 7 sub-sections.** | **Benefit Limits** |
| **3.6 If your passport or travel documents are lost, stolen or damaged during your journey, we will pay the reasonable additional transport and accommodation expenses incurred by you during your journey in obtaining a replacement passport or travel documents.** | **Single Policy**  
Unlimited reasonable expenses, less any amounts that are recoverable on unused transport and accommodation vouchers or tickets. |
| **3.7 If you are directed into quarantine during your journey, we will pay reasonable additional transport and accommodation expenses incurred by you.** | **Unlimited reasonable expenses, less any amounts that are recoverable on unused transport and accommodation vouchers or tickets.** |
### What you are covered for:

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>What you are not covered for:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Family Policy</strong></td>
<td>Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.</td>
</tr>
</tbody>
</table>
| Unlimited reasonable expenses, less any amounts that are recoverable on unused transport and accommodation vouchers or tickets. | **We** will not pay a claim under Section 3.6 if **your** passport or **travel documents** are confiscated by any government authority, customs official or police.  
**We** will also not pay for consequential living expenses, including but not limited to food, laundry services or telephone calls. |
| Unlimited reasonable expenses, less any amounts that are recoverable on unused transport and accommodation vouchers or tickets. | **We** will not pay a claim under Section 3.7 if **you** do not take all reasonable steps to meet any quarantine regulations.  
**We** will also not pay for consequential living expenses, including but not limited to food, laundry services or telephone calls. |
Section 4 – Cash paid while you are in hospital

No excess applies to any claim paid under this Section.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section.</td>
<td>Benefit Limits</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Single Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1 <strong>We</strong> will pay <strong>you</strong> a cash allowance if:</td>
</tr>
<tr>
<td>a. <strong>we</strong> agree to pay <strong>your</strong> claim for overseas medical expenses under Section 2, and</td>
</tr>
<tr>
<td>b. <strong>you</strong> are an in-patient in an overseas hospital for a period of more than 48 hours.</td>
</tr>
</tbody>
</table>

$100 for every day that **you** are an in-patient in a hospital, up to a maximum of $6,000.

Note: when travelling within Australia the cover provided under this Section does not apply.
### Section 4 – Cash paid while you are in hospital

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Policy</td>
<td>$100 for every day that <strong>you</strong> are an in-patient in a hospital, up to a maximum of $12,000. We will not pay a claim under Section 4.1 for any period when <strong>you</strong> are an in-patient in a hospital in Australia.</td>
</tr>
</tbody>
</table>

**What you are covered for:**

- We will pay you a cash allowance if:
  - a. we agree to pay your claim for overseas medical expenses under Section 2,
  - b. you are an in-patient in an overseas hospital for a period of more than 48 hours.

**What you are not covered for:**

- Benefit Limits
- Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.

**Single Policy**

**Family Policy**

- $100 for every day that **you** are an in-patient in a hospital, up to a maximum of $6,000.
Section 5 – Delayed transport – Accommodation and meal expenses

No excess applies to any claim paid under this Section.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section. This Section has 2 sub-sections.</td>
<td>Benefit Limits</td>
</tr>
<tr>
<td></td>
<td>Single Policy</td>
</tr>
</tbody>
</table>

5.1 We will pay your reasonable accommodation and meal expenses if:

- your transport provider has delayed your scheduled transport departure time for 12 hours or more during your journey, and
- the cause of delay is outside your control, and
- you have actually incurred these expenses because of the delay, and
- you supply us with a written report from your transport provider confirming the delay, and
- these expenses are not recoverable from the transport provider, and
- you have provided us with receipts for the incurred expenses.

Up to $250 for each 12 hour period of delay, up to a maximum of $1,000 in total.

5.2 We will pay any relocation fee charged by a vehicle rental company and incurred by you for relocating their vehicle from where you leave it to their nearest depot, provided the relocation was necessarily caused by a travel delay which was outside your control.

Up to $500
### Section 5 – Delayed transport – Accommodation and meal expenses

**Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.**

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>What you are covered for:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Family Policy</strong></td>
<td><strong>What you are covered for:</strong></td>
</tr>
<tr>
<td>Up to $500 for each 12 hour period of delay, up to a maximum of $2,000 in total.</td>
<td><strong>How much you are covered for:</strong> Up to $250 for each 12 hour period of delay, up to a maximum of $1,000 in total.</td>
</tr>
</tbody>
</table>

**We** will not pay a claim under Section 5.1 if **your** accommodation and meal expenses are incurred because of hijack, strike, riot or civil commotion.

<table>
<thead>
<tr>
<th><strong>Benefit Limits</strong></th>
<th><strong>What you are not covered for:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to $1,000</td>
<td><strong>We</strong> will not pay a claim under Section 5.2 if <strong>you</strong> do not provide <strong>us</strong> receipts for the incurred expenses.</td>
</tr>
</tbody>
</table>

**We** will not pay a claim under Section 5.2 if **you** do not provide **us** receipts for the incurred expenses.
Section 6 – Personal baggage and travel documents

Variable *excess* amounts may apply to claims paid under this Section. Please refer to the “How much you are covered for” columns for full details.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section. This Section has 4 sub-sections.</td>
<td>Benefit Limits</td>
</tr>
</tbody>
</table>

6.1 *We* will indemnify you for loss, damage or theft that occurs to your personal baggage, clothing or personal effects during your journey.

*We* will decide if *we* repair or replace the item, or pay you the amount it would cost *us* to repair or replace the item.

Where the item forms part of a set or pair, *we* will only pay the replacement value of the actual item that is damaged, lost or stolen. *We* will not pay to replace the set or pair.

<table>
<thead>
<tr>
<th>Single Policy</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A maximum of $8,000 for all claims, including up to: $4,000 per item of electronic equipment</td>
<td></td>
</tr>
<tr>
<td>$1,000 per item of sporting equipment</td>
<td></td>
</tr>
<tr>
<td>$900 per item for all other items.</td>
<td></td>
</tr>
<tr>
<td>A standard <em>excess</em> applies to any claim paid under this Section. This <em>excess</em> will be shown on your schedule.</td>
<td></td>
</tr>
<tr>
<td>An additional <em>excess</em> of $1,000 will apply to all claims paid under this Section, for theft of your personal baggage, clothing or personal effects from a motor vehicle.</td>
<td></td>
</tr>
</tbody>
</table>
Section 6 – Personal baggage and travel documents

Variable excess amounts may apply to claims paid under this Section. Please refer to the “How much you are covered for” columns for full details.

