

Banca Comercială Română SA (BCR)
 EPB MasterCard World Signia/
 EPB MasterCard Platinum – Benefit Schedule

BENEFIT TABLE	
Section A - Travel Advice	
Travel Advice	Included
Section B - Travel Assistance	
Medical Assistance	Included
Legal Assistance	Included
Cash Advance	up to € 3,000
Lost or Stolen Document Assistance	Included
Interpreter	Included
Message Relay	Included
Lost Luggage Assistance	Included
Section C – Cancellation or Curtailment Charges	
Cancellation or Curtailment or Abandonment	€ 10,000
Section D – Missed Departure/ Missed Connection	
Missed Departure/ Missed Connection	€ 2,500
Section E – Delayed Departure/Abandonment	
Delayed Departure, maximum	€ 500
- per 4 hour period	€ 75
Section F - Baggage Delay and Extended Baggage Delay	
Baggage Delay, after 6 hours	€ 375
Extended Baggage Delay, after 48 hours	€ 375
Section G - Involuntary Denial of Boarding	
Involuntary Denial of Boarding	€ 100
Extended Denial of Boarding	€ 500
Section H - Emergency Medical and Other Expenses	
Medical Expenses and Repatriation Expenses	€ 10,000,000
Emergency Dental Pain Relief	€ 1,000
Transportation to Hospital if not free	Included
Close Relative to travel out if hospitalised	€ 200 per day, max. 10 days + Economy Flight
Extended Stay of Insured/Companion	€ 200 per day, max. 10 days
Return Home of Children	€ 200 per day, max. 3 days + Economy Flight
Convalescence, maximum	€ 1,000
- per day	€ 100
Funeral Expenses	€ 2,500
Section I - Hospital Benefit	
Hospital Benefit, maximum	€ 500
- per day	€ 50
Section J – Home Emergency Service	
Home Emergency Service	€ 500
Section K - Baggage and Passport	
Baggage, maximum	€ 5,000
- Single Article Limit	€ 500
- Valuables Limit in Total	€ 750
- Personal Money	€ 500
- Cash Limit	€ 250

- Cash Limit under 16's	€ 100
Lost or Stolen Passport	€ 1,000
Cruise Baggage, maximum	€ 10,000
- Single Article Limit	€ 750
- Valuables Limit in Total	€ 1,000
Section L - Travel Accident	
Travel Accident, maximum	€ 1,000,000
- Loss of Limbs or Sight (Aged < 66)	€ 1,000,000
- Permanent Total Disablement (< 66)	€ 1,000,000
- Death Benefit (Aged 18 to 65)	€ 300,000
- Death Benefit (Under 18 or 65 yrs+)	€ 160,000
- All Benefits (66 yrs+)	€ 160,000
Section M - Personal Liability	
Personal Liability	€ 5,000,000
Section N - Overseas Legal Expenses and Assistance	
Overseas Legal Expenses	€ 50,000
Section O - Catastrophe Benefit	
Catastrophe	€ 2,500
Section P - Hijack Benefit	
Hijack, maximum (per day)	€ 5,000 (€ 1,000)
Section Q - Business Benefit	
Business Equipment (maximum)	€ 10,000
- Single Item Limit	€ 1,000
- Computer Equipment Single Item Limit	€ 2,000
- Samples Limit	€ 1,000
Business Colleague Replacement	Economy Flight
Section R1 – Ski Equipment and Ski Equipment Hire	
Ski Equipment, maximum	€ 2,500
- Owned	€ 2,500
- Hired	€ 750
- Single Article Limit	€ 500
Ski Hire, maximum	€ 500
- per day	€ 50
Section R2 – Ski Pack	
Ski Pack, maximum	€ 500
- per day	€ 50
Section R3 – Piste Closure	
Piste Closure, maximum	€ 500
- per day	€ 50
Section R4 – Avalanche Closure	
Avalanche Closure, maximum	€ 500
- per day	€ 50
Section S1 – Golf Benefit	
Golf Equipment	€ 5,000
- Single Article Limit	€ 400
Golf Liability	€ 1,500,000
Section S2 – Green Fees	
Green Fees	€ 250
Section S3 – Hole in One Benefit	
Hole in One Benefit	€ 250
Section T – Wedding Cover	
Wedding Cover, maximum	€ 10,000
- Single Item Limit	€ 2,000

- Valuables Limit in Total	€ 1,000
- Wedding Video/ Photos	€ 1,000
Section U – ATM Theft/ Assault	
ATM Theft/ Assault, maximum per year	€ 600
- Per Event	€ 300
Section V – Purchase Protection	
- Limit per 365 day period	€ 7,500
- Limit per Incident	€ 1,500
- Single Article Limit	€ 750
- per Item Excess	€ 75

IMPORTANT NOTICE

1. **Pre-existing medical conditions** are not covered.
2. Please do not **curtail** any **trip** without contacting **AXA Assistance** – See page 4.
3. In order to be eligible to receive benefits under this Benefit Schedule **you** must charge the **eligible item** in Section V - Purchase Protection and the green fees in Section S3 - Hole In One Benefit, in full to **your** EPB MasterCard World Signia/ EPB MasterCard Platinum.
4. All benefit amounts listed in the **Benefit Table** are per **beneficiary** per **trip** unless otherwise noted (excluding Section V - Purchase Protection).
5. The Romanian translation of this document may be used for information purpose only, the English wording prevails in case of disputes or litigation.

INTRODUCTION

IMPORTANT INFORMATION

This document is not a contract of insurance but summarises an insurance policy held by Banca Comercială Română SA (BCR) which provides benefits and coverage for the benefit of its EPB MasterCard World Signia/ EPB MasterCard Platinum **Card Holders**. The insurance policy is issued by Inter Partner Assistance under policy number 5531502.

The policy provides insurance coverage for the benefit of EPB MasterCard World Signia/ EPB MasterCard Platinum **Card Holders**. The policy is held by Banca Comercială Română SA of Bucharest - Sector 3, Regina Elisabeta Blvd. 5, Romania, postal code 030016, which is the only policyholder and only it has direct rights under the contract of insurance against the insurer. These rights are held for the benefit of (and in trust for) EPB MasterCard World Signia/ EPB MasterCard Platinum **Card Holders**. This document summarises the benefits available under the policy for EPB MasterCard World Signia/ EPB MasterCard Platinum **Card Holders**; it does not give EPB MasterCard World Signia/ EPB MasterCard Platinum **Card Holders** direct rights under the policy. Strict compliance with the terms and conditions of **our** policy is required if **you** are to receive a benefit.

Under the Financial Services Authority's Insurance Conduct of Business rules, EPB MasterCard World Signia/ EPB MasterCard Platinum **Card Holders** will not be customers of Inter Partner Assistance or of Banca Comercială Română SA. The provision of these insurance benefits to EPB MasterCard World Signia/ EPB MasterCard Platinum **Card Holders** falls outside regulation by the Financial Services Authority.

ELIGIBILITY

The benefits summarised in this document are dependent upon **you** being a valid EPB MasterCard World Signia/ EPB MasterCard Platinum **Card Holder** at the time of any incident giving rise to a claim. Banca Comercială Română SA will give **you** notice if there are

any material changes to the policy or if it is cancelled or expires without renewal on equivalent terms.

This is **your** benefit guide. It contains details of benefits, conditions and exclusions relating to EPB MasterCard World Signia/ EPB MasterCard Platinum **Card Holders** and is the basis on which all claims will be settled.

THE LAW APPLICABLE TO THESE BENEFITS

These benefits will be governed by the laws of Romania unless **we** have specifically agreed otherwise.

USE OF YOUR PERSONAL DATA

If **you** accept these benefits **you** also agree **we** may:

- a) disclose and use information about **you** and **your** benefits – including information relating to **your** medical status and health – to companies within the AXA Assistance Group of companies worldwide, **our** partners, service providers and agents in order to administer and service **your** cover, process and collect relevant payments on it and for fraud prevention;
- b) undertake all of the above within and outside the European Union (EU). This includes processing **your** information in countries in which data protection laws are not as comprehensive as in the EU. However, **we** have taken appropriate steps to ensure the same (or equivalent) level of protection for **your** information in other countries as there is in the EU; and
- c) monitor and/or record **your** telephone calls in relation to cover to ensure consistent servicing levels and account operation.

We use advanced technology and well defined employee practices to help ensure that **your** information is processed promptly, accurately and completely and in accordance with applicable data protection law.

If **you** want to know what information is held about **you** by the AXA Assistance Group, please write to:

AXA Travel Insurance, Data Protection Officer, The Quadrangle, 106-118 Station Road, Redhill, Surrey, RH1 1PR United Kingdom
There may be a charge for this service, as permitted by law. Any information which is found to be incorrect will be corrected promptly.

