

TRAVEL GUARD

Nedbank Limited Card Travel Insurance

REFERENCE NUMBER: NED/01072013

AIG

10 Queens Road

Parktown Johannesburg, 2193

PO Box 31983 Braamfontein 2017

Tel: (011) 551-8000

Fax (011) 551-8653

24 HOUR EMERGENCY MEDICAL ASSISTANCE HELPLINE: +44 1273 227036 (UNITED KINGDOM)

This Policy is a contract made between Nedbank Limited Card and AIG South Africa Limited, the Company. The Company agrees to provide insurance on the basis set out in this Policy provided the premium is paid when due and the Company agrees to accept it. Any endorsement to the Policy or the Schedule shall form part of the Policy.

Signed on behalf of the Company



Richard Lang

VP, Consumer Lines Head

Accident and Health South Africa

SCHEDULES OF BENEFITS

AUTOMATIC COVER						
CARD TYPE	NEDBANK CLASSIC BUSINESS (CREDIT/CHARGE/CHEQUE); NEDBANK CORPORATE CLASSIC (CHARGE)		NEDBANK BUSINESS GOLD; NEDBANK CORPORATE GOLD; NEDBANK PROCUREMENT CARD; NEDBANK SMALL BUSINESS CREDIT CARD. NEDBANK REWARDS REVOLVE; NEDBANK CASH REVOLVE		NEDBANK PLATINUM AND NEDBANK PRIVATE WEALTH PLATINUM CARD	
Trip Duration	Trips up to 30 days		Trips up to 30 days		Trips up to 30 days	
	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL
SECTION 1 - EMERGENCY MEDICAL AND RELATED EXPENSES AND ASSISTANCE						
1A - Emergency Medical and Related Expenses						
Injury	R 25,000	R 150,000	R 70,000	R 1,000,000	R 70,000	R 3,000,000
Illness	Nil	R 150,000	Nil	R 1,000,000	Nil	R 3,000,000
Excess - in-patient	R 2,000	R 2,000	R 2,000	R 2,000	R 2,000	R 2,000
Excess - out-patients	R 500	R 500	R 500	R 500	R 500	R 500
Coffin Expenses	R 10,000	R 10,000	R 10,000	R 10,000	R 10,000	R 10,000
Return of travel companion	Actual Expense		Actual Expense		Actual Expense	
Return of children	Actual Expense		Actual Expense		Actual Expense	
Visit by a family member	Actual Expense		Actual Expense		Actual Expense	
1B - Travel guard Assist						
Cash advances	Assistance Service		Assistance Service		Assistance Service	
Consular referral	Assistance Service		Assistance Service		Assistance Service	
Emergency travel & accommodation arrangements	Assistance Service		Assistance Service		Assistance Service	
Legal assistance abroad	Assistance Service		Assistance Service		Assistance Service	
24 Hour medical emergency and assistance telephone line	Assistance Service		Assistance Service		Assistance Service	
Replacement of lost travel documents	Assistance Service		Assistance Service		Assistance Service	
Transmission of urgent messages	Assistance Service		Assistance Service		Assistance Service	
1C - Medical evacuation; repatriation or transportation	Actual Expense		Actual Expense		Actual Expense	
SECTION 2 - PERSONAL ACCIDENT						
(i) Public conveyance	R 250,000	R 450,000	R 600,000	R 750,000	R 1,000,000	R 1,000,000
(ii) 24 hour cover	R 50,000	R 50,000	R 100,000	R 100,000	R 500,000	R 500,000
SECTION 10 - HIJACK - PUBLIC CONVEYANCE - 12 hour excess						
R750 per day for up to 10 days	Nil	Nil	Nil	Nil	R 7,500	R 7,500
MAXIMUM ACCUMULATION LIMIT	R 150,000		R 1,000,000		R 3,000,000	

OPTIONAL COVER						
BENEFIT	OPTION 1		OPTION 2		OPTION 3	
	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL
1A - Emergency Medical and Related Expenses	Nil	R 5,000,000	Nil	R 7,000,000	Nil	R 9,000,000
Emergency medical expenses due to terrorism	Nil	R 1,000,000	Nil	R 2,500,000	Nil	R 2,500,000
Excess - in-patient	Waiver of Excess		Waiver of Excess		Waiver of Excess	
Excess - out-patient	Nil	R 500	Nil	R 500	Nil	R 500
1B - Legal assistance abroad	Nil	R 5,000	Nil	R 5,000	Nil	R 5,000
1D - Hospital confinement as a result of an accident or illness for a period not exceeding 20 days	Nil	Nil	Nil	Nil	Nil	R250 per day; up to R 5,000
1E - Alternative employee or resumption of assignment expenses	Nil	Nil	Nil	R 25,000	Nil	R 25,000
SECTION 2 - PERSONAL ACCIDENT						
(i) Public conveyance	R 600,000	R 600,000	R 1,000,000	R 1,500,000	R 1,000,000	R 2,000,000
(ii) 24 hour cover	R 300,000	R 300,000	R 500,000	R 750,000	R 500,000	R 1,000,000
(iii) Terrorism extension	Nil	R 250,000	Nil	R 750,000	Nil	R 750,000
SECTION 3 - CANCELLATION AND CURTAILMENT - R500 excess						
3A - Cancellation of journey	R 10,000	R 10,000	R 15,000	R 20,000	R 20,000	R 20,000
3B - Curtailment of journey	R 10,000	R 10,000	R 15,000	R 20,000	R 20,000	R 20,000
SECTION 4 - BAGGAGE LOSS - R500 excess						
4A - Loss, theft, damage to baggage or personal effects	R 5,000	R 7,500	R 10,000	R 15,000	R 10,000	R 20,000
Maximum Insured value of any one item	R 2,000	R 2,000	R 2,000	R 2,000	R 2,000	R 2,000
4B - Loss of cash/travel documents - R500 excess	R 2,000	R 2,000	R 2,000	R 3,000	R 2,000	R 3,000
SECTION 5 - BAGGAGE DELAY - 24 hour excess						
Incurred expenses up to an amount of	R 2,000	R 2,500	R 2,000	R 2,500	R 2,000	R 3,500
SECTION 6 - TRAVEL DELAY AND MISSED CONNECTION						
6A - Travel Delay - Incurred expenses up to an amount of (24 hour excess)	R 2,000	R 2,500	R 2,000	R 2,500	R 2,000	R 2,500
6B - Travel Missed Connection - Incurred expenses up to an amount of (6 hour excess)	Nil	Nil	Nil	R 2,500	Nil	R 2,500
SECTION 7 - TICKET UPGRADE						
Incurred expenses up to an amount of	Nil	Nil	Nil	R 4,000	Nil	R 4,000
SECTION 8 - NATURAL DISASTER - 48 hour excess						
Incurred expenses up to an amount of	Nil	R 2,500	Nil	R 2,500	Nil	R 2,500
SECTION 9 - PERSONAL LIABILITY						
Bodily Injury and Material Damage	R 2,000,000	R 2,000,000	R 2,000,000	R 2,000,000	R 2,000,000	R 2,000,000
SECTION 10 - HIJACK - PUBLIC CONVEYANCE - 12 hour excess						
R750 per day for up to 10 days	R 7,500	R 7,500	R 7,500	R 7,500	R 7,500	R 7,500
MAXIMUM ACCUMULATION LIMIT	R 11,000,000		R 13,000,000		R 15,000,000	
PREMIUM						
Per Trip - 1 to 30 days	R 475	R 475	R 519	R 519	R 571	R 571
Per Trip - 31 to 90 days	R 643	R 643	R 702	R 702	R 769	R 769

OPTIONAL COVER						
BENEFIT	OPTION 1		OPTION 2		OPTION 3	
	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL
Per Trip - 91 to 180 days	R 1,367	R 1,367	R 1,499	R 1,499	R 1,653	R 1,653
Mandate - 1 to 90 days	R 448	R 448	R 490	R 490	R 539	R 539

PRE-EXISTING OPTIONAL COVER (IN ADDITION TO OPTIONAL COVER)						
BENEFIT	PRE-EXISTING OPTION 1		PRE-EXISTING OPTION 2		PRE-EXISTING OPTION 3	
Any medical condition for which an Insured person has received treatment of advice or recommendation for treatment at any time prior to commencement of a journey. The member must be hospitalised as an in-patient, following medical advice, for more than 48 hours. This benefit does not apply to persons aged 75 and over.	Nil	R 100,000	Nil	R 150,000	Nil	R 250,000
PREMIUM						
Per Trip - 1 to 30 days	N/A	R 950	N/A	R 1,193	N/A	R 1,608
Per Trip - 31 to 90 days	N/A	R 1,279	N/A	R 1,595	N/A	R 2,135
Per Trip - 91 to 180 days	N/A	R 3,290	N/A	R 3,803	N/A	R 4,447
Mandate - 1 to 90 days	N/A	R 896	N/A	R 1,125	N/A	R 1,517

MANDATE COVER:

This option has been designed for clients who travel regularly. With this option the Company will, with your permission, automatically bill you for travel insurance every time you charge a Public Conveyance ticket to a Nedbank Limited Card, the insured will be provided with the mandate travel insurance documents. Our sales and service travel contact centre will assist with travel insurance documentation should the insured require it for future trips.

Specific Conditions applicable to Mandate Cover:

1. Cardholders must notify AIG SA once the age limit of 84 years is reached in order to cancel the mandate option;
2. All and any medical conditions identified after the activation of the mandate cover, is to be disclosed to AIG SA immediately after diagnosis, as well as when the cardholder turns 75 years of age;
3. The mandate option is available only to International Travel; Cardholders can request for local travel as a top-up by contacting saclientservices@za.aegisglobal.com
4. A Single Public Conveyance ticket should be purchased per transaction against a Nedbank Limited Card as we cannot identify when multiple tickets have been purchased and therefore only charge a single premium;
5. AIG SA must be informed of insurance requirements for travellers who do not fall within the travel insurance option, but the cardholder needs to ensure the necessary adjustments are made (including premium) as required by the specific traveller;
6. Tickets purchased using SAA Voyager Miles will not be automatically covered by mandate travel insurance as no card transaction is generated;