What you are covered for:

Benefits of this Section.
This Section has 4 sub-sections.

Benefit Limits

Family Policy
A maximum of $15,000 for all claims, including up to:
- $6,000 per item of electronic equipment
- $2,000 per item of sporting equipment
- $1,500 per item for all other items.
A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

An additional excess of $1,000 will apply to all claims paid under this Section, for theft of your personal baggage, clothing or personal effects from a motor vehicle.

What you are not covered for:

Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.

We will not pay a claim under Section 6.1 if you:

a. or your travelling companion have left or forgotten your personal baggage, clothing or personal effects unattended in a public place, or
b. or your travelling companion have not taken reasonable care to prevent the loss, theft or damage, or
c. have not reported the theft to either the police, local government authority or transport provider and provided us with a written report from them, or
d. do not comply with the requirement to report the loss, theft or damage to us as set out on pages 62 to 63.

We will also not pay a claim under Section 6.1 for:

1. loss or damage to fragile items, unless the loss or damage is caused by fire, or accident involving the transport vehicle in which the fragile item is being carried, or
Section 6 – Personal baggage and travel documents (continued)

Variable **excess** amounts may apply to claims paid under this Section. Please refer to the “How much **you** are covered for” columns for full details.

<table>
<thead>
<tr>
<th>What you are covered for</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefit Limits</td>
<td></td>
</tr>
<tr>
<td>Single Policy</td>
<td></td>
</tr>
</tbody>
</table>

| 6.2 We will pay **you** for the theft of **your** cash stolen while on **your** person and during **your** journey. Up to $250 for all claims paid under this Section. No **excess** applies to a claim paid under this sub-section. |

| 6.3 We will pay **you** for the loss, damage or theft of **your travel documents**, if they were lost, damaged, or stolen during **your** journey. **We** will only pay a claim under Section 6.3 if **you** have complied with the conditions under which the **travel documents** were issued. Up to $1,000 for all claims paid under this Section. No **excess** applies to a claim paid under this sub-section. |
### What you are not covered for:

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Policy</td>
<td>f. loss, damage or theft of personal baggage, clothing or personal effects that occurs whilst they have been sent in advance, mailed or shipped separately to the transport on which you are travelling, or</td>
</tr>
<tr>
<td></td>
<td>g. any damage as a result of cleaning, dyeing, repairing, wear and tear, mechanical failure, mildew, rust or corrosion, or the action of insects or vermin, or</td>
</tr>
<tr>
<td></td>
<td>h. any loss or damage to sporting equipment while it is being used.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Up to $500 for all claims paid under this Section. No excess applies to a claim paid under this sub-section.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>We will not pay a claim under section 6.2 if you do not comply with the requirement to report theft as set out on page 56.</td>
</tr>
<tr>
<td></td>
<td>We will also not pay a claim under Section 6.2 if the cash is stolen from any place other than on your person.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Up to $2,000 for all claims paid under this Section. No excess applies to a claim paid under this sub-section.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>We will not pay a claim under section 6.3 if you do not comply with the requirement to report loss, theft or damage as set out on pages 62 to 63.</td>
</tr>
</tbody>
</table>
Section 6 – Personal baggage and travel documents (continued)

Variable **excess** amounts may apply to claims paid under this Section. Please refer to the “How much **you** are covered for” columns for full details.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.4 <strong>We</strong> will pay <strong>you</strong> for the unauthorised use of <strong>your</strong> credit cards or <strong>negotiable instruments</strong> if they were stolen during <strong>your journey</strong>. <strong>We</strong> will only pay a claim under Section 6.4 if <strong>you</strong> have complied with the conditions under which the credit cards or <strong>negotiable instruments</strong> were issued.</td>
<td>Up to $500 for all claims paid under this Section. No <strong>excess</strong> applies to a claim paid under this sub-section.</td>
</tr>
</tbody>
</table>
### What you are covered for:

| Up to $1,000 for all claims paid under this Section. No excess applies to a claim paid under this sub-section. |

### What you are not covered for:

- **We** will not pay a claim under Section 6.4 if **you** do not comply with the requirement to report theft as set out on pages 62 to 63.

- **We** will also not pay a claim under Section 6.4 if **you** have not reported the theft to the credit card or **negotiable instrument** issuer, or the loss is recoverable from the issuer.
Section 7 – Accidental death

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section.</td>
<td>Benefit Limits</td>
</tr>
<tr>
<td></td>
<td>Single Policy</td>
</tr>
</tbody>
</table>

7.1 We will pay your estate if you die:
   a. during your journey, and
   b. as a direct result of an injury.

   $25,000 for all claims paid under this Section.
### Section 7 – Accidental death

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

**What you are covered for:**

**Benefit Limits**

<table>
<thead>
<tr>
<th>Family Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>$25,000 per person, up to $50,000 in total for all claims paid under this Section.</td>
</tr>
</tbody>
</table>

**Benefit Limits Exclusions**

We will not pay a claim under Section 7.1 if your death occurs more than one year after the injury.

**General Exclusions also apply to this Section of the policy.**

**What you are not covered for:**

- Single Policy
- Family Policy

$25,000 for all claims paid under this Section.

$25,000 per person, up to $50,000 in total for all claims paid under this Section.
Section 8 – Personal liability

No excess applies to any claim paid under this Section.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Benefits of this Section.</strong></td>
<td><strong>Benefit Limits</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Single Policy</strong></td>
</tr>
<tr>
<td></td>
<td>A maximum of $5 million for all claims arising from one event.</td>
</tr>
<tr>
<td></td>
<td>This maximum amount includes all legal costs and expenses.</td>
</tr>
</tbody>
</table>

8.1 **We** will pay for your legal liability if a court orders you to pay compensation, or if we accept that you are legally responsible for:
   a. injury to, or the death of someone other than you, or your family, or your travelling companion, or
   b. loss of or damage to property owned or controlled by someone other than you, or your family.