UNDERWRITER

Benefits under this policy are provided by AXA Travel Insurance, 10/11 Mary Street, Dublin 1, Ireland, CRO Nr. 426087, an insurance intermediary, Central Bank of Ireland authorisation Nr. C47421 and underwritten by Inter Partner Assistance, 10/11 Mary Street, Dublin 1, Ireland, CRO Nr. 906006, Central Bank of Ireland authorisation Nr. C47746, which is a branch of Inter Partner Assistance S.A., Avenue Louise 166 bte 1, 1050 Brussels, RCB/HRB 394025, a Belgian insurance company authorised by the l'Autorité des Services et Marchés Financiers. All are member companies of the AXA Assistance Group.

VALIDITY OF BENEFITS

This document only constitutes a valid evidence of benefits when it is issued in conjunction with a valid EPB MasterCard World Signia/ EPB MasterCard Platinum Card.

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DEFINITIONS

Any word or expression to which a specific meaning has been attached will bear the same meaning throughout this Benefit Schedule. For ease of reading the definitions are highlighted by the use of bold print.

Policy holder

– Banca Comercială Română SA (BCR), Romanian credit institution, joint-stock company managed under the two-tier system, whose registered office is at Bucharest - Sector 3, Regina Elisabeta Blvd. 5, Romania, postal code 030016.

You/your/beneficiary(ies)

– the **Card Holder** and his/her **family**. Beneficiaries are covered for benefits when travelling independently of one another. For all sections of the Benefit Schedule other than Section S3 – Hole In One benefit and Section V – Purchase Protection the Cardholder and his/her family will be covered irrespective of use of the EPB MasterCard World Signia/EPB MasterCard Platinum Card.

We/us/our

– AXA Travel Insurance, 10/11 Mary Street, Dublin 1, Ireland, and/or Inter Partner Assistance, 10/11 Mary Street, Dublin 1, Ireland, and/or Inter Partner Assistance S.A., Avenue Louise 166 bte 1, 1050 Brussels. All are member companies of the AXA Assistance Group.

AXA Assistance

– AXA Assistance Services Europe Limited, 10/11 Mary Street, Dublin 1, Ireland, the Assistance Service Provider, CRO N°426085, appointed by AXA Travel Insurance to organize and provide the services and benefits of this policy.

Baggage

– luggage, clothing, personal effects, and other articles which belong to **you** and are worn, used or carried by **you** during any **trip**.

Benefit Table

– the table listing the benefit amounts on page 1 and 2. All benefits are per **beneficiary**, per **trip**, except as noted otherwise and excluding Section V – Purchase Protection.

Bodily injury

– an identifiable physical injury sustained by **you** due to a sudden, unexpected and specific event. Injury as a result of **your** unavoidable exposure to the elements shall be deemed to be a **bodily injury**.

Business equipment

– items used by **you** in support of **your** business activity including office equipment which is portable by design including, but not restricted to, personal computers, telephones and calculators.

Business associate

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

Business trip

- a **trip** taken wholly or in part for business purposes but excluding **manual work**.

Card Holder

– the holder of a EPB MasterCard World Signia/ EPB MasterCard Platinum card, the card being valid and the account in good standing at the time of the incident.

Close relative

– mother, father, sister, brother, wife, husband, daughter, son, grandparent, grandchild, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, step parent, step child, step sister, step brother, foster child, legal guardian, legal ward, partner or fiancé/fiancée or Common-Law Partner (any **couple**, including same-sex, in a common law relationship or who have co-habited for at least 6 months).

Couple

– the **Card Holder** and either their Fiancé(e), spouse/partner who is normally resident at the same address.

Country of residence

– the country in which **you** legally reside and the country in which **your** card is issued.

Curtailed / curtail

– abandoning the **trip** by direct return to **your country of residence** or by attending a hospital abroad for in excess of 48 hours as an in-patient and then being repatriated directly from the hospital to **your country of residence**.

Family

– the spouse or legal partner of the **Card Holder**, their children, step children or foster children aged under 19, or age 19 to 21 if in full time education.

Golf equipment

- golf clubs, golf balls, golf bag, golf trolley, and golf shoes forming part of **your baggage**.

Hole-in-one

– driving from the tee during a golf match and holing out in a single stroke.

Home

– **your** normal place of residence in **your country of residence**.

Incidental basis

– participating in sports that are not the sole or main reason for **your trip**.

Medical condition(s)

– any disease, illness or injury.

Medical practitioner

– a qualified, registered practising member of the medical profession who is not related to **you** or any person with whom **you** are travelling.

Period of insurance

– any **trip** not exceeding 30 days, beginning and ending in the **country of residence**.

Under Section C – Cancellation cover shall be operative from the time **you** pay for the **trip** and ceases upon commencement of **your trip**. For all other sections of the Benefit Schedule, the insurance commences when **you** leave **your home** or hotel, or **your** place of business (whichever is the later) to commence the **trip** and terminates at the time **you** return to **your home**, hotel or place of business (whichever is the earlier) on completion of the **trip**. **You** must claim against **your** private health insurer first for any inpatient medical expenses abroad up to **your** benefit limit.

The **period of insurance** is automatically extended for the period of the delay in the event that **your** return to **your country of residence** is unavoidably delayed due to an event covered by this Benefit Schedule.

Personal belongings

- **baggage, business equipment, ski equipment, golf equipment, wedding gifts and/or wedding attire.**

Personal money

- bank notes, currency notes and coins in current use, travellers' and other cheques, postal or money orders, pre-paid coupons or vouchers, travel tickets, hotel vouchers and passport, all held for private purposes.

Pre-existing medical condition(s)

– any medical or mental condition existing prior to **your trip** and/ or causing **you** pain or physical distress or severely restricting **your** normal mobility, including (but not limited to):

1. a condition for which **you** are on a waiting list for or have knowledge of the need for surgery, in-patient treatment or investigation at a hospital, clinic or nursing home;
2. a condition referred to a medical specialist or the cause of in-patient treatment within one year prior to **your trip**;
3. any mental condition including fear of flying or other travel phobia;
4. a condition for which **you** have not had a diagnosis;
5. a condition for which a **medical practitioner** has provided a terminal prognosis;
6. any circumstances **you** are aware of that could reasonably be expected to give rise to a claim on this Benefit Schedule.

Public transport

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

Ski equipment

– skis (including bindings), ski boots, ski poles, snowboards and helmets.

Sports and activities

– the activities listed on page 7 undertaken on an **incidental basis**.

Territorial limits

– worldwide, excluding the **country of residence** for Medical Benefits in Section H – Emergency Medical and Other Benefits and Section I – Hospital Benefit and Section U - ATM Theft. Any **trip** solely within the **country of residence** is only covered where **you** have pre - booked at least two nights accommodation in a hotel, motel, holiday camp, bed and breakfast, holiday cottage or similar accommodation rented for a fee.

Terrorism

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

Trip

- any holiday, or journey for business or pleasure made by **you** within the **territorial limits** during the **period of insurance**.

Any **trip** solely within the **country of residence** is only covered where **you** have pre - booked at least two nights accommodation in a hotel, motel, holiday camp, bed and breakfast, holiday cottage or similar accommodation rented for a fee.

Unattended

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

Valuables

– jewellery, gold, silver, precious metal or precious or semiprecious stone articles, watches, furs, leather goods, cameras, camcorders, photographic audio video computer television and telecommunications equipment (including CD's, DVD's, tapes, films, cassettes, cartridges and headphones), computer games and associated equipment, telescopes, binoculars, portable DVD players, ipods, MP3 and MP4 players.

Wedding attire

– dress, shoes and other accessories bought specially for the wedding and make-up, hair styling and flowers paid for and purchased for the wedding forming part of **your baggage**.

GENERAL CONDITIONS

These conditions apply throughout the Benefit Schedule. **You** must comply with the following conditions to have the full protection of the Benefit Schedule. If **you** do not comply **we** may at **our** option refuse to deal with **your** claim, or reduce the amount of any claim payment.

1. DUAL INSURANCE

If at the time of any incident which results in a claim under this Benefit Schedule, there is another insurance covering the same loss, damage, expense or liability **we** will not pay more than **our** proportional share (not applicable to Section L – Travel Accident). Under Section H – Emergency Medical and Other Expenses – **your** private health insurer must pay the first amount as stated in their policy and **we** will commence cover once that limit has been reached.

You must claim against **your** private health insurer, state health provider and/or other travel insurer first for any in-patient medical expenses abroad up to all applicable limits.

2. REASONABLE PRECAUTIONS

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

3. MAXIMUM AGE LIMIT

The maximum age limit for benefits is 65 years inclusive.

4. CURTAILMENT ASSISTANCE

In the event of **curtailment** necessitating **your** early return **home** **you** must contact **AXA Assistance**. The service is available to **you** and operates 24 hours a day, 365 days a year for advice and assistance with **your** return **home**. **AXA Assistance** will arrange transport **home** when **you** have notice of serious illness, imminent demise, or death of a **close relative at home**.

SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS

- You** must report all incidences of loss, theft, or attempted theft of **personal belongings** to the local Police within 24 hours of discovery and obtain a written report. A Holiday Representatives Report is not sufficient.
- For items damaged whilst on **your trip** **you** must obtain an official report from an appropriate local authority.
- If **personal belongings** are lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **you** must report to them, in writing, details of the loss, theft or damage and obtain an official report from an appropriate local authority. If **personal belongings** are lost, stolen or damaged whilst in the care of an airline **you** must:
 - obtain a Property Irregularity Report from the airline.
 - give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please retain a copy).
 - retain all travel tickets and tags for submission if a claim is to be made under the Benefit Schedule.
- You** must provide an original receipt or proof of ownership for items lost, stolen or damaged to help **you** to substantiate **your** claim.
- Receipts for items lost, stolen or damaged must be retained as these will help **you** to substantiate **your** claim.
- Payment will be made based on the value of the property at the time it was damaged, lost or stolen. A deduction will be made for wear, tear and loss of value depending on the age of the property.

CLAIMS CONDITIONS

These conditions apply throughout **your** policy. **You** must comply with the following conditions to have the full protection of the policy. If **you** do not comply **we** may at **our** option refuse to deal with **your** claim, or reduce the amount of any claim payment.

The first thing **you** should do:

We recommend that **you** check **your** cover. Please read the appropriate section in the policy to see exactly what is, and is not covered, noting any conditions, limitations and exclusions.

If **bodily injury**, illness, loss, theft or damage happens **you** should immediately:

- Call **AXA Assistance** on +49 89 500 70 5459 to report a medical emergency, request repatriation, report any loss, theft or damage.
- Inform a local Police station in the country where the incident occurred and obtain a crime or lost property irregularity report.

- Take all reasonable steps to recover missing property.
- Take all reasonable steps to prevent a further incident.

What **you** must do after making a claim:

- Tell **us** and provide full details in writing immediately if someone is holding **you** responsible for damage to their property or **bodily injury** to them. **You** must also immediately send **us** any writ or summons, letter of claim or other document.
- If **we** ask, **you** must send **us** written details of **your** claim within 31 days.
- You** or **your** legal representatives must supply at **your** own expense all information, evidence, details of household insurance, medical certificates and assistance that may be needed.
- You** must supply all of **your** original invoices, receipts and reports etc.

What **you** must not do:

- Admit or deny any claim made by someone else against **you** or make any arrangement with them.
- Abandon any property for **us** to deal with.
- Dispose of any damaged items as **we** may need to see them.

We are entitled to take over any rights in the defence or settlement of any claim in **your** name for **our** benefit against any other party. **We** are entitled to take possession of the property insured and deal with any salvage. **We** may also pursue any claim to recover any amount due from a third party in the name of anyone claiming cover under this policy.

We reserve the right to require **you** to undergo an independent medical examination at **our** expense. **We** may also request and will pay for a post-mortem examination.

We may refuse to reimburse **you** for any expenses for which **you** cannot provide receipts or bills.

FRAUD

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

- make a claim under the policy knowing the claim to be false or fraudulently exaggerated in any respect or
- make a statement in support of a claim knowing the statement to be false in any respect or
- submit a document in support of a claim knowing the document to be forged or false in any respect or
- make a claim in respect of any loss or damage caused by **your** wilful act or with **your** connivance

Then

- we** shall not pay the claim
- we** shall not pay any other claim which has been or will be made under the policy
- we** may at **our** option declare the policy void
- we** shall be entitled to recover from **you** the amount of any claim already paid under the policy
- we** may inform the police of the circumstances.

EMERGENCY AND MEDICAL SERVICE

Contact **AXA Assistance** on telephone: +49 89 500 70 5459

In the event of a serious illness or accident which may lead to in-patient hospital treatment, or before any arrangements are made for repatriation or in the event of **curtailment** necessitating **your** early return **home**, or in the event of **you** incurring medical expenses in excess of €500, **you** must contact **AXA Assistance**. The service is available to **you** and operates 24 hours a day, 365 days a year for advice, assistance, making arrangements for hospital admission, repatriation and authorisation of medical expenses. If this is not

possible because the condition requires immediate emergency treatment **you** must contact **AXA Assistance** as soon as possible. Private medical treatment is not covered unless authorised specifically by **AXA Assistance**.

MEDICAL ASSISTANCE ABROAD

AXA Assistance has the medical expertise, contacts and facilities to help should **you** be injured in an accident or fall ill. **AXA Assistance** will also arrange transport **home** when this is considered to be medically necessary, or when **you** have notice of serious illness or death of a **close relative at home**.

PAYMENT FOR MEDICAL TREATMENT ABROAD

If **you** are admitted to a hospital/clinic while outside **your country of residence**, **AXA Assistance** will arrange for medical expenses covered by the Benefit Schedule to be paid direct to the hospital/clinic. To take advantage of this benefit someone must contact **AXA Assistance** for **you** as soon as possible.

For simple out-patient treatment, **you** should pay the hospital/clinic yourself and claim back medical expenses from **us** on **your** return to **your country of residence**. Beware of requests for **you** to sign for excessive treatment or charges. If in doubt regarding any such requests, please call **AXA Assistance** for guidance.

RECIPROCAL HEALTH AGREEMENTS

EUROPEAN UNION (EU), EUROPEAN ECONOMIC AREA (EEA) AND SWITZERLAND

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

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

GENERAL EXCLUSIONS

These exclusions apply throughout **your** Benefit Schedule. **We** will not pay for claims arising directly or indirectly from:

1. War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, **terrorism**, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power but this exclusion shall not apply to losses under Section H – Emergency Medical and Other Expenses, Section I – Hospital Benefit and Section L – Travel Accident unless such losses are caused by nuclear, chemical or biological attack, or the disturbances were already taking place at the beginning of any **trip**.
2. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste, from combustion of nuclear fuel, the radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly.
3. Loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.
4. **Your** participation in or practice of any sport or activity unless it is shown as covered in the list of **Sports and Activities** on page 7.
5. **Your** engagement in or practice of: manual work involving the use of dangerous equipment in connection with a profession

business or trade, flying except as a fare paying passenger in a fully-licensed passenger-carrying aircraft, the use of motorised two or three wheeled vehicles unless a full driving licence issued in **your country of residence** is held permitting the use of such vehicles, professional entertaining, professional sports, racing (other than on foot), motor rallies and motor competitions, or any tests for speed or endurance.

6. **Your** pursuit of the following winter sports; Off piste skiing without a guide, skiing against local authoritative warning or advice, ski stunting, free-style skiing, Nordic skiing, ice hockey, bobbing, tobogganing, heli skiing, ski acrobatics, ski flying, ski jumping, ski mountaineering, glacier skiing, snowcat skiing, snow carting or the use of bob sleighs, luges or skeletons.
7. **Your** wilfully, self-inflicted injury or illness, suicide or attempted suicide, sexually transmitted diseases, solvent abuse, alcohol abuse, the use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a **medical practitioner**, but not for the treatment of drug or alcohol addiction), self exposure to needless peril (except in an attempt to save human life).
8. A condition **you** have in respect of which a **medical practitioner** has advised **you** not to travel or would have done so had **you** sought his/her advice.
9. A condition for which **you** are travelling with the intention of obtaining medical treatment (including surgery or investigation) or advice outside of **your country of residence**.
10. A condition for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**.
11. **Your** travel against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider.
12. **Your** own unlawful action or any criminal proceedings against **you**.
13. Not covered is any claim where **you** are entitled to Indemnity under any other Insurance, including any amounts recoverable from any other source, except in respect of any excess beyond the amount which would have been covered under such other Insurance, or any amount recoverable from any other source, had these benefits herein not been effected.
14. Unless **we** provide cover under this insurance, any other loss, damage or additional expense following on from the event for which **you** are claiming. Examples of such loss, damage or additional expenses would be the cost of replacing locks after losing keys, cost incurred in preparing a claim or loss of earnings following **bodily injury** or illness.
15. Operational duties as a member of the Armed Forces.
16. **Your** travel to a country or specific area or event to which a government agency in the **country of residence** or the World Health Organisation has advised the public not to travel, or which are officially under embargo by the United Nations.

SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS

1. Loss, theft of or damage to **valuables** or **personal money** left **unattended** at any time (including in a vehicle or in the custody of carriers) unless deposited in a hotel safe or locked safety deposit box.
2. Loss, theft of or damage to **personal belongings** contained in an **unattended** vehicle:
 - a) overnight between 9pm and 8am (local time) or
 - b) at any time between 8am and 9pm (local time) unless it is in the locked boot which is separate from the passenger compartment for those vehicles with a boot, or for those vehicles without a separate boot locked in the vehicle and covered from view and evidence of forcible and violent entry to the vehicle confirmed by a police report.

redefining / service

3. Loss or damage due to delay, confiscation or detention by customs or other authority.
4. Loss, theft of or damage to cheques other than travellers cheques, money, postal or money orders, pre-paid coupons or vouchers, travel tickets, credit/debit or charge cards.
5. Loss, theft of or damage to unset precious stones, contact or corneal lenses, eye glasses, hearing aids, dental or medical fittings, cosmetics, antiques, musical instruments, deeds, manuscripts, securities, perishable goods, bicycles and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).
6. Loss or damage due to cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or accident to the aircraft, sea vessel, train or vehicle in which they are being carried.
7. Loss or damage due to breakage of sports equipment or damage to sports clothing whilst in use.
8. Claims which are not supported by the original receipt, proof of ownership or insurance valuation (obtained prior to the loss) of the items lost, stolen or damaged.
9. Loss, theft of or damage to tools of trade, motor accessories and other items used in connection with **your** business, trade, profession or occupation.
10. Loss or damage caused by wear and tear, depreciation, deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown or liquid damage.
11. Loss or damage due to depreciation in value, variations in exchange rates or shortages due to error or omission.
12. Claims arising from loss or theft from **your** accommodation unless there is evidence of forced entry which is confirmed by a police report.
13. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **baggage**.
14. Claims arising from loss, theft or damage of **personal belongings** shipped as freight or under a bill of lading.