SENIORS		
OPTION 1, 2 & 3 - SENIORS COVER (AGE 75 – 84 inclusive) *		
BENEFIT	LOCAL	INTERNATIONAL
SECTION 1 - EMERGENCY MEDICAL AND RELATED EXPENSES AND ASSISTANCE		
1A - Emergency medical and related expenses and assistance - injury or illness	Nil	R 5,000,000
Emergency medical expenses due to terrorism	Nil	R 1,000,000
Excess - in-patient	Waiver of Excess	Waiver of Excess
Excess - out-patient	Nil	R 500
Return of mortal remains	Actual Expense	Actual Expense
Coffin Expenses	R 10,000	R 10,000
Return of travel companion	Actual Expense	Actual Expense
Return of children	Actual Expense	Actual Expense
Visit by a family member	Actual Expense	Actual Expense
1B - Travel guard Assist		
Cash advances	Assistance Service	Assistance Service
Consular referral	Assistance Service	Assistance Service
Emergency travel & accommodation arrangements	Assistance Service	Assistance Service
Legal assistance abroad	Assistance Service	Assistance Service
24 Hour medical emergency and assistance telephone line	Assistance Service	Assistance Service
Replacement of lost travel documents	Assistance Service	Assistance Service
1C - Medical evacuation, repatriation or transportation	Actual Expense	Actual Expense
SECTION 3 - CANCELLATION OR CURTAILMENT - R500 excess		
3A - Cancellation of journey	R 10,000	R 10,000
3B - Curtailment of journey	R 10,000	R 10,000
SECTION 4 - BAGGAGE LOSS - R500 excess		
Loss, theft, damage to baggage or personal effects	R 5,000	R 7,500
Maximum Insured value of any one item	R 2,000	R 2,000
Loss of cash/travel documents	R 2,000	R 2,000
SECTION 5 - BAGGAGE DELAY - 24 hour excess		
Incurred expenses up to an amount of	R 2,000	R 2,500
SECTION 6 - TRAVEL DELAY AND MISSED CONNECTION		
6A - Travel Delay - Incurred expenses up to an amount of (24 hour excess)	R 2,000	R 2,500
SECTION 8 - NATURAL DISASTER - 48 hour excess		
Incurred expenses up to an amount of	Nil	R 2,500
SECTION 9 - PERSONAL LIABILITY		
Bodily Injury and Material Damage	R 2,000,000	R 2,000,000
SECTION 10 - HIJACK - PUBLIC CONVEYANCE - 12 hour excess		
R750 per day for up to 10 days	R 7,500	R 7,500
MAXIMUM ACCUMULATION LIMIT	R 5,000,000	
PREMIUM		
Per Trip - 1 to 30 days	R 958	R 958
Per Trip - 31 to 90 days	R 1,302	R 1,302
Mandate - 1 to 90 days	R 904	R 904

* **NO AUTOMATIC AVAILABLE TO THE SENIORS COVER**

IMPORTANT CONTACT DETAILS

24 hour Emergency Medical Assistance – Travel Guard

Phone: +44 1273 227036 (UNITED KINGDOM)

Phone lines are open 24 hours a day, 7 days a week

All Medical assistance incidents should be logged with Travel Guard

Claims

AIG South Africa Limited

P.O Box 31983

Braamfontein 2017

SA Share Call Tel:

Tel: 0860 104 146

Tel: 011 525 3101 (Outside of RSA)

Fax: 011 551 8290

Email: satravelclaims@travelgaurd.com

The claims department is open Monday to Friday from 8:15am to 4:30pm (South African Time).

Sales & Services:

Tel: 0860 103 524

Tel: 011 525 3110 (Outside RSA)

Fax: 086 625 4818

Email: saclientservices@za.aegisglobal.com

The Sales & Services department is open Monday to Thursday from 8am to 6pm, Fridays from 8am to 5pm and Saturdays from 8am to 1pm (South Africa Time), excluding South African public holidays.

POLICY TERMS AND CONDITIONS

PERIOD OF INSURANCE

This Policy will provide cover for Insured Journeys that commence after the inception date appearing on the Travel Policy receipt. Except for Cancellation insurance, cover will commence when the Insured Person leaves the Point of Departure and will automatically cease when he returns to the Point of Departure. Cancellation coverage will take effect one day after the issue date as stated on the Travel Policy receipt and once the required premium is received by us.

The maximum period for any Insured Person is restricted to 30 days on the following options: Automatic, Optional or Pre-existing cover unless the Insured Person has requested to extend the cover to 90 days or 180 days and paid the additional premium. Seniors cover can only be extended to a maximum of 90 days.

This Policy does not apply to events that occur after the expiration date shown on the Policy receipt, or if the Insured Person returns to the Point of Departure from his Insured Journey before this date. This Policy cannot be cancelled once an Insured Journey has commenced or after the expiry date of the Insured Journey.

All cover is subject to the full cost of the departure and return Public Conveyance tickets being charged to a Nedbank Limited Card and either Nedbank Limited or the Insured Person paying the required premium and is subject to all the Terms, Conditions, Endorsements, Terminations and Exclusions of the Policy including the Schedule of Benefits.

Cover for the Insured Person entering into the Republic of South Africa on an Inbound Journey is limited to the Insured Benefits applicable to automatic cover only and provided the Public Conveyance ticket is purchased on a South African Nedbank Limited Card.

In respect of Public Conveyance tickets purchased with Voyager Miles earned against a South African issued Nedbank Limited Card the automatic cover is provided at no additional charge to the Insured Person, subject to the purchase of the Optional cover.

PREMIUM PAYMENTS

Nedbank Limited Card is liable for the premium on the automatic cover and the Insured Person is liable for the premium on the optional cover. The premium is payable in advance and the Company shall not be liable for any claim arising under this Policy in respect of an Accident or Illness that occurs prior to receipt of the premium. The Company shall not be obliged to accept premium tendered to it or to any intermediary after such date, but may do so upon such terms as it in its sole discretion may determine.

The Company reserves the right to ask for proof of payment of premium at any time. Such proof must be to the Company's satisfaction.

MAXIMUM AMOUNT PAYABLE

1. No Insured Person shall be entitled to recover a benefit exceeding 100% of the sum for an Insured Event as reflected in the Schedule of Benefits.
2. If two or more travel policies issued by the Company or any member company of AIG International apply to the same claim, the maximum amount payable by AIG under all such policies shall not exceed the limit of liability of whichever of such policies has the highest applicable limit of liability. Nothing contained herein shall be construed to increase the limit of liability of this Policy.
3. The maximum amount payable in the event of death or Permanent total disability of a child will be 20% of the Benefit, or in respect of death that amount which is legislated at the Date of Loss, whichever is the lesser.

CANCELLATION/TERMINATION

Cancellation

1. Provided that no claims have been initiated the Insured Person may cancel this Policy at any time by giving the Company written notice 15 days prior to his intended date of departure.
2. This Policy may be cancelled by the Company giving 15 days written notice if the Insured Person has been in breach of any of its Terms, Conditions, Endorsements, Terminations and Exclusions in accordance with the Short Term Insurance Act of 1998, and any other subsequent legislation that may be enacted, in which case the Company will refund a pro-rata premium for the unexpired policy period.
3. The Company may cancel this Policy by sending the Insured Person notice in writing to his last known address. If the premium is paid annually in advance and the Policy is cancelled other than at the anniversary date, the Company will refund a pro-rata premium provided that no claims have been initiated.

Termination

This Policy will terminate on the earliest of the following dates:

1. on the date the Master Policy is cancelled; or
2. the date of the Insured Person's return to the Point of Departure in South Africa or Country of Residence; or
3. the date that the Insured Person reaches the maximum age for the cover selected.

This Policy will terminate on the expiry date appearing in the schedule unless there is an automatic extension as described under the general conditions applying to this Policy.

OPTION NAMES

The Policy Schedule refers to the persons insured under this Policy by reference to the option selected.

The options are as follows:

1. **Automatic Cover**
2. **Optional Cover**
3. **Pre-Existing Optional Cover**
4. **Seniors Cover**

DEFINITIONS

In this Policy the following definitions apply:

24 Hour Cover means any time during the period of an Insured Journey other than when covered under Public Conveyance benefits.

Accident means a sudden unexpected and specific event which occurs at an identifiable time and place, resulting in Injury.

Accidental Loss means the Insured Person mislaying or misplacing their Baggage resulting in a loss of possession.

Accumulation Limit means the maximum liability of the Company in respect of any one Accident or number of Accidents arising from one source or cause during an Insured Journey.

Acquired Immune Deficiency Syndrome or **AIDS** shall have the meanings assigned to it by the World Health Organisation including Opportunistic Infection, Malignant Neoplasm, Human Immune Deficiency Virus (HIV), Encephalopathy (Dementia), HIV Wasting Syndrome or any disease or Illness in the presence of a sero-positive test for HIV.

Baggage means luggage, Personal Effects and travel documents (travel tickets, passports and visas) taken by an Insured Person on an Insured Journey.

Beneficiary means the person or persons nominated by the Insured Person.

Business means your employment, trade, profession or occupation.

Business Associate means a partner, director or employee of the Insured Person.

Children means the Insured Person's dependent children who are not in full-time employment and who are between the ages of 3 months up to and including the age of 18 years (or under the age of 25 years provided they are in full-time education), unmarried, not pregnant, without children and primarily dependent on the Insured Person for maintenance and support.

Company means AIG South Africa Limited.

Confinement means confinement to a Hospital as a resident in-patient for a period which is necessary for the diagnosis or treatment of any Injury or Illness.

Country of Residence means the country of which the Insured Person is a citizen or permanent resident.

Damage means physical damage to Baggage which lowers the value.

Date of Loss means:

- a. for Illness, the first date of diagnosis or the date the Insured Person first became aware of the Illness – whichever occurs earlier;
- b. for Injury, the date of the Accident;
- c. for all other Sections, the date of the Insured Event.

Day means a period of 24 consecutive hours including the day of admission but excluding the day of discharge.

Effective Date of Coverage means:

- a. for cancellation, one day after the issue date of travel insurance;
- b. for all other sections of cover, the date of departure on an Insured Journey.

Electronic Equipment shall mean any computer equipment system or software or any product, equipment, system or machinery connected to or operated by means of a micro or data processor chip.

Emergency Medical Expenses means all Reasonable and Customary Charges which at the sole discretion of Travel Guard are deemed medically necessary for Illness or Injury on an International Journey.

Excess means the first amount, or period, of each and every loss payable by the Insured Person.

Follow up Treatment in South Africa means all Reasonable and Customary Charges incurred for Illness or Injury, resulting in hospitalisation, surgical or other diagnostic or remedial treatment given or prescribed by a qualified Medical Practitioner, dentist or optometrist in South Africa. Follow up Treatment in South Africa does not include those expenses the Company is prohibited by law from paying and will only be paid to the extent permissible under the Medical Schemes Act No. 131 of 1998 and any other subsequent legislation which is enacted.

Hazardous Pursuits means any activity which introduces or increases the possibility of a loss or which may influence the extent of a loss including but not limited to sports activities.

Holder means the Policyholder named in the Policy Schedule who is Nedbank Limited Card.

Hospital means a legally constituted establishment which operates pursuant to the laws of the country in which it is based and which meets the following requirements:

- a. it operates primarily for the reception, medical care and treatment of sick, ailing or injured persons on a resident in-patient basis;
- b. it admits resident in-patients only under the supervision of a Medical Practitioner;
- c. it maintains organised facilities for the medical diagnosis and treatment of such persons and provides (where appropriate) facilities for major surgery within the confines of the establishment or facilities controlled by the establishment;
- d. it provides a full-time nursing service by or under the supervision of a staff of nurses;
- e. it is not a day clinic, health hydro or nature clinic, a mental institution, an institution confined primarily to the treatment of psychiatric disease, the psychiatric department of a hospital, a place for the treatment of chemical dependency, an establishment or a special unit of a hospital used primarily as a place for treatment of drug addicts or alcoholics, a hospice, a frail care centre, a rest home or nursing, convalescent, rehabilitation, assisted living or extended care facility.

Identity Theft means the unauthorized and/or illegal use of an Insured Person's personal information such as name or identity number to obtain a loan or open credit accounts.

Illness means any fortuitous sickness or disease contracted, commencing or first manifesting itself during an Insured Journey.

