CCI Personal Insurance
Giving back to the Catholic community

Travel Insurance

Product Disclosure Statement
PRODUCT DISCLOSURE STATEMENT

ABOUT THIS PRODUCT DISCLOSURE STATEMENT

A Product Disclosure Statement is a document required by the Corporations Act 2001 (Cth) and contains information designed to help you decide whether to buy this product and to compare it with other products you may be considering.

This PDS sets out the cover available and the terms and conditions which apply. Please note that any recommendations or opinions in this document are of a general nature only and do not take into account your objectives, financial situation or needs. Before you make any decision about the product, you should read this PDS carefully to ensure that it is suitable for you.

This PDS will also contain information about the remuneration received by Allianz Global Assistance for its role, the services provided by it and how any complaint you have with Allianz Global Assistance can be dealt with.

This PDS, together with the Certificate of Insurance and any written document we tell you forms part of your policy, make up your contract with Allianz. Please retain these documents in a safe place.

UNDERSTANDING THIS PRODUCT AND ITS IMPORTANT TERMS AND CONDITIONS

To properly understand this product’s significant features, benefits, limits, conditions and exclusions you need to carefully read:

- PURCHASING THIS PRODUCT – this contains important information on who can purchase this product, age limits and cover types available to you; on applicable excesses, the period of cover and when cover may be amended or extended;
- About the cover, and limits on the amount we will pay, that applies to each plan in the TABLE OF BENEFITS, when we will pay a claim under each section (YOUR POLICY COVER) (where applicable to any cover taken out), any options purchased by you under ADDITIONAL OPTIONS and PRE-EXISTING MEDICAL CONDITIONS (remember, certain words have defined meanings – see OUR DEFINITIONS);
- IMPORTANT MATTERS - this contains important information on your duty of disclosure (including how the duty applies to you and what happens if you breach the duty), our privacy notice and dispute resolution process, the Financial Claims Scheme, when you can choose your own doctor, when you should contact Allianz Global Assistance concerning 24 hour medical assistance, overseas hospitalisation or medical evacuation, and more;
- When we will not pay a claim under each section applicable to the cover you choose (YOUR POLICY COVER) and GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS; and

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CCI Personal Insurance is remarkable in the world of insurance because we value people over profits.

For over 100 years CCI has insured Catholic organisations. Through CCI Personal Insurance we share our knowledge and spirit with the Catholic community via a range of competitive insurance products for individuals.

As a Catholic insurer we enjoy giving back to the Catholic community. We do this through sponsorships, donations and a wide range of partner programs. We also proudly return any surplus funds back to Catholic entities.

CCI & Allianz. Perfect Partners.

We’ve chosen Allianz, one of Australia’s largest general insurers, to underwrite our personal insurance products.

Our partnership gives you the best of both worlds: the strength of Allianz Australia - drawing on the global expertise of the worldwide Allianz Group - coupled with the Catholic values of CCI. This allows us to provide ethical, compassionate service and make a real contribution back to the Catholic community.

CCI Personal Insurance
Giving back to the Catholic community
• **CLAIMS** - this sets out important information about how we will consider claims. It also sets out certain obligations that you and we have. If you do not meet them we may refuse to pay, or reduce the amount we will pay in relation to, a claim.

**APPLYING FOR COVER**

When you apply for your policy, we will confirm with you things such as the period of cover, your premium, what cover options and excesses will apply, and whether any standard terms are to be varied.

These details will be recorded on the Certificate of Insurance issued to you.

If we are unable to offer you the cover you seek, it will be because the particular product offered is not designed to cover a particular risk or risks including, but not limited to, some geographical regions, some pre-existing medical conditions or some ages. In such a case, if you would like to discuss your options please use the contact details on the back cover of this PDS.

This PDS sets out the cover which is available. You need to decide if the benefit limits, type and level of cover are appropriate for you and will cover your potential loss. If you have any queries, want further information about this product or want to confirm a transaction, please use the contact details on the back cover of this PDS.

**ABOUT YOUR PREMIUM**

You will be told the premium payable for your policy when you apply. In calculating the premium, we take into account a number of factors including your destination(s), length of journey, the number of persons and age of persons to be covered under the policy and the plan type you select. The amount of any excess payable, cover for additional options and cover for agreed pre-existing medical conditions is also included in the calculation of your premium.

Your total premium reflects the amount we calculate to cover these factors as well as any relevant government charges, taxes or levies (such as stamp duty or GST) in relation to your policy. These amounts are included in the total amount payable by you as shown in your Certificate of Insurance.

**COOLING-OFF PERIOD**

Even after you have purchased your policy, you have cooling-off rights.

If you decide that you do not want your policy, you may cancel it within 14 days after you are issued your Certificate of Insurance. You will be given a full refund of the premium you paid, provided you have not started your journey or you do not want to make a claim or to exercise any other right under your policy.

After this period you can still cancel your policy but we will not refund any part of your premium if you do.

**WHO IS THE INSURER?**

This product is underwritten by Allianz Australia Insurance Limited, ABN 15 000 122 850, AFS Licence No. 234708, of 2 Market Street, Sydney, NSW 2000, Telephone 132 664, who has sole responsibility for this PDS.

**WHO IS ALLIANZ GLOBAL ASSISTANCE?**

Allianz Global Assistance is a trading name of AWP Australia Pty Ltd ABN 52 097 227 177 AFS Licence No. 245631, of Level 16, 310 Ann Street, Brisbane, QLD 4000, Telephone (07) 3305 7000. Allianz Global Assistance has been authorised by Allianz to enter into the policy and deal with and settle any claims under it, as the agent of Allianz, not as your agent. Allianz Global Assistance acts under a binder which means that it can do these things as if it were the insurer. It administers all emergency assistance services and benefits of this insurance. You may contact Allianz Global Assistance in an emergency 24 hours a day, 7 days a week.

**UPDATING THE PDS**

We may need to update this PDS from time to time if certain changes occur where required and permitted by law. We will issue you with a new PDS or a supplementary PDS to update the relevant information except in limited cases.

Where the information is not to correct a misleading or deceptive statement or an omission that is materially adverse, from the point of view of a reasonable person considering whether to buy this product, Allianz Global Assistance may provide the updated information on their website. You can also get a paper copy of the updated information free of charge by calling the contact number shown on the back cover of this PDS.

**PREPARATION DATE**

The preparation date of this PDS is 13 February 2019.
OUR DEFINITIONS

Headings, where appearing, are for reference only and do not affect interpretation.

When the following words and phrases appear in bold type in this PDS, your Certificate of Insurance or any other document we tell you forms part of your policy, they have the meanings given below. The use of the singular shall also include the use of the plural and vice versa.

**Accident, accidental, accidentally**
means an unexpected event caused by something external and visible.

**Accompanying**
means travelling with the insured person for 100% of the journey.

**AICD/ICD**
means an implantable cardioverter-defibrillator (ICD), also known as an automated implantable cardioverter-defibrillator (AICD).

**Allianz**
means Allianz Australia Insurance Limited, ABN 15 000 122 850, AFSL 234708.

**Allianz Global Assistance**
means AWP Australia Pty Ltd, ABN 52 097 227 177, AFSL 245631.

**Appropriate supervision**
means under the supervision of a person who possesses the necessary skills, qualifications and licensing appropriate for the supervision of the activity being undertaken.

**Bicycle**
means any bicycle, tricycle, tandem, trailer cycle or push scooter that is powered by human pedalling or and/or a battery.

**Business samples**
means demonstration goods or examples of goods sold by you or your company.

**Carrier**
means an aircraft, vehicle, train, tram, vessel or other scheduled transport operated under a licence for the purpose of transporting passengers. However, it does not mean a taxi, limousine or similar service.

**Certificate of Insurance**
is the document we give you which confirms that we have issued a policy to you and sets out details of your cover.

**Chronic**
means a persistent and lasting condition. It may have a pattern of relapse and remission.

**Concealed storage compartment**
means a boot, trunk, glove box, enclosed centre console, or concealed cargo area of a motor vehicle.

**Cruise Vessel**
means a boat or ship on which travel is taken for pleasure or as a holiday as a paying passenger, for a minimum of 3 nights in duration.

**Date of issue**
means the date and time of issue on your Certificate of Insurance.

**Dependant**
means your children or grandchildren, not in full-time employment, accompanying you on the journey and who are aged 24 years or under at the time of issue of your Certificate of Insurance.

**Depreciation**
means the deduction from the original purchase price of an amount calculated to be the reduction in value because of wear and tear and/or the passing of time.

**Duo**
means you and your travelling companion as named on the Certificate of Insurance but does not include dependants.

**Epidemic**
means a sudden development and rapid spreading of a contagious disease in a region where it developed in a simply endemic state or within a previously unscathed community.

**Excess**
means the deduction we will make from the amount otherwise payable under your policy for each claimable incident or event.

**Family**
means you, your spouse or partner and your dependants.

**Formal wear**
means dinner suit, dress shirt, bowtie, evening gown, cocktail dress or other items of clothing which are required attire for formal dining/functions. This includes wedding attire but does not include jewellery.

**Funeral expenses**
means the costs charged by a funeral director for arranging your funeral service and by a cemetery for your burial or a crematorium for your cremation. It does not include the cost of memorialisation.

**Home**
means the place where you normally live in Australia.

**Hospital**
means an established hospital registered under any legislation that applies to it, that provides in-patient medical care. It does not include any institution used primarily as a nursing or convalescent home, a place of rest, a geriatric ward, a mental institution, a rehabilitation or external care facility or a place for the treatment of alcoholism, drug addiction or substance addiction.
Income means the amount of money you earn from your employment in a trade, business, profession or occupation after the deduction of income tax.

Individual means you only.

Injure or injured or injury means bodily injury caused solely and directly by violent, accidental, visible and external means, which happens at a definite time and place during your period of cover and does not result from any illness, sickness or disease.

Insolvency or insolvent means bankruptcy, provisional liquidation, liquidation, appointment of a receiver, manager or administrator, entry into any official or unofficial scheme of arrangement, statutory protection, restructuring or composition with creditors, or the happening of anything of a similar nature under the laws of any jurisdiction.

Jewellery means a form of personal adornment, such as brooches, rings, necklaces, earrings, and bracelets. It does not include watches or items of clothing.

Journey means travel which begins when you leave home or your place of business to commence your travel and ends when you arrive back home or at a hospital or nursing home in Australia (if you are evacuated or repatriated), whichever is earlier.

Legal costs means fees, costs and expenses (including any applicable taxes and charges) in connection with a legal action. It also means any costs which you are ordered to pay by a court or arbitrator (other than any fine or penalty, or aggravated, punitive, exemplary or liquidated damages) or any other costs we agree to pay.

Luggage and personal effects means your suitcases, trunks and similar containers including their contents and articles worn or carried by you. It does not mean or include any bicycle, business samples or items that you intend to trade, valuables, snow sport equipment, passport or travel documents, cash, bank notes, currency notes, cheques, negotiable instruments, electronic data, software, intangible asset, watercraft of any type (other than surfboards), furniture, furnishings, household appliances, hired items or any other item listed as excluded on your Certificate of Insurance.

Maximum journey period means the maximum period for any one journey under the Multi-Trip Plan as shown on your Certificate of Insurance.

Medical adviser means a doctor (including a clinical psychologist) or dentist qualified to diagnose the condition or disorder, holding the necessary current certification in the country in which they are currently practising, and who is not you or your travelling companion, or a relative or employee of you or your travelling companion.

Mental illness means any illness, condition or disorder listed in the current edition of the Diagnostic and Statistical Manual of Mental Disorders.

Moped or scooter means any two-wheeled or three-wheeled motor vehicle with an engine displacement of not greater than 50cc.

Motorcycle means any two-wheeled or three-wheeled motor vehicle with an engine displacement greater than 50cc.

Overseas means outside of Australia and its territories.

Pandemic means a form of an epidemic that extends throughout an entire continent, even the entire human race.

PDS means Product Disclosure Statement.

Permanent disability means permanent loss of all the sight in one or both eyes, or the use of a hand at or above the wrist or a foot at or above the ankle.

Policy means this PDS, the Certificate of Insurance and any written document we tell you forms part of your policy.

Pre-existing medical condition means a condition of which you were, or a reasonable person in your circumstances should have been, aware:

1. prior to the time of the policy being issued that is:
   a. a chronic or ongoing:
      - medical condition;
      - dental condition; or
      - mental illness, or
   b. a current pregnancy; or
   c. a medical condition connected with your current or past pregnancy; or
   d. related to in vitro fertilisation or another form of assisted reproductive treatment or procedure, or

2. in the ten (10) years prior to the time of the policy being issued that involves:
   a. your heart, brain, circulatory system or blood vessels; or
   b. your respiratory system; or
   c. your kidneys, liver or pancreas; or
• cancer; or 
• back pain requiring prescribed pain relief medication; or 
• surgery involving any joints, the neck, back, spine, brain, skull, abdomen or pelvis requiring at least an overnight stay in hospital; or 
• diabetes mellitus (type 1 or type 2); or 
• mental illness; or 
• signs or symptoms for which you:
  - have not yet sought a professional opinion regarding the cause; or 
  - are currently under investigation to define a diagnosis; or 
  - are awaiting specialist opinion, or 
3. in the two (2) years prior to the time of the policy being issued for which you:
   • have been in hospital, required an emergency department visit or had day surgery; or 
   • have been prescribed a new medication or had a change to your medication regime; or 
   • had or required regular review or check-ups; or 
   • have required prescription pain relief medication.

**Professional Sport**
means training for, coaching or competing in any sporting event where you are entitled to receive, or are eligible to receive, an appearance fee, wage, salary or prize money in excess of $1,000.

**Public place**
means any place that the public has access to, including but not limited to planes, trains, cruise ships, taxis, buses, air or bus terminals, stations, wharves, streets, shops, museums, galleries, hotels, hotel foyers and grounds, beaches, restaurants, private car parks, public toilets and general access areas.

**Quad bike**
means a motorised vehicle designed to travel on four or more wheels, having a seat straddled by the operator and handlebars for steering control.