You can only claim for your legal liability if the event that gives rise to your legal liability is one that:
   a. you did not expect or intend to give rise to your legal liability, and
   b. occurs during your journey.

We will only pay for your legal liability if we agree to do so in writing before the expenses are incurred. You must contact us if you become aware of any legal liability proceedings made against you and you must allow us the option of representing you in any proceedings made against you.
### Benefit Limits

**Family Policy**

A maximum of $5 million for all claims arising from one event. This maximum amount includes all legal costs and expenses.

<table>
<thead>
<tr>
<th>What you are not covered for:</th>
<th>Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>We will not pay a claim under Section 8.1 for liability arising from:</strong></td>
<td><strong>We will also not pay a claim under Section 8.1 for any penalties, fines, or punitive, exemplary or aggravated damages that you or your family must pay.</strong></td>
</tr>
<tr>
<td>a. injury, illness, or death of you or your family, or your travelling companion, or</td>
<td><strong>We will also not pay a claim under Section 8.1 for liability arising from:</strong></td>
</tr>
<tr>
<td>b. loss of or damage to any property that is owned or controlled by you or your family, or</td>
<td>a. the use of any motor vehicles, watercraft, hovercraft, aircraft or aircraft landing areas, or</td>
</tr>
<tr>
<td>c. you or your family’s ownership of any land or building, or</td>
<td>b. the transmission of any illness, sickness or disease, or</td>
</tr>
<tr>
<td>d. you or your family’s unlawful, malicious, deliberate or intentional act, or</td>
<td>c. the vibration, removal or weakening of the support of any land or building.</td>
</tr>
</tbody>
</table>
Section 9 – Disability

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section.</td>
<td>Benefit Limits</td>
</tr>
</tbody>
</table>

9.1 **We** will pay you compensation if you suffer an injury during your journey, and your injury was caused solely by violent, accidental, external and visible means.

**We** will only pay you if your injury results in:

a. the permanent and total loss of sight in one or both eyes, or

b. the permanent and total loss of use of one or more limbs.

$10,000 for all claims paid under this Section.
### Section 9 – Disability

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

#### What you are covered for:

**Benefits of this Section.**

**Benefit Limits**

**Single Policy**

- **9.1** We will pay you compensation if you suffer an injury during your journey, and your injury was caused solely by violent, accidental, external and visible means.

- **We** will only pay you if your injury results in:
  - a. the permanent and total loss of sight in one or both eyes, or
  - b. the permanent and total loss of use of one or more limbs.

- **$10,000 for all claims paid under this Section.**

**Family Policy**

- **$10,000 per person, up to $25,000 in total for all claims paid under this Section.**

#### Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.

**We** will not pay a claim under Section 9.1 unless **your** disability is confirmed in a written report by a registered medical practitioner that confirms that the permanent nature of **your injury** was diagnosed less than one year after the **injury** occurred.
Section 10 – Resumption of journey

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section.</td>
<td>Benefit Limits</td>
</tr>
<tr>
<td></td>
<td>Single Policy</td>
</tr>
<tr>
<td>10.1 We will pay your additional travel expenses in resuming your journey if:</td>
<td>$2,000 for all claims paid under this Section.</td>
</tr>
<tr>
<td>a. you had to return to Australia because a relative unexpectedly died, became sick, suffered an illness, or suffered an injury, and</td>
<td></td>
</tr>
<tr>
<td>b. your relative’s death, sickness, illness or injury occurred during your journey, and</td>
<td></td>
</tr>
<tr>
<td>c. you decide to resume your journey within 12 months of your return to Australia.</td>
<td></td>
</tr>
</tbody>
</table>

Note: when travelling within Australia the cover provided under this Section does not apply.
### What you are covered for:

- **Benefits of this Section.** Benefit Limits

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>Family Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 for all claims made in the Section.</td>
<td>$4,000 for all claims made in the Section.</td>
</tr>
</tbody>
</table>
- **Exclusions that specifically apply to this Section.** General Exclusions also apply to this Section of the policy.

- **Single Policy**
  - **Family Policy**

#### 10.1

*We will pay your additional travel expenses in resuming your journey if:*

- **a.** you had to return to Australia because a relative unexpectedly died, became sick, suffered an illness, or suffered an injury, and
- **b.** your relative’s death, sickness, illness or injury occurred during your journey, and
- **c.** you decide to resume your journey within 12 months of your return to Australia.

- **$2,000 for all claims paid under this Section.**
- **$4,000 for all claims made in the Section.**

*We will not pay a claim under Section 10.1 if you do not provide us with a written report from your relative’s doctor, confirming the death, illness, sickness or injury.*

*We will also not pay a claim under Section 10.1 if we have already paid a claim arising from the same event under Section 3.*

Note: when travelling within Australia the cover provided under this Section does not apply.
Section 11 – Special event cancellation expenses

This **excess** will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section.</td>
<td>Benefit Limits</td>
</tr>
<tr>
<td></td>
<td>Single Policy</td>
</tr>
</tbody>
</table>

11.1 If **you** are unable to attend a special event, **we** will pay **you** the cost of **your** unused special event tickets if:

a. **you** were unable to attend due to any unforeseen circumstances outside **your** control, and

b. **you** have already paid for the special event tickets you are claiming for, and

c. **you** cannot obtain a refund from anyone else, and

d. the special event was to occur during **your journey**.

**We** will only pay a claim under Section 11.1 if **you** provide and surrender to **us** the original unused tickets.

Up to a maximum of $500 for all claims.
Section 11 – Special event cancellation expenses

What you are covered for:

What you are not covered for:

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Policy</td>
<td>Up to a maximum of $2,000 for all claims.</td>
</tr>
</tbody>
</table>

We will not pay a claim under Section 11.1 for your unused special event tickets because:

- a. you have not complied with the terms and conditions of issue of the tickets, or
- b. you change your mind or were disinclined to attend, or
- c. of your financial circumstances or any business or contractual obligation, or
- d. of traffic delays.