SPORTS AND ACTIVITIES

You are covered under Section H – Emergency Medical and Other Expenses for the following activities automatically, provided that the activity is on an **incidental basis**. Cover under Section M – Personal Liability for those sports or activities marked with * is excluded.

- Archery (amateur)
- Badminton (amateur)
- Baseball (amateur)
- Basketball (amateur)
- Beach Games
- Bungee Jump (1)
- *Camel / Elephant Riding (incidental)
- Canoeing (Up to Grade 3)
- *Clay Pigeon Shooting
- Cricket (amateur)
- Cycling (other than specified)
- Dinghy Sailing
- Fell Walking
- Fencing
- Fishing
- Football (amateur)
- GAA Football (amateur)
- Golf (amateur)
- Hiking (under 2,000 meters altitude)
- Hockey (amateur)
- Horse Riding (up to 7 days)
- Jet Boating
- *Jet Skiing
- Jogging

- Manual Work - bar and restaurant, waitress, waiter, chalet, maids, au pair and nanny's and occasional light manual work at ground level including retail work and fruit picking but excluding the use of power tools and machinery
- Marathon Running (amateur)
- Motorcycling up to 50cc
- Netball (amateur)
- Non manual work (Including professional, administrative or clerical duties only)
- Orienteering
- Outwardbound Pursuits
- *Paintballing
- Parascending (over water)
- Pony Trekking
- Racquetball
- River Canoeing (Up to Grade 3)
- Roller Skating
- Roller Blading
- Rounders
- Rowing
- Running – sprint/long distance (amateur)
- Sail Boarding
- *Sailing within territorial waters
- Scuba Diving¹ Up to 30 metres if adequately supervised with qualified instructor (see notes below)
- Skate Boarding
- Snorkelling
- Squash (amateur)
- Surfing (amateur, under 14 days)
- Tennis (amateur)
- Tour Operator Safari
- Track Events
- Trekking (under 2,000 metres altitude)
- Volleyball (amateur)
- War Games
- Water Polo (amateur)
- Water skiing (amateur)
- White Water Rafting (Grade 1 to 3)
- Windsurfing (amateur)
- Yachting (racing/crewing inside territorial waters)

Winter sports

- guided cross country skiing (Nordic skiing)
- mono skiing
- off piste skiing or snowboarding only when accompanied by a locally qualified guide
- skiing
- snowboarding
- snow sledging

¹ Scuba diving – scuba diving to the following depths, when **you** hold the following qualifications, and are diving under the direction of an accredited dive marshal, instructor or guide and within the guidelines of the relevant diving or training agency or organisation:

- PADI Open Water – 18 metres
- PADI Advanced Open Water – 30 metres
- BSAC Ocean Diver – 20 metres
- BSAC Sports Diver – 35 metres
- BSAC Dive Leader – 50 metres

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

BENEFIT SCHEDULE **SECTION A – TRAVEL ADVICE** **WHAT IS COVERED**

Before and during **your trip** we will provide **you** with information on:

1. current visa and entry requirements for all countries. If **you** hold a passport from a country other than the **country of residence**, we may need to refer **you** to the embassy or consulate of the country concerned.
2. current vaccination requirements for all countries and information on current World Health Organisation warnings.
3. weather forecasts abroad.
4. specific languages spoken at the travel destination.
5. time zones and time differences.
6. opening hours of major banks including information and advice on the acceptability of various currencies and the main currency in use at the travel destination.

SECTION B – TRAVEL ASSISTANCE

WHAT IS COVERED

During **your trip** we will:

1. assist **you** with the procurement of a lawyer and/or interpreter and or the advance of any legal or interpreter's fees if **you** are arrested or threatened with arrest while travelling, or are required to deal with any public authority.
2. relay messages to **your close relatives**, business colleagues or friends in **your country of residence**.
3. assist in locating **your** lost luggage and provide **you** with regular updates on the current situation.
4. provide an advance if **your** cash, traveller's cheques or credit cards are lost or stolen and there are no other means for **you** to obtain funds. All advances and delivery fees will be charged to **your** EPB MasterCard World Signia/ EPB MasterCard Platinum Card account unless other accepted means of repayment to **us** are made in advance.
5. assist in obtaining replacement travel documents if the documents required for the return journey are lost or stolen. **We** will not pay the charges payable for issuing new documents. In the event that travel tickets for the return journey are lost or stolen, an advance shall be paid to enable purchase of a replacement ticket. All advances and delivery fees will be charged to **your** EPB MasterCard World Signia/ EPB MasterCard Platinum Card account unless other accepted means of repayment to **us** are made in advance.

SPECIAL CONDITIONS

Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. The cost of any advance or delivery fee.
2. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION C – CANCELLATION OR CURTAILMENT CHARGES

YOU SHOULD ALWAYS CONTACT AXA ASSISTANCE BEFORE CURTAILMENT Telephone Number +49 89 500 70 5459

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**, for any irrecoverable unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay together with any reasonable additional travel expenses incurred if

- a) cancellation of the **trip** is necessary and unavoidable; or
- b) the **trip** is **curtailed** before completion;

as a result of any of the following events occurring:

1. The death, **bodily injury** or illness of:
 - a) **You**;
 - b) any person with whom **you** are travelling or have arranged to travel with;

- c) any person with whom **you** have arranged to reside temporarily;
- d) **your close relative**; or
- e) a **business associate**.
2. Compulsory quarantine, jury service attendance or being called as a witness at a Court of Law of **you** or any person with whom **you** are travelling or have arranged to travel with.
3. Redundancy (which qualifies for payment under the current redundancy payment legislation in the **country of residence** and at the time of booking the **trip** there was no reason to believe anyone would be made redundant) of **you** or any person with whom **you** are travelling or have arranged to travel with.
4. The withdrawal of leave for members of the Armed Forces, Police, Fire, Nursing or Ambulance Services or employees of a Government Department, provided that such cancellation or **curtailment** could not reasonably have been expected at the time of receiving these benefits or booking **your trip** (whichever is the later).
5. The Police requesting **you**, within 7 days of **your** departure date, to remain at or subsequently return to **your home** due to serious damage to **your home** caused by fire, aircraft, explosion, storm, flood, subsidence, malicious persons or theft.

SPECIAL CONDITIONS

1. **You** must obtain a medical certificate from **your** treating **medical practitioner** and prior approval of **AXA Assistance** to confirm the necessity to return **home** prior to **curtailment** of the **trip** due to death, **bodily injury** or illness.
2. If **you** delay or fail to notify the travel agent, tour operator or provider of transport/ accommodation, at the time it is found necessary to cancel the **trip**, **our** liability shall be restricted to the cancellation charges that would have applied had failure or delay not occurred.
3. If **you** cancel the **trip** due to **bodily injury** or illness **you** must provide a medical certificate from the **medical practitioner** treating the injured/ill person, stating that this necessarily and reasonably prevented **you** from travelling.
4. If the car which **you** intended to use for the **trip** is stolen or damaged within 7 days of the departure date then the costs of a hire car will be covered and no cancellation costs will be paid.
5. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. **Pre-existing medical conditions** of **you** or anyone under WHAT IS COVERED 1.
2. The cost of recoverable airport charges and levies.
3. Any claims arising directly or indirectly from:
 - a) Redundancy caused by or resulting from misconduct leading to dismissal or from resignation or voluntary redundancy or where a warning or notification of redundancy was given prior to the date these benefits became effective or the time of booking any **trip** (whichever is the earlier).
 - b) Circumstances known to **you** prior to the date the date these benefits became effective or the time of booking any **trip** (whichever is the earlier) which could reasonably have been expected to give rise to cancellation or **curtailment** of the **trip**.
4. Costs paid for using any airline mileage reward scheme, for example Air Miles, or any card bonus point schemes, Timeshare, Holiday Property Bond or other holiday points scheme and/or any associated maintenance fees.
5. Normal pregnancy, without any **accompanying bodily injury**, illness, disease or complication. This section is designed to provide cover for unforeseen events, accidents, illnesses and diseases and normal childbirth would not constitute an unforeseen event.
6. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION D - MISSED DEPARTURE/ MISSED CONNECTION

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**, for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** overseas destination, connecting flights outside the **country of residence** or returning to the **country of residence** if **you** fail to arrive at the international departure point in time to board the scheduled **public transport** on which **you** are booked to travel on the initial international journey of the **trip** as a result of:

1. the failure of other scheduled **public transport** or
2. an accident to or breakdown of the vehicle in which **you** are travelling or
3. strike, industrial action or adverse weather conditions

SPECIAL CONDITIONS

1. **You** must allow sufficient time for the scheduled **public transport** or other transport to arrive on schedule and to deliver **you** to the departure point.
2. **You** must obtain a written report from the carrier confirming the delay and cause.
3. **You** must obtain a written report from the police or attending emergency service if the vehicle **you** are travelling in breaks down or is involved in an accident.
4. **You** may claim only once under Section E – Delayed Departure/Abandonment or once under Section D – Missed Departure/Missed Connection or once under Section G – Involuntary Denial of Boarding for the same event, not twice or all.
5. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Claims arising directly or indirectly from:
 - a) Strike or industrial action existing or declared publicly by the date these benefits became effective or **you** booked **your trip** (whichever is the earlier).
 - b) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Aviation Authority or a Port Authority or any similar body in any country.
 - c) An accident to or breakdown of the vehicle in which **you** are travelling for which a professional repairers report is not provided.
 - d) Breakdown of any vehicle in which **you** are travelling if the vehicle is owned by **you** and has not been serviced properly and maintained in accordance with manufacturers instructions.
2. Additional expenses where the scheduled **public transport** operator has offered reasonable alternative travel arrangements.
3. Missed departure when less than a minimum connection time of 2 hours between connecting flights at an international point of departure has been arranged or longer if flight reservations systems require longer periods for connections.
4. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION E – DELAYED DEPARTURE/ ABANDONMENT

WHAT IS COVERED

If departure of the scheduled **public transport** on which **you** are booked to travel is delayed at the final departure point from or to the **country of residence** for at least 4 hours from the scheduled time of departure due to:

- a) strike or industrial action or
- b) adverse weather conditions or
- c) mechanical breakdown of or a technical fault occurring in the scheduled **public transport** on which **you** are booked to travel

we will pay **you**, either:

1. up to the amount shown in the **Benefit Table** for each completed 4 hours delay up to a maximum of the amount shown in the **Benefit Table**, or
2. up to the amount as shown in the **Benefit Table** for Section C - Cancellation for any irrecoverable unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay if after a minimum of 24 hours delay has elapsed for a **trip** booked 1-7 days and a minimum of 36 hours delay has elapsed for a **trip** booked over 8 days, **you** choose to cancel **your trip**.

SPECIAL CONDITIONS

1. **You** must check in according to the itinerary supplied to **you**.
2. **You** must obtain confirmation from the carriers (or their handling agents) in writing of the number of hours of delay and the reason for the delay.
3. **You** must comply with the terms of contract of the travel agent, tour operator or provider of transport.
4. **You** may claim only once under Section E – Delayed Departure/Abandonment or once under Section D – Missed Departure/Missed Connection or once under Section G – Involuntary Denial of Boarding for the same event, not twice or all.
5. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Claims arising directly or indirectly from:
 - a) Strike or industrial action or air traffic control delay existing or publicly declared by the date these benefits became effective or **you** booked **your trip** (whichever is the earlier).
 - b) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Aviation Authority or a Port Authority or any similar body in any country.
2. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION F – BAGGAGE DELAY AND EXTENDED BAGGAGE DELAY

WHAT IS COVERED

BAGGAGE DELAY

We will pay **you** up to the amount shown in the **Benefit Table** for Baggage Delay for the emergency replacement of clothing, medication and toiletries if the checked in **baggage** is temporarily lost in transit during the outward journey and not returned to **you** within 6 hours of **your** arrival.

EXTENDED BAGGAGE DELAY

We will pay **you** up to the amount shown in the **Benefit Table** for Extended Baggage Delay if the checked in **baggage** has still not arrived at **your** destination airport within 48 hours of **your** arrival.

If the loss is permanent the amount paid will be deducted from the final amount to be paid under Section K - Baggage.

SPECIAL CONDITIONS

1. Written confirmation must be obtained from the carrier, confirming the number of hours the **baggage** was delayed.
2. All receipts must be retained.
3. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS on page 5.
4. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS on page 6.
2. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION G – INVOLUNTARY DENIAL OF BOARDING

WHAT IS COVERED

DENIAL OF BOARDING

If **you** have checked-in, or attempted to check in, for a confirmed scheduled flight, within the published check-in times, and **you** are involuntarily denied boarding as a result of overbooking, **we** will pay **your** costs incurred in respect of restaurant meals and refreshments consumed between the original scheduled flight departure time and **your** actual departure time, up to the amount shown in the **Benefit Table**.

EXTENDED DENIAL OF BOARDING

If **you** are delayed for more than six hours, **we** will pay up to the amount shown in the **Benefit Table** for **your** costs incurred in respect of hotel accommodation used and restaurant meals and refreshments consumed, within 30 hours of the original scheduled flight departure time, and before **your** actual departure.

SPECIAL CONDITIONS

1. **You** may claim only once under Section E – Delayed Departure/Abandonment or once under Section D – Missed Departure/Missed Connection or once under Section G – Involuntary Denial of Boarding for the same event, not twice or all.
2. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Any costs or charges for which the airline will compensate **you**;
2. Any costs or charges incurred where seat bumping was not involuntary and/or on a mandatory basis;
3. Any claims where written proof from the airline is not obtained confirming **your** inability to travel through over-booking and the period of delay until **your** next available flight is confirmed.
4. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION H – EMERGENCY MEDICAL AND OTHER EXPENSES

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**, for the following expenses which are necessarily incurred outside of the **country of residence** as a result of **your** suffering **bodily injury** or a **medical condition** and/or compulsory quarantine:

1. Emergency medical, surgical, hospital, ambulance and nursing fees and charges incurred outside of the **country of residence**.
2. Emergency dental treatment for the immediate relief of pain (to natural teeth only) up to the limit in the **Benefit Table** incurred outside of the **country of residence**.
3. In the event of **your** death outside of the **country of residence** the reasonable additional cost of funeral expenses abroad up to a maximum of €2,500 plus the reasonable cost of conveying **your** ashes to **your home**, or the additional costs of returning **your** remains to **your home**.
4. Up to the amount shown in the **Benefit Table** per night for 10 nights for reasonable accommodation expenses incurred, up to the standard of **your** original booking, if it is medically necessary for **you** to stay beyond **your** scheduled return date. This includes, with the prior authorisation of **AXA Assistance**, up to the amount shown in the **Benefit Table** per night for reasonable additional accommodation expenses for a friend or **close relative** to remain with **you** and escort **you home**. If **you** and **your** friend or **close relative** are unable to use the original return ticket, **AXA Assistance** will provide additional travel expenses up to the standard of **your** original booking to return **you** to **your home**.
5. Economy class transport and up to the amount shown in the **Benefit Table** per night for 10 nights accommodation expenses for a **close relative** from the **country of residence** to visit **you** or escort **you** to **your home** if **you** are travelling alone and if **you**

are hospitalised as an in-patient for more than 10 days, with the prior authorisation of **AXA Assistance**.

6. With the prior authorisation of **AXA Assistance**, the additional costs incurred in the use of air transport or other suitable means, including qualified attendants, to repatriate **you** to **your home** if it is medically necessary. Repatriation expenses will be in respect only of the identical class of travel utilised on the outward journey unless **AXA Assistance** agree otherwise.
7. Economy class transport and up to the amount shown in the **Benefit Table** per night for 3 nights accommodation expenses for a friend or **close relative** to travel from the **country of residence** to escort **beneficiaries** under the age of 16 to **your home** in the **country of residence** if **you** are physically unable to take care of them. If **you** cannot nominate a person **we** will then select a competent person.
8. If **we** have repatriated **you** to **your country of residence** with a medical escort **we** will pay for **your** accommodation, food and nursing costs for up to 10 days up to the amounts listed in the **Benefit Table** while **you** are convalescing in a Nursing Home registered in accordance with the legislation in the **country of residence**. The convalescence must immediately follow **your** repatriation and be agreed to by **our** senior medical officer in consultation with the registered **medical practitioner** treating **you**.

SPECIAL CONDITIONS

1. **You** must give notice as soon as possible to **AXA Assistance** of any **bodily injury** or **medical condition** which necessitates **your** admittance to hospital as an in-patient or before any arrangements are made for **your** repatriation.
2. **You** must contact **AXA Assistance** as soon as possible in the event of **you** incurring medical expenses in excess of €500 relating to any one incident.
3. In the event of **your** **bodily injury** or **medical condition** **we** reserve the right to relocate **you** from one hospital to another and arrange for **your** repatriation to the **country of residence** at any time during the **trip**. **We** will do this if in the opinion of the **medical practitioner** in attendance or **AXA Assistance** **you** can be moved safely and / or travel safely to the **country of residence** to continue treatment.
4. **You** must Always contact **AXA Assistance** before **curtailing your trip**.
5. **You** must claim against **your** state or private health insurer first for any in-patient medical expenses abroad up to **your** policy limit. In the event of a claim under this section **you** must advise **us** of any other insurance policy **you** hold or benefit from which may provide cover.
6. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. **Pre-existing medical conditions**
2. Any claims arising directly or indirectly in respect of:
 - a) Costs of telephone calls, other than calls to **AXA Assistance** notifying them of the problem for which **you** are able to provide a receipt or other evidence to show the cost of the call and the number telephoned.
 - b) The cost of treatment or surgery, including exploratory tests, which are not directly related to the **bodily injury** or **medical condition** which necessitated **your** admittance into hospital.
 - c) Any expenses which are not usual, reasonable or customary to treat **your** **bodily injury** or **medical condition**.
 - d) Any form of treatment or surgery which in the opinion of the **medical practitioner** in attendance and **AXA Assistance** can be delayed reasonably until **your** return to the **country of residence**.
 - e) Expenses incurred in obtaining or replacing medication, which at the time of departure is known to be required or to be continued outside the **country of residence**.