**Reasonable**
means:

• for medical, hospital or dental expenses, the standard level of care given in the country you are in not exceeding the level you would normally receive in Australia; or 
• for other expenses, such as unexpected additional travel and accommodation expenses, a level comparable to those you have booked for the rest of your journey or, as determined by us; or 
• as determined by Allianz Global Assistance having regard to the circumstances.

**Reciprocal Health Care Agreement**
means an agreement between the Government of Australia and the government of another country where Residents of Australia are provided with subsidised essential medical treatment. (Please visit www.dfat.gov.au for details of Reciprocal Health Care Agreements with Australia.)

**Redundant** or redundancy
means loss of permanent paid full time employment (except voluntary redundancy), after a continuous working period of two years with the same employer.

**Relative**

**Rental vehicle**
means a campervan/motorhome that does not exceed 4.5 tonnes, a sedan, coupe, hatchback, station-wagon, SUV, four wheel drive or mini bus/people mover rented from a licensed motor vehicle rental company or agency.

**Resident of Australia**
means someone who usually resides in Australia and is eligible for an Australian Medicare Card.

**Sick** or sickness
means a medical condition (including a mental illness), not being an injury, the symptoms of which first occur or manifest after the date of issue.

**Single**
means you and your dependants who are accompanying you on the journey.

**Snow sport activities**
means amateur skiing, snowboarding, sledding, toboganning, or tubing conducted on groomed ski slopes within ski resort boundaries that does not include any form of racing, acrobatics, jumping, stunting, aerial or freestyle activities.

**Snow sport equipment**
means skis, poles, boots, bindings or snowboards.

**Sporting equipment**
means equipment needed and used to participate in a particular sport and which can be carried about with you.

**Transaction card**
means a debit card, credit card or travel money card.

**Travelling companion**
means a person with whom you have made arrangements before your policy was issued, to travel with you for at least 75% of your journey.
Unsupervised means leaving your luggage and personal effects:
- with a person who is not named on your Certificate of Insurance or who is not a travelling companion or who is not a relative; or
- with a person who is named on your Certificate of Insurance or who is a travelling companion or who is a relative but who fails to keep your luggage and personal effects under close supervision; or
- where they can be taken without your knowledge; or
- at such a distance from you that you are unable to prevent them being taken; and
includes forgetting or misplacing items of your luggage and personal effects, leaving them behind or walking away from them.

Valuables means jewellery, antiques, curios or works of art, watches, precious metals or semi precious stones/precious stones and items made of or containing precious metals or semi precious stones/precious stones, furs, binoculars, telescopes, any kind of photographic, audio, video, computer, television, fax and phone equipment (including mobile phones), tablets, MP3/4 players and PDAs.

We, our, us means Allianz Australia Insurance Limited, ABN 15 000 122 850, AFSL 234708.

You, your and insured person means each person named on the Certificate of Insurance except in the definition of pre-existing medical condition where you and your mean you, any relative, travelling companion or any other person.

PURCHASING THIS PRODUCT

WHO CAN PURCHASE THIS PRODUCT?

Comprehensive, Essentials, Domestic, Non-Medical or Multi-Trip Plan
Cover is only available if:
- you are a resident of Australia; and
- you purchase your policy before you commence your journey; and
- your journey commences and ends in Australia.

AGE LIMITS

Age limits are as at the date of issue.

Comprehensive and Domestic Plans
Available to travellers of all ages.

Essentials Plan
Available to travellers aged 74 years and under.

Multi Trip Plan
Available to travellers aged 74 years and under. Accompanying spouse or partner and dependants can be covered under this product provided they are 74 years and under. Additional premium will apply.

Non-Medical Plan
Where this plan is offered it is available to travellers of all ages.

COVER TYPES

The following cover types apply:

Single - The benefit limits for single cover apply to the total of all claims combined regardless of the number of persons the claims relate to and are shown in the TABLE OF BENEFITS for the Plan you have selected.

Duo - The benefits limits for duo cover that apply to each insured person are shown in the TABLE OF BENEFITS for the Plan you have selected.

Family - The benefit limits for family cover apply to the total of all claims combined, regardless of the number of persons the claims relate to and are shown in the TABLE OF BENEFITS for the Plan you have selected.

Individual - The benefit limits for individual cover apply to the total of all claims combined and are shown in the TABLE OF BENEFITS for the Plan applicable.
YOUR CHOICES
Based on your travel arrangements you can choose;

- single, duo or family cover; for
- a Comprehensive, Essentials, Domestic, or Multi-Trip Plan.

Please note: Depending upon your pre-existing medical condition we may be unable to offer you a policy which provides cover for any medical expenses, or for any other expenses arising from, related to or associated with any injury or sickness suffered by you. If that is the case you may be able to purchase a Non-Medical Plan. A Non-Medical Plan is only available as an Individual cover type, and Individual cover type is only available with a Non-Medical Plan.

PERIOD OF COVER
We will confirm the issue of your policy by providing you with a Certificate of Insurance. The period you are insured for is set out in the Certificate of Insurance.

- Comprehensive, Essentials, Domestic, or Non-Medical Plan.

  Cover for SECTION 2.1 CANCELLATION only applies to those services scheduled to be used between the start and end dates shown on your Certificate of Insurance and begins from the date of issue and finishes at the end of your journey or on the end date shown on your Certificate of Insurance whichever occurs earlier. The cover for all other sections starts at the beginning of your journey or the start date shown on your Certificate of Insurance, whichever occurs later, and finishes at the end of your journey or on the end date shown on your Certificate of Insurance whichever occurs earlier.

- Multi Trip Plan

  Cover for SECTION 2.1 CANCELLATION begins on the start date shown on your Certificate of Insurance or the date you booked your journey, whichever is the later and finishes at the end of your journey or on the end date shown on your Certificate of Insurance whichever occurs earlier.

  The cover for all other sections starts at the beginning of your journey or the start date shown on your Certificate of Insurance, whichever occurs later, and finishes at the end of your journey, at the expiry of the maximum journey period or on the end date shown on your Certificate of Insurance whichever occurs earlier.

  Please note: The maximum period for any one journey under the Multi-Trip Plan is shown on your Certificate of Insurance (maximum journey period). You are not covered for any incident or event that occurs outside of the maximum journey period you nominated.

AMENDMENT OF COVER
In certain circumstances, we will allow you to amend your policy after purchase.

Where we agree to update or add to the cover under your policy, the change in cover will only apply to circumstances which arise after we have issued you with an updated Certificate of Insurance reflecting the change.

Where we agree to your request to remove any cover under your policy, you will not be able to make any claim or exercise any other right under the cover that has been removed for any circumstance which arises after the time your policy is updated.

EXTENSION OF COVER
Your cover may be extended at no additional charge if you find that your return to your home has been delayed because of one or more of the following:

- a bus line, airline, shipping line or rail authority you are travelling on, or that has accepted your fare or luggage and personal effects, is delayed; or
- the delay is due to a reason for which you can claim under your policy (subject to our written approval).

If the delay is for any other reason other than as stated above, we must receive your request to extend your cover at least 7 days before your original policy expires if you send your request by post.

All other requests to extend your cover must be received prior to your policy expiry date. Cover will be extended subject to our written approval, and your payment of the additional premium.

Where we have agreed to extend cover, we will issue you with a new Certificate of Insurance. The period of cover on your new Certificate cannot exceed 12 months.

Cover cannot be extended:

- under SECTION 1.3 ACCIDENTAL DEATH for any period in excess of 12 months from the start date shown on your Certificate of Insurance, in any circumstances;
- for any pre-existing medical condition, unless it is listed under the heading PRE-EXISTING MEDICAL CONDITIONS WHICH WE MAY COVER WITH NO ADDITIONAL PREMIUM PAYABLE in the PRE-EXISTING MEDICAL CONDITIONS section, and you have not been hospitalised (including day surgery or emergency department attendance) for that condition in the past 24 months prior to application for the extension. This applies regardless of whether your pre-existing medical condition was covered under your original policy;
- for any medical conditions you suffered during the term of your original policy;
- where you have not advised us of any circumstances that have given (or may give) rise to a claim under your original policy; or
• where at the time of application for the extension you are aged 75 years or over under the Essentials Plan; or
• under the Multi-Trip and Non-Medical Plan.

AUTOMATICALLY INCLUDED ACTIVITIES
Your policy provides cover for claims arising directly from your participation in the following activities, subject to the terms, conditions, limits and exclusions that apply to the section under which your claim is made and the GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS:

- Aqua zorbing;
- Archery;
- Bar and restaurant work (except security and crowd control);
- Bicycling (but not bicycle motorcross (BMX) or downhill mountain biking);
- Bungee jumping or canyon swinging;
- Camel, donkey or elephant riding (under appropriate supervision);
- Dancing;
- Dog sledding;
- Diving underwater using an artificial breathing apparatus at a depth no greater than 10 metres (you must hold an open water diving licence recognised in Australia or dive with an instructor licensed for these activities);
- Fishing (on land or within 2 nautical miles of a land mass);
- Fruit picking that does not involve your use of machinery;
- Go-karting;
- Golf;
- Gym activities (but not powerlifting);
- Gymnastics (but not competitions);
- Horse riding (but not competitions, equestrian events, steeple chasing, jumping, or polo);
- Ice skating on a rink (but not including competitive skating, racing, speed skating, and tour skating);
- Indoor rock climbing (under appropriate supervision);
- Leisure activities (meaning any activities involving minimal physical exertion that is undertaken for relaxation or pleasure. For example, sight-seeing, picnics, photography and museum or art gallery visits);
- Motorcycle, scooter or moped riding (restrictions apply - refer to General Exclusion A.10);
- Music and singing;
- Orienteering;
- Paintball (with eye protection);
- Racing on foot for distances up to and including full marathon (42.2 kilometres or 26.2 miles and note that restrictions apply - refer to General Exclusions C.2 and C.8);
- Racquet and ball sports not involving physical contact;
- Regulated or licensed ballooning;
- Safari (under appropriate supervision) but not hunting;
- Sailing up to 10 nautical miles off any land mass;
- Shark cage diving (subject to diving restrictions listed above);
- Shooting (fixed target only);
- Skateboarding, roller skating, inline skating (but not including vert skating or acrobatics);
- Snorkelling;
- Soccer;
- Surface water activities in rivers or rapids graded I, II or III under the International Scale of River Difficulty, or lakes or canals;
- Surface water activities (other than sailing) up to 2 nautical miles off any land mass;
- Track and field athletics; and
- Walking, hiking, trekking or tramping, peaking at altitudes up to 3,000 metres where specialist climbing equipment is not required (but not expeditions to or on the Kokoda Track/Trail).

All other sports and activities are excluded from cover under your policy, subject to any additional options that have been purchased and are listed on your Certificate of Insurance.

EXCESS
Your standard excess is shown on your Certificate of Insurance and applies EXCEPT where a benefit is payable under the following sections:

- SECTION 1.1 OVERSEAS EMERGENCY ASSISTANCE
- SECTION 1.5 HOSPITAL CASH ALLOWANCE
- SECTION 3.5 DOMESTIC SERVICES
- SECTION 3.6 DOMESTIC PETS
- SECTION 4.2 LUGGAGE & PERSONAL EFFECTS DELAY EXPENSES
- SECTION 4.4 THEFT OF CASH
- SECTION 7.9 CABIN CONFINEMENT
- SECTION 7.12 FORMAL CRUISE ATTIRE DELAYED
- SECTION 7.13 MARINE RESCUE DIVERSION

In some circumstances we may impose an additional excess for claims arising from some medical conditions. We will inform you in writing if any additional excess applies.

If you purchase SNOW PACK the following sections have a $500 excess which applies to all claims under those sections (in addition to any standard excess) if your claim arises from your participation in snow sport activities:

- SECTION 1.2 OVERSEAS EMERGENCY MEDICAL & HOSPITAL EXPENSES
- SECTION 2.1 CANCELLATION
TABLE OF BENEFITS

The table below sets out the benefits and policy sections that apply to each of the plans listed and the maximum amount we will pay for all claims combined under each policy section. Please carefully read the PDS in full to ensure you understand the extent of cover provided and limitations that apply.

<table>
<thead>
<tr>
<th>BENEFIT SECTION</th>
<th>COMPREHENSIVE PLAN</th>
<th>ESSENTIALS PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>SINGLE</td>
<td>DUO (PER PERSON)</td>
</tr>
<tr>
<td>1.1* Overseas Emergency Assistance^</td>
<td>Unlimited~</td>
<td>Unlimited~</td>
</tr>
<tr>
<td>1.2* Overseas Emergency Medical &amp; Hospital Expenses^</td>
<td>Unlimited~</td>
<td>Unlimited~</td>
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<tr>
<td></td>
<td>Emergency Dental Expenses [per person]</td>
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</tr>
<tr>
<td>1.3* Accidental Death</td>
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<td>$25,000</td>
</tr>
<tr>
<td>1.4* Permanent Disability^</td>
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<tr>
<td>1.5* Hospital Cash Allowance^</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>1.6* Loss of Income^</td>
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<tr>
<td>2.1* Cancellation</td>
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<td>3.1* Additional Expenses</td>
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<td>3.2* Travel Delay Expenses</td>
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<td>3.5* Domestic Services^</td>
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<tr>
<td>3.6* Domestic Pets^</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>4.1* Luggage &amp; Personal Effects</td>
<td>$10,000</td>
<td>$10,000</td>
</tr>
<tr>
<td>4.2* Luggage &amp; Personal Effects Delay Expenses</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>4.3 Travel Documents, Transaction Cards &amp; Travellers Cheques^</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>4.4 Theft of Cash</td>
<td>$250</td>
<td>$250</td>
</tr>
<tr>
<td>5.1* Rental Vehicle Excess</td>
<td>$3,000</td>
<td>$3,000</td>
</tr>
<tr>
<td>6.1 Personal Liability</td>
<td>$2.5 million</td>
<td>$2.5 million</td>
</tr>
</tbody>
</table>

* sub-limits apply - refer to YOUR POLICY COVER section of the PDS for details.