We will also not pay a claim under Section 11.1 if your special event tickets have been lost or stolen and we have already reimbursed you for them under Section 6.
Section 12 – Delayed baggage – emergency purchases

This excess will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section.</td>
<td>Benefit Limits</td>
</tr>
</tbody>
</table>

**12.1** We will pay you the cost you incur to purchase emergency clothing and toiletries if your baggage is not returned to you within 12 hours of it being declared missing by your transport provider, if:

a. the costs are not recoverable from anyone else, and

b. the costs are actually incurred by you during your journey, and

c. you have provided us written confirmation of the delay from your transport provider, and

d. you have provided us receipts for any emergency clothing and toiletries purchased.

<table>
<thead>
<tr>
<th>Single Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to $250 for each 12 hour period your baggage is delayed, up to a maximum of $500 in total for all claims.</td>
</tr>
</tbody>
</table>
Section 12 – Delayed baggage – emergency purchases

What you are covered for:

How much you are covered for

What you are not covered for:

Benefits of this Section. Benefit Limits

Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>Family Policy</th>
</tr>
</thead>
</table>
| Up to $500 for each 12 hour period your baggage is delayed, up to a maximum of $1,000 in total for all claims. | **We** will not pay a claim under Section 12.1 if your baggage is delayed, detained, confiscated or destroyed by customs officials, police, government or any other authority.  
**We** will also not pay a claim under Section 12.1 to replace cash, or **negotiable instruments**.  
**We** will also not pay a claim under Section 12.1 if **your** baggage has been sent in advance, mailed or shipped separately to the transport on which **you** are travelling, or not handled by **your transport provider**. |
Section 13 – Hire car insurance excess

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section.</td>
<td>Benefit Limits</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>13.1 We will pay you the amount of the excess you must pay on a claim you make on your hire car insurance, or the cost of repairs for damage to your hire car, whichever is the lesser.</td>
<td>Up to $2,000 in total for all claims.</td>
</tr>
<tr>
<td>You can only claim under Section 13.1 if:</td>
<td></td>
</tr>
<tr>
<td>a. you have hired a car and taken out insurance on your hired car, and</td>
<td></td>
</tr>
<tr>
<td>b. you lodge a claim with your hire car insurer, and that insurer has agreed to pay that claim, and</td>
<td></td>
</tr>
<tr>
<td>c. you have provided us a written report from the hire car provider confirming you are liable to pay the excess or the cost of repairs, and</td>
<td></td>
</tr>
<tr>
<td>d. the event giving rise to the claim occurred during your journey.</td>
<td></td>
</tr>
</tbody>
</table>

For the purposes of Section 13.1 only, any reference to a hire(d) car includes cars, vans, wagons, 4 wheel drive vehicles, campervans, and motorhomes provided they are all hired and used for personal and private use.
Section 13 – Hire car insurance excess

A standard excess applies to any claim paid under this Section. This excess will be shown on your schedule.

What you are covered for:

Benefits of this Section. Benefit Limits

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>What you are not covered for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Policy</td>
<td>Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.</td>
</tr>
<tr>
<td>Up to $4,000 in total for all claims.</td>
<td>We will not pay a claim under Section 13.1 if you have hired a car for any purpose other than your personal and private use. We will also not pay a claim under Section 13.1 for any other damages or liability you incur as a result of the event that gives rise to your hire car insurance claim. Please note that Section 13.1 of the policy does not replace hire car insurance. You will need to consider whether or not you need to purchase hire car insurance. Section 13.1 of the policy will only respond if you have purchased hire car insurance.</td>
</tr>
</tbody>
</table>

We will pay you the amount of the excess you must pay on a claim you make on your hire car insurance, or the cost of repairs for damage to your hire car, whichever is the lesser.

You can only claim under Section 13.1 if:

a. you have hired a car and taken out insurance on your hired car,

b. you lodge a claim with your hire car insurer, and that insurer has agreed to pay that claim,

c. you have provided us a written report from the hire car provider confirming you are liable to pay the excess or the cost of repairs,

d. the event giving rise to the claim occurred during your journey.

For the purposes of Section 13.1 only, any reference to a hire(d) car includes cars, vans, wagons, 4 wheel drive vehicles, campervans, and motorhomes provided they are all hired and used for personal and private use.

Up to $2,000 in total for all claims.

Up to $4,000 in total for all claims.
Section 14 – Loss of income

This excess will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section.</td>
<td>Benefit Limits</td>
</tr>
<tr>
<td></td>
<td>Single Policy</td>
</tr>
</tbody>
</table>

14.1 We will pay you for your loss of income if:

a. you suffer an injury during your journey, and as a result of this injury you are unable to perform your normal work in Australia, and

b. you provide us at your own expense with written reports that we require from a registered medical practitioner confirming that you are unable to perform your normal work due to the injury, and

c. you are either required to stay in hospital overseas, or have returned to your home in Australia

d. the care of a registered medical practitioner for the whole time you are unable to perform your normal work in Australia, and

e. you cannot recover the loss from anyone else.

The amount of your lost income up to $1,000 per month to a maximum of $10,000, for all claims.

We will not pay more than your average monthly net of tax income.
**Section 14 – Loss of income**

This excess will be shown on your schedule.

**What you are covered for:**

- **How much you are covered for**
  - **Benefits of this Section. Benefit Limits**
  - **Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.**

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>Family Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Single Policy</strong></td>
<td><strong>14.1</strong></td>
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<tr>
<td></td>
<td>a.</td>
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<tr>
<td></td>
<td>b.</td>
</tr>
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<td></td>
<td>c.</td>
</tr>
<tr>
<td></td>
<td>d.</td>
</tr>
<tr>
<td></td>
<td>e.</td>
</tr>
<tr>
<td><strong>Amount of your lost income up to</strong></td>
<td><strong>$1,000 per month to a maximum of $10,000, for all claims.</strong></td>
</tr>
<tr>
<td><strong>We will not pay more than your average monthly net of tax income.</strong></td>
<td><strong>$1,500 per month to a maximum of $15,000, for all claims.</strong></td>
</tr>
<tr>
<td><strong>We will not pay more than your average monthly net of tax income.</strong></td>
<td><strong>We will not pay a claim under Section 14.1 if your inability to perform your normal work in Australia first occurs more than 90 days after you were injured.</strong></td>
</tr>
<tr>
<td><strong>We will also not pay you under Section 14.1 for the first 30 days that you are unable to perform your normal work in Australia because you are injured on your journey. The 30 day period commences from when you would have gone back to work had the injury not occurred.</strong></td>
<td></td>
</tr>
</tbody>
</table>
Section 15 – Substitute person to complete your business

This excess will be shown on your schedule.