- f) Additional costs arising from single or private room accommodation.
 - g) Treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre unless agreed by **AXA Assistance**.
 - h) Any expenses incurred after **you** have returned to the **country of residence** unless previously agreed to by **AXA Assistance**.
 - i) Expenses incurred as a result of a tropical disease where **you** have not had the recommended inoculations and/or taken the recommended medication.
 - j) **Your** decision not to be repatriated after the date when in the opinion of **AXA Assistance** it is safe to do so.
3. Anything mentioned in GENERAL EXCLUSIONS on page 6.

3. Blockage of toilet units not caused by sudden breakage or mechanical failure.
4. Failure of the central heating system unless there is the danger of frost damage to **your home**.
5. Emergencies caused by leaking water hoses or water appliances.
6. Leaking overflows or gradual seepage from defective seal joints, any claim involving a septic tank, descaling or work relating to hard water scale deposit removal.
7. Damage made by the tradesman while gaining necessary access to **your home**.
8. Damage to any contents of **your home**.
9. Any costs which were not authorised by **us** first.
10. Anything mentioned in GENERAL CONDITIONS on page 4.
11. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION I - HOSPITAL BENEFIT

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**, for every complete 24 hours **you** have to stay in hospital as an in-patient outside the **country of residence** as a result of **bodily injury** or **medical condition** **you** sustain. **We** will pay the amount in the **Benefit Table** in addition to any amount payable under Section H – Emergency Medical and Other Expenses.

SPECIAL CONDITIONS

1. **You** must give notice as soon as possible to **AXA Assistance** of any **bodily injury** or **medical condition** which necessitates **your** admittance to hospital as an in-patient.
2. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Any claims arising directly or indirectly from:
 - a) Any additional period of hospitalisation relating to treatment or surgery, including exploratory tests, which are not directly related to the **bodily injury** or **medical condition** which necessitated **your** admittance into hospital.
 - b) Hospitalisation relating to any form of treatment or surgery which in the opinion of the **medical practitioner** in attendance and **AXA Assistance** can be delayed reasonably until **your** return to the **country of residence**.
 - c) Any additional period of hospitalisation relating to treatment or services provided by a convalescent or nursing home or any rehabilitation centre.
 - d) Hospitalisation as a result of a tropical disease where **you** have not had the recommended inoculations and/or taken the recommended medication.
 - e) Any additional period of hospitalisation following **your** decision not to be repatriated after the date when in the opinion of **AXA Assistance** it is safe to do so.
2. **Pre-existing medical conditions**
3. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION J – HOME EMERGENCY SERVICE

WHAT IS COVERED

We will arrange for one of **our** approved tradesmen to contact **you** to arrange for the emergency repair to **your** domestic gas or electricity supply, fixed heating system, domestic plumbing or drainage system, doors, windows, external locks or roofing, if any of them suffer damage during **your trip**, or up to 3 days upon **your** return **home** after a **trip**. **We** will pay for the call out charge and two man-hour's time. **We** will also pay for any parts or materials used to make the repair up to a maximum total of €150 (including VAT) per **trip**.

WHAT IS NOT COVERED

1. More than two man hour's labour charge.
2. Costs of more than € 150 (including VAT) for parts and materials used to make the repair.

SECTION K – BAGGAGE, PERSONAL MONEY AND PASSPORT

WHAT IS COVERED

BAGGAGE

We will pay **you**, up to the amount shown in the **Benefit Table**, for the accidental loss of, theft of or damage to **baggage**. The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (or **we** may at **our** option replace, reinstate or repair the lost or damaged **baggage**). The maximum **we** will pay for any one article, pair or set of articles is equal to the Single Item Limit shown in the **Benefit Table**. The maximum **we** will pay for all **valuables** in total is equal to the **valuables** Limit shown in the **Benefit Table**.

If **you** are on a cruise **we** will pay **you**, up to the amount shown in the **Benefit Table** for cruise **baggage**.

PERSONAL MONEY

We will pay **you** up to the amounts shown in the **Benefit Table** for the accidental loss of, theft of or damage to **personal money**.

We will pay **you** up to the amounts shown in the **Benefit Table** for cash limit for bank notes, currency notes and coins and up to the Cash Limit for under 16's if **you** are under the age of 16.

PASSPORT

We will pay **you** up to the amount shown in the **Benefit Table** for reasonable additional travel and accommodation expenses incurred necessarily abroad to obtain a replacement of **your** lost or stolen passport. **We** will only pay the pro-rata value of the lost passport.

SPECIAL CONDITIONS

1. All receipts must be retained.
2. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS on page 5.
3. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS on page 6.
2. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION L - TRAVEL ACCIDENT

DEFINITIONS - Applicable to this section

Loss of limb

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

Loss of sight

– total and irrecoverable loss of sight in both eyes.

Permanent total disablement

– disablement which in the opinion of **our medical practitioner**, entirely prevents **you** from engaging in, or giving any attention to, any and every business or occupation for the remainder of **your** life.

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**, if **you** sustain **bodily injury** whilst on a public conveyance which shall solely and independently of any other cause, result within one year in **your** death, **loss of limb**, **loss of sight** or **permanent total disablement**.

SPECIAL CONDITIONS

1. **Our medical practitioner** may examine **you** as often as reasonably necessary prior to paying a claim.
2. Anything mentioned in GENERAL CONDITIONS on page 4.

PROVISIONS

The benefit is not payable to **you**:

1. Under more than one of the items shown in the **Benefit Table**.
2. Under **permanent total disablement**, until one year after the date **you** sustain **bodily injury**.
3. Under **permanent total disablement**, if **you** are able or may be able to carry out any gainful employment or gainful occupation.

WHAT IS NOT COVERED

1. **Pre-existing medical conditions**
2. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION M - PERSONAL LIABILITY

WHAT IS COVERED

We will pay up to the amount shown in the **Benefit Table**, (inclusive of legal costs and expenses up to the amount shown in the **Benefit Table**) against any amount **you** become legally liable to pay as compensation for any claim or series of claims arising from any one event or source of original cause in respect of accidental:

1. **Bodily injury**, death, illness or disease to any person who is not in **your** employment or who is not a **close relative** or member of **your** household.
2. Loss of or damage to property that does not belong to and is neither in the charge of or under the control of **you**, a **close relative**, anyone in **your** employment or any member of **your** household other than any temporary holiday accommodation occupied (but not owned) by **you**.

In the event of an incident related to golfing, **we** will pay up to the amount shown in the **Benefit Table** for Golfing Liability.

SPECIAL CONDITIONS

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

WHAT IS NOT COVERED

1. Compensation or legal costs arising directly or indirectly from:
 - a) Liability which has been assumed by **you** under agreement unless the liability would have attached in the absence of such agreement.
 - b) Pursuit of any business, trade, profession or occupation or the supply of goods or services.
 - c) Ownership, possession or use of vehicles, aircraft or watercraft (other than surfboards or manually propelled rowboats, punts, canoes).
 - d) The transmission of any communicable disease or virus.
 - e) Ownership or occupation of land or buildings (other than occupation only of any temporary holiday accommodation where **we** will not pay for the first £250 of each and every claim arising from the same incident).
 - f) **Your** criminal, malicious or deliberate acts.
2. Anything mentioned in the GENERAL EXCLUSIONS on page 6.

SECTION N – OVERSEAS LEGAL EXPENSES AND ASSISTANCE

WHAT IS COVERED

We will pay up to the amount shown in the **Benefit Table**, for legal costs to pursue a civil action for compensation if someone else causes **you** **bodily injury**, **medical condition** or death during **your** trip. **We** will also pay reasonable costs of an interpreter that is arranged by **us** for court proceedings.