^ you do not have cover under these sections while travelling in Australia.

~ Where used, the term ‘Unlimited’ only means there is no capped dollar sum insured. Terms, conditions, limits and exclusions apply as set out in the PDS. All costs and expenses claimed must be reasonable. We will only pay for treatment received and/or hospital accommodation during the 12 month period after the sickness first showed itself or the injury happened.
TABLE OF BENEFITS - CONTINUED

The table below sets out the benefits and policy sections that apply to each of the plans listed and the maximum amount we will pay for all claims combined under each policy section. Please carefully read the PDS in full to ensure you understand the extent of cover provided and limitations that apply.

<table>
<thead>
<tr>
<th>BENEFIT SECTION</th>
<th>DOMESTIC PLAN</th>
<th>MULTI-TRIP PLAN</th>
<th>NON-MEDICAL PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>SINGLE</td>
<td>DUO [PER PERSON]</td>
<td>FAMILY</td>
</tr>
<tr>
<td>1.1* Overseas Emergency Assistance^</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>1.2* Overseas Emergency Medical &amp; Hospital Expenses^</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Emergency Dental Expenses [per person]</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>1.3* Accidental Death</td>
<td>$25,000</td>
<td>$25,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>1.4* Permanent Disability^</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>1.5* Hospital Cash Allowance^</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>1.6* Loss of Income^</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>2.1* Cancellation</td>
<td>Unlimited~</td>
<td>Unlimited~</td>
<td>Unlimited~</td>
</tr>
<tr>
<td>3.1* Additional Expenses</td>
<td>$25,000</td>
<td>$25,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>3.2* Travel Delay Expenses</td>
<td>$2,000</td>
<td>$2,000</td>
<td>$4,000</td>
</tr>
<tr>
<td>3.3 Alternative Transport Expenses^</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>3.4 Return Airfare^</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>3.5* Domestic Services^</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>3.6* Domestic Pets^</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>4.1* Luggage &amp; Personal Effects</td>
<td>$10,000</td>
<td>$10,000</td>
<td>$20,000</td>
</tr>
<tr>
<td>4.2* Luggage &amp; Personal Effects Delay Expenses</td>
<td>$500</td>
<td>$500</td>
<td>$1,000</td>
</tr>
<tr>
<td>4.3 Travel Documents, Transaction Cards &amp; Travellers Cheques^</td>
<td>---</td>
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<td>---</td>
</tr>
<tr>
<td>4.4 Theft of Cash</td>
<td>$250</td>
<td>$250</td>
<td>$500</td>
</tr>
<tr>
<td>5.1* Rental Vehicle Excess</td>
<td>$3,000</td>
<td>$3,000</td>
<td>$6,000</td>
</tr>
<tr>
<td>6.1* Personal Liability</td>
<td>$2.5 million</td>
<td>$2.5 million</td>
<td>$2.5 million</td>
</tr>
</tbody>
</table>

* sub-limits apply - refer to YOUR POLICY COVER section of the PDS for details.
^ you do not have cover under these sections while travelling in Australia.

Where used, the term ‘Unlimited’ only means there is no capped dollar sum insured. Terms, conditions, limits and exclusions apply as set out in the PDS. All costs and expenses claimed must be reasonable. We will only pay for treatment received and/or hospital accommodation during the 12 month period after the sickness first showed itself or the injury happened.
MULTI TRIP PLAN

- 12 month policy.
- Unlimited number of journeys.
- A journey limited to travel within Australia must include a destination at least 250 kilometres from your home.
- Maximum period for any one journey is shown on your Certificate of Insurance. This is known as your maximum journey period.

IMPORTANT: When applying for this policy, you must choose the maximum journey period that will be sufficient to cover your longest journey. You can choose from one of these maximum journey periods: 15 days, 30 days or 45 days.

- Benefits limits and sub-limits reinstated on the completion of each journey except for SECTION 6.1 PERSONAL LIABILITY - the amount shown in the TABLE OF BENEFITS is the most we will pay for all claims combined for the 12 month policy period.
- Not available to travellers aged 75 years or over.
- Accompanying spouse or partner and dependants can be covered under this Plan provided that they are aged 74 years and under. Additional premium will apply.

NON-MEDICAL PLAN

It is also important to note that under a Non-Medical Plan, there is no provision for you to claim under the following sections of your policy if the claim arises from, is related to or associated with any injury or sickness suffered by you:

SECTION 2.1: CANCELLATION
SECTION 3.1: ADDITIONAL EXPENSES
**ADDITIONAL OPTIONS**

**TABLE OF BENEFITS**

The table below sets out the benefits and policy sections that apply to each of the optional packs of cover listed and the maximum amount we will pay for all claims combined under each policy section. Please carefully read the PDS in full to ensure you understand the extent of cover provided and limitations that apply.

<table>
<thead>
<tr>
<th>BENEFIT SECTION</th>
<th>COMPREHENSIVE PLAN</th>
<th>DOMESTIC PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>SINGLE</td>
<td>DUO (PER PERSON)</td>
</tr>
<tr>
<td><strong>SNOW PACK</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.1* Emergency Rescue^ ^^</td>
<td>$100,000</td>
<td>$100,000</td>
</tr>
<tr>
<td>7.2* Own Snow Sport Equipment^ ^</td>
<td>$2,000</td>
<td>$2,000</td>
</tr>
<tr>
<td>7.3 Snow Sport Equipment Hire^ ^</td>
<td>$2,000</td>
<td>$2,000</td>
</tr>
<tr>
<td>7.4 Snow Sport Pack^ ^^</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>7.5* Piste Closure^ ^</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>7.6 Bad Weather &amp; Avalanche Closure^ ^</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td><strong>CRUISE PACK</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.7 Medical cover while Cruising^ ^</td>
<td>Unlimited~</td>
<td>Unlimited~</td>
</tr>
<tr>
<td>Emergency Dental Expenses (per person)</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>7.8* Evacuation Cover - Ship to Shore^ ^</td>
<td>Unlimited~</td>
<td>Unlimited~</td>
</tr>
<tr>
<td>7.9* Cabin Confinement^ ^</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>7.10 Pre-paid Shore Excursion Cancellation^ ^</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>7.11 Formal Cruise Attire Lost or Damaged^ ^</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>7.12 Formal Cruise Attire Delayed^ ^</td>
<td>$250</td>
<td>$250</td>
</tr>
<tr>
<td>7.13* Marine Rescue Diversion^ ^</td>
<td>$500</td>
<td>$500</td>
</tr>
</tbody>
</table>

* sub-limits apply - refer to **YOUR POLICY COVER** section of the PDS for details.

^ you do not have cover under this section while travelling in Australia

^ ^ you only have cover for these sections if the relevant Pack has been purchased.

# Please note that where only one adult is shown on the **Certificate of Insurance** as covered under this additional option pack, the benefit limit which will apply for this section will be the benefit limit for single cover for the Plan selected.

~ Where used, the term 'Unlimited' only means there is no capped dollar sum insured. Terms, conditions, limits and exclusions apply as set out in the PDS. All costs and expenses claimed must be reasonable. We will only pay for treatment received and/or hospital accommodation during the 12 month period after the sickness first showed itself or the injury happened.
### ADDITIONAL OPTIONS

#### TABLE OF BENEFITS - CONTINUED

The table below sets out the benefits and policy sections that apply to each of the optional packs of cover listed and the maximum amount we will pay for all claims combined under each policy section. Please carefully read the PDS in full to ensure you understand the extent of cover provided and limitations that apply.

<table>
<thead>
<tr>
<th>BENEFIT SECTION</th>
<th>MULTI-TRIP PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>POLICY LIMIT</td>
</tr>
<tr>
<td><strong>SNOW PACK</strong></td>
<td></td>
</tr>
<tr>
<td>7.1* Emergency Rescue^^</td>
<td>$100,000#</td>
</tr>
<tr>
<td>7.2* Own Snow Sport Equipment^^</td>
<td>$2,000#</td>
</tr>
<tr>
<td>7.3 Snow Sport Equipment Hire^^</td>
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<td>7.13* Marine Rescue Diversion^^</td>
<td>$500</td>
</tr>
</tbody>
</table>

* sub-limits apply - refer to YOUR POLICY COVER section of the PDS for details.

^ you do not have cover under this section while travelling in Australia

^^ you only have cover for these sections if the relevant Pack has been purchased.

# Please note that where only one adult is shown on the Certificate of Insurance as covered under this additional option pack, the benefit limit which will apply for this section will be the benefit limit for single cover for the Plan selected.

~ Where used, the term ‘Unlimited’ only means there is no capped dollar sum insured. Terms, conditions, limits and exclusions apply as set out in the PDS. All costs and expenses claimed must be reasonable. We will only pay for treatment received and/or hospital accommodation during the 12 month period after the sickness first showed itself or the injury happened.

### SNOW PACK

You can purchase the SNOW PACK with the Comprehensive, Domestic or Multi-Trip Plans by paying an additional premium. You will only have the cover provided under the sections included in SNOW PACK if you select this option at the time of purchase and you have paid the required additional premium. Please refer to the ADDITIONAL OPTIONS TABLE OF BENEFITS and the applicable section in YOUR POLICY COVER for details. You cannot purchase sections of this pack individually.

You must be aged 74 years or under at the date of issue.

This additional option does not provide cover for claims under SECTION 1.4 PERMANENT DISABILITY or SECTION 6.1 PERSONAL LIABILITY that arise from you participating in snow sport activities.

An excess of $500, in addition to any standard excess, applies for all claims under SECTIONS 1.2 OVERSEAS EMERGENCY MEDICAL & HOSPITAL EXPENSES and 2.1 CANCELLATION if you purchase this option and your claim arises directly from you participating in snow sport activities. You cannot pay to remove this excess.

### CRUISE PACK

You can purchase the CRUISE PACK with the Comprehensive, Domestic or Multi-Trip Plans by paying an additional premium. You will only have the cover provided under the sections included in the CRUISE PACK if you select this option at the time of purchase and you have paid the required additional premium. Please refer to the ADDITIONAL OPTIONS TABLE OF BENEFITS and the applicable section in YOUR POLICY COVER for details. You cannot purchase sections of this pack individually.

### INCREASED ITEM LIMITS

Cover is provided under sub-section 4.1.1 a] for loss, theft of or accidental damage to luggage and personal effects up to the item limits shown in sub-section 4.1.1 a] and the benefit limits shown in the TABLE OF BENEFITS for the Plan you have selected.

You can purchase increased item limit cover under sub-section 4.1.1 b] for item type(s) we give you the option to select, by paying an additional premium at the time you purchase your policy. Details of the item type(s) and the increased item limits selected and purchased are shown on your Certificate of Insurance. Increased Item Limit cover is only available for the particular item types that we give you the option to nominate when you purchase your policy.

No cover is provided under sub-section 4.1.1 a] for any item(s) of a particular item type for which you have purchased an increased item limit under sub-section 4.1.1 b].
**PRE-EXISTING MEDICAL CONDITIONS**

Please read this section carefully.

You cannot apply for cover for pre-existing medical conditions under the Essentials Plan.

The meaning of pre-existing medical condition is defined in the section headed OUR DEFINITIONS. It is important that you read and understand this and all other definitions used in this product.

There is no cover under this policy for any claims arising from, related to or associated with, your pre-existing medical condition(s) unless:

a] Allianz Global Assistance has agreed in writing to provide cover to you for the pre-existing medical condition causing your claim; or

b] the pre-existing medical condition meets the requirements set out under the heading PRE-EXISTING MEDICAL CONDITIONS WHICH WE MAY COVER WITH NO ADDITIONAL PREMIUM PAYABLE.

Except as provided under sub-section 2.1.1 d] and sub-section 3.1.1 g], no cover is provided under this policy for any claims arising from, related to or associated with, a pre-existing medical condition of any person who is not named on your Certificate of Insurance.

**PRE-EXISTING MEDICAL CONDITIONS WHICH WE MAY COVER WITH NO ADDITIONAL PREMIUM PAYABLE**

No application for cover or any further information is required from you if:

a] your pre-existing medical condition is described in the list below, and

b] it has not caused your hospitalisation (including day surgery or emergency department attendance) in the 24 months prior to the time of the policy being issued.

**Conditions**

1. acne;
2. asthma, provided:
   - you are under 60 years of age, and
   - you have no other lung disease;
3. bunions;
4. carpal tunnel syndrome;
5. cataracts;
6. cleft palate;
7. cochlear implant;
8. coeliac disease;
9. congenital adrenal hyperplasia;

(For example: Sub-section 4.1.1 a] provides cover for mobile phones subject to an item limit of $1,000 which is included in the benefit limit for luggage and personal effects shown in the TABLE OF BENEFITS for the Plan you have selected. If you have one or more mobile phones, purchased for more than $1,000 each, you can purchase cover under sub-section 4.1.1 b] increasing the limit for mobile phones to either $2,000 or $3,000.)

If you purchase an increased item limit for a nominated item type, and during your journey any items of that particular item type are stolen or accidentally damaged or permanently lost, we will pay up to the selected increased limit shown on your Certificate of Insurance for any one item of the nominated item type or for all items of the nominated item type combined.

We will not pay more than the original purchase price of any item. We have the option to repair or replace an item or paying you the amount it would cost us to repair or replace the item after allowing for any trade discounts we are entitled to.

Receipts and/or valuations must be provided proving your ownership of and the value of any item for which you make a claim.

**INCREASED RENTAL VEHICLE EXCESS COVER**

You can increase the benefit limit shown in the TABLE OF BENEFITS that applies to SECTION 5.1 RENTAL VEHICLE EXCESS for the Comprehensive, Domestic, Multi-Trip or Non-Medical Plans by nominating the level of additional cover required from the options we make available to you and paying an additional premium at the time you purchase your policy. The increased benefit limit purchased by you will be shown on your Certificate of Insurance.