Inbound Journey means an Insured Journey commencing from the Point of Departure outside the territorial limits of the Republic of South Africa to the destination inside the territorial limits of the Republic of South Africa including the return journey to the Point of Departure.

Injury means physical trauma to an Insured Person caused by an Accident occurring on an Insured Journey resulting, solely and independently of any other cause or any other physical defect or infirmity existing prior to the Accident, in an Insured Event within 24 months of the date of the Accident. Physical trauma caused by exposure to the elements of nature as a direct result of an Accident will be deemed to be an Injury.

Insured Event means an event stated in the Schedule of Benefits.

Insured Journey means a Local Journey, an International Journey or an Inbound Journey.

Insured Person means any person whose public conveyance tickets have been charged to a valid Nedbank Limited card.

International Journey means an Insured Journey commencing from the Point of Departure to the destination, outside the territorial limits of the Republic of South Africa, including the return journey to the Point of Departure.

Local Journey means an Insured Journey which commences at the time when the Insured Person departs from the Point of Departure to travel in a direct, timeous and uninterrupted manner to a destination within the territorial limits of the Republic of South Africa that is more than 100 kilometers away from the Point of Departure and it includes the return journey to the Point of Departure.

Local Destination means a destination within the territorial limits of the Republic of South Africa that is more than 100 kilometres away from the Point of Departure.

Kidnapping means any event or connected series of events of seizing, detaining or carrying away by force or fraud of the Insured Person by person/s for the purpose of demanding ransom monies.

Malaria is a vector-borne infectious disease characterized by recurrent attacks of fever, caused by prozotan parasites of the genus Plasmodium transmitted by female Anopheles mosquitoes in tropical and subtropical regions.

Malignant Neoplasm shall include but not be limited to Kaposi's sarcoma, central nervous system lymphoma and/or other malignancies now known or which become known as immediate causes of death, an illness, or disability, in the presence of AIDS.

Manual Labour means physical, human labour involving the use of hands where the work may be considered hard or arduous, including skilled labourers who use or operate mechanical or non-mechanical machinery or equipment.

Master Policy means the internal reference for a specific product containing identical benefits and premium rates.

Medical Expenses means all Reasonable and Customary Charges for Illness or Injury on an International Journey resulting in hospitalisation, surgical or other diagnostic or remedial treatment given or prescribed by a Medical Practitioner.

Medical Practitioner means a person registered with a current, legal licence to practise medicine, but excludes an Insured Person or a member of any Insured Person's immediate family.

Medical Treatment means a Medical Practitioner's medical advice, treatment, consultations and prescribed or repeat maintenance medication.

Motor Hijack the unlawful seizing or attempted unlawful seizing of a vehicle by any person using force or threat or violence where such violence is intended, used or made to overpower or subdue the Insured Person whilst driving or as a passenger in a Private Motor Vehicle or whilst such vehicle is stationary.

Opportunistic Infection shall include but not be limited to pneumocystis carinii pneumonia, organism of chronic enteritis, virus and/or disseminated fungi infection.

Payment Card means an automatic teller machine (ATM) card, credit card, or debit card issued by a registered financial institution or qualified retail shop.

Permanent and Incurable Insanity means the Insured Person being diagnosed as permanently and incurably insane according to the usual and customary standards of the registered medical profession. The permanent and incurable insanity must have resulted directly from Injury.

Permanent and Incurable Paralysis means the complete and permanent loss of use of arms or legs, or one arm and one leg, through paralysis.

Permanent and Total Loss means the loss by physical severance or the permanent and total loss of use of a hand, foot, thumb, finger, toe, arm or a leg.

Permanent and Total Loss of Hearing means the total, irreversible loss of hearing of all sounds confirmed by medical evidence relying on audio-metric and sound-threshold tests.

Permanent and Total Loss of Sight means the total, irreversible loss of sight. Loss of sight will be deemed to have occurred if the degree of sight remaining after correction is 3/60 or less on the Snellen scale.

Permanent and Total Loss of Speech means the total and irrecoverable loss of the ability to speak. "Loss of the ability to speak" means the inability to make a comprehensible word or an understandable verbal language.

Permanent Total Disablement means total and absolute disablement which entirely prevents the Insured Person from engaging in or giving attention to his usual or any occupation for which he is qualified or has received specialised training and which will in all probability be lasting and continuous for his lifetime.

Personal Effects means spectacles, dentures, purses, wallets, cosmetics and other personal effects normally worn or carried on the person.

Point of Departure

- a. in respect of a Local Journey means the Insured Person's usual place of residence or from which an Insured Person leaves to travel in a direct, timeous and uninterrupted manner;
- b. in respect of an International Journey, the point where the Insured Person passes through passport control from within the Republic of South Africa; with regard to Section 4B-Baggage Delay and Section 5A-Travel Delay cover will commence from the Insured Person's place of residence or employment, whichever occurs latest; or
- c. respect of an Inbound Journey, the point where an Insured Person passes through passport control in Country of Residence from which the Insured Person intends to travel to the Republic of South Africa in a timeous and uninterrupted manner

Policy means this document embodying the contract of insurance, benefits and premium rates and shall include any subsequent Terms, Conditions, Exclusions, Terminations and Endorsements.

Postponement means delaying a travel date stated on the Travel Insurance Certificate.

Pre-Existing Medical Conditions means any condition giving rise to a claim for which, within the 12 consecutive months prior to the Effective Date of Coverage, the Insured Person:

- a. has consulted a Medical Practitioner or specialist; or
- b. has received Medical Treatment or advice; or
- c. the manifestation of symptoms would have caused a reasonable person to seek advice.

Private Motor Vehicle means any licensed passenger vehicle other than taxis, buses and any vehicle that is in excess of 2 tons.

Professional Player means an Insured Person who earns in excess of 50% of his income from playing sport or who participates in a sport that remunerates him as a means of livelihood.

Public Conveyance means any scheduled or chartered land, water or air conveyance legally licensed to carry passengers for hire operating commercially in accordance with all locally applicable laws and regulations and in which the Insured Person is travelling only as a fare-paying passenger, excluding minibuses, non-standard motor vehicles and non-pressurised single engine piston aircraft.

Reasonable and Customary Charges means the charges which:

- a. are medically required for the treatment, supplies or medical service to treat an Insured Person's condition;
- b. do not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expenses are incurred, and
- c. do not exceed the charges for treatment that would have been made if no insurance existed.

Related Expenses means additional accommodation and travelling expenses, excluding telephone costs, meals and beverages of necessity incurred by any one person, who on the advice of a Medical Practitioner appointed by the Company remains with or escorts the Insured Person until completion of his journey or until he resumes the Insured Journey or returns to the Point of Departure, whichever occurs first.

Relative means a Spouse, parent, parent-in-law, grandparent, step-parent, Children, grandchild, brother, brother-in-law, sister, sister-in-law, daughter-in-law, son-in-law, fiancée, fiancé, half-brother, half-sister, aunt, uncle, niece or nephew of the Insured Person.

Spouse means the husband, wife, partner in a same sex partnership or any de facto partner with whom the Insured Person has permanently and continuously lived in the same household in a relationship which is not casual or impermanent for a period longer than 6 consecutive months. Only one Spouse shall be eligible for cover.

Suit means a civil proceeding seeking monetary damages as a result of Identity Theft or a criminal proceeding in which you are charged with illegal acts committed by any person other than you whilst using your identity.

Territorial Waters means within a 19 Kilometer radius of the coastline.

Terrorist Act means any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or commission of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies

or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator/s and victim/s shall not be considered Terrorist Acts. 'Terrorist Act' shall also include any act which is verified or recognised as an act of terrorism by the (relevant) government of the country where the act occurs.

Theft means wrongfully taking property from an Insured Person without their willful consent.

Travel Insurance Certificate means the certificate which attaches to and forms part of the Policy and contains the relevant details of the Insured Journey.

Traumatic Event means a violent criminal act or attempt where such violence is intended or made to overpower or subdue.

Travel Companion means the person intending to travel or travelling with the Insured Person and who is covered under a Travel Guard Policy.

Travel Guard means Travel Guard International Ltd, who provides emergency travel and pre-departure health information and the Travel Guard services as more fully detailed in the body of this Agreement.

Waiver Of Excess means that if the Insured Person has selected Optional, the Excess of R2,000 applicable to any emergency medical assistance and expenses will be waived, if the Insured Person is hospitalised as an in-patient. An excess of R500 will apply for out-patient treatment.

War means war, whether declared or not, or any warlike activities (including use of military force) by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

Wrongful Detention means the arbitrary or capricious act of involuntary confinement of the Insured Person by person/s acting as agent/s or with the approval of any government of government entity, or acting or purporting to act on behalf of any insurgent party,

GENERAL CONDITIONS

1. Age limits

1.1 This Policy covers any event which happens to an Insured Person who is:

from the age of 3 months up to and including 74 years of age at the date of such event on the Automatic, Optional or Pre-existing Optional cover;

From the age of 75 years up to and including 84 years of age on the Seniors cover;

1.2 With respect to Insured Event 2 in the Personal Accident Table of Benefits, cover ceases on the Insured Person's 65th birthday unless he is gainfully employed.

1.3 This Policy does not extend to an Insured Person over the age of 70 years in the event of a claim as a result of any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto.

2. **Airlines** The Company will have no liability to pay any benefit in relation to any Insured Event for which the Insured Person may be able to seek compensation from an airline. If the Insured Person proves that he has taken all reasonable and necessary steps to claim from the airline, the Company will pay a pro-rata portion of the benefits. The Company's liability will be calculated by reducing the benefits by the amount for which the Company considers the airline to be liable.

3. **Automatic extension** If an event occurs after commencement of the Insured Journey giving rise to a legitimate claim under Emergency Medical and Related Expenses and/or Curtailment, the Insured Journey shall automatically be extended. If an event occurs in terms of section 10, the cover shall be extended and shall continue in force for the duration of the seizure or control of the Public Conveyance or 12 consecutive months from the date of such seizure or control, whichever is the lesser period.

4. **Currency** All amounts are shown in South African Rand (ZAR). If expenses are incurred in a foreign currency the rate of exchange used will be the rate at the time of incurring the expense or suffering a loss.

5. **Endorsements** This Policy may be extended, amended or altered by the Company issuing an endorsement, provided that the application is made in writing to the Company prior to the expiry of the existing Policy and there are neither existing nor initiated claims on the existing Policy.

6. **Information** By acceptance of this contract of insurance or the benefits under this Policy the Policyholder or Insured Person acknowledges that the sharing of claims and underwriting information by the Company is essential to enable the Company to underwrite policies, assess risks fairly, ensure compliance with all and necessary applicable legislation, regulations and business compliance requirements (including any overseas laws, regulations and compliance requirements binding on the Company) and to reduce the incidence of fraudulent claims, in the public interest and with a view to limiting premiums. The Policyholder and or Insured person, on his own behalf and on behalf of any person he represents herein, hereby waives any right to privacy in any insurance information

provided by him or on his behalf in respect of any insurance policy or claim made or lodged by him and he consents to such information being disclosed to any other party (including any subsidiary or parent company of the Company as well as any government or regulatory authority) who has a direct interest in the information disclosed by the Policyholder / Insured Person / his agent. The Policyholder / Insured Person also acknowledges that the information provided by him may be verified against any other legitimate sources or databases and waives any rights of privacy and consent to the disclosure of any information relevant to any insurance policy or claim concerning him.