SPECIAL CONDITIONS

1. **We** shall supervise any legal action through agents **we** nominate and will decide the point at which negotiations cannot usefully be pursued further. After that, no further claims can be made against **us**.
2. If **you** or **your** lawyer receive any compensation, **you** must repay **us** any legal costs which **we** have paid up to the amount of the compensation.
3. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Legal costs in respect of:
 - a) Claims when in **our** opinion there are no reasonable prospects for success.
 - b) Claims against a carrier, the travel or holiday agent or tour operator arranging any **trip**, **us**, Inter Partner Assistance, AXA Travel Insurance, **AXA Assistance** or their agents and Visa Europe.
 - c) Claims against someone **you** were travelling with or another **beneficiary**.
 - d) Legal action where in **our** opinion the estimated amount of compensation is less than €750.
 - e) Actions undertaken in more than one country.
 - f) Lawyers' fees incurred on the condition that **your** action is successful.
 - g) Claims by **you** other than in **your** private capacity.
 - h) Claims occurring within the **country of residence**.
2. Legal costs or expenses incurred before **we** accept **your** claim in writing.
3. Claims not notified to **AXA Assistance** within 30 days of the incident.
4. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION O – CATASTROPHE BENEFIT

WHAT IS COVERED

We will pay **you** up to the amounts shown in the **Benefit Table** in the event that **you** are forced to move from the pre-booked accommodation as a result of fire, lightning, explosion, earthquake, storm, tempest, hurricane, flood, medical epidemic or local Government directive which is confirmed in writing by local or

national authority for irrecoverable travel or accommodation costs necessarily incurred to continue with the **trip** or, if the **trip** cannot be continued for **your** return **home**.

SPECIAL CONDITIONS

1. **You** must obtain a report from local or national authority stating that it was not acceptable for **you** to remain in **your** pre booked accommodation.
2. If **you** receive any compensation from the tour operator, booking agent or any third party, any claim under this section will be reduced by the amount of compensation received.
3. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Claims where the tour company is responsible.
2. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION P – HIJACK BENEFIT

WHAT IS COVERED

We will pay **you** up to the amounts shown in the **Benefit Table** for each 24 hours **you** are detained in the event that the aircraft or sea vessel in which **you** are travelling as a fare paying passenger is hijacked.

WHAT IS NOT COVERED

1. Anything mentioned in GENERAL CONDITIONS on page 4.
2. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION Q – BUSINESS BENEFIT

WHAT IS COVERED

Business Equipment

We will pay **you** up to the amount shown in the **Benefit Table**, for accidental loss, theft of or damage to **your business equipment**. The maximum **we** will pay for any **single item**, computer equipment or business samples is as shown in the **Benefit Table**.

Replacement Business Colleague

We will pay up to the amount shown in the **Benefit Table** in arranging for a **business associate** to take **your** place on a pre-arranged **business trip** in the event that:

1. **You** die.
2. **You** are unable to make the **business trip** due to **you** being hospitalised or totally disabled as confirmed in writing by a **medical practitioner**.
3. **Your close relative** or **business associate** in the **country of residence** dies, is seriously injured or falls seriously ill.
4. **You** are unable to continue working on **your trip** following **your** return **home** after **your** covered treatment under Section H – Emergency Medical and Other Expenses.

SPECIAL CONDITIONS

1. **Our** liability for **business equipment** hired by **you** shall be further limited to **your** liability for such loss or damage.
2. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS on page 5.
3. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Claims arising for **business equipment** left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property at anytime.
2. Claims arising for computer equipment and **valuables** whilst in the custody of a carrier.
3. Claims arising from damage caused by leakage of powder or liquid carried within personal effects or **baggage**.
4. In respect of **replacement business colleague**:

- a) Additional costs if **you** were totally disabled, hospitalised or **you** were on a waiting list to go into hospital at the time of arranging the **business trip**.
 - b) Additional costs if **you** were aware of circumstances at the time of arranging the **business trip** which could reasonable have been expected to give rise to disruption of the **business trip**.
5. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS on page 6.
 6. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTIONS R1, R2, R3 and R4 WINTERSPORTS

SECTION R1 – SKI EQUIPMENT AND SKI

EQUIPMENT HIRE

WHAT IS COVERED

SKI EQUIPMENT

We will pay **you**, up to the amount shown in the **Benefit Table**, for the accidental loss of, theft of or damage to **your own ski equipment**, or for hired **ski equipment**. The amount payable will be the value at today's prices less a deduction for wear tear and depreciation, (or **we** may at **our** option replace, re-instate or repair the lost or damaged **ski equipment**). The maximum **we** will pay for any one article, pair or set of articles is shown in the **Benefit Table**.

SKI EQUIPMENT HIRE

We will pay **you**, up to the amount shown in the **Benefit Table**, for the reasonable cost of hiring replacement **ski equipment** as a result of the accidental loss of, theft of or damage to or temporary loss in transit for more than 24 hours of **your own ski equipment**.

SPECIAL CONDITIONS

1. **Our** liability for **ski equipment** hired by **you** shall be further limited to **your** liability for such loss or damage.
2. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS on page 5.
3. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS on page 6.
2. Anything mentioned in the GENERAL EXCLUSIONS on page 6.

SECTION R2 - SKI PACK

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table**:

- a) For the unused portion of **your** ski pack (ski school fees, lift passes and hired **ski equipment**) following **your bodily injury** or illness.
- b) For the unused portion of **your** lift pass if lost.

SPECIAL CONDITIONS

1. **You** must provide written confirmation from a **medical practitioner** that such **bodily injury** or illness prevented **you** from using **your** ski pack.
2. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. **Pre-existing medical conditions**
2. Anything mentioned in the GENERAL EXCLUSIONS on page 6.

SECTION R3 – PISTE CLOSURE

WHAT IS COVERED

If **you** are prevented from skiing at the pre-booked resort for more than 24 consecutive hours, because insufficient snow, strike or adverse weather causes a total closure of the lift system (other than baby drags and lifts used for transport within the resort by non-skiers), **we** will pay **you**, up to the amount shown in the **Benefit**

Table for the cost of transport and lift pass charges for travel to and from an alternative site (excluding cross country skiing).

If no alternative sites are available **we** will pay **you** a cash benefit up to the amount shown in the **Benefit Table**.

SPECIAL CONDITIONS

1. Cover only applies to the resort which **you** have pre-booked at least one nights accommodation and for so long as such conditions prevail at the resort, but not exceeding the pre-booked period of **your trip** and
 - a) For **trips** taken during the period 15th December to 15th April in the northern hemisphere (both dates inclusive).
 - b) For **trips** taken during the period 15th May to 15th October in the southern hemisphere (both dates inclusive).
2. **You** must obtain written confirmation from the resort management of the piste conditions confirming the closure of facilities and the dates applicable.
3. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

Anything mentioned in the GENERAL EXCLUSIONS on page 6.

SECTION R4 – AVALANCHE CLOSURE

WHAT IS COVERED

If access to and from the ski resort is blocked or scheduled **public transport** services are cancelled or curtailed following avalanches or landslides **we** will pay up to the amount as shown in the **Benefit Table** for reasonable extra accommodation and travel expenses.

SPECIAL CONDITIONS

1. Cover only applies to the resort which **you** have pre-booked at least one nights accommodation and for so long as such conditions prevail at the resort.
2. For **trips** taken during the period 15th December to 15th April in the northern hemisphere (both dates inclusive).
3. For **trips** taken during the period 15th May to 15th October in the southern hemisphere (both dates inclusive).
4. **You** must obtain written confirmation from the resort management of the piste conditions confirming the closure of facilities and the dates applicable.
5. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

Anything mentioned in the GENERAL EXCLUSIONS on page 6.

SECTIONS S1, S2 and S3 GOLF BENEFIT

SECTION S1 – GOLF EQUIPMENT

WHAT IS COVERED

We will pay **you** up to the amount as shown in the **Benefit Table** for loss, theft, or damage to **your own golf equipment**. The amount payable will be the value at the time of the loss, less a deduction for wear tear and depreciation, or **we** may at **our** option replace, reinstate or repair the lost or damaged **golf equipment**. The maximum payment for any **single item** is shown in the **Benefit Table**.

SPECIAL CONDITIONS

1. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS on page 5.
2. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Claims arising for **golf equipment** left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property at anytime.

2. Claims arising for loss, theft or damage of **golf equipment** carried on a vehicle roof rack.
3. Loss, theft of or damage to **golf equipment** over 5 years old.
4. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS on page 6.
5. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION S2 – GREEN FEES

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table** per **trip** to reimburse **your** pre-paid, irrecoverable Green Fees if:

1. **You** are ill or suffer a **bodily injury** during **your trip** and **you** are medically certified (by the treating registered **medical practitioner** at the resort or place of incident), as being unable to play golf for the remainder of **your trip**; or
2. **You** have to cancel or **curtail your trip** for any of the valid reasons listed under Section C – Cancellation or Curtailment.

SPECIAL CONDITIONS

1. **You** must provide written confirmation from a **medical practitioner** at the resort or place of incident that such **bodily injury** or illness prevented **you** from golfing.
2. Anything mentioned in Section C - Cancellation or Curtailment WHAT IS NOT COVERED.
3. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION S3 – HOLE IN ONE BENEFIT

WHAT IS COVERED

If **you** shoot a **Hole-in-One** during a golf game where green fees have been paid for with **your** EPB MasterCard World Signia/ EPB MasterCard Platinum card, **we** will pay up to €250 towards bar expenses.