**INCREASE OF STANDARD EXCESS**

You may reduce your policy premium under all plans by increasing the standard excess. Your selected excess will be listed on your Certificate of Insurance.
10. congenital blindness;
11. congenital deafness;
12. conjunctivitis;
13. dengue fever;
14. diabetes (type 1 or type 2), or glucose intolerance provided:
   • you were first diagnosed over 6 months ago; and
   • you had no complications in the last 12 months; and
   • you had no kidney, eye or neuropathy complications or cardiovascular disease; and
   • you are under 50 years of age;
15. dry eye syndrome;
16. Dupuytren’s contracture;
17. ear grommets, if no current infection;
18. eczema;
19. gastric reflux (GORD);
20. glaucoma;
21. gout;
22. hay fever;
23. hiatus hernia, if no surgery planned;
24. hormone replacement therapy;
25. hypercholesterolaemia (high cholesterol), provided no cardiovascular disease and/or no diabetes;
26. hyperlipidaemia (high blood lipids), provided no cardiovascular disease and/or no diabetes;
27. hypertension, provided no cardiovascular disease and/or no diabetes;
28. hypothyroidism, including Hashimoto’s disease;
29. lipoma;
30. macular degeneration;
31. Meniere’s disease;
32. rhinitis;
33. rosacea;
34. sinusitis;
35. tinnitus; or
36. single uncomplicated pregnancy, up to and including 23 weeks, not arising from services or treatment associated with an assisted reproduction program including but not limited to, in vitro fertilisation (IVF).

OTHER PRE-EXISTING MEDICAL CONDITIONS
You will need to apply for cover of any pre-existing medical condition that does not meet the requirements set out under the heading PRE-EXISTING MEDICAL CONDITIONS WHICH WE MAY COVER WITH NO ADDITIONAL PREMIUM PAYABLE. Please apply online or call the contact number shown on the back cover of this PDS.

Depending on your pre-existing medical condition, we may be unable to offer you a policy which provides cover for any medical expenses, or for any other expenses arising from, related to or associated with any injury or sickness suffered by you. If that is the case, you may be able to purchase a Non-Medical Plan. Please refer to the TABLE OF BENEFITS section for details of the benefits which are available under this type of plan.

If you have any questions about pre-existing medical conditions, please call the contact number shown on the back cover of this PDS.
IMPORTANT MATTERS
Under your policy there are rights and responsibilities which you and we have. You must read this PDS in full for all details, but here are some you should be aware of.

LIMITATION OF COVER
Notwithstanding anything contained in this PDS we will not provide cover nor will we make any payment or provide any service or benefit to any person or party where providing such cover, payment, service or benefit would contravene or violate any applicable trade or economic sanction or any law or regulation.

CONFIRMATION OF COVER
To confirm any policy transaction, (if the Certificate of Insurance does not have all the information you require), call us on the contact number shown on the back cover of this PDS.

JURISDICTION AND CHOICE OF LAW
Your policy is governed by and construed in accordance with the law of Queensland, Australia and you agree to submit to the exclusive jurisdiction of the courts of Queensland. You agree that it is your intention that this Jurisdiction and Choice of Law clause applies.

YOUR DUTY OF DISCLOSURE
Before you enter into this insurance with us, you have a duty of disclosure under the Insurance Contracts Act 1984.

The Act imposes a different duty the first time you enter into a contract of insurance with us to that which applies when you vary, extend or reinstate the contract. This duty of disclosure applies until the contract is entered into (or varied, extended or reinstated as applicable).

YOUR DUTY OF DISCLOSURE WHEN YOU ENTER INTO THE CONTRACT WITH US FOR THE FIRST TIME
When answering our specific questions that are relevant to our decision whether to accept the risk of the insurance and, if so, on what terms, you must be honest and disclose to us anything that you know and that a reasonable person in the circumstances would include in answer to the questions.

It is important that you understand that you are answering our questions in this way for yourself and anyone else that you want to be covered by the contract.

YOUR DUTY OF DISCLOSURE WHEN YOU VARY, EXTEND OR REINSTATE THE CONTRACT
When you vary, extend or reinstate the contract with us, your duty is to disclose every matter that you know, or could reasonably be expected to know, is relevant to our decision whether to accept the risk of the insurance and, if so, on what terms.

WHAT YOU DO NOT NEED TO TELL US
Your duty however, does not require disclosure of any matter:
• that diminishes the risk to be undertaken by us; or
• that is of common knowledge; or
• that we know or, in the ordinary course of our business as an insurer, ought to know; or
• as to which compliance with your duty is waived by us.

NON-DISCLOSURE
If you fail to comply with your duty of disclosure, we may be entitled to reduce our liability under the contract in respect of a claim, cancel the contract or both.

If your non-disclosure is fraudulent, we may also have the option of avoiding the contract from its beginning.

FINANCIAL CLAIMS SCHEME
In the unlikely event Allianz were to become insolvent and could not meet its obligations under your policy, a person entitled to claim may be entitled to payment under the Financial Claims Scheme. Access to the Scheme is subject to eligibility criteria. More information can be obtained from http://www.fcs.gov.au.

REMUNERATION
The premium for your policy is payable to Allianz as the insurer. Allianz Global Assistance is also remunerated by Allianz for providing services on behalf of Allianz. This is a percentage (exclusive of GST) of the premium that you pay for your policy and is only paid if you buy this product. Employees and representatives of Allianz Global Assistance receive an annual salary, which may also include bonuses and/or other incentives, which can be based on performance or other criteria. This remuneration is included in the premium you pay.

If you would like more information about the remuneration that Allianz Global Assistance receives, please ask us. This request should be made within a reasonable time after this document is provided to you and before the financial services are provided to you.
GENERAL INSURANCE CODE OF PRACTICE
Allianz and Allianz Global Assistance proudly support the General Insurance Code of Practice.

The Code sets out the minimum standards of practice in the general insurance industry. For more information on the Code please call the contact number on the back cover of this PDS.

DISPUTE RESOLUTION PROCESS
In this section, “we”, “our” and “us” means Allianz and Allianz Global Assistance.

If you have a complaint or dispute in relation to this insurance, or our services or our representatives, please call us using the contact details on the back cover of this PDS, or put the complaint in writing and send it to The Dispute Resolution Department, Locked Bag 3014, Toowong DC, Queensland 4066.

We will attempt to resolve the matter in accordance with our Internal Dispute Resolution process. To obtain a copy of our procedures, please contact us.

We are a member of an external dispute resolution scheme which is independent and free to you. We are bound by determinations made by it in accordance with its relevant terms and rules applicable to us. Any complaint or dispute can be lodged with the Australian Financial Complaints Authority (AFCA). The contact details for the AFCA are:

Australian Financial Complaints Authority
Online: www.afca.org.au
Email: info@afca.org.au
Phone: 1800 931 678
Mail: Australian Financial Complaints Authority
GPO Box 3 Melbourne Victoria 3001.

SAFEGUARDING YOUR LUGGAGE & PERSONAL EFFECTS
You must take all reasonable precautions to safeguard your luggage and personal effects. If you leave your luggage and personal effects unsupervised in a public place we will not pay your claim.

CLAIMS
In the event of a claim, immediate notice should be given to Allianz Global Assistance using the contact details on the back cover of this PDS.

Please note: Receipts and/or valuations must be provided proving your ownership of and the value of any item for which you make a claim. Receipts must be provided for any expense for which you make a claim.

Allianz Global Assistance will consider your claim within 10 business days of receiving a completed claim form and all necessary documentation. If they need additional information, a written notification will be sent to you within 10 business days.

PRIVACY NOTICE
To offer or provide you with our products and services (or those we may offer or provide to you on behalf of our business partners) we, namely AWP Australia Pty Ltd ABN 52 097 227 177 trading as Allianz Global Assistance, and our agents and representatives, collect, store, use, and disclose your personal information including sensitive information. We usually collect it directly from you but sometimes from others depending upon the circumstances and the product involved. For instance, we may collect your personal information from our business partners who may have provided you with a product or service including but not limited to travel insurance, roadside assistance with a vehicle purchase, Overseas Student or Visitor Health Cover, or other assistance services we arrange or provide. For example, your personal information may be collected from your family members and travel companions, doctors, and hospitals if you purchase our travel insurance and require medical assistance. Likewise, we collect personal information from universities and your agents if you inquire about or apply for our Overseas Student or Visitor Health Cover. We are the ‘data controller’ and responsible for ensuring your personal information is used and protected in accordance with applicable laws including the Privacy Act 1988 and sometimes European Law (the GDPR) where our activities are within its scope. Personal information we collect includes, for example, your name, address, date of birth, email address, and sometimes your medical information, passport details, bank account details, as well as other information we collect through devices like ‘cookies’ when you visit our website such as your IP address and online preferences.

We use your personal information to offer and provide our products and services and to manage your and our rights and obligations in connection with any products and services you have acquired. For instance, we use it to assess, process, and investigate any travel or health insurance claims, and to liaise with Government Departments when necessary. We may also use it for product development, marketing (where permitted by law or with your consent but not in connection with some products or services such as credit card insurances), customer data analytics, research, IT systems maintenance and development, recovery against third parties, fraud investigations, and for other purposes with your consent or where permitted by law. We do not use sensitive information for marketing purposes or provide that information to any third parties for marketing.

Your personal information may be disclosed to third parties (some of whom are data processors) who assist us to carry out the above activities both inside and outside of Australia, such as claims management providers, travel agents and intermediaries, insurers, investigators, cost containment providers, medical and health service providers, universities and other education institutions, roadside assistance and towing providers, vehicle manufacturers, oversease data storage (including ‘cloud’ storage) and data handling providers, legal and other professional advisers, your agents and broker, your travel group leader if you travel in a group, your employer if you have a corporate travel policy, your bank if you are the beneficiary of the
bank’s credit card insurances, insurance reference bureaux, and our related and group companies including Allianz. Some of these third parties may be located in other countries including in Europe, Asia, Canada, or the USA. We also, where necessary, disclose your personal information to Government Departments including for immigration and private health insurance purposes as well as to regulatory bodies.

With the exception of credit card insurances and some other products and services that we offer or provide on behalf of certain clients, we may, where permitted by law or with your consent, contact you by telephone, normal mail, email, electronic messages such as SMS, and via other means with promotional material and offers of products or services from us, our related companies, as well as offers from our business partners that we consider may be relevant and of interest to you. Where we contact you as a result of obtaining your consent, you can withdraw your consent at any time by calling us on 1800 023 767 or by contacting us – see below.

When you provide personal information to us about other individuals, we rely on you to have first obtained the individual’s consent, and have made them aware of the matters set out in this Privacy Notice.

You may also (1) seek access to your personal data and ask about its origin, the purposes of the processing, and details of the data controller or data processor, and the parties to whom it may be disclosed; (2) ask us to correct and update your personal information, (3) ask for a copy of your personal data in an electronic format for yourself or for someone you nominate. You may in some circumstances restrict the processing of your personal data, and request that it be deleted. Where your personal information is used or processed with your specific consent as the sole basis for processing (rather than on a contractual basis or legitimate interest), you may withdraw your consent at any time. You may not access or correct personal information of others unless you have been authorised by their express consent, or unless they are your dependants under 16 years of age.

If you have a request or complaint concerning your personal information or about data privacy, please contact: Privacy Officer, Allianz Global Assistance, PO Box 162, Toowong, QLD 4066, or email DataPrivacyAU@allianz-assistance.com.au.

You can also contact the Privacy Commissioner at the Office of The Australian Information Commissioner, GPO Box 5218, Sydney, NSW 2001 if you have a complaint.

For more information about our corporate privacy policy and handling of personal information, including further details about access, correction and complaints, please visit our website at www.allianz-assistance.com.au and click on the Privacy & Security link.

If you do not agree with the matters set out in our privacy policy or will not provide us with the personal information we request, we may not be able to provide you with our products or services including the assessment and payment of any claims. In cases where we cannot comply with your request concerning your personal information, we will give you reasons why.

**OVERSEAS HOSPITALISATION OR MEDICAL EVACUATION**

For emergency assistance anywhere in the world at any time, Allianz Global Assistance is only a telephone call away. The team will help with medical problems, locating nearest medical facilities, your evacuation home, locating nearest embassies and consulates, as well as keeping you in touch with your family and work in an emergency.

If you are hospitalised, you, or a member of your travelling party, must contact Allianz Global Assistance as soon as possible. If you do not, then to the extent permitted by law, we will not pay for these expenses or for any evacuation or airfares that have not been approved or arranged by Allianz Global Assistance.

If you are not hospitalised but you are being treated as an outpatient and the total cost of such treatment is likely to exceed $2,000, you must contact Allianz Global Assistance.

Please note that we will not pay for any hospital or medical costs incurred in Australia.

**YOU CAN CHOOSE YOUR OWN DOCTOR**

Unless you are treated under a Reciprocal Health Care Agreement you are free to choose your own medical adviser or, if you ask them to, Allianz Global Assistance can appoint an approved medical adviser to see you.

You must, as soon as possible, advise Allianz Global Assistance of your admittance to hospital or your early return to your home based on written medical advice.

If you do not get the medical treatment you expect, Allianz Global Assistance can assist you but neither Allianz nor Allianz Global Assistance are liable for anything that results from that.
# GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS

The Exclusion column is a summary for reference only and does not affect interpretation.