<table>
<thead>
<tr>
<th>What you are covered for:</th>
<th>How much you are covered for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits of this Section.</td>
<td>Benefit Limits</td>
</tr>
<tr>
<td></td>
<td>Single Policy</td>
</tr>
</tbody>
</table>

15.1 We will pay the incurred reasonable transport and accommodation expenses of a substitute person who completes the business purpose you originally intended to perform during your journey if:

a. you have contracted an illness or suffered an injury during your journey, and as a result of this illness or injury you are unable to perform your originally intended business purpose, and

b. you provide us at your own expense any written reports that we require from a registered medical practitioner confirming that you are unable to perform your originally intended business purpose due to the illness or injury, and

c. you are either required to stay in hospital overseas, or are required to return to your home in Australia, and

d. you cannot recover these costs from anyone else.

Up to $10,000, for all claims.
Section 15 – Substitute person to complete your business

This excess will be shown on your schedule.

What you are covered for:

<table>
<thead>
<tr>
<th>Benefit Limits</th>
<th>What you are not covered for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Policy</td>
<td>Exclusions that specifically apply to this Section. General Exclusions also apply to this Section of the policy.</td>
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</table>

**Benefits of this Section. Benefit Limits**

<table>
<thead>
<tr>
<th>Single Policy</th>
<th>Family Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to $10,000, for all claims.</td>
<td>Up to $20,000, for all claims.</td>
</tr>
</tbody>
</table>
General exclusions

It is important that you read and understand the following general exclusion clauses, which apply to all Sections of this policy (except where otherwise noted).

We will not pay claims arising from:

1. any pre-existing medical condition suffered by you or a travelling companion except when it has been disclosed to us, and we have agreed to provide cover for the condition by specifying it on your schedule as a Tier 2 condition and you have paid an additional premium for that cover, or the pre-existing medical condition meets the criteria under the Tier 1 category on pages 10 to 12,

2. any pre-existing medical condition suffered by a relative, business partner, or any other person who is known to you before we issue this policy, except when the pre-existing medical condition meets the criteria under the Tier 1 category on pages 10 to 12,

3. any elective medical, dental, surgical or cosmetic procedure, or any complications as a result of these procedures, where you have arranged to undertake these procedures without our written consent,

4. loss or theft or damage to property, or death, illness, or injury, if you fail to take reasonable care,

5. any unlawful act committed by you or any other person insured by this policy,

6. intentional self-injury, suicide or attempted suicide,

7. the use or effects of alcohol or drugs,

8. Acquired Immune Deficiency Syndrome (AIDS) or Human Immunodeficiency Virus (HIV) or their complications,

9. any sexually transmitted disease, infection or virus,

10. pregnancy, childbirth, the health of a child under 1 month of age or complications arising from any of these,

11. motor cycling unless,
   — the motorcycle is hired, and
   — the motorcycle has an engine capacity of 200cc or less, and
   — you (as the driver) or the driver (if you are a passenger) hold a current motorcycle licence (if required by the country you are in),
12. professional sport (including training for professional sport), hunting, racing of any kind, football of any kind, flying or other aerial activity (except as a fare paying passenger in a scheduled commercially operated power-driven aircraft), rodeo riding, sailing (except as a fare paying passenger in a scheduled, commercially operated power-driven watercraft), mountain or rock climbing using ropes or guides, abseiling, diving using breathing apparatus (if you do not hold an open water diving licence), off-piste skiing, or competitive snow and ice sports, (whether competing or not),

13. any event that occurs during any period of your journey in which you do paid work, unless:
   — the paid work is for your usual employer in Australia, and
   — you arranged to do this paid work before you commenced your journey,

14. any war, whether it has been formally declared or not, any hostilities, uprising, insurrection, revolt, rebellion, usurped power, revolution or coup d’état, or theft or confiscation of property as a result of any of these,

15. radio-activity or the use, existence or escape of any nuclear fuel, nuclear material, or nuclear waste,

16. the refusal, failure or inability of any person, company or organisation, (including but not limited to any airline, other transportation provider, hotel, car rental agency, tour or cruise operator, travel wholesaler, travel agent, booking agent or other agent for travel or tourism related services, facilities or accommodation), to provide services, by reason of their own financial failure or the financial failure of any person, company or organisation with whom or with which they deal,

We will also not pay claims:

17. for medical expenses incurred for continuing treatment, including medication you began taking before the commencement of the period of insurance,

18. for medical, hospital, ambulance and dental expenses incurred:
   — in Australia, or
   — in Australian waters if Medicare covers all or part of those expenses, or
— for any **injury** or **illness** that recurs after the expiry of the **period of insurance**,

19. for an event that is also covered by a **Reciprocal Health Agreement**, statutory fund or any other compensation scheme,

20. for consequential loss of any kind including loss of enjoyment or any financial loss (other than financial losses for which benefits are provided under this policy), or

21. for **you** or any person insured under this policy who is not a **permanent resident**, or

22. where the event that gives rise to the claim occurs after 90 days following the commencement of any one **journey**. The following limitation on cover also applies:

23. If **you** are entitled to be returned to Australia under this policy, but do not have a return ticket at the time of the incident giving rise to the claim, **we will deduct from your claim payment the cost of an economy class airfare with the airline you commenced your journey from Australia, using the airlines regular published rates for the return journey.**

**We will also not pay any claims under Sections 1, 5 and 11 arising from:**

24. anything directly or indirectly caused by, resulting from or in connection with any **act of terrorism** regardless of any other cause or event contributing concurrently or in any other sequence to the loss, damage, liability, cost or expense,

25. anything directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to any **act of terrorism**.
Claims procedure

Claims services are managed by an external provider on our behalf.