SPECIAL CONDITIONS

1. **You** must provide a certified copy of **your** score card, signed by **you** and a witness and countersigned by the club professional, a dated Golf Club bar receipt and a dated charge slip for the greens fees.
2. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION T – WEDDING COVER

DEFINITIONS - Applicable to this section

You/your/ beneficiary/wedding couple

– the **couple** travelling abroad to be married whose names appear on the marriage certificate

WHAT IS COVERED

1. **We** will pay up to the amount shown in the **Benefit Table** for the accidental loss of, theft of or damage to:
 - a) each wedding ring taken or purchased on the **trip** for each **beneficiary**
 - b) wedding gifts taken or purchased on the **trip** for the **wedding couple**.
 - c) **Your wedding attire** which is specifically worn by **you** on **your** wedding day.
The amount payable will be the original purchase price less a deduction for wear, tear and depreciation, or **we** may at **our** option replace, reinstate or repair the lost or damaged **baggage**.
2. **We** will pay the **wedding couple** up to the amount shown in the **Benefit Table** for the reasonable additional costs incurred to reprint/ make a copy of or retake the photographs/video

recordings either at a later date during the **trip** or at a venue in the **country of residence** if:

- a) The professional photographer who was booked to take the photographs/ video on **your** wedding day is unable to fulfil such obligations due to **bodily injury**, illness or unavoidable and unforeseen transport problems, or
- b) The photographs/ video recordings of the wedding day taken by a professional photographer are lost, stolen or damaged within 14 days after the wedding day and whilst **you** are still at the holiday/honeymoon location.

SPECIAL CONDITIONS

1. Anything mentioned under SPECIAL CONDITIONS APPLICABLE TO PERSONAL BELONGINGS on page 5.
2. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Anything mentioned under SPECIAL EXCLUSIONS APPLICABLE TO PERSONAL BELONGINGS on page 6.
2. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION U – ATM THEFT/ ASSAULT

WHAT IS COVERED

We will pay **you**, up to the amount shown in the **Benefit Table** if **you** are mugged or robbed and the cash that **you** have withdrawn from an ATM with **your** EPB MasterCard World Signia/ EPB MasterCard Platinum Card is taken from **you** within 500 meters of the ATM and within 1 hour of the withdrawal during a **trip**.

SPECIAL CONDITIONS

1. **You** must report the theft to the police within 4 hours of the attack/robbery.
2. **You** must report the incident to **AXA Assistance** within 72 hours of the attack/robbery.
3. **You** must obtain a written report from the police which includes an incident number.
4. **You** must provide proof of the amount, date and time of the covered withdrawal.
5. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. Any cash that is withdrawn before 1 hour of the time of the robbery and/or not withdrawn using the EPB MasterCard World Signia/ EPB MasterCard Platinum Card.
2. Anything mentioned in GENERAL EXCLUSIONS on page 6.

SECTION V – PURCHASE PROTECTION

DEFINITIONS - Applicable to this section

You/your

– the holder of a EPB MasterCard World Signia/ EPB MasterCard Platinum card, the card being valid and the account in good standing at the time of the incident.

Eligible item

– an item, purchased by the **Card Holder** solely for personal use (including gifts), which has been charged fully to the **Card Holders** EPB MasterCard World Signia/ EPB MasterCard Platinum Card account and is not listed under WHAT IS NOT COVERED in this section.

Purchase price

– the lower of the amounts shown on either the EPB MasterCard World Signia/ EPB MasterCard Platinum Card billing statement or the store receipt for the **eligible item**.

WHAT IS COVERED

In the event of loss through theft, fire and accidental damage to an **eligible item** within 90 days of purchase, **We** will, at **our** option, replace or repair the **eligible item** or credit **your** EPB MasterCard World Signia/ EPB MasterCard Platinum Card account an amount not exceeding the **purchase price** of the **eligible item**, or the single item limit shown in the **Benefit Table** whichever is lower. **We** will not pay more than the amount shown in the **Benefit Table** for any one event, or more than the maximum amount shown in the **Benefit Table** in any one 365 day period.

SPECIAL CONDITIONS

1. Purchase Protection provides cover only for claims or portions of claims that are not covered by other applicable guarantees, warranties, insurance or indemnity policies, subject to the stated limits of liability
2. Claims for an **eligible item** belonging to a pair or set, will be paid up to the full **purchase price** of the pair or set, provided the items are not useable individually and cannot be replaced individually.
3. If **you** purchase the **eligible item** as a gift for someone else, **we** will if **you** wish, pay a valid claim to the recipient, subject to **you** making the claim.
4. **You** must exercise due diligence and do all things reasonably practicable to avoid any direct physical theft or damage to an **eligible item**.
5. **You** will need to transfer to **us**, on **our** request and at **your** expense, any damaged **eligible item** or part of a pair or set, and assign the legal rights to recover from the party responsible up to the amount **we** have paid.
6. **You** must document that the claim has not been sent to other insurance company.
7. **You** must provide **us** with the original sales receipt from store, original of card receipt, original of account showing the transaction and the police report.
8. Anything mentioned in GENERAL CONDITIONS on page 4.

WHAT IS NOT COVERED

1. The excess of €75, applying to each and every claim.
2. Lost items not connected to theft, fire or damage caused by accident.
3. Mysterious disappearance of items.
4. Theft or damage caused by fraud, mistreatment, carelessness or not following the manufacturers manual.
5. Items which were used before purchase, second-hand, altered, or bought fraudulently by the **Card Holder**.
6. Damage to items caused by product defects.
7. Expenses due to repairs not performed by workshops approved by **AXA Assistance**.
8. Stolen items not reported to the police within 48 hours of discovery and a written report obtained.
9. Items left **unattended** in a place accessible to the public.
10. Loss or damage due to normal wear and tear of items or damage due to normal use or normal activity during sports and games (example golf- tennis balls, or other consumable items used for sport or games).
11. Motor vehicles, motorcycles, bicycles, boats, caravans, trailers, hovercraft, aircraft and their accessories.
12. Loss or damage due to radioactivity, water, damp, earthquake, unexplainable disappearance or error during production.
13. Theft, loss or damage when item is under supervision, control or taking care of, by third party other than allowed according to safety regulations.
14. Items not received by the **Card Holder** or other party pointed out by the **Card Holder**.
15. Losses from any item of any property, land or premises unless entry or exit to the property or premises was gained by the use of force, resulting in visible physical damage to the property or premises.

16. Direct physical theft or damage to items in a motor vehicle or as a result of the theft of said motor vehicle.
17. Loss caused by declared or undeclared war, confiscation by order of any government or public authority, or arising from illegal acts.
18. Loss of jewellery, watches, precious metals and gemstones in **baggage** unless carried by hand and under the **Card Holder's** personal supervision or under the supervision of a travelling companion previously known to the **Card Holder**.
19. Service, cash, travel checks, tickets, documents, currency, silver and gold.
20. Art, antiques, rare coins, stamps and collector's items.
21. Animals, living plants, consumables, perishable goods or permanent installations.
22. Electronic items and equipment, including but not limited to, personal stereos, MP3 players, computers or computer-related equipment whilst at **your** place of employment, items used for business purpose.
23. Riot and civil commotions, strikes, labour and political disturbances.
24. Any mail order items or items delivered by courier until item or items are received, checked for damage and accepted at the nominated delivery address.
25. Items purchased on the Internet unless it is from a local country registered site.
26. Theft or accidental damage to any item where there is any other insurance covering the same theft or accidental damage, or where the terms and conditions of such other insurance have been broken or for the reimbursement of any evident excess.
27. Anything mentioned in GENERAL EXCLUSIONS on page 6.

We are committed to providing **you** with an exceptional level of service and customer care. **We** realize that things can go wrong and there may be occasions when **you** feel that **we** have not provided the service **you** expected. When this happens, **we** want to hear about it so that **we** can try to put things right.

WHEN YOU CONTACT US:

Please give **us your** name and contact telephone number. Please quote **your** EPB MasterCard World Signia/ EPB MasterCard Platinum Card and/or claim number. Please explain clearly and concisely the reason for **your** complaint.

STEP ONE – INITIATING YOUR COMPLAINT

You need to contact **AXA Assistance** on +49 89 500 70 5459. **We** expect that the majority of complaints will be quickly and satisfactorily resolved at this stage, but if **you** are not satisfied, **you** can take the issue further:

STEP TWO – CONTACTING AXA TRAVEL INSURANCE HEAD OFFICE

If **your** complaint is one of the few that cannot be resolved by this stage contact the Head of Customer Care in **your** preferred language, who will arrange for an investigation on behalf of the Chief Executive: AXA Travel Insurance, Head of Customer Care, The Quadrangle, 106-118 Station Road, Redhill, Surrey, RH1 1PR, United Kingdom. Or **you** may use e-mail: customer.support@axa-travel-insurance.com

STEP THREE – BEYOND AXA TRAVEL INSURANCE

If **we** have given **you our** final response and **you** are still dissatisfied **you** may refer **your** case to the Insurance Supervision Commission and/or the Consumers' Protection Authority. Referral to these authorities will not affect **your** right to take legal action against **us**.

COMPLAINTS PROCEDURE

MAKING YOURSELF HEARD