To the extent permitted by law we will not pay if:

<table>
<thead>
<tr>
<th>NO.</th>
<th>EXCLUSION</th>
<th>WORDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.1</td>
<td>Acting intentionally or recklessly</td>
<td>you intentionally or recklessly act in a way that would reasonably pose a risk to your safety or the safety of your luggage and personal effects, except in an attempt to protect the safety of a person or to protect property.</td>
</tr>
<tr>
<td>A.2</td>
<td>Loss mitigation</td>
<td>you do not do everything you can to reduce your loss as much as possible.</td>
</tr>
<tr>
<td>A.3</td>
<td>Consequential loss</td>
<td>your claim is for consequential loss of any kind including loss of enjoyment.</td>
</tr>
<tr>
<td>A.4</td>
<td>Aware of circumstances</td>
<td>at the time of purchasing this product, you were aware, or a reasonable person in your circumstances would have been aware, of something that would give rise to you making a claim under your policy.</td>
</tr>
<tr>
<td>A.5</td>
<td>Workers compensation</td>
<td>your claim is for a loss which is recoverable by compensation under any workers compensation or transport accident laws or by any government sponsored fund, plan, or medical benefit scheme, or any other similar type legislation required to be effected by or under a law.</td>
</tr>
<tr>
<td>A.6</td>
<td>Errors or omissions</td>
<td>your claim arises from errors or omissions in any booking arrangements or failure to obtain relevant visa, passport or travel documents.</td>
</tr>
<tr>
<td>A.7</td>
<td>Illegal acts</td>
<td>your claim arises because you breach any government prohibition or regulation, including visa requirements or intentionally act illegally. This exclusion does not apply to vehicle driver licensing; motorcycle/moped rider licensing; or traffic offences.</td>
</tr>
<tr>
<td>A.8</td>
<td>Invitees</td>
<td>your claim arises directly or indirectly from, or is in any way connected with, the conduct of someone who enters your accommodation with your consent, or whose accommodation you choose to enter.</td>
</tr>
<tr>
<td>A.9</td>
<td>Government confiscation</td>
<td>your claim arises from a government authority confiscating, detaining or destroying anything.</td>
</tr>
<tr>
<td>A.10</td>
<td>Vehicles</td>
<td>your claim arises directly or indirectly from, or is in any way connected with:</td>
</tr>
<tr>
<td></td>
<td>• you driving a motor vehicle or riding a moped or scooter without a current Australian drivers licence or drivers licence valid for the country you are driving or riding in. This applies even if you are not required by law to hold a licence in the country you are driving or riding in;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• you riding a motorcycle without a current Australian motorcycle licence or motorcycle licence valid for the country you are riding in. This applies even if you are not required to hold a motorcycle licence because you hold a drivers licence, or a motorcycle licence is not required by law in the country you are riding in;</td>
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<td></td>
<td>• you riding or travelling as a passenger on a motorcycle with an engine capacity greater than 250cc;</td>
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<tr>
<td></td>
<td>• you travelling as a passenger on a motorcycle, moped or scooter that is in control of a person who does not hold a current motorcycle or drivers licence valid for the vehicle being ridden and for the country you are riding in;</td>
<td></td>
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<td></td>
<td>• you riding, or travelling as a passenger, on a motorcycle, moped or scooter without wearing a helmet;</td>
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<tr>
<td></td>
<td>• you riding, or travelling as a passenger, on a quad bike.</td>
<td></td>
</tr>
<tr>
<td>A.11</td>
<td>Epidemic/pandemic</td>
<td>your claim arises from, is related to or associated with:</td>
</tr>
<tr>
<td></td>
<td>• an actual or likely epidemic or pandemic; or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• the threat of an epidemic or pandemic.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Refer to <a href="http://www.who.int">www.who.int</a> and <a href="http://www.smartraveller.gov.au">www.smartraveller.gov.au</a> for further information on epidemics and pandemics.</td>
<td></td>
</tr>
<tr>
<td>A.12</td>
<td>Government warning</td>
<td>your claim arises because you did not follow advice in the mass media or any government or other official body’s warning and you did not take appropriate action to avoid or minimise any potential claim under your policy (including delay of travel to the country or part of a country referred to in the warning). Refer to <a href="http://www.who.int">www.who.int</a> and <a href="http://www.smartraveller.gov.au">www.smartraveller.gov.au</a> for further information.</td>
</tr>
<tr>
<td>A.13</td>
<td>War</td>
<td>your claim arises from any act of war, whether war is declared or not, or from any rebellion, revolution, insurrection or taking of power by the military.</td>
</tr>
<tr>
<td>NO.</td>
<td>EXCLUSION</td>
<td>WORDING</td>
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<tr>
<td>A.14</td>
<td>Nuclear</td>
<td>your claim arises from a nuclear reaction or contamination from nuclear weapons or radioactivity.</td>
</tr>
<tr>
<td>A.15</td>
<td>Chemical/ biological</td>
<td>your claim arises from biological and/or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.</td>
</tr>
</tbody>
</table>
| B.1 | Pre-existing Medical | your claim arises directly or indirectly from, or is in any way connected with, any **pre-existing medical condition of any person including you, your travelling companion or a relative** except:  
• as provided under sub-section **2.1.1 d**, and sub-section **3.1.1 g**;  
• if you or any other **insured person** satisfy the provisions as set out under the heading **PRE-EXISTING MEDICAL CONDITIONS WHICH WE MAY COVER WITH NO ADDITIONAL PREMIUM PAYABLE** contained in the **PRE-EXISTING MEDICAL CONDITIONS** section;  
• where **Allianz Global Assistance** have agreed in writing to provide cover for your pre-existing medical conditions as shown on your **Certificate of Insurance**. Special conditions, limits and **excesses** may apply if Allianz Global Assistance notify you in writing; or  
• where your **travelling companion** or a relative is an **insured person** and Allianz Global Assistance have agreed in writing to provide them with cover for their pre-existing medical condition as shown on your **Certificate of Insurance**. |
| B.2 | Signs and symptoms  | your claim arises from, is related to or associated with any physical or mental signs or symptoms that you were aware, or a reasonable person in your circumstances would have been aware, of before cover commenced, and:  
  a] you had not yet sought a medical opinion regarding the cause; or  
  b] you were currently under investigation to define a diagnosis; or  
  c] you were awaiting specialist opinion. |
| B.3 | Travel against medical advice | your claim is in respect of travel booked or undertaken by you against the advice of any **medical adviser**.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| B.4 | Pregnancy          | your claim arises directly or indirectly out of pregnancy, childbirth or related complications unless it is a single, uncomplicated pregnancy (up to and including 23 weeks) or we have agreed in writing to provide cover. In any event we will not pay medical expenses for:  
• regular antenatal care;  
• childbirth at any gestation; or  
• care of the newborn child. |
| B.5 | Addiction          | your claim arises from or is in any way related to or connected with:  
• you or any other person being hospitalised or confined to a clinic, where you or that other person (as the case may be) is being treated for addiction to drugs, substances or alcohol, or is using the hospital or clinic as a nursing, convalescent or rehabilitation place; or  
• a therapeutic or illicit drug, substance or alcohol addiction suffered by you or any other person. |
<p>| B.6 | Medication already in use | your claim involves the cost of medication you are using at the time the journey began or the cost for maintaining a course of treatment you were on prior to the start of the journey. |
| B.7 | Suicide            | your claim arises from your suicide or your attempted suicide or your attempted self harm. |
| B.8 | STD                | your claim arises directly or indirectly from, or is in any way connected with, a sexually transmitted disease or virus, unless Allianz Global Assistance have agreed in writing to provide cover. |
| B.9 | Under the influence | your claim arises directly or indirectly from, or is in any way connected with you being under the influence of any intoxicating liquor, substance or drugs except a drug prescribed to you by a <strong>medical adviser</strong>, and taken in accordance with their instructions. |
| B.10| Private medical treatment | despite the advice given following your call to Allianz Global Assistance, you received private hospital or medical treatment where public funded services or care is available in Australia or under any Reciprocal Health Care Agreement between the Government of Australia and the government of any other country. |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>B.11</td>
<td>AICD/ICD</td>
<td>your claim arises from any medical procedures in relation to AICD/ICD insertion during overseas travel. If you, your travelling companion or a relative (as listed on your Certificate of Insurance) requires this procedure, due to sudden and acute onset which occurs for the first time during your period of cover and not directly or indirectly related to a pre-existing medical condition, we will exercise our right based on medical advice, to organise a repatriation to Australia for this procedure to be completed.</td>
</tr>
<tr>
<td>B.12</td>
<td>Elective surgery</td>
<td>your claim arises from, is related to or associated with elective surgery, or treatment received by you or your travelling companion during your journey.</td>
</tr>
<tr>
<td>B.13</td>
<td>Complications</td>
<td>your claim arises, or is a consequence of complications from medical, surgical or dental procedures or treatments received by you or your travelling companion during your journey that are not for an injury or sickness that would be otherwise be covered by this policy.</td>
</tr>
<tr>
<td>B.14</td>
<td>Health insurance</td>
<td>your claim arises from, or is in any way related to or associated with any loss, damage, liability, event, occurrence, injury or sickness where providing such cover would result in us contravening the Health Insurance Act 1973 (Cth), the Private Health Insurance Act 2007 (Cth) or the National Health Act 1953 (Cth) or where Allianz does not have the necessary licenses or authority to provide such cover.</td>
</tr>
<tr>
<td>C.4</td>
<td>Air supported device</td>
<td>your claim arises from travel in any air supported device other than as a passenger in: • a fully licensed aircraft operated by an airline or charter company; or • a regulated or licensed hot air balloon.</td>
</tr>
<tr>
<td>C.5</td>
<td>Snow sport activities</td>
<td>your claim arises from, or is any way associated with you participating in snow sport activities except as provided under the ADDITIONAL OPTION - SNOW PACK (if you have purchased this option).</td>
</tr>
<tr>
<td>C.6</td>
<td>Protective gear</td>
<td>your claim arises directly or indirectly from, or is in any way connected with, you not wearing the appropriate protective clothing and head protection for the sport or activity you are participating in.</td>
</tr>
<tr>
<td>C.7</td>
<td>Ignoring safety warnings</td>
<td>your claim arises directly or indirectly from, or is in any way connected with, you not observing all safety warnings and advice about adverse weather and terrain conditions.</td>
</tr>
<tr>
<td>C.8</td>
<td>Professional sport</td>
<td>your claim arises from you or your travelling companion participating in professional sport of any kind (including professional racing on foot).</td>
</tr>
<tr>
<td>C.9</td>
<td>Cruise exclusion</td>
<td>your claim arises directly or indirectly from, or is any way connected with travel on a cruise vessel except as provided under the ADDITIONAL OPTION - CRUISE PACK (if you have purchased this option). This exclusion does not apply to river cruising.</td>
</tr>
<tr>
<td>C.1</td>
<td>Sports &amp; activities</td>
<td>your claim arises from, or is in any way connected with you participating in any sports or recreational activities not listed in the AUTOMATICALLY INCLUDED ACTIVITIES list in the PURCHASING THIS PRODUCT section, except as provided under the ADDITIONAL OPTION - SNOW PACK (if you have purchased this option).</td>
</tr>
<tr>
<td>C.2</td>
<td>Racing</td>
<td>your claim arises directly or indirectly from, or is in any way connected with, you participating in any race, speed or time trial, or endurance event except for amateur racing on foot in races for distances up to and including the full marathon (42.2 kilometres or 26.2 miles).</td>
</tr>
<tr>
<td>C.3</td>
<td>Diving</td>
<td>your claim arises because you dive underwater greater than 10 metres. There is no cover under this policy if an incident or event occurs while you are diving alone.</td>
</tr>
</tbody>
</table>
YOUR POLICY COVER

The maximum amount we will pay for all claims combined under each section is shown in the TABLE OF BENEFITS for the Plan you have selected. Your Certificate of Insurance will also show the ADDITIONAL OPTIONS you are covered for. You must also check GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS for reasons why we will not pay.

SECTION 1.1 OVERSEAS EMERGENCY ASSISTANCE

Allianz Global Assistance will help you with any overseas emergency (see OVERSEAS HOSPITALISATION OR MEDICAL EVACUATION contained in the section IMPORTANT MATTERS). You may contact Allianz Global Assistance at any time 7 days a week.

1.1.1 ALLIANZ GLOBAL ASSISTANCE WILL ARRANGE

Allianz Global Assistance will arrange for the following assistance services if you injure yourself, or become sick overseas during your journey provided the relevant injury or sickness is covered by your policy:

a] Access to a medical adviser for emergency medical treatment while overseas;

b] Any messages which need to be passed on to your family or employer in the case of an emergency;

c] Provision of any written guarantees for payment of reasonable expenses for emergency hospitalisation while overseas;

d] Your medical transfer or evacuation if you must be transported to the nearest hospital for emergency medical treatment overseas or be brought back to your home with appropriate medical supervision; and

e] The return to your home of your dependants if they are left without supervision following your hospitalisation or evacuation.

In addition:

f] If you die as a result of an injury or a sickness during your journey, we will pay for your reasonable funeral expenses incurred overseas or the cost of bringing your remains back to your home. The maximum amount we will pay is $15,000 per person.

Please note that we will not pay for any costs incurred in Australia except the reasonable cost of transporting your remains from the inbound port or airport to your home or nominated funeral home.

SECTION 1.2 OVERSEAS EMERGENCY MEDICAL & HOSPITAL EXPENSES

1.2.1 WHAT WE COVER

If you injure yourself overseas, or become sick while overseas, we will reimburse the reasonable medical or hospital expenses you incur until you get back to Australia. The medical or hospital expenses must have been incurred on the written advice of a medical adviser. You must make every effort to keep your medical or hospital expenses to a minimum.

If we determine, on medical advice, that you should return home for treatment and you do not agree to do so, we will pay you an amount up to the limit shown in the TABLE OF BENEFITS, which we reasonably consider to be equivalent to:

- your medical expenses and/or related costs incurred overseas to the date we advise you to return to your home; plus
- the amount it would cost us to return you to your home; plus
- the non-refundable portion of unused travel and accommodation arrangements you would have incurred had you followed the advice of Allianz Global Assistance,

you will then be responsible for any ongoing or additional costs relating to or arising out of the event you have claimed for.

We will only pay for treatment received and/or hospital accommodation during the 12 month period after the sickness first showed itself or the injury happened.
b] We will also pay the cost of emergency dental treatment up to limit shown in the TABLE OF BENEFITS for the Plan selected for dental costs incurred which the treating dentist certifies in writing is for the relief of sudden and acute pain to sound and natural teeth. This limit does not apply to dental costs arising from any injury that is covered under sub-section 1.2.1 a].