Making a claim

If you wish to make a claim, you must:

— if you are within Australia, promptly call us on 1800 646 279 or you can fax us on 07 3305 7005, or you can email us at: veroclaims@travelclaims.com.au

— if you are outside Australia, promptly call us on +61 (7) 3305 7057 or you can fax us on +61 (7) 3305 7005, or you can email us at: veroclaims@travelclaims.com.au

— at your own expense give us all the information and documentation which we request. This can include but is not limited to:

  — original medical and dental certificates,
  — specialist doctors reports,
  — police reports,
  — original proof of ownership such as receipts, invoices, or packaging,
  — travel itineraries,
  — airline, train, bus or other transport tickets, and
  — luggage tags.

— immediately send us any court or legal documents or other communication you receive about the claim. Do not take any action yourself or ask anyone else to do so on your behalf.

Please note the time taken to settle claims will vary from country to country, and claims can only be assessed and finalised by us in Australia. Provided you have supplied us with all the information we require and we have completed any investigation needed to assess your claim, we will tell you whether we have accepted your claim or not within 10 business days of receiving all necessary information.

Only we have the right to settle or defend your claim.
When we pay a claim we consider a number of aspects in calculating the amount. These can include:

— amount of loss or damage or liability;
— excess;
— policy limit; and
— the terms and conditions of the policy.

After calculating the amount payable we will either;

— pay for repair or replacement of your personal baggage;
— pay for your overseas medical costs;
— pay other third parties; or
— pay you.

Where we select and directly authorise a repairer in connection with your claim, we will:

— accept responsibility for the quality of workmanship and materials; and
— handle any complaint about the quality or timeliness of the work or conduct of the repairer as part of our complaints handling process.

If we accept your claim, only we have the right to:

— make or accept any offer or payment, or in any other way admit you are liable,
— settle, or attempt to settle, any claim, or
— defend any claim.

Stolen property

If your property (taken on the journey with you) is stolen or maliciously damaged you must make a report to the police or local Government authority within 24 hours of the loss or damage becoming known to you, and provide us with a copy of their report.

Lost or damaged property

If your property (taken on the journey with you) is lost or damaged when it is with the transport provider (for example the airline) you must also make a report to the transport provider within 72 hours of the loss or damage becoming known to you. You must also provide us with a written report from the transport provider.
If your property is lost or damaged in other circumstances, you must register the loss or damage with us within 72 hours of either: the loss or damage becoming known to you, or your return to your home, or the date of expiry shown on your schedule, whichever happens first.

You can register your loss or damage with us, by either:

— calling us on 1800 646 279 (within Australia), or
— calling us on +61 (7) 3305 7057 (from outside Australia), or
— emailing us at: VEROclaims@travelclaims.com.au; or
— sending a fax to +61 (7) 3305 7005 (from outside Australia) or 07 3305 7005 (from within Australia).

In any case, regardless of the circumstances, you must keep any lost, damaged or stolen property that you recover, and let us inspect it if we need to. Please remember, if we agree to pay a claim, only we have the right to exercise, for our own benefit, any legal right you have to recover the property or seek compensation from a third party.

When we may refuse a claim

We may refuse a claim if:

— when you apply for insurance or when making a claim or in connection with either the application or the claim, you:
  — are not truthful,
  — have not given us full and complete details, or
  — have not told us something when you should have.
— you do not at all times take all reasonable care to:
  — protect any property you have insured with us against any initial or further loss or damage,
  — keep your baggage and personal effects in good condition,
  — prevent death, bodily injury, or illness to other people, or loss or damage to their property, and
  — obey any laws or regulations.
— you do not give us the documents and information we may need to help us decide on any amount we may pay you.
— you do any of the following without us agreeing to it first:
— make or accept any offer or payment, or in any other way admit you are liable,
— settle, or attempt to settle, any claim, or
— defend any claim.

If you have agreed not to seek compensation from another person who is liable to compensate you for any loss, damage or liability which is covered by this policy, we will not cover you under this policy for that loss, damage or liability.

The amount you pay towards a claim

An excess is an amount you are required to pay in the event of a claim. There are different types of excess that may apply to your claim, depending on the type of claim and the Section of the policy you are claiming under.

For further details of how an excess will be applied, please refer to our Secure™ Travel Insurance Premium, Excess and Claims Guide available at www.vero.com.au/PED. A copy of the Secure™ Travel Insurance Premium, Excess and Claims Guide can be provided on request, at no charge, if you contact Vero on 1800 285 712.

How a claim payment is calculated

When we pay a claim we consider a number of aspects in calculating the amount payable. For further details of how claim payments are calculated, please refer to our Secure™ Travel Insurance Premium, Excess and Claims Guide available at www.vero.com.au/PED. A copy of the Secure™ Travel Insurance Premium, Excess and Claims Guide can be provided on request, at no charge, if you contact Vero on 1800 285 712.

How claims affect your insurance for this policy

If we agree to pay a claim, the limits on what we pay under each section of the policy will be reinstated for each new journey you commence during the period of insurance.
Cancelling a policy

How you may cancel

You may cancel this policy at any time by telling us that you want to cancel it.

We subtract from any premium you pay us, an amount to cover the period that we have already insured you for. We then refund the unused premium along with GST (if applicable) to you.

How we may cancel

We may only cancel this policy when the law says we can.

We cancel your policy by telling you so in writing.

We give you that notice in person or send it to your last known address.
Words with special meanings

Some words used in the policy have special defined meanings. These words are in **bold** each time they are used. All of the words we define are listed in the following definition section of this policy. It is important that you familiarise yourself with all of them.

“**act of 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), which from its nature or context is done for, or in connection with, political, religious, ideological, ethnic or similar purposes or reasons, including the intention to influence any government and/or to put the public, or any section of the public, in fear.