7. **Liability**

7.1. The Company shall not be liable or responsible for:

- a. the negligence, wrongful acts and/or omissions of any legal and/or health care professional or any other person or persons or legal entity that provide direct or indirect service to the Insured Person;
- b. the failure of any agent or broker to explain adequately the terms, conditions, endorsements, terminations and exclusions of this Policy.

7.2. Should any discrepancies arise between this Policy and any literature received by the Insured Person, the Terms, Conditions, Endorsements, Terminations and Exclusions in this Policy will govern in all cases.

8. **Language** The official version of this Policy is in English. Words in the singular include the plural and vice versa and words in the masculine gender include the feminine gender.

9. **Marketing** Should any discrepancies arise between the Policy and any literature received by You or the Insured Person, the Terms, Conditions, Endorsements, Terminations and Exclusions in the Master Policy will govern in all cases. Any Insured Person may inspect the Master Policy at any time by arrangement with the policyholder.

10. **Misrepresentation** This Policy shall be voidable (at the discretion of the Company) in the event of misrepresentation, misdescription or non-disclosure by or on behalf of the Insured Person of any information material to this Policy.

11. **Other financial products and services** The Company will accept no liability whatsoever for any of the insurance or other financial products or services which are sold in conjunction with this Policy that are provided or underwritten by any other insurance or assurance companies and/or assistance companies and/or financial providers.

12. **Other insurance** Except for Section 2 - Personal Accident, if the Insured Person is able to claim under any other policies (including statutory insurance and/or automatic credit card travel insurance) to be covered for the whole or any part of an Insured Event ("Other Claims"), the Company will only be liable to pay its pro rata portion of the claim submitted in terms of this Policy.

12.1. If in the Company's discretion it decides to pay the claim in full, then it will not be obliged to make payment unless the Insured Person cedes to the Company all of their rights in respect of the Other Claims.

12.2. If the Company has already paid benefits in terms of this Policy, all of the Insured Person's rights in respect of the Other Claims will be ceded automatically to the Company.

12.3. A cession in terms of 12.1 or 12.2 will allow the Company to do all things necessary to claim against the other insurer or company and institute legal proceedings against that other insurer or company if the Other Claim is not paid..

12.4. Without limiting any provision of this Policy or any legal obligation, the Insured Person must cooperate fully with the Company in relation to the Other Claim or legal proceedings including:

- a. not doing anything to prejudice or limit the Company's rights;
- b. giving the Company whatever information and documents it may require;
- c. signing any document or affidavit that the Company may request to enable it to exercise its rights.

13. **Payment of benefits** This Policy is between the Company and the Insured Person only and all of its provisions and conditions are for the sole and exclusive benefit of those parties. Nothing in this Policy, express or implied, is intended to confer upon any other person any rights or remedies of any nature whatsoever under this Policy or any of its provisions. Without limitation, no third party shall have any rights under this Policy or any right to receive Policy benefits.

13.1. Receipt of Benefits paid as follows will be a valid discharge of the Company's liability under this Policy:

13.2. For Emergency Medical and Related Expenses on an International Journey, the benefit will be paid to the provider of such Medical Expenses.

13.3. For Emergency Medical and related Expenses on a Local Journey, the benefit will be paid to the Insured Person.

13.4. This Policy cannot be ceded, assigned or in any way transferred to a third party. Benefits shall be payable only to the Insured Person or his legal representative.

14. **Public Conveyance tickets** The Company has the right to utilise the Insured Person's Public Conveyance ticket to offset the Company's expenses.
15. **Schedule of Benefits** The Schedule of Benefits referred to in this policy wording is the Schedule of Benefits used in the AIG marketing material. The policy wording is to be read in conjunction with the Schedule of Benefits in the marketing material and vice versa.
16. **South African Law** This Policy will be governed by the laws of South Africa and its courts shall have exclusive jurisdiction to the exclusion of the courts of any other country.
17. **Subrogation** The Company has the right to commence or take over legal proceedings in the Insured Person's name for the defence or settlement of any claim, or to sue or prosecute any other party to recover monies payable by them at law. The Insured Person must co-operate with the Company and do nothing to hinder the Company's rights.
18. **Tax or imposts** The onus will always be on the Insured Person to ensure, correctly admit and pay any tax liability in consideration of any benefit being paid that may incur tax or imposts of any nature.

CLAIMS CONDITIONS

1. **Compliance** The Insured Person must follow the Company's advice or instruction otherwise the Company may decline to pay the whole or any part of the claim.
2. **Legal action** If the Company denies liability for any claim and the Insured Person does not institute legal action and serve summons on the Company (or initiate arbitration proceedings if the Company has agreed to submit to arbitration) within 12 months after such repudiation, all benefits of such claim shall be forfeited.
3. **Notice of claim and proof of loss**
 - 3.1 The Insured Person must give the Company notice in writing:
 - a. within 90 days of an Accident which may give rise to a claim under section 2 of this Policy. Any benefit related to death will only be payable if the Company receives written notification of the death within 30 days. The Company shall have the right to have a post mortem examination of the body conducted.
 - b. within 30 days of any other occurrence which may give rise to a claim under this Policy.
 - 3.2 The Insured Person must, at his own cost, provide whatever certificates, information and documented evidence ("Evidence") is required by the Company regarding the Insured Event.
4. **Recoveries** All recoveries net of the Company's actual recovery costs will be distributed firstly to the Company for all amounts paid and any remainder will be paid to the Insured Person.
5. **Fraudulent Claims** If the Insured Person, or anyone acting on his behalf use any fraudulent means or devices to obtain any benefit, then any amount payable in respect of such claim shall be forfeited.
6. **General**
 - 6.1 The Insured Person shall submit to medical examination at the expense of the Company as often as shall be required in connection with any claim. Any report generated as a result of such examination shall be the property of the Company and shall be deemed to be confidential information of the Company.
 - 6.2 Medical Treatment shall be sought and followed promptly on the occurrence of an Injury or Illness and the Company shall not be liable for that part of any claim which in the opinion of a Medical Practitioner arises from the unreasonable or wilful neglect or failure of any Insured Person to seek and remain under the care of a qualified Medical Practitioner.
 - 6.3 All claims arising from criminal incidents are to be supported and accompanied by a certified police report.
 - 6.4 The due observance and fulfilment of the Policy insofar as it relates to anything being done or complied with by the Insured Person, shall be a condition precedent to liability to make any payment under this Policy.
 - 6.5 The Company shall have the right to access any current or prior medical records of the Insured Person in order to finalise and/or proceed with the assessment of a claim and/or render medical assistance. By virtue of this clause, the Insured Person shall be deemed to have given the Company written consent to access any of the Insured Person's current or prior medical records.
 - 6.6 No amount payable in terms of this Policy shall bear any interest.

CLAIMS PROCEDURES

A completed claim form that has been signed by the Insured Person, copies of the airline ticket, the Policy Receipt or Schedule, and other items that may be necessary, are required on all claims together with the following documents for the different types of losses.

Emergency Medical Expenses

- a. All bills to be submitted with claims.

- b. If Illness is possibly pre-existing then the Insured Person is to supply his normal Medical Practitioner's report stating what treatment was received prior to the commencement of the Insured Journey, unless additional premium has been received to purchase Waiver of Pre-existing Conditions.
- c. Name of the Medical Practitioner as well as his address and telephone number.

Death, Disability and Injury

- a. Medical Reports.
- b. Death Certificate indicating cause of death.
- c. Inquest and post mortem reports.
- d. Police Report if death is due to a motor accident. The police station and reference number if death is the subject of criminal investigation.
- e. Claim Notification Period for this Section will be 90 days.

Cancellation or Curtailment

- a. Relevant Medical certificates or death certificates in the case of death.
- b. Original air-tickets or Travel documents.
- c. Proof of deposits not recoverable.
- d. Police Reports in case of accidents or hijack.
- e. Proof of material loss.

Baggage Loss

- a. The Insured Person must obtain Passenger/Property irregularity report from the relevant carrier, in order to substantiate the claim.
- b. Police Report to be submitted if loss is due to Theft.
- c. Receipts to be submitted as proof of payment.

Baggage Delay

- a. The Insured Person must obtain Passenger/Property irregularity report from the relevant carrier, in order to substantiate the claim.
- b. Receipts for emergency clothing and toiletries purchased, to be submitted.

Travel Delay

- a. Letter from airline/s detailing reason for the delay.
- b. Receipts for essential expenses to be submitted.

GENERAL EXCLUSIONS

The Company will not be liable to pay any Benefit or cover any loss, injury, damage or legal liability sustained directly or indirectly by or caused by or arising directly or indirectly from:

1. War, invasion, act of foreign enemy, hostilities, civil war, rebellion, revolution, insurrection or military or usurped power, labour disturbances, riot, strike or lock-out, however, the Insured Person will continue to be entitled to be covered for 7 calendar days from the start of the hostilities in case he is surprised by such events abroad and insofar as he does not actively participate in them ; or
2. the intentional use of military force to intercept, prevent, or mitigate any known or suspected Terrorist Act; or
3. any Terrorist Act or bomb incident or threat thereof; or
4. travel in, to, or through Cuba or Iraq, or
5. any terrorist or member of a terrorist organization, narcotics trafficker, or purveyor of nuclear, chemical or biological weapons; or
6. the use, release or escape of nuclear materials that directly or indirectly results in ionising, radiation or contamination by radioactivity from any nuclear fuel or from nuclear weapons materials. For the purpose of this exclusion only combustion shall include any self-sustaining process of nuclear fission; or
7. the dispersal or application of pathogenic or poisonous biological or chemical materials; or
8. being in active service or on duty with or undergoing training with any military or police force, or militia or paramilitary organisation; or
9. engaging in occupational activities underground or requiring the use of explosives; or
10. wilful or deliberate exposure to danger (except in an attempt to save human life), intentional self inflicted injury, suicide or attempt thereat; or
11. deliberate violation of criminal law; or