1.2.2 WHAT WE EXCLUDE

To the extent permitted by law, we will not pay for expenses:

a] when you have not notified Allianz Global Assistance as soon as practicable of your admittance to hospital;
b] incurred after 2 weeks treatment by a chiropractor, physiotherapist or dentist, unless approved by Allianz Global Assistance;
c] if you do not follow the advice of Allianz Global Assistance;
d] if you have received medical care under a Reciprocal Health Care Agreement;
e] for damage to dentures, dental prostheses, bridges or crowns;
f] relating to dental treatment involving the use of precious metals or for cosmetic dentistry;
g] for dental treatment caused by or related to the deterioration and/or decay of teeth;

SECTION 1.3 ACCIDENTAL DEATH

1.3.1 WHAT WE COVER

If, during your journey;

a] you are injured and you die because of that injury within 12 months of the injury; or
b] something you are travelling on or in disappears, sinks or crashes and your body is not found within 12 months and you are presumed dead;

we will pay the benefit payable under this section, to your estate.

The amount we will pay for the death of each adult who is not an accompanying dependant is the benefit limit for single or individual cover for the Plan selected.

The amount we will pay for the death of an accompanying dependant (if cover is provided for accompanying dependants under the Plan you have selected) is $5,000.

SECTION 1.4 PERMANENT DISABILITY

1.4.1 WHAT WE COVER

If you are injured during your journey; and

- because of the injury, you suffer permanent disability within 12 months of the injury; and
- your permanent disability continues for at least 12 consecutive months and at the expiry of that period, in the opinion of an appropriate medical specialist, is beyond hope of improvement;

we will pay the benefit payable under this section to you.

The amount we will pay for the permanent disability of each adult who is not an accompanying dependant is the benefit limit for single or individual cover for the Plan selected.

The amount we will pay for the permanent disability of an accompanying dependant (if cover is provided for accompanying dependants under the Plan you have selected) is $5,000.

1.4.2 WHAT WE EXCLUDE

We will not pay if your permanent disability arises from, is related to or associated with your participation in snow sport activities.

SECTION 1.5 HOSPITAL CASH ALLOWANCE

1.5.1 WHAT WE COVER

If, as a result of an injury or sickness during your journey, you are hospitalised overseas for a continuous period of more than 48 hours then we will pay you $50 for each day in excess of 48 hours that you continue to be hospitalised.

1.5.2 WHAT WE EXCLUDE

We will not pay if you cannot claim for overseas medical expenses connected with the hospitalisation under SECTION 1.2 OVERSEAS MEDICAL & HOSPITAL EXPENSES.

SECTION 1.6 LOSS OF INCOME

1.6.1 WHAT WE COVER

If during your journey you suffer an injury requiring medical treatment overseas, and:

- because of the injury you become disabled within 30 days; and
- the disablement continues for more than 30 consecutive days from the date of your return to your home; and
- you are under the regular care of and acting in accordance with the instructions or advice of a medical adviser who certifies in writing that the disablement prevents you from gainful employment; and
- as a result you lose all your income,

then we will pay you up to $400 per week for up to 26 continuous weeks, starting from the 31st day after your return to your home.
1.6.2 WHAT WE EXCLUDE
We will not pay for the loss of income of dependants.

SECTION 2.1 CANCELLATION
If you think that you may have to cancel your journey or shorten your journey you must tell us as soon as possible - for more information see under the headings CLAIMS or call the contact number (or if overseas the 24 HOUR EMERGENCY ASSISTANCE number) shown on the back cover of this PDS.

If your claim arises from or is related to your fitness to travel, written proof from a medical adviser must be provided.

2.1.1 WHAT WE COVER
If your journey is cancelled, rescheduled or shortened because of circumstances that were not expected or intended by you and are outside your control then we will pay:

a] the non-refundable portion of unused travel and accommodation arrangements scheduled to be used during your journey that you have paid in advance of cancellation and cannot recover in any other way, inclusive of:
   • your travel agent’s cancellation fees and any commission or service fees retained by your travel agent up to the amount of commission or service fees that your travel agent would have earned had your journey not been cancelled, limited to:
     • $1,500 for single and individual cover and under the Multi-Trip Plan; or
     • $1,500 per insured person for duo cover; or
     • $3,000 for family cover.

b] for the value of frequent flyer points, air miles, loyalty card points, redeemable vouchers or other similar schemes lost by you as a result of cancelling the services paid for with those points, air miles, vouchers or schemes, but only if you cannot recover your loss in any other way. We calculate the amount we pay you as follows:
   i] for frequent flyer points, air miles or loyalty card points:
      • the cost of an equivalent booking based on the same advance booking period as your original booking less any payment you made toward the booking, multiplied by
      • the total number of points or air miles lost, divided by the total number of points or air miles used to make the booking.
   ii] for vouchers, the face value of the voucher or current market value of an equivalent booking whichever is the lesser;

   c] your reasonable costs of rescheduling your journey.
   The most we will pay for rescheduling your journey is the unrecoverable amount that would have been payable under sub-sections 2.1.1 a] and 2.1.1 b] had your journey been cancelled.
   We will not pay a claim under sub-section 2.1.1 c] in addition to a claim under sub-sections 2.1.1 a] and 2.1.1 b] for the same services/facilities;

d] If, a relative of yours or your travelling companion
   • who resides in Australia or New Zealand; and
   • is aged 84 years or under,
dies or is hospitalised in Australia or New Zealand as a result of a pre-existing medical condition after the policy is issued, and at the time of policy issue you were, or a reasonable person in your circumstances would have been, unaware of the likelihood of such hospitalisation or death then the most we will pay for all claims under sub-sections 2.1.1 a] and 2.1.1 b] or sub-section 2.1.1 c] is:
   • $2,000 for single and individual cover and under the Multi-Trip Plan;
   • $2,000 per insured person for duo cover;
   • $4,000 for family cover.

2.1.2 WHAT WE EXCLUDE
We will not pay your claim if:

a] you were aware, or a reasonable person in your circumstances would have been aware before your policy was issued, of any reason that may cause your journey to be cancelled, rescheduled or shortened;

b] caused by the death, injury or illness of any person, including a relative or travelling companion, not listed on your Certificate of Insurance who resides outside of Australia or New Zealand or who is aged 85 years and over;

c] the death, injury or illness of your relative arises from a pre-existing medical condition except as specified under sub-section 2.1.1 d];

d] caused by you or your travelling companion changing plans; or

e] caused by the breakdown or dissolution of any personal or family relationship;

f] caused by any business, financial or contractual obligations that prevent you or your travelling companion from travelling. This exclusion does not apply to claims where you or your travelling companion are made redundant in Australia except where a reasonable person in a similar situation would have been aware before the policy was purchased that the redundancy was to occur;
If you did not have a return ticket booked to your home before you were injured or became sick, we will reduce the amount of your claim by the price of the fare to your home from the place you planned to return to your home from. The fare will be at the same fare class as the one you left your home on.

e] If, during your journey, your travelling companion or a relative of yours or your travelling companion who is resident in Australia or New Zealand:
  - dies unexpectedly;
  - is injured and because of the injury requires hospitalisation; or
  - becomes seriously sick and requires hospitalisation, (except where the relevant death, injury or sickness arises out of a pre-existing medical condition), we will reimburse the reasonable additional cost of your early return to your home. We will only pay the cost of the fare class you had planned to travel at.

f] If you return to your home because:
  - during your journey, a relative of yours or your travelling companion:
    - who resides in Australia or New Zealand; and
    - who is aged 84 years or under,
dies unexpectedly or is hospitalised in Australia or New Zealand following a serious injury or a sickness (except arising from a pre-existing medical condition); and
  - it is possible for your journey to be resumed; and
  - there is more than 14 days remaining of the period of cover, as noted on your Certificate of Insurance; and
  - you resume your journey within 12 months of your return to your home,
we will reimburse you for airfares for you to return to the place you were when your journey was interrupted.

The most we will pay under this benefit is as follows:
  - $3,000 for single and individual cover and under the Multi-Trip Plan;
  - $3,000 per insured person for duo cover; or
  - $6,000 for family cover.

g] If, during your journey, a relative of yours who is aged 84 years or under, dies or is hospitalised in Australia or New Zealand as a result of a pre-existing medical condition after the policy is issued, and at the time of policy issue you were, or a reasonable person in your circumstances would have been, unaware of the likelihood of such hospitalisation or death, we will pay for the reasonable additional cost of your return to your home and/or the cost of airfares for you to return to the place you were when your journey was interrupted.
The most **we** will pay for all events under this benefit is as follows:

- $2,000 for **single** and **individual** cover and under the Multi-Trip Plan;
- $2,000 per **insured person** for **duo** cover; or
- $4,000 for **family** cover.

**h)** In addition, if a disruption to **your journey** arises from any of the following reasons:

- **your** scheduled or connecting transport is cancelled, delayed, rescheduled or diverted because of a strike, riot, hijack, civil protest, weather, natural disaster or accident affecting **your** mode of transport;
- **you** unknowingly break any quarantine rule;
- **you** lose **your** passport, travel documents or transaction cards or they are stolen; or
- **your home** is rendered uninhabitable by fire, explosion, earthquake or flood,

**we** will reimburse **your reasonable** additional travel and accommodation expenses.

Whenever claims are made by **you** under this section and **SECTION 2.1 CANCELLATION** for cancelled services/facilities or alternative arrangements for the same or similar services/facilities, **we** will pay for the higher of the two amounts, not both.

**3.1.2 WHAT WE EXCLUDE**

To the extent permitted by law **we** will not pay **your** claim:

- **a)** if **you** were, or a reasonable person in **your** circumstances would have been, aware of any reason, before **your** period of cover commenced, that may cause **your journey** to be cancelled, disrupted or delayed;

- **b)** if the death, injury or illness of **your relative** arises from a pre-existing medical condition, except as specified under sub-section **3.1.1 g**;

- **c)** if **you** can claim **your** additional travel and accommodation expenses from anyone else;

- **d)** caused by any service provider misappropriating **your** funds or failing to arrange or provide services for which **you** have paid;

- **e)** if **your** claim relates to the financial collapse or insolvency of any service provider;

- **f)** for cancellations, delays, rescheduling or diversions to **your** scheduled or connecting transport unless it is due to a strike, riot, hijack, civil protest, weather, natural disaster or accident affecting **your** mode of transport;

- **g)** if **your** claim arises directly or indirectly out of **you** operating a rental vehicle in violation of the rental agreement.

**SECTION 3.2 TRAVEL DELAY EXPENSES**

**3.2.1 WHAT WE COVER**

If a delay to **your journey**, for at least 6 hours, arises from circumstances outside **your** control, **we** will reimburse the cost of **your reasonable** additional meals and accommodation expenses.

**We** will pay up to $200 at the end of the initial 6 hour period. In addition **we** will pay up to $200 for each full 24 hour period that the delay continues beyond the initial 6 hour delay.

**3.2.2 WHAT WE EXCLUDE**

**We** will not pay if:

- **a)** a delay to **your journey** arises from an act or threat of terrorism; or

- **b)** **your** claim is caused by the financial collapse or insolvency of any service provider.

**SECTION 3.3 ALTERNATIVE TRANSPORT EXPENSES**

**3.3.1 WHAT WE COVER**

If **your** scheduled transport is cancelled, delayed, shortened or diverted and that means **you** would not arrive at a wedding, funeral, conference, sporting event or prepaid travel/tour arrangements on time, **we** will pay **your reasonable** additional travel expenses to enable **you** to arrive on time.

**3.3.2 WHAT WE EXCLUDE**

**We** will not pay if **your** claim:

- **a)** arises from an act or threat of terrorism; or

- **b)** is caused by the financial collapse or insolvency of any service provider.

**SECTION 3.4 RETURN AIRFARE**

**3.4.1 WHAT WE COVER**

If, because of an injury or sickness that happens during **your journey**, the attending medical adviser, approved by **us**, requires **you** to be brought back to **your home** with a medical escort, **we** will pay the cost of **your** original airline ticket (less any refund that is due to **you**). However, **we** will only do so if **we** bring **you** back when either:

- there are more than 5 days of the journey, or 25% of its length, whichever is the greater left to go; or

- **you** have been confined to hospital overseas for more than 25% of the journey.
3.4.2 WHAT WE EXCLUDE

We will not pay if:

a] the injury or illness occurred before your departure from your home;

b] the injury or illness was a pre-existing medical condition except as specified under the PRE-EXISTING MEDICAL CONDITIONS section or in your Medical Terms of Cover letter; or

c] you have an entitlement to be paid for the cost of your original airline ticket (less any refunds due to you) under SECTION 2.1 CANCELLATION.

SECTION 3.5 DOMESTIC SERVICES

3.5.1 WHAT WE COVER

If you are injured during your journey and become disabled as a result of the injury, we will reimburse you up to $50 per day in respect of expenses incurred in the provision of housekeeping services that you are unable to perform yourself provided that:

• the disablement continues after you return to your home; and

• you have a medical certificate confirming your disablement and verifying the need for housekeeping services during the period of your disablement.

SECTION 3.6 DOMESTIC PETS

3.6.1 WHAT WE COVER

a] If you are delayed beyond the original end date of your journey due to an event covered by this policy, we will reimburse you up to $25 for each 24 hour period in respect of additional boarding kennel or boarding cattery fees incurred in Australia, for domestic dogs and cats owned by you.

b] If your pet suffers an injury while you are on your journey and requires veterinary treatment, provided that at the time of the injury, your pet was in the care of a relative, friend, boarding kennel or boarding cattery, we will reimburse you up to $500 for veterinary fees incurred in Australia.

c] No cover is provided under sub-sections 4.1.1 a] for any item(s) of the particular item type for which you have purchased cover under ADDITIONAL OPTION - INCREASED ITEM LIMITS. Cover is then provided for any item(s) of the particular item type under sub-section 4.1.1 b].

b] If you purchase optional cover for increased item limits and any item(s) of the particular item type are, during the journey, stolen or accidentally damaged or are permanently lost (except when: left in a motor vehicle; is sporting equipment in use; or are valuables checked in to be transported in the cargo hold of any aircraft, ship, train, tram or bus), we will pay up to the increased limit selected by you and shown on your Certificate of Insurance for any one item or for all items of the nominated item type combined.

c] Luggage and personal effects left in a motor vehicle are only covered during daylight hours and must have been left in a concealed storage compartment of a locked motor vehicle, and in the event of theft forced entry must have been made. The most we will pay is $200 for each item, and $2,000 in total for all stolen items.

d] No cover is provided for valuables left in a motor vehicle at any time or valuables checked in to be transported in the cargo hold of any aircraft, ship, train, tram or bus including any loss from the point of check in until collection by you from the baggage carousel or collection area at the end of your flight, voyage or trip.

e] No cover is provided for the loss or damage to, or of, sporting equipment while in use (including surfboards).