“**business partner**” means a person who you rely on to conduct your business, profession, trade or occupation.

“**children**” or “**child**” means people who accompany you on your journey, and who are under the age of 21 years, as at the issue date of the policy shown on your schedule and who normally live with you in your home in Australia.

“**electronic equipment**” means any device that uses either battery or mains powered electricity to operate, including but not limited to video, camera and sound recording devices and their equipment, laptop and notebook computers, MP3 players, mobile telephones, portable DVD, CD and computer game players, electronic diaries and organisers and hearing aids.

“**excess**” means the amount you must pay towards a claim. We will only apply one excess to all claims arising out of the same event. You will find the amount of the excess shown on your schedule. Variable excess amounts may also apply to claims paid under Section 6. Please refer to the “How much you are covered for” columns in Section 6 for full details.

“**financial failure**” means insolvency, bankruptcy, provisional liquidation, liquidation, winding up, the appointment of a receiver, manager or administrator, entry into any official or unofficial arrangement with creditors, stopping the payment of debts, a restructure or composition with creditors or the happening of anything of a similar nature under the laws of any jurisdiction.
“fragile items” means items that are made of glass or other brittle or fragile substances such as china or porcelain.

“grandchildren” or “grandchild” means people who accompany you on your journey, and who are under the age of 21 years, as at the date of the policy shown on your schedule and who normally reside in Australia.

“home” means your usual place of residence in Australia.

“incapacitated” means a qualified medical practitioner has certified in writing that you are medically unfit to care for your children.

“illness” means sudden and unforeseen sickness or disease which results in you being certified in writing as medically unfit to travel by a qualified medical practitioner.

“injury” means an injury that first occurs during your journey and was sustained by violent, accidental, external and visible means.

“journey” means the travel we insure you for that starts when you leave your home in Australia to start your trip and ends when you return to your home in Australia.

Note: There is no limit to the number of journeys you can make during your period of insurance, but cover is limited to the first 90 days of each journey.

“medical condition” means any medical or physical condition, disease or illness including any mental illness.

“medical practitioner” means a medical professional registered and certified by the National and/or State Health Board either in Australia or in the country in which you are being treated whilst on your trip, and who is licensed to provide treatment, medication/prescriptions and medical opinions and reports.

In the case of a mental illness, Medical Practitioner means a mental health professional registered and certified by the National and/or State Health Board either in Australia or in the country in which you are being treated whilst you are on your trip, and who is licensed to provide treatment, medication/prescriptions, medical opinions and reports - for example, psychologists and psychiatrists.

“mental Illness” means any illness, disorder or condition which is or would be recognised or defined in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders"
“motorcycle” means any two, three, or four wheeled cycle sometimes with a sidecar attached, powered by a motor and used for transporting people. For example any motorbike, tricycle, quadbike, moped, or motor scooter.

“motor vehicle” means a vehicle driven by a motor. For example a car, motorcycle, truck, bus, or motorhome.

“natural disaster” means an event caused by natural phenomenon and not human activity. For example; earthquake, flood, fire, volcanic eruption, storm and lightning.

“negotiable instrument(s)” means a legal document that represents money and that can be legally transferred in title from one person to another (for example travellers cheques). It does not mean currency or cash.

“period of insurance” means the period we insure you for under your policy.

The period of insurance begins from the time you commence each journey or the travel start date shown on your schedule (whichever happens last), and ends at the earliest of the following times:

— when you complete the journey, or
— the expiry of 90 days following commencement of the journey, or
— on the expiry date shown on your schedule,

Cover for Section 1 - Cancelled travel and accommodation expenses, begins from the date we issue you this policy.

“permanent resident” means someone who resides in Australia and is eligible for an Australian Medicare card.

“personal baggage” means items of luggage and their contents that you either take or purchase on your journey. It does not mean fragile items, travel documents, negotiable instruments, currency or cash.

“personal effects” means items that are carried or normally worn on or about your person. For example, jewellery and watches. It does not mean fragile items, travel documents, negotiable instruments, currency or cash.

“pre-existing medical condition” means:

1. any of the following conditions you have ever had prior to the policy issue date shown on your schedule, even if treatment is no longer being received:
— heart (cardiac) condition;
— lung or respiratory condition (other than asthma if it meets the criteria on page 10);
— kidney (renal) condition;
— reduced immunity;
— dementia or documented memory problems; and
— metastatic (secondary) cancer,
or any medical condition or dental condition for which investigation, medical advice or any treatment has been obtained, or for which prescribed drugs have been taken, within the 90 days before the policy issue date shown on your schedule,

2. or any medical condition or dental condition that is chronic or ongoing in nature of which prior to the policy issue date shown on your schedule you and/or a reasonable person in your position knew or ought to have known you were suffering or potentially suffering from, regardless of whether you have undergone investigation or received medical advice or treatment or taken prescribed drugs within the 90 days before the policy issue date shown on your schedule.

The policy terms and conditions for a pre-existing medical condition:
— include any complications or treatment that are directly or indirectly attributable to it;
— apply to you, the persons named as travellers on the insurance schedule, and your or their relative or business partner or any other person who is known to you before we issue this policy.

“public place” means any place where the public has access. For example; shops, planes, taxis, buses, trains, airports, railway stations, streets, museums, galleries, markets, hotel foyers, beaches, restaurants, and public toilets.

“Reciprocal Health Agreement” means an agreement between the Australian Government and the government of another country to provide medical treatment, medication or advice to Australian citizens and residents.

“relative” means any of the following who reside permanently in Australia:
— your spouse, partner or de facto;
— your parents, parents-in-law, grandparents;
— your children, grandchildren, brothers and sisters, including their respective spouse, partner or de facto;
— the children, parents, parents-in-law, grandparents, grandchildren, brothers and sisters of your spouse, partner or de facto.

“sporting equipment” means equipment normally used for the purpose of a sporting activity. It does not mean climbing equipment, watercraft greater than 3 metres in length, motor vehicles, motorcycles, bicycles and their accessories, guns or weapons of any kind.