12. travelling by air or acting as part of an aircraft crew, except where the Insured Person is travelling as a fare-paying passenger on an aircraft that belongs to an airline company duly registered for the transport of fare-paying passengers on regular and published scheduled routes; or
13. mental disorders including, but not limited to anxiety disorders, eating disorders, psychotic disorders, affective disorders, personality disorders, substance use disorders, somatoform disorders, dissociate disorders, psychosexual disorders, adjustment disorders, organic mental disorders, mental retardation and autism; or
14. pregnancy or childbirth of the Insured Person (except for an unexpected medical complication or emergency occurring during the first 26 weeks of the pregnancy); or
15. sexually transmitted diseases and the conditions commonly known as AIDS or HIV and/or any related illness or condition including derivatives or variations thereof, howsoever, acquired or caused; or
16. chronic fatigue syndrome or myalgic encephalomyelitis (M.E.) (anticardiolipin antibody positivity) or the illness commonly referred to as yuppie flu; or
17. non-adherence or travelling against medical advice or travelling when unfit to do so; or
18.
 - a. an Insured Person being under the influence of alcohol with more than the legal limit of alcohol in his blood or breath; or
 - b. an Insured Person being under the influence of drugs or narcotics unless such drugs or narcotics were administered by a Medical Practitioner or unless prescribed by and taken in accordance with the directions of a Medical Practitioner; or
 - c. an Accident occurring whilst an Insured Person was driving a motor vehicle with more than the legal limit of alcohol in his blood or breath; or
 - d. alcohol abuse, alcoholism, substance abuse, solvent abuse, drug abuse or addictive conditions of any kind; or
19.
 - a. any Pre-existing Medical Condition unless Pre-existing cover has been purchased; or
 - b. any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications that can reasonably be related thereto, if the Insured Person has received medical advice or treatment (including medication) for hypertension 12 months prior to the commencement of the Insured Journey; or
20. any condition known to the Insured Person prior to the Effective Date of Coverage, where the Insured Person:
 - a. is on the waiting list for Medical Treatment; or
 - b. is travelling for the purpose of obtaining Medical Treatment (even if this is not the sole reason for the Insured Journey); or
 - c. has received a terminal prognosis; or
 - d. has been recommended to continue or to commence any Medical Treatment or medication after the Effective Date of Coverage; or
21. in respect of an Insured Person on reaching 70 years of age or older, any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications that can reasonably be related thereto; or
22. employment involving Manual Labour ; or
23. undertaking employment on a permanent or contract basis which is not casual; or
24. participating in any sport as a Professional Player; or
25. any Hazardous Pursuits not listed in the Sports and Hazardous Pursuits Activities Section; or
26. Any claim arising from using a two-wheeled motor vehicle where the engine capacity exceeds 200cc and/or is under control of an unlicensed driver and/or where a crash helmet is not worn
27. Consequential loss of any kind or financial loss and/or expense not otherwise specifically covered; or
28. any claim arising from the tour operator, airline (unless the cover includes Section 11) or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfil any part of their obligation to the Insured Person; or
29. Open ended tickets, if purchased for emigration purposes; or
30. Any search and rescue costs; or
31. For any expenses that you would normally incur regarding your trip; or
32. Being a crew member on a ship.

If the Company alleges that by reason of any of the above exclusions, loss or damage is not covered by this Policy, the burden of proving the contrary shall rest on the Insured Person.

TERRORISM EXTENSION

Cover is extended to provide cover for Section 1 - Medical and Related Expenses and Section 2 - Personal Accident as a direct result of an Accident causing Injury arising from:

1. the intentional use of military force to intercept, prevent, or mitigate any known or suspected Terrorist Act; or
2. any Terrorist Act or bomb threat or threat thereof.

Therefore General Exclusions 2 and 3 do not apply to Section 1 and 2A if Optional cover is purchased.

HAZARDOUS PURSUITS (ONLY APPLICABLE TO TOP UP I, II AND III COVER)

If the Insured Person intends to take part in a sport or activity during the Insured Trip, please note that cover is available for the activities listed in the two lists below. Cover is subject to the conditions below:

Hazardous Pursuits conditions:

- a. You must follow the safety guidelines for the activity concerned and where applicable use the appropriate and recommended safety equipment;
- b. Professional participation is excluded
- c. The Insured Person taking part in a sport or activity must be 69 years or younger.
- d. Cover under Section 1 will be limited to R500 000 while training for, participating, or engaging in any of the activities listed in the lists below.
- e. Sprains, strains and physiotherapy claims are excluded
- f. Search and rescue operations are excluded.
- g. The excess for Section 1 will be R500 while training for, participating, or engaging in any of the activities listed below.

Cover is provided for the activities listed below:

Badminton, Baseball, Softball, Basketball, Running (Excluding Marathons) Cricket, Handball, Netball, Golf, Squash, Tennis, Volleyball, Water polo, Canoeing (Open Water-Within Territorial Waters), Kayaking (Open Water-Within Territorial Waters), Rowing (Open Water-Within Territorial Waters), Sailing (leisure-Within Territorial Waters), Fishing (from shore), Fishing (At sea-recreational and within territorial waters), Fly Fishing, Paintballing, Wind Surfing, Swimming in a pool, Swimming in open waters (Within 100m off the shore), Scuba diving as a Licensed diver in waters less than 50m deep, snorkeling, scuba diving as an unlicensed diver and supervised, Snowboarding/Skiing on blue, red and green slopes, 4x4 Driving on the road, Cycling Tour, Skateboarding, Rollerblading, Ice skating, Field Athletics, Biathlon, Cross Country, Power lifting, Fencing, Ballet, Dancing, Gymnastics, Fell Walking, Mountaineering up Mount Kilimanjaro with an accredited guide and Archery.

Cover is provided for the activities listed below; however, no cover is available under section 2 (Personal accident).

Hockey, Rugby, American Football, Soccer, Speed Boats, Canoeing (White waters/ extreme), Kayaking (White waters/extreme), White Water Rafting (White waters/extreme), Supervised Sailing, Scuba Diving (as a licensed diver), Scuba Diving, Surf Skiing, Surfing, Wake Boarding, Water Skiing, High Diving, Ice Hockey, Black and Off Piste Skiing/ Snowboarding, Off Road 4X4 Driving, Competitive Cycling, BMX extreme, Go Kart Racing, Mountain Biking, Quad Biking, Iron Man, Pentathlon, Running in a Marathon, Triathlon, Martial Arts (excl kick boxing), Wrestling, Elephant Riding, Horseback Safari, Dog Sledding, Horse Riding, Polo, Gorge Swimming, War Games, Bungee Jumping, Clay Pigeon shooting, Hiking/Trekking (on a clearly marked trail with a registered guide, this does not including Hiking/ Trekking on Mountains) and Show jumping.

If you have any questions or if you wish to take part in an activity not shown in the table above, please contact the AIG Travel Call Centre on 0860 103 524 or 011 525 3110 (Outside of RSA) or e-mail saclientservices@za.aegisglobal.com before taking part in the activity. The Company may choose to charge an additional premium, cover will be provided at the discretion of the Company.

PLEASE NOTE THE SECTIONS LISTED BELOW ARE ONLY APPLICABLE IF LISTED IN THE APPLICABLE INSURED'S SCHEDULE OF BENEFITS FOR THE RELEVANT OPTION THAT THE INSURED PERSON IS COVERED FOR.

SECTION 1 – EMERGENCY MEDICAL AND RELATED EXPENSES AND ASSISTANCE

SECTION 1A – EMERGENCY MEDICAL EXPENSES AND RELATED EXPENSES

1. International Journey

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If an Insured Person whilst travelling on an International Journey incurs Medical Expenses as a result of Illness or Injury, the Company will pay for those expenses.

2. Local Journey

If an Insured Person whilst travelling on a Local Journey incurs Medical Expenses as a result of Injury, the Company will pay the Insured Person for those expenses.

SECTION 1B - TRAVEL GUARD

An Insured Person is entitled to the worldwide services of Travel Guard. In the event of a medical or other emergency, the Insured Person must call the Travel Guard number shown on the Emergency Travel Card which has been supplied to the Insured Person and which should be carried by all Insured Persons during an Insured Journey.

Travel Guard has a worldwide team of doctors, medical professionals and insurance specialists who are available 24 hours a day for advice and assistance for medical emergencies that the Insured Person might encounter during an Insured Journey.

Return of Mortal Remains

If an Insured Person dies, the Company will pay the reasonable cost of returning his mortal remains to the Country of Residence or the Point of Departure.

Coffin Expenses

If an Insured Person dies, the Company will pay for the coffin expenses when the mortal remains are returned to the Country of Residence or Point of Departure.

Return of Travel Companion

In the event of the Insured Person being confined to a Hospital or his repatriation or death, We will amend his Travel Companion's existing tickets or if not possible, arrange and pay the reasonable expense, for their transportation back to the Point of Departure, with a qualified escort if necessary, provided they are also insured under this Policy or a Travel Guard Policy.

Return of Children

If the Insured Person's accompanying Children are left stranded at the time of him being confined to a Hospital or his repatriation or Death, the Company will amend their existing tickets or if not possible, arrange and pay the reasonable expense, for their transportation back to the Point of Departure, with a qualified escort if necessary, provided they are also insured under this Policy or a Travel Guard Policy.

Visit by a Family Member

If the Insured Person suffers Illness or Injury resulting in him being hospitalised for a period of more than 5 consecutive days, the Company will pay, subject to medical advice and the Company's written agreement, the reasonable Related Expenses for one Relative to travel to, remain with, or accompany him back to his Point of Departure.

Travel Guard arranges access to the following services, subject to the Policy terms and conditions:

1. **Cash Assistance** If as a result of Theft, loss, Illness or Injury the Insured Person requires funds to pay for travel or accommodation, Travel Guard will advise him or his representative on how to obtain additional funds. Travel Guard will charge an administration fee for this advice.
2. **Consular referral** Wherever possible Travel Guard will provide an Insured Person with the details of the representative of the relevant consulate.
3. **Emergency travel and accommodation arrangements** Wherever possible Travel Guard will provide an Insured Person all reasonable, possible and practicable assistance in arranging emergency alternative transportation and accommodation.
4. **Legal Assistance Abroad** If the Insured Person is imprisoned or threatened with imprisonment, the Company will assist him in finding a lawyer.
5. **24-hour Medical Emergency and Assistance Telephone line** The Travel Guard medical personnel including paramedics, nurses and doctors are available 24 hours a day to provide medical advice and information. This is an advisory service, as a telephonic conversation does not constitute an accurate diagnosis.
6. **Replacement of Lost Travel Documents** Wherever possible Travel Guard will provide an Insured Person with all reasonable, possible and practical assistance in arranging emergency alternative travel documents.

7. **Transmission of urgent messages** Travel Guard will transmit urgent (personal) messages on behalf of or to an Insured Person in the event of travel delay, Illness or Injury.

SECTION 1C - MEDICAL EVACUATION, REPATRIATION OR TRANSPORT TO MEDICAL CENTRE EXPENSES

If an Insured Person suffers an Illness or Injury covered under Section 1A - Medical and Related Expenses that necessitates emergency transportation, the Company will:

1. transfer the Insured Person to another location to obtain necessary Medical Treatment; and/or
2. repatriate the Insured Person to his Point of Departure; and/or
3. pay for the cost of the required service including the necessary accompanying medical staff; and/or
4. pay for the cost of returning the Insured Person under Section 1E – Alternative Employee or Resumption Expenses.

SECTION 1C - SPECIFIC CONDITIONS

1. If the Insured Person wants the Company to pay for emergency transportation, Travel Guard must be contacted and their prior written agreement obtained. (This requirement does not include in-country emergency ambulance transfers from place of Illness or Injury to a Hospital, which will be paid for by the Company provided that such service was medically necessary or was authorised by a local authority such as the police or a medical officer.)
2. The Company will decide where and how to move the Insured Person depending on the medical advice received.
3. The Company will use the Insured Person's return ticket towards their costs if he is returned to his Point of Departure.

SECTION 1D - HOSPITAL CONFINEMENT

The Company will pay for Confinement as a result of Injury or Illness whilst on an International Journey. The Company will pay for each complete Day of Confinement.