Please note that sub-sections 4.1.1 c], 4.1.1 d] and 4.1.1 e] apply to all luggage and personal effects or valuables even if you have purchased the ADDITIONAL OPTION - INCREASED ITEM LIMITS.
The maximum amount we will pay for all claims combined under sub-section 4.1.1 a] is shown under the TABLE OF BENEFITS for the Plan you have selected. The maximum amount we will pay for all claims combined under sub-section 4.1.1 b] is shown on your Certificate of Insurance.

4.1.2 WHAT WE EXCLUDE

To the extent permitted by law, we will not pay a claim in relation to your luggage and personal effects or valuables if:

a] you do not report the loss, theft or misplacement within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or misplacement occurred. You must prove that you made such report by providing us with a written statement from whoever you reported it to;

b] the loss, theft or damage is to, or of, items left behind in any hotel or motel room after you have checked out, or items left behind in any aircraft, ship, train, tram, taxi or bus;

c] the luggage and personal effects or valuables were being sent unaccompanied by you or under a freight contract;

d] the loss or damage arises from any process of cleaning, repair or alteration;

e] the loss or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin;

f] the luggage and personal effects or valuables were left unsupervised in a public place;

g] the luggage and personal effects or valuables have an electrical or mechanical breakdown;

h] the luggage and personal effects or valuables are fragile, brittle or an electronic component is broken or scratched - unless either:

• it is the lens of spectacles, binoculars or photographic or video equipment; or

• the breakage or scratch was caused by a crash involving a vehicle in which you are travelling;

i] you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft, misplacement or damage occurred. However, if you are not reimbursed the full amount of your claim, we will pay the difference between the amount of your loss and what you were reimbursed, up to the limit of your cover (allowing for depreciation due to age, wear and tear);

SECTION 4.2 - LUGGAGE AND PERSONAL EFFECTS

DELAY EXPENSES

4.2.1 WHAT WE COVER

If any items of your luggage and personal effects are delayed, misdirected or misplaced by the carrier for more than 12 hours, and in our opinion it was necessary for you to purchase essential items of clothing or other personal items, we will reimburse you.

You must provide written proof from the carrier who was responsible for your luggage and personal effects that they were delayed, misdirected or misplaced.

We will deduct any amount we pay you under this Section from any subsequent claim you make for lost luggage and personal effects payable under SECTION 4.1 LUGGAGE & PERSONAL EFFECTS.

4.2.2 WHAT WE EXCLUDE

To the extent permitted by law we will not pay if you are entitled to compensation from the bus line, air line, shipping line or rail authority you were travelling on for the relevant amount claimed. However, if you are not reimbursed the full amount, we will pay the difference between the amount of your expenses and what you were reimbursed, up to the limit of your cover.

SECTION 4.3 - TRAVEL DOCUMENTS, TRANSACTION CARDS & TRAVELLERS CHEQUES

4.3.1 WHAT WE COVER

a] If any essential travel documents (including passports), transaction cards or travellers cheques are lost by you, stolen from you or destroyed during your journey, then we will pay the issuer’s fees for the replacement costs (including communication costs) of the items lost, stolen or destroyed.

b] If during your journey, your transaction cards or travellers cheques are lost or stolen, then we will pay for any loss resulting from the fraudulent use of the transaction cards or travellers cheques.

4.3.2 WHAT WE EXCLUDE

a] To the extent permitted by law, we will not pay if you do not report the loss or theft within 24 hours to the police and, in the case of transaction cards or travellers cheques, to the issuing bank or company in accordance with the conditions under which the transaction cards or travellers cheques were issued. You must prove that you made such report by providing us with a written statement from whosoever you reported it to.

b] We will not pay for any amounts covered by any guarantee given by the bank or issuing company to you as the holder of the transaction cards or travellers cheques.
 SECTION 4.4 - THEFT OF CASH

4.4.1 WHAT WE COVER

If, during your journey cash, bank notes, currency notes, postal orders or money orders are stolen from your person we will reimburse you.

4.4.2 WHAT WE EXCLUDE

To the extent permitted by law, we will not pay if you do not report the theft within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the theft occurred. You must prove that you made a report by providing us with a written statement from whoever you reported it to.

 SECTION 5.1 RENTAL VEHICLE EXCESS

Cover is only provided under this section if your rental vehicle agreement specifies an excess, deductible or damage liability fee that is payable in the event the rental vehicle is damaged or stolen while in your custody. This section does not cover items such as, but not limited to, tyres and/or windscreens, roof and underbody if they are not covered by the indemnity provided by the rental company or agency under the rental vehicle agreement to which the excess, deductible or damage liability fee applies.

The maximum amount we will pay under this section is the amount of the excess, deductible or damage liability fee that is specified in your rental vehicle agreement up to the limit shown in the TABLE OF BENEFITS for the Plan you have selected.

5.1.1 WHAT WE COVER

a] If, during your period of cover, a rental vehicle you have rented from a rental company or agency is:

- involved in a motor vehicle accident while you are driving it; or
- damaged or stolen while in your custody,

then we will pay you the lesser of:

- the specified excess, deductible or damage liability fee that you are liable to pay under your rental vehicle agreement; or
- property damage for which you are liable.

You must provide a copy of:

- your rental vehicle agreement;
- the incident report that was completed;
- repair account;
- an itemised list of the value of the damage; and
- written notice from the rental company or agency advising that you are liable to pay the specified excess, deductible or damage liability fee.

b] If you are injured or become sick and your attending medical adviser certifies in writing that you are unfit to return your rental vehicle to the nearest depot during your journey, then we will pay up to $500 for the cost of returning your rental vehicle.

5.1.2 WHAT WE EXCLUDE

To the extent permitted by law, we will not pay a claim involving the theft or damage to your rental vehicle if the claim arises directly or indirectly from, or is in any way connected with, or is for:

a] you using the rental vehicle in breach of the rental agreement;

b] you using the rental vehicle without a licence for the purpose that you were using it (such as but not limited to the carrying of passengers or freight); or

c] administrative charges or fees of the rental company that are not a component of the excess, deductible or damage liability fee specified in your rental vehicle agreement.

 SECTION 6.1 - PERSONAL LIABILITY

6.1.1 WHAT WE COVER

If you become legally liable to pay compensation for:

- death or bodily injury to someone else; or
- physical loss of, or damage to, someone else’s property as a result of an accident, or a series of accidents arising out of the one event, that happens during your journey, then we will cover you for:

  - the compensation (including legal costs) awarded against you; and
  - any reasonable legal costs incurred by you for settling or defending a claim made against you, providing you have approval in writing from Allianz Global Assistance before incurring these costs.

We must be told as soon as you or your personal representatives are, or a reasonable person in your circumstances would have been, aware of a possible prosecution, inquest, fatality, accident or incident which might lead to a claim against you.

You must not pay or promise to pay, settle with, admit or deny liability to anyone who makes a claim against you without our written consent.

6.1.2 WHAT WE EXCLUDE

To the extent permitted by law we will not pay any amount you become legally liable to pay if the liability arises directly or indirectly from, or is in any way connected with, or is for:

a] bodily injury to you, your travelling companion or to a relative or employee of any of you;

b] loss of or damage to property belonging to, or in the care, custody or control of you, your travelling companion, a relative or an employee of any of you;

c] your ownership, custody, control or use of any firearm or weapon, aerial device, watercraft or motorised vehicle;

d] your conduct of, or employment in any business, profession, trade or occupation;
e] any loss, damage or expenses which are covered or should have been covered under a statutory or compulsory insurance policy, statutory or compulsory insurance or compensation scheme or fund, or under Workers Compensation legislation, an industrial award or agreement, or Accident Compensation legislation;
f] any fine or penalty, or aggravated, punitive, exemplary or liquidated damages;
g] illness, sickness or disease that is transmitted by you;
h] any relief or recovery other than monetary amounts;
i] a contract that imposes on you a liability which you would not otherwise have;
j] assault and/or battery committed by you or at your direction;
k] any act intended to cause bodily injury, property damage or liability done by you or any person acting with your knowledge, connivance or consent; or
l] your participation in snow sport activities.

SECTION 7.1 - EMERGENCY RESCUE
You only have this cover if you purchased the SNOW PACK. See ADDITIONAL OPTIONS section for details.

7.1.1 ALLIANZ GLOBAL ASSISTANCE WILL ARRANGE
Allianz Global Assistance will arrange for the following assistance services if you injure yourself, or become sick while participating in snow sport activities overseas during your journey provided the relevant injury or sickness is covered by your policy.

a] Access to a medical adviser for emergency medical treatment while overseas;
b] Any messages which need to be passed on to your family or employer in the case of an emergency;
c] Provision of any written guarantees for payment of reasonable expenses for emergency hospitalisation while overseas;
d] Your medical transfer or evacuation if you must be transported to the nearest hospital for emergency medical treatment overseas or be brought back to your home with appropriate medical supervision; and

e] The return to your home of your dependants if they are left without supervision following your hospitalisation or evacuation.

In addition:

f] If you die as a result of an injury or a sickness during your journey, we will pay for your reasonable funeral expenses incurred overseas or the cost of bringing your remains back to your home. The maximum amount we will pay is $15,000 per person.

Please note that we will not pay for any costs incurred in Australia except the reasonable cost of transporting your remains from the inbound port or airport to your home or nominated funeral home.

7.1.2 WHAT WE EXCLUDE
To the extent permitted by law we will not pay:

a] for any expenses for medical evacuation, funeral expenses incurred overseas or bringing your remains back to your home, unless it has been first approved by Allianz Global Assistance;
b] if you decline to promptly follow the medical advice we have obtained, and we will not be responsible for subsequent medical, hospital or evacuation expenses;
c] for medical evacuation or the transportation of your remains from Australia to an overseas country;
d] for any claims arising from ice skating, bobsleighing, snow rafting, para-penting, ski acrobatics, ski or snowboard jumping, aerial skiing, stunting, freestyle, ski joring or any form of power-assisted skiing or use of mechanised snow-mobiles except as provided by the recognised piste authorities for transport to and from areas designed for recreational skiing; or
e] for any claims arising outside the period 15th December to 31st March in Northern Hemisphere resorts, and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for normal skiing activities.

SECTION 7.2 - OWN SNOW SPORT EQUIPMENT
You only have this cover if you purchased the SNOW PACK. See ADDITIONAL OPTIONS section for details.

7.2.1 WHAT WE COVER

a] If, during your journey, your snow sport equipment is stolen, accidentally damaged or is permanently lost (except when: left in a motor vehicle; or while in use) we will pay the lesser of:
   - the repair cost;
   - the replacement cost;
   - the amount it would cost us to repair or replace the item(s) allowing for any trade discounts we are entitled to;
   - the cost of repairing or replacing the lost or damaged part of a pair, set or collection; or
   - the original purchase price.

We have the option to repair or replace the snow sport equipment instead of paying you.

A pair or set of items, for example (but not limited to):
   - a matched or unmatched set of skis or ski poles
are considered as only one item and the appropriate benefit limit will be applied.
b] Snow sport equipment owned by you and left in a motor vehicle is only covered during daylight hours and must have been left in a concealed storage compartment of a locked motor vehicle and in the event of theft, forced entry must have been made. The most we will pay is $200 for each item, and $1,000 in total for all stolen items.

c] No cover is provided for snow sport equipment while it is in use.

7.2.2 WHAT WE EXCLUDE

To the extent permitted by law, we will not pay a claim in relation to snow sport equipment owned by you if:

a] you do not report the loss, theft or damage within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or damage occurred. You must prove that you made such report by providing us with a written statement from whoever you reported it to;

b] the loss, theft or damage is to, or of, snow sport equipment left behind in any hotel or motel room after you have checked out, or snow sport equipment left behind in any aircraft, ship, train, tram, taxi or bus;

c] the snow sport equipment was being sent unaccompanied by you or under a freight contract;

d] the loss or damage arises from any process of cleaning, repair or alteration;

e] the loss or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin;

f] the snow sport equipment was left unsupervised in a public place;

g] you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or damage occurred. However, if you are not reimbursed the full amount of your claim, we will pay the difference between the amount of your claim and what you were reimbursed, up to the limit of your cover;

h] the claim arises from ice skating, bobsleighing, snow rafting, para-penting, ski acrobatics, ski or snowboard jumping, aerial skiing, stunting, freestyle, ski joring or any form of power-assisted skiing or use of mechanised snow-mobiles except as provided by the recognised piste authorities for transport to and from areas designed for recreational skiing.

SECTION 7.3 - SNOW SPORT EQUIPMENT HIRE

You only have this cover if you purchased the SNOW PACK. See the ADDITIONAL OPTIONS section for details.

7.3.1 WHAT WE COVER

If we have agreed to pay a claim:

- under SECTION 7.2 OWN SNOW SPORT EQUIPMENT for loss, theft of, or accidental damage to, your snow sport equipment; or
- following the misdirection or delay of snow sport equipment owned by you, for a period more than 24 hours;

we will reimburse the costs of hiring alternative snow sport equipment.

We will also reimburse the snow sport equipment hire insurance excess if you have chosen and paid for snow sport equipment hire cover from the hire company or agency and you are charged an excess following the loss of, or damage to the snow sport equipment hired by you.

SECTION 7.4 - SNOW SPORT PACK

You only have this cover if you purchased the SNOW PACK. See the ADDITIONAL OPTIONS section for details.

7.4.1 WHAT WE COVER

If, as a result of your injury or sickness during your journey, you are unable to utilise the full duration of your pre-booked and pre-paid ski passes, snow sport equipment hire, tuition fees or lift passes, we will reimburse you the non-refundable cost of the unused portion for each insured person.