“transport provider” means the organisation, group or company you have arranged paid scheduled transport with. Paid scheduled transport includes transport obtained using frequent flyer points or any other reward scheme.

“travel documents” means any documents required for travelling that are taken with you on your journey. For example, passports, visas and airline tickets. It does not mean credit cards or negotiable instruments.

“travelling companion” means a person who is a permanent resident and has made arrangements to travel with you on your journey.

“unattended” means that you or your travelling companion are not in a position to observe an item or in a position to have any reasonable prospect of preventing its theft.

“we” or “our” or “us” means AAI Limited ABN 48 005 297 807, AFS Licence No. 230859.

“you” or “your” means:
— in a Single Policy, the person named as the insured on the schedule, and up to one of their children or grandchildren who is under 21 years of age, and accompanies them on their journey, or
— in a Family Policy, the person(s) named as the insured the schedule, and their husband, wife or de-facto partner, and their children and grandchildren who are under 21 years of age, and who accompany them on their journey.

Please note that a Single Policy will only cover one child or grandchild. If the person(s) named as the insured on the schedule takes more than one child or grandchild with them on their journey they must take out a Family Policy.
How we will deal with a complaint

If you are not satisfied with our products or services or a decision made in relation to your insurance, please let us know so that we can help. It is important to follow the complaint handling process in order to resolve your complaint effectively and efficiently.

Step 1. Let us know

If you would like to make a complaint, please let us know by contacting the relevant department as they may be able to resolve the complaint for you. If not, the staff member will refer you to a Manager or their delegate and they will attempt to resolve the complaint. A response is usually provided to you within 5 business days. You can contact us:

**By phone:** 1800 689 762

**By email:** customer.relations@vero.com.au

**In writing:**
Customer Relations Unit RE058,
GPO Box 1453 Brisbane QLD 4001

Step 2. Review by our Customer Relations Team

If you are not satisfied with the outcome of the business review you can request the complaint be referred to the Customer Relations Team for review or you can contact them directly:

**By phone:** 1300 264 470

**By Email:** idr@vero.com.au

**In writing:**
Vero Internal Dispute Resolution,
PO Box 14180,
Melbourne City Mail Centre VIC 8001

If we require additional information we will contact you to discuss. Customer Relations will usually contact you with a decision within 15 business days of receiving your complaint.
Step 3. Seek review by an external service

We expect our procedures will deal fairly and promptly with your complaint. However, if you remain dissatisfied, you may be able to access the services of the Financial Ombudsman Service (FOS) Australia. The FOS is an independent external dispute scheme and their service is free to you. Any decision the FOS makes is binding on us, provided you also accept the decision. You do not have to accept their decision and you have the option of seeking remedies elsewhere.

The FOS is available to customers who fall within their terms of reference. The FOS will advise if they can help you.

You can contact FOS:

By phone: 1800 367 287
By Fax: (03) 9613 6399
By email: info@fos.org.au
In writing: Financial Ombudsman Service Limited
GPO Box 3, Melbourne VIC 3001
By visiting: www.fos.org.au
The General Insurance Code of Practice

We support the General Insurance Code of Practice. You can get a copy of the code from the Insurance Council of Australia website (insurancecouncil.com.au) or by phoning (02) 9253 5100.

Financial Claims Scheme

The policy described in this Guide may be a protected policy under the Federal Government’s Financial Claims Scheme (FCS) which is administered by the Australian Prudential Regulation Authority (APRA).

The FCS only applies in the extremely unlikely event of an insurer becoming insolvent and the Federal Treasurer making a declaration that the FCS will apply to that insurer.

The FCS entitles certain persons, who have valid claims connected with certain protected policies issued by that insurer to be paid certain amounts by APRA.

Information about the FCS can be obtained from www.fcs.gov.au.

Goods and Services Tax (GST)

These additional terms and conditions of the policy deal with:

— how GST is part of what you have to pay us for the policy,
— your obligation to tell us about any input tax credit entitlement you may have for that GST, and
— how GST affects what we pay you for any claims you make and any limits on what we pay.

As part of the total amount payable for this insurance policy, we will include an amount on account of GST if the journey is within Australia.

Each time you make a claim under this policy, you must tell us if you are entitled to claim an input tax credit for the GST amount charged on your policy and, if you are, the proportion of the GST that you can claim as an input tax credit.
If you are entitled to claim an input tax credit for the GST included in the amount payable:

If you do not tell us that you are entitled to an input tax credit, or you give us incorrect information about the proportion of the GST you claim as an input tax credit, then you may have a GST liability for claim payments we make. Any such GST liability you have remaining when we make a cash settlement (whether it is made to you or to a third party to whom you are liable) will be your responsibility, even if you tell us your correct input tax credit entitlement after the payment has been made.

If your personal baggage or transport and accommodation services were used for business purposes and we settle your claim by making a cash payment to you, then we will reduce the amount we pay you by the amount of any input tax credit to which you would be entitled if you were to purchase replacement goods or services. If the sum insured or the policy limit is not sufficient to cover your loss, we will pay the GST (less any relevant input credit tax) that relates to our proportion of your loss, less any excess. We will pay that GST in addition to your sum insured or policy limit.

If you are NOT entitled to claim an input tax credit for the GST included in the amount payable:

If the sum insured or the policy limit is not sufficient to cover your loss, we will pay the GST that relates to our proportion of your loss, less any excess. We will pay that GST in addition to your sum insured or policy limit. Please remember, we will apply these terms and conditions in addition to any other terms and conditions in the policy.

This outline of the effect of the GST on your policy is for general information only. You should not rely on this information without first seeking expert advice on the application of the GST to your particular circumstances.

‘GST’, ‘input tax credit’, ‘acquisition’ and ‘supply’ have the meaning given in A New Tax System (Goods and Services Tax) Act 1999.
For 24-hour emergency medical and travel assistance, please call an international operator and request that they call Australia reverse charge on:

Phone: +61 (7) 3305 7057
(24 hrs/7 days a week).
(Local call charges may apply from pay phones)

For further information in relation to 24-hour emergency medical and travel assistance, please refer to page 12 of the PDS.)