SECTION 1E - BUSINESS TRAVEL - ALTERNATIVE EMPLOYEE OR RESUMPTION OF ASSIGNMENT EXPENSES

The Company will reimburse the Insured Person for reasonable and necessary expenses for either:

1. **Alternative Employee** Send a substitute person to complete the original business commitment of an Insured Person who is unable to do so due to his unexpected death, Injury or Illness, or who has to return early to his Point of Departure following the unexpected death or imminent death of a Relative or Business Associate; or
2. **Resumption of Assignment** Return the original Insured Person whom the Company has repatriated back to the Point of Departure following an event covered under Section 1A or Section 1C, within 90 days of such repatriation, to complete his original business commitments.

SECTION 1 - SPECIFIC CONDITIONS

1. If the Insured Person wants the Company to pay for any medical expenses in excess of R2,000, Travel Guard must be contacted and their prior written agreement must be obtained. If not approved by Travel Guard, the Company's liability will be limited to R2,000 for any one Insured Event.
2. Medical Expenses as a result of emergency dental treatment are limited to dentistry received within 30 days of the Accident.
3. Medical and Related Expenses shall only be paid until such time as a Medical Practitioner appointed by the Company decides that an Insured Person is capable of being repatriated. If the Insured Person is capable of being repatriated and elects not to return to the Point of Departure, all expenses incurred in respect of the occurrence will be for the Insured Person's own account.

SECTION 1 - SPECIFIC EXCLUSIONS

The Company will not pay for any medical expenses:

1. incurred for continuing treatment, including any medication commenced prior to the commencement date of the Insured Journey, which the Insured Person has been advised to continue whilst on an Insured Journey; or
2. incurred within the Republic of South Africa notwithstanding that such expenses may arise from an Injury or Illness suffered by the Insured Person during the period of an Insured Journey; or
3. incurred due to investigatory treatment that is not specified by a Medical Practitioner as immediately necessary; or
4. for fillings or crowns of precious metal; or
5. for any procedures relating to dental or oral hygiene; or

6. for specialist Medical Treatment without referral from a Medical Practitioner; or
7. relating to contraceptive devices, prosthetic devices, medical appliances or artificial aids; or
8. for preventative treatment, including but not limited to any vaccination and/or immunisation; or
9. in excess of R1,000 for either physiotherapy or chiropractic treatment, unless confined to a Hospital; or
10. as a result of any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto, for persons over the age of 70 years.

PRE-EXISTING MEDICAL CONDITIONS - (ONLY APPLICABLE IF THE RELEVANT OPTION HAS BEEN PURCHASED)

Medical Expenses cover in respect of a Pre-Existing condition shall be limited to Medical Expenses resulting from Illness occurring whilst on an International Journey due to a Pre-Existing condition up to the limit stated in the Schedule of Benefits.

PRE-EXISTING MEDICAL CONDITIONS - SPECIFIC CONDITIONS

1. Any costs associated with treatment the Insured Person currently receives or that the Insured Person's medical advisors are aware will or may arise during the International Journey as a result of such Insured Person's current state of health.
2. The Insured Person must be hospitalised as an in-patient for more than 48 hours up to the limits as specified in the Schedule of Benefits.

PRE-EXISTING MEDICAL CONDITIONS - SPECIFIC EXCLUSIONS

1. The Company will not pay for any medical expenses as a result of any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto, for persons over the age of 70 years.
2. We shall not provide the cover for Pre-Existing Medical condition should a Medical Practitioner have advised the Insured Person not to travel due to medical reasons.
3. Any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications, if the Insured Person has received medical advice or treatment (including medication) for hypertension 12 months prior to the commencement of the Insured Journey.

SECTION 2 - PERSONAL ACCIDENT

SECTION 2A - DEATH AND DISABILITY

If an Insured Person sustains an Injury resulting in an Insured Event described in the Table of Benefits below, the Company will pay the Insured Person or his legal representative the compensation as stated in the Schedule of Benefits.

If an Insured Person disappears and after 24 consecutive calendar months it is reasonable for the Company to believe that he may have died due to an Injury, the Company will pay the benefit subject to receipt of a signed undertaking by his beneficiary that such compensation shall be refunded if it is later demonstrated that he did not die as a result of an Injury. This written undertaking will be required at the point where this benefit becomes payable.

Public Conveyance Cover

Cover applies if an Insured Person sustains Injury any time during the period of an Insured Journey while riding in or upon, boarding or alighting from any Public Conveyance being used as a means of land, air or water transportation.

24 Hour Cover

Cover applies any time during the period of an Insured Journey other than when covered under the Public Conveyance benefit.

TABLE OF BENEFITS

INSURED EVENT	COMPENSATION EXPRESSED AS A PERCENTAGE OF THE

	SUM INSURED
1. Death	
a. As a result of an Accident	100%
b. Disappearance	100%
c. Death as a direct result of exposure to the elements of nature as a direct result of an Accident	100%
2. Permanent Total Disablement	
a. As a result of an Accident	100%
b. Permanent Total Disablement as a direct result of exposure to the elements of nature as a direct result of an Accident	100%
3. Permanent Disability	
3.1 Permanent and Total Loss of:	
a. Both hands or both feet	100%
b. One hand and one foot	100%
c. Either hand or foot and sight of one eye	100%
d. One hand or one foot	50%
3.2 Permanent and Total Loss of Sight in:	
a. Both eyes	100%
b. One eye	50%
3.3 Permanent and Total Loss of Hearing in:	
a. Both ears	100%
b. One ear	50%
3.4 Permanent and Total Loss of Speech	100%
3.5 Permanent and Incurable Insanity	100%
3.6 Permanent and Incurable Paralysis	100%
3.7 Permanent and Total Loss of four fingers and thumb of either hand	70%
3.8 Permanent and Total Loss of four fingers of either hand	40%
3.9 Permanent and Total Loss of thumb of either hand:	
a. Both joints	30%
b. One joint	15%
3.10 Permanent and Total Loss of a finger of either hand:	
a. Three joints	10%
b. Two joints	7.5%
c. One joint	5%
3.11 Permanent and Total Loss of toes of either foot:	
a. All in one foot	15%
b. Great – both joints	5%
c. Great – one joint	3%
d. Other than great – each toe	1%
3.12 Fracture of leg or patella with established non-union	10%
3.13 Shortening of leg by at least 5cm	7.5%
3.14 Permanent disability not otherwise provided for under items 3.1 – 3.13 inclusive	A percentage of the sum insured up to a maximum of 15%

SECTION 2A - SPECIFIC CONDITIONS

1. The Company will not pay for any benefit in respect of:
 - (a) Permanent Total Disablement except on submission of satisfactory proof to the Company that the disablement will in all probability continue for the remainder of an Insured Person's life;
 - (b) more than 100% of the sum insured when more than one Injury arises from the same Accident;
 - (c) more than one category for more than 100% of the sum insured. The benefit payable will be the highest in the appropriate category.
2. If the Insured Person sustains Permanent Total Disablement and the claim in relation to that disability is admitted and accepted, the benefit will be paid and all cover under this Section 2A in respect of such Insured Person shall cease.

3. The diagnosis and determination of Permanent Total Disablement or any Permanent Disability must be made and documented by a Medical Practitioner and must be continuous and permanent for at least 24 consecutive months from the onset of the disablement. However:
 - a) for Permanent and Total Loss of Speech, the loss of the ability to speak must be continuous and permanent for at least 12 consecutive months and medical evidence must confirm Permanent and Total Loss of Speech and all psychiatric related causes must be excluded; and
 - b) for Permanent and Incurable Paralysis, the loss of use must be continuous and permanent for at least 12 consecutive months from the onset of the paralysis.
4. If the Insured Person's existing ailment, infirmity or other abnormal physical or mental condition is aggravated by an Accident, the Benefit amount will be determined by the degree of the deterioration of the existing ailment after the Accident and the Benefit will be paid accordingly. The degree of ailment, infirmity or other abnormal physical or mental condition before the Accident will be determined by medical evidence.
5. If the consequences of an Accident are aggravated owing to an Insured Person's existing ailment, infirmity or other abnormal physical or mental condition, determination of the benefit will be based on the consequences the Accident would have had, had such defects not existed. The foregoing shall not apply, however, if such circumstances are a consequence of an earlier Accident to the Insured Person, for which benefit has been or will be paid under this Policy.
6. If an Insured Person dies of natural causes prior to the final disablement assessment relating to an Insured Event, the Company will pay what reasonably would have had to be paid for such Permanent Disability in accordance with Specific Condition 1(b) above.
7. In the event of death of Children, the benefit payable will be subject to the amount legislated by law at the time of the death.
8. Children are excluded from any benefit for occupational disability under Permanent Total Disablement.

SECTION 2 - SPECIFIC EXCLUSION

The Company will not be liable to pay any benefit under this section in respect of any Insured Person for any Insured Event caused by or arising directly or indirectly from any type of Illness, or bacterial infection, except that this exclusion shall not apply to medically acquired infections or blood poisoning, including pyogenic infections, which may result from an accidental cut or wound.

SECTION 3 - CANCELLATION OR CURTAILMENT

SECTION 3A - CANCELLATION

The Company will reimburse the non-refundable unused portion of travel or accommodation costs paid by the Insured Person following necessary cancellation and / or postponement of the Insured Journey prior to departure due to:

1. The Insured Person's unexpected death, Illness or Injury or the unexpected death, Illness or Injury of his Spouse, Business Associate, Children, the person with whom he had intended to stay abroad, a Relative or Travel Companion.
2. Non availability of the person that is in charge of the Insured Person's minor or disabled Children due to such person's unexpected death, Illness or Injury within 30 days prior to the date of the Insured Journey.
3. Cancellation or diversion of scheduled public transport services, including by reason of strikes or other industrial action, unless there was media warning 24 hours before the date the particular Insured Journey was booked that such events were likely to occur; or
4. Serious or considerable accidental material damage to immovable property owned by the Insured Person caused within 30 days of the intended date of departure. The cause of such damage must be unintentional, not as a direct result of any action of the Insured Person and require him to cancel the Insured Journey for the safeguarding of his interests.
5. Theft or complete immobilisation of the Insured Person's Private Motor Vehicle at the moment of departure or during the trip towards the destination due to a traffic accident, fire or as a result of a hijacking.
6. Delay in reaching the place of embarkation for any Public Conveyance operating on land, air or water as a result of immobilisation of more than one hour due to a traffic accident or circumstances beyond one's control ("Act of God") during the trip towards the place of embarkation.
7. A Traumatic Event occurring within 30 days of the date of departure to the Insured Person, his Spouse, Children or the person abroad with whom he intended to stay, a Relative or Business Associate where medical advice has been sought and he has been advised not to travel.

8. Loss or Theft of travel documents (travel tickets, passports and visas).

SECTION 3B - CURTAILMENT

The Company will reimburse the Insured Person the non-refundable unused portion of travel or accommodation costs or additional accommodation and/or travel expenses (excluding telephone costs, meals and beverages) paid by him following necessary Curtailment (shortening and/or alteration) of the Insured Journey due to:

1. his unexpected death, Illness or Injury or the unexpected death, Illness or Injury of his Spouse, Business Associate, Children, the person with whom he had intended to stay abroad, a Relative or Travel Companion.
2. cancellation or diversion of scheduled public transport services, including by reason of strikes or other industrial action, unless there was media warning 24 hours before the date the particular Insured Journey was booked that such events were likely to occur.
3. Loss or Theft of travel documents (travel tickets, passports and visas).

SECTION 3B - SPECIFIC CONDITION

It is a condition that should the Insured Person need to return to the Point of Departure for any reason, Travel Guard must be contacted beforehand to make the travel arrangements.

SECTION 3 - SPECIFIC EXCLUSIONS

The Company will not pay for any expenses arising directly or indirectly out of:

1. financial circumstances or insolvency; or
2. the Insured Person not being in possession of the required or valid or correct travel documents or visas unless they are lost or stolen; or
3. carrier caused delays where the cost of the expenses are recoverable from the carrier; or
4. any business or employment commitment or financial or contractual obligation of the Insured Person or any other person on whom the Insured Journey depends; or
5. any change of plans or disinclination on the part of the Insured Person or any other person to travel on an Insured Journey; or
6. the inability of any tour operator or wholesaler to complete arrangements for any tour due to a deficiency in the required number of persons to commence any tour or travel; or
7. defective or bad condition of the Private Motor Vehicle planned to be used for the Insured Journey; or
8. Unemployment or change of employment, or
9. lock-out or prohibitive regulation by the court of any country; or
10. adverse weather conditions including cyclones, tornadoes, floods, typhoons, blizzards or other natural disasters at the destination.

SECTION 4A - BAGGAGE LOSS

Property The Company will pay for the Accidental Loss or, Theft or damage to the Insured Person's accompanying baggage, Personal Effects, that occurred during the Insured Journey.

Sum Insured

Except as provided for under Section 5 - Baggage Delay, the maximum amount the Company will pay for any one item, set or pair of items, is the amount stated in the Schedule of Benefits

SECTION 4A - SPECIFIC CONDITIONS

1. It is a condition of payment that loss or damage attributable to Theft, vandalism or loss or damage by carriers be reported to the local police or appropriate authority as soon as possible after discovery of the loss and that a written acknowledgement of the report be obtained.
2. A camera and/or video camera, its lenses and accessories shall be regarded as one item.
3. The repair or replacement cost of a cellular phone and any fittings or accessories (all deemed to be a single item) shall be limited to R1,000 per Insured Person.
4. A laptop, palmtop, notebook or similar personal computer, and any fittings or accessories including discs/storage mechanisms/carry cases, shall be deemed to be a single item
5. In respect of jewellery claims, original or certified copies of valuation certificates issued prior to the commencement of the Insured Journey are required. This condition is applicable to all jewellery including gifts and inherited items.
6. Contact lenses, prescription spectacles or sunglasses are limited to a maximum of R1,000 per pair over and above any applicable Excess.
7. Reasonable measures to save and recover baggage must have been taken by any Insured Person.

8. The Insured Person shall, in respect of property, Personal Effects, which may become the subject of a claim:
 - (a) exercise all reasonable care for the safety, security and supervision thereof at all times and must not leave property unattended in a public place or in any unlocked vehicle, room or building;
 - (b) endeavour to minimise any loss;
 - (c) not abandon any damaged property.
9. The basis of settlement for items purchased within the 12 months prior to the Insured Journey or whilst on the Insured Journey will be the replacement value of items determined at the Company's discretion. The Company may choose to replace, repair or pay for the loss in cash. All items must be supported by proof of purchase.
10. To account for wear and tear the Company will pay a maximum of 75% of the replacement value for items purchased more than 12 months prior to the Insured Journey, decreasing thereafter at 10% per year from date of purchase.

SECTION 4A - SPECIFIC EXCLUSIONS

The Company will not be liable for:

1. damage or loss arising from electrical or mechanical breakdown of any item; or
2. damage to or replacement of any electronic data or software; or
3. scratching or breakage of fragile or brittle items. This exclusion does not apply to photographic or video equipment, binoculars, spectacles or contact lenses; or
4. damage or loss arising from normal wear and tear, decay, a defective feature of the object itself, destruction by moth or vermin, mould or fungus, insects, rodents, any process of cleaning, ironing, pressing, repairing, restoring or alteration. However, loss as a result of leaking liquid enclosed in the baggage is included; or
5. baggage, Personal Effects, business property, travel documents or money shipped under any freight agreement, unaccompanied baggage or items sent by postal or courier services or given to someone else other than a Travel Companion; or
6. loss, destruction or damage arising from confiscation or detention by customs or other officials or authorities or shortages due to errors, omissions or depreciation value; or
7. loss, destruction or damage directly occasioned by pressure waves caused by aircraft or any other aerial devices travelling at sonic or supersonic speeds; or
8. loss, destruction or damage caused by atmospheric or climatic conditions or any other gradually deteriorating cause; or
9. loss of or damage to bonds, stamps, negotiable instruments, deeds, securities or any kind of bullion; or
10. personal computers, cellular phones or any electronic equipment:
 - (a) where Theft or attempted Theft occurs while such equipment is unattended other than when securely locked inside a building or securely locked out of sight inside a motor vehicle.
 - (b) whilst carried on any conveyance unless carried by an Insured Person as personal cabin luggage. However, exclusion 10(a) shall not apply in circumstances where the Insured Person leaves such property temporarily unattended whilst on any Public Conveyance and takes all reasonable precaution to safeguard the property and has no option other than to leave the property temporarily unattended; or
11. contractual obligations in relation to a cellular phone purchase; or
12. any goods intended for sale or trade; or
13. household furniture and household appliances, non-portable property, computer or electronic equipment unless acquired during the Insured Journey for personal use in the Insured Person's Country of Residence. The Insured Person will be required to attach receipts for such items in the event of a claim.
14. Accidental Loss of sports equipment and tools and/or damage of sports equipment and tools whilst in use.

SECTION 4B - LOSS OF CASH / TRAVEL DOCUMENTS

1. **Travel documents/credit card/travellers cheques fraud** The Company will pay the Insured Person's non-recoverable cost of replacing his travel documents (travel tickets, passports and visas), credit cards or traveller's cheques following loss, damage or Theft by any person other than his Relative or Travel Companion.
2. **Money** The Company will pay for the Insured Person's loss of cash, bank or currency notes, cheques, postal or money orders or other negotiable instruments as a result of Theft during an Insured Journey. In respect of money secured for the purpose of the Insured Journey, cover shall

commence at the time of collection from the bank or 72 hours prior to the start of the Insured Journey, whichever occurs first, and shall continue for 72 hours after termination of the Insured Journey or until deposited at the bank, whichever occurs first.

3. **Fraud** We will pay the Insured Person's legal liability for payment arising out of the unauthorised use of the Insured Person's Travel documents, credit cards or Insured travellers cheques following Theft during an Insured Journey by any person other than the Insured Person's Relative or Insured Person's Travel Companion, up to the amount stated in the Schedule of Benefits.

SECTION 4B - SPECIFIC CONDITIONS

1. Loss or Theft must be reported to the appropriate authorities and a copy of the report submitted in support of any claim.
2. Cash and travel documents must be carried on the Insured Person or lodged in a safety deposit on the date of loss.
3. Any loss of credit cards, travellers cheques or Travel documents must be reported within 24 hours to the issuing authority and the appropriate cancellation measures taken. The onus will be on the Insured Person to prove that We were not prejudiced in any way by late reporting.
4. The Insured Person shall in respect of Travel documents, money and credit cards, which may become the subject of a claim under this Policy:
 - (a) Exercise all reasonable care for the safety, security and supervision thereof at all times and must not leave property unattended in a public place or in any unlocked vehicle, room or building;
 - (b) Endeavour to minimise any loss;
 - (c) Not abandon any damaged property.

SECTION 5 - BAGGAGE DELAY

The Company will reimburse the Insured Person for reasonable essential expenses incurred, and for such amount incurred above the Excess, for the emergency replacement of essential items if his baggage is delayed, misdirected or temporarily misplaced by a carrier.

SECTION 5 - SPECIFIC CONDITIONS

1. Written proof of delay from the transport provider must be submitted with any claim and the Company's liability is subject to it receiving original receipts for the essential expenses incurred.
2. The baggage delay must exceed the Excess.
3. Confiscation or requisition by customs or other government authority cannot form the basis of a claim for loss or expenses.
4. Claims in respect of essential clothing or requisites purchased as a result of delayed baggage will only be considered if items have been purchased within 4 days after the actual arrival time at the intended destination.
5. If baggage appears to be delayed or lost at the destination airport, the Insured Person must formally notify the relevant carrier airline immediately.

SECTION 6 - TRAVEL DELAY AND TRAVEL MISSED CONNECTION

SECTION 6A - TRAVEL DELAY

The Company will reimburse the Insured Person for reasonable essential expenses incurred in respect of hotel accommodation, restaurant meals or refreshments if not provided or compensated by the carrier or any third party, following unforeseen travel delay resulting from:

1. Accidental Loss or Theft of travel documents (travel tickets, passports and visas).
2. An accident or mechanical/electrical breakdown involving the transport in which he arranged to travel or was travelling for the purpose of reaching the Point of Departure and/or departure point from which he had intended commencing an onward journey.
3. Delay of a scheduled departure of a Public Conveyance due to:
 - a) industrial dispute, strike or action; or
 - b) adverse weather conditions including cyclones, tornados, floods, typhoons, blizzards, or natural disasters in the country to or through which he is travelling; or
 - c) mechanical/electrical breakdown; or
 - d) public transport services failure.

SECTION 6A - SPECIFIC CONDITION

The travel delay must exceed the Excess.

SECTION 6A - SPECIFIC EXCLUSIONS

The Company will not pay for expenses incurred:

1. where comparable alternative onward transportation has been made available to the Insured Person within the Excess after the scheduled departure time of a booked flight or within the Excess after an actual flight arrival (in the case of a connecting flight); or
2. where the Insured Person fails to check in according to the itinerary supplied, unless such failure was due to a strike or industrial action; or
3. where the delay is due to industrial dispute, strike or action which existed or for which advance notice had been given on or before the date on which the Insured Journey commenced; or
4. where the delay is due to the withdrawal from service temporarily or permanently of any Public Conveyance on the orders or recommendation of any Port Authority or the Civil Aviation Authority or any similar body in any country in which advance notice had been given on or before the date on which the Insured Journey commenced; or
5. for carrier caused delays where the cost of expenses is recoverable from the carrier

SECTION 6B - TRAVEL MISSED CONNECTION

The Company will reimburse the Insured Person for reasonable essential expenses incurred if he misses an onward travel connection at the transfer point during an International Journey due to the late arrival of his incoming confirmed connecting scheduled conveyance and no onward transportation is available to him within 6 consecutive hours of his arrival or any circumstances beyond his control. The Company will indemnify the Insured Person for reasonable essential expenses incurred in respect of hotel accommodation, restaurant meals or refreshments if not provided or compensated by the carrier or any third party.

SECTION 6B - SPECIFIC EXCLUSIONS

The Company shall not be liable:

1. for any loss arising from failure of the Insured Person to check in according to the itinerary supplied to him, and he must obtain written confirmation from the common carrier or their handling agents of the number of hours delayed and the reasons for the delay.
2. for any loss that is covered by any other existing insurance scheme, government programme or which will be paid or refunded by a hotel, airline, travel agent or any other provider of travel or accommodation.
3. where the delay is due to industrial dispute, strike or action which existed, or for which advance notice had been given, on or before the date on which the Insured Journey commenced.

SECTION 6 - SPECIFIC CONDITION

Written proof of delay from the transport provider must be submitted with any claim and the Company's liability is subject to it receiving original receipts for the essential expenses incurred.

SECTION 7 - TICKET UPGRADE

The Company will reimburse the Insured Person for the essential upgrade of a conveyance ticket during an international journey due to:

1. the delay of his confirmed scheduled conveyance and if no onward transportation is available to him within 6 consecutive hours of the scheduled departure time; or
2. the Insured Person not being admitted to a confirmed scheduled conveyance due to overbooking and if no other means of transport is made available to him within 6 hours after the scheduled time of departure of the scheduled conveyance; or
3. the Insured Person missing an onward travel connection at the transfer point during an International Journey due to the late arrival of his incoming confirmed connecting scheduled conveyance and no onward transportation is available to him within 6 consecutive hours of his arrival.

SECTION 7 - SPECIFIC CONDITION

Written proof of delay from the transport provider must be submitted with any claim and the Company's liability is subject to it receiving original receipts for the expenses incurred.

SECTION 8 - SPECIFIC EXCLUSIONS

The Company shall not be liable:

1. for any loss arising from failure of the Insured Person to check in according to the itinerary supplied to him, and he must obtain written confirmation from the common carrier or their handling agents of the number of hours delayed and the reasons for the delay.

2. for any loss that is covered by any other existing insurance scheme, government programme or which will be paid or refunded by a hotel, airline, travel agent or any other provider of travel or accommodation.
3. where the delay is due to industrial dispute, strike or action which existed, or for which advance notice had been given, on or before the date on which the Insured Journey commenced.

SECTION 8 - NATURAL DISASTER

The Company will reimburse the Insured Person for the cost of providing other similar accommodation if his booked accommodation cannot be lived in because of a fire, flood, earthquake or storm and/or the additional costs for changing his means of public transport used.

SECTION 8 - SPECIFIC CONDITIONS

1. the Insured person must give the Company a written statement from an appropriate public authority confirming the reason and nature of the disaster and how long it lasted and the Company's liability is subject to it receiving original receipts for the essential expenses incurred.
2. any event that results in a claim under this section must not have been known about before the Insured Person left from his Point of Departure.

SECTION 8 - SPECIFIC EXCLUSIONS

The Company shall not be liable for:

1. any expense the Insured Person can recover from any tour operator, airline, hotel or other service provider.
2. any expenses the Insured person would normally have to pay during the period.
3. any claim directly resulting from the Insured Person travelling against the advice of the appropriate national or local authority.

SECTION 9 - PERSONAL LIABILITY

The Company will pay all damages, compensation and legal expenses for which the Insured Person becomes legally liable as a result of his actions causing:

1. Injury, including resultant death, of another person;
2. loss of or damage to property.

SECTION 9 - SPECIFIC CONDITIONS

1. It is a condition of payment that the Insured Person not admit fault or liability to any other person without the Company's prior written consent.
2. No offer, promise, payment or indemnity may be made by the Insured Person without the Company's prior written consent.
3. The Insured Person must give the Company written notice with full particulars of an event that may give rise to a claim within 30 days of the conclusion of an Insured Journey.
4. Every letter, writ, summons and process must be forwarded to the Company as soon as possible.
5. The Company is entitled to take over the defence and settlement of claim in the name of the Insured Person for the Company's benefit. The Company shall have full discretion in the conduct of any proceedings and settlement of the claim.
6. The Company may at any time pay the Insured Person the amount for which a claim can be settled less any damages already paid. The Company will then be under no further liability other than for costs and expenses incurred prior to making such payment.
7. No indemnity will be provided for legal liability arising from Injury or loss as a result of any wilful or malicious act of the Insured Person.

SECTION 9 - SPECIFIC EXCLUSIONS

The Company will not pay damages, compensation or legal expenses in respect of any liability directly or indirectly arising out of or in connection with:

1. Injury to the Insured Person or to any member of his family ordinarily residing with him; or
2. Injury to the Insured Person or his employees arising out of or in the course of employment; or
3. loss of or damage to property owned by or in control of the Insured Person or any member of his family ordinarily residing with him; or
4. the ownership, possession or use by or on behalf of the Insured Person of any caravan, mechanically propelled vehicle (other than golf carts and motorised wheelchairs), aircraft or other aerial device, hovercraft (other than hand-propelled or sailing craft in territorial waters) or animals; or
5. loss of or damage to property or Injury arising out of the Insured Person's profession, business or trade, or out of professional advice given by him; or

6. any contract unless such liability would have arisen in the absence of that contract; or
7. judgements which are not in the first instance either delivered by or obtained from a court of competent jurisdiction within the Republic of South Africa or the country in which the event occurred giving rise to the Insured Person's liability; or
8. any claim for fines, penalties, punitive, exemplary, aggravated or vindictive damages.

SECTION 10 - HIJACK - PUBLIC CONVEYANCE

The Company will pay the benefit in the event of the unlawful seizure or wrongful exercise of control of a Public Conveyance (including the crew thereof) in which the Insured Person is travelling.

24 HOUR EMERGENCY MEDICAL ASSISTANCE HELPLINE: +44 1273 227036 (UNITED KINGDOM)

DISCLOSURE NOTICE

Important Information please read carefully

This contains disclosures and other legal requirements, some of which will appear here, and the rest in more detail elsewhere as indicated

(THIS NOTICE DOES NOT FORM PART OF THE INSURANCE CONTRACT)

About your Financial Services Provider (Sponsor Details)	
AIG South Africa Ltd. is both the product supplier and the FSP in this instance; therefore AIG South Africa Ltd. has a 100% financial interest in this transaction. AIG's FSP Number is 15805	
AIG South Africa Ltd. has Professional Indemnity and Fidelity Insurance.	
About your Financial Services Provider (Claims and Policy Administration)	
AIG South Africa Ltd administer all claims and claim administration matters, please contact: PO Box 31983, Braamfontein, 2017(Tel) 0860 104 146(Tel) +27 11 525 3101 (Fax) +27 11 551 8290 Email: SATravelclaims@travelguard.com for a detailed claims procedure, Please refer to the Claims Procedure in the Policy Wording. If you have any complaint regarding a claim, please contact the AIG Claims on the above details.	
Travel Agents earn 20% commission on all policies. A Registered Travel Agent with AIG SA is in possession of the required written mandate to act on behalf of AIG South Africa Ltd. and is authorised to provide information about the AIG Leisure and Business Travel Policies and intermediary services with regard to the sale of the product	
About the Product	
This is a Travel Insurance policy is a Short-Term Insurance policy. It does not have a surrender or maturity value.	
For the complete nature and extent of benefits – PLEASE REFER TO THE POLICY WORDING.	
For your monetary obligations, premium payment obligations, manner and frequency thereof, and the consequences of non-payment of premium – PLEASE REFER TO THE POLICY WORDING.	
Details of special conditions, exclusions, excesses or restrictions – PLEASE REFER TO THE POLICY WORDING.	
About the Insurer (Product Supplier)	
This Travel Insurance Policy is underwritten by AIG South Africa Ltd. (Registration no. 1962/003192/06) AIG South Africa Ltd contact details are: AIG House, 10 Queens Road, Parktown, 2017; PO Box 31983, Braamfontein, 2017; General Switchboard: (011) 551 8000	
If you have any queries about this product, please contact: The AIG Travel Call Centre 0860-100 491	
If you have a complaint about this product, please contact: The Compliance Officer, AIG South Africa Ltd. PO Box 31983, Braamfontein, 2017; (Tel) (011) 551 8000; (Fax) (011) 551 8811; (e-mail) complaintssa@AIGinsurance.com	
Matters of Importance	
<ol style="list-style-type: none">1. If you have a complaint about this policy, please first try and resolve it with either of the Financial Service Providers stated above.2. If the matter cannot be resolved, please then submit a complaint in writing to the insurer's Compliance Officer above.3. If you have a dispute regarding a claim that is not resolved by the FSP to your satisfaction, you may submit the complaint to the Ombudsman fo Short-term Insurance, contact details below.4. All material facts must be accurately, fully and properly disclosed by you. All information provided by you or on your behalf is your own responsibility. You need to be satisfied with the accuracy of any transaction submitted by your Financial Services Provider on your behalf.5. Misrepresentation, incorrect or non-disclosure by you of any material facts or circumstances may impact negatively on any claims arising from your insurance contract.6. You are entitled to a full copy of the policy. If you have not received a copy within 30 days, please contact your FSP without delay. The policy wording and the Transit Insurance Certificate must be read as one document.	
Particulars of The Short-term Insurance Ombudsman who is available to advise you in the event of claim problems which are not satisfactorily resolved by your Financial Services Provider and/or the insurer:	
The Short-term Insurance Ombudsman P O Box 32334 Braamfontein 2017	Tel: (011) 726 8900 Fax: (011) 726 5501

CONSENT TO USE, PROCESS, DISSEMINATE AND STORE PERSONAL INFORMATION.

AIG South Africa Limited ("AIG") treats personal or proprietary information ("personal information") obtained through the use of this website as private and confidential and is committed to providing you with secure access to our online services.

AIG needs to collect personal or other information if AIG is to meet its obligations to you, to follow your instructions, to inform you of new services and to ensure that our business is geared towards your needs.

You acknowledge that the collection, use, processing and sharing of your personal information by AIG is essential to enable AIG to underwrite policies, assess risks fairly, verify the Personal Information given including conducting checks against legitimate databases, deliver against our contractual obligations, ensure compliance with all and necessary applicable legislation, regulations, business compliance requirements (including any overseas laws, regulations and compliance requirements binding on AIG) and to reduce the incidence of fraudulent claims, in the public interest with a view to limiting premiums.

You consent to the personal information supplied by you being disclosed to such other party, including any subsidiary or parent of AIG as well as any government or regulatory authority, regardless of the country of location of such recipient, who is required to have access to your personal information.

Provided that you have agreed to this, AIG may use your personal or other information to send you information on new services or products that may be of interest to you and from time to time will mail, email or SMS information to you about us, our products and services, or our partners and their products or services. If you do not wish to continue receiving this information you may contact us and AIG will remove you from our mailing list.

Whenever AIG outsources third party vendors to provide support services to us, AIG will bind them to our privacy policies as far as they may be required to have limited access to our customers' personal information to perform such services.

AIG will not disclose personal information to anyone outside AIG without your permission unless:

- AIG is compelled to do so by law or in terms of a court order;
- it is in the public interest to do so;
- it is necessary to protect our rights.

Personal information that AIG collects via the website is stored in a secure environment and is not available to any unauthorized persons outside AIG. AIG will endeavor to protect the quality and integrity of your personal information and to this end, all interactions with our transactional sites are protected through encryption that complies with international standards. Encryption is used to protect the transmission of your personal information when completing online application forms. Our Internet servers are protected by firewalls and intrusion detection systems. This notwithstanding, AIG cannot guarantee the security of any information you transmit to it online and you do so at your own risk.

AIG will make every reasonable effort to respond to your requests to correct inaccuracies in your personal information in a timely manner. To assist AIG in correcting inaccuracies in your personal information please inform AIG of the inaccuracies together with details of the correction requested.

AIG reserves the right to amend this privacy and security statement at any time. All amendments to this privacy and security statement will be posted on the website. Unless otherwise stated, the current version shall supersede and replace all previous versions of this privacy and security statement.