You must obtain a medical certificate (for your injury or sickness) from your treating medical adviser in support of your claim.

7.4.2 WHAT WE EXCLUDE

We will not pay;

a] for any claims arising from ice skating, bobsleighing, snow rafting, para-penting, ski acrobatics, ski or snowboard jumping, aerial skiing, stunting, freestyle, ski joring or any form of power-assisted skiing or use of mechanised snow-mobiles except as provided by the recognised piste authorities for transport to and from areas designed for recreational skiing; or

b] for any claims arising outside the period 15th December to 31st March in Northern Hemisphere resorts and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for normal skiing activities.
SECTION 7.5 - PISTE CLOSURE

You only have this cover if you purchased the SNOW PACK. See the ADDITIONAL OPTIONS section for details.

7.5.1 WHAT WE COVER

If, as a result of not enough snow, bad weather or power failure, in your pre-booked holiday resort during the period of your booking, all lift systems in the resort are closed for more than 24 hours preventing you from participating in your planned snow sport activities during your journey, we will pay up to $100 per 24 hour period for either:

- the cost of transport to the nearest resort with open lift systems; or
- the cost of additional ski passes.

7.5.2 WHAT WE EXCLUDE

We will not pay:

a] for any claims relating to resorts that do not have skiing facilities greater than 1,000 metres above sea level; or

b] for any claims arising outside the period 15th December to 31st March in Northern Hemisphere resorts and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for normal skiing activities.

SECTION 7.6 - BAD WEATHER AND AVALANCHE CLOSURE

You only have this cover if you purchased the SNOW PACK. See ADDITIONAL OPTIONS section for details.

7.6.1 WHAT WE COVER

If, as a result of avalanche or bad weather your pre-booked departure is delayed for more than 12 hours from your scheduled departure time, we will pay the reasonable extra travel and accommodation expenses that you need to pay provided you obtain a written statement from the appropriate authority confirming that the reason for the delay was related to either an avalanche or bad weather, and how long the delay lasted.

7.6.2 WHAT WE EXCLUDE

We will not pay:

a] for any claims relating to resorts that do not have skiing facilities greater than 1,000 metres above sea level; or

b] for any claims arising outside the period 15th December to 31st March in Northern Hemisphere resorts and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for normal skiing activities.

SECTION 7.7 - MEDICAL COVER WHILE CRUISING

You only have this cover if you purchased the CRUISE PACK. See the ADDITIONAL OPTIONS section for details.

7.7.1 WHAT WE COVER

a] If you injure yourself or become sick while travelling on a cruise vessel, we will reimburse the reasonable medical or hospital expenses you incur until you get back to Australia. The medical or hospital expenses must have been incurred on the written advice of a medical adviser approved by Allianz Global Assistance. You must make every effort to keep your medical or hospital expenses to a minimum.

If we determine, on medical advice, that you should return home for treatment and you do not agree to do so, we will pay you an amount up to the limit shown in the TABLE OF BENEFITS, which we reasonably consider to be equivalent to:

- your medical expenses and/or related costs incurred overseas to the date we advise you to return to your home; plus
- the amount it would cost us to return you to your home; plus
- the non-refundable portion of unused travel and accommodation arrangements you would have incurred had you followed the advice of Allianz Global Assistance,

you will then be responsible for any ongoing or additional costs relating to or arising out of the event you have claimed for.

We will only pay for treatment received and/or hospital accommodation during the 12 month period after the sickness first showed itself or the injury happened.

b] We will also pay the cost of emergency dental treatment up to the limit shown in the TABLE OF BENEFITS for the Plan selected for dental costs incurred which the treating dentist certifies in writing is for the relief of sudden and acute pain to sound and natural teeth. This limit does not apply to dental costs arising from any injury that is covered under sub-section 7.7.1 a].

7.7.2 WHAT WE EXCLUDE

To the extent permitted by law, we will not pay for expenses:

a] when you have not notified Allianz Global Assistance as soon as practicable of your admittance to hospital;

b] incurred after 2 weeks treatment by a chiropractor, physiotherapist or dentist unless approved by Allianz Global Assistance;

c] if you do not take the advice of Allianz Global Assistance;

d] for damage to dentures, dental prostheses, bridges or crowns;

e] for expenses relating to dental treatment involving the use of precious metals or for cosmetic dentistry;

f] for dental treatment caused by or related to the deterioration and/or decay of teeth; or

g] for preventative dental treatment.
SECTION 7.8 - EVACUATION COVER - SHIP TO SHORE

You only have this cover if you purchased the CRUISE PACK. See ADDITIONAL OPTIONS section for details.

7.8.1 ALLIANZ GLOBAL ASSISTANCE WILL ARRANGE

Allianz Global Assistance will arrange for the following assistance services if you injure yourself, or become sick during travel on a cruise vessel provided the relevant injury or sickness is covered by your policy.

a) Access to a medical adviser for emergency medical treatment;
b) Any messages which need to be passed on to your family or employer in the case of an emergency;
c) Provision of any written guarantees for payment of reasonable expenses for emergency hospitalisation while on a cruise vessel;
d) Your medical transfer or evacuation if you must be transported to the nearest overseas hospital for emergency medical treatment or be brought back to your home with appropriate medical supervision; and

e) The return to your home of your dependants if they are left without supervision following your hospitalisation or evacuation.

In addition:

f) If you die as a result of an injury or a sickness during your travel on a cruise vessel, we will pay for your reasonable funeral expenses incurred overseas and/or the cost of bringing your remains back to your home. The maximum amount we will pay is $15,000 per person.

Please note that we will not pay for any costs incurred in Australia except the reasonable cost of transporting your remains from the inbound port or airport to your home or nominated funeral home.

7.8.2 WHAT WE EXCLUDE

To the extent permitted by law, we will not pay for expenses:

a) for any expenses for medical evacuation, funeral expenses incurred overseas or bringing your remains back to your home unless it has been first approved by Allianz Global Assistance;
b) if you decline to promptly follow the medical advice we have obtained, and we will not be responsible for subsequent medical, hospital or evacuation expenses; or

c) for medical evacuation or the transportation of your remains from Australia to an overseas country.

SECTION 7.9 - CABIN CONFINEMENT

You have this cover if you purchased the CRUISE PACK. See the ADDITIONAL OPTIONS section for details.

7.9.1 WHAT WE COVER

If, as a result of an injury or sickness during your journey, you are confined to your cabin or the cruise vessel’s hospital for a continuous period of more than 48 hours then we will pay you $50 for each day in excess of 48 hours that you continue to be confined.

SECTION 7.10 - PRE-PAID SHORE EXCURSION CANCELLATION

You only have this cover if you purchased the CRUISE PACK. See the ADDITIONAL OPTIONS section for details.

7.10.1 WHAT WE COVER

If you cannot participate in your pre-paid shore excursion(s) due to your confinement in your cabin or in the cruise vessel’s hospital as a result of circumstances outside your control, we will pay you the non-refundable portion of your shore excursion costs paid in advance of cancellation.

SECTION 7.11 - FORMAL CRUISE ATTIRE LOST OR DAMAGED

You only have this cover if you purchased the CRUISE PACK. See the ADDITIONAL OPTIONS section for details.

7.11.1 WHAT WE COVER

a) If, during your journey, your formal wear is stolen, accidentally damaged or is permanently lost we will pay the lesser of:

- the repair cost;
- the replacement cost;
- the amount it would cost us to repair or replace the item(s) allowing for any trade discounts we are entitled to;
- the cost of repairing or replacing the lost or damaged part of a pair, set or collection; or
- the original purchase price.

We have the option to repair or replace the formal wear instead of paying you.

A pair or set of items, for example (but not limited to):

- shoes, gloves, suit

are considered as only one item and the appropriate benefit limit will be applied.
7.11.2 WHAT WE EXCLUDE

To the extent permitted by law, we will not pay a claim in relation to your formal wear if:

a] you do not report the loss, theft or misplacement within 24 hours to the police or an office of the carrier you were travelling on when the loss, theft or misplacement occurred. You must prove that you made such report by providing us with a written statement from whoever you reported it to;

b] the loss, theft or damage is to, or of, formal wear left behind in any hotel or motel room after you have checked out or cruise vessel cabin after you have disembarked, or items left behind in any aircraft, ship, train, tram, taxi or bus;

c] the formal wear was being sent unaccompanied by you or under a freight contract;

d] the loss or damage arises from any process of cleaning, repair or alteration;

e] the loss or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin;

f] the formal wear was left unsupervised in a public place; or

g] you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft, misplacement or damage occurred. However, if you are not reimbursed the full amount of your claim, we will pay the difference between the amount of your loss and what you were reimbursed, up to the limit of your cover.

SECTION 7.12 - FORMAL CRUISE ATTIRE DELAYED

You only have this cover if you purchased the CRUISE PACK. See the ADDITIONAL OPTIONS section for details.

7.12.1 WHAT WE COVER

If your formal wear is delayed, misdirected or misplaced for over 12 hours from the time you boarded the cruise vessel, and it is necessary to purchase or hire replacement formal wear, we will reimburse you, your reasonable expenses.

7.12.2 WHAT WE EXCLUDE

We will not pay if you are entitled to compensation from the bus line, airline, shipping line or rail authority you were travelling on for the relevant amount claimed. However, if you are not reimbursed the full amount, we will pay the difference between the amount of your expenses and what you were reimbursed, up to the limit of your cover.

SECTION 7.13 - MARINE RESCUE DIVERSION

You only have this cover if you purchased the CRUISE PACK. See the ADDITIONAL OPTIONS section for details.

7.13.1 WHAT WE COVER

If during your journey, your cruise vessel diverts from its scheduled course in order to affect a marine rescue in accordance with obligations under international conventions governing the Law of the Sea, and Search and Rescue we will pay you $100 for each day your cruise vessel diverts, up to a maximum of 5 days.
CLAIMS

First check that you are covered by your policy by reading the appropriate section in the PDS and the GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS to see exactly what is, and is not covered, noting particularly any conditions limitations and exclusions.

HOW TO MAKE A CLAIM

You must give Allianz Global Assistance notice of your claim as soon as possible. You can lodge your claim online 24 hours a day or obtain a claim form at www.travelclaims.com.au.

If there is a delay in claim notification, or you do not provide sufficient detail for Allianz Global Assistance to consider your claim, we can reduce any claim payable by the amount of prejudice we have suffered because of the delay.

You must give any information Allianz Global Assistance reasonably asks for to support your claim at your expense, such as but not limited to police reports, valuations, medical reports, original receipts or proof of purchase and ownership. If required they may ask you to provide them with translations into English of any such documents to enable their consideration of your claim.

You must co-operate at all times in relation to providing supporting evidence and such other information that may reasonably be required.

a] If you think that you may have to cancel your journey or shorten your journey you must tell us as soon as possible. Contact Allianz Global Assistance using the contact number, or if overseas the 24 HOUR EMERGENCY ASSISTANCE number, shown on the back cover of this PDS.

b] For medical, hospital or dental claims, contact Allianz Global Assistance as soon as practicable.

c] For loss or theft of your luggage and personal effects, report it immediately to the police and obtain a written notice of your report.

d] For damage or misplacement of your luggage and personal effects, caused by the airline or any other operator or accommodation provider, report the damage or misplacement to an appropriate official and obtain a written report, including any offer of settlement that they may make.

e] Submit full details of any claim in writing within 30 days of your return home.

CLAIMS ARE PAYABLE IN AUSTRALIAN DOLLARS TO YOU

We will pay all claims in Australian dollars. We will pay you unless you tell us to pay someone else. The rate of currency exchange that will apply is the rate at the time you incurred the expense.

Payment will be made by direct credit to an Australian bank account nominated by you.

YOU MUST NOT ADMIT FAULT OR LIABILITY

You must not admit that you are at fault, for any accident, incident or event causing a claim under your policy, and you must not offer or promise to pay any money, or become involved in legal action, without the approval of Allianz Global Assistance.

YOU MUST HELP US TO RECOVER ANY MONEY WE HAVE PAID

If we have a claim against someone in relation to the money we have to pay or we have paid under your policy, you must do everything you can to help us do that in legal proceedings. If you are aware of any third party that you or we may recover money from, you must inform us of such third party.

IF YOU CAN CLAIM FROM ANYONE ELSE, WE WILL ONLY MAKE UP THE DIFFERENCE

If you can make a claim against someone in relation to a loss or expense covered under this policy and they do not pay you the full amount of your claim, we will make up the difference. You must claim from them first.

OTHER INSURANCE

If any loss, damage or liability covered under this policy is covered by another insurance policy, you must give us details. If you make a claim under one insurance policy and you are paid the full amount of your claim, you cannot make a claim under the other policy. If you make a claim under another insurance policy and you are not paid the full amount of your claim, we will make up the difference, up to the amount this policy covers you for, provided your claim is covered by this policy. We may seek contribution to amounts we have paid, or must pay, from your other Insurer. You must give us any information we reasonably ask for to help us make a claim from your other Insurer.
**FRAUD**

Insurance fraud places additional costs on honest policyholders. Fraudulent claims force insurance premiums to rise. We encourage the community to assist in the prevention of insurance fraud.

You can help by reporting insurance fraud by calling Allianz Global Assistance on 1800 453 937. All information will be treated as confidential and protected to the full extent under law.

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**SUBROGATION**

We may, at our discretion undertake in your name and on your behalf, control and settlement of proceedings for our own benefit in your name to recover compensation or secure indemnity from any party in respect of anything covered by this policy. You are to assist and permit to be done, everything required by us for the purpose of recovering compensation or securing indemnity from other parties to which we may become entitled or subrogated, upon us paying your claim under this policy regardless of whether we have yet paid your claim and whether or not the amount we pay you is less than full compensation for your loss. These rights exist regardless of whether your claim is paid under a non-indemnity or an indemnity clause of this policy.

**RECOVERY**

We will apply any money we recover from someone else under a right of subrogation in the following order:

1. To us, our costs (administration and legal) arising from the recovery.
2. To us, an amount equal to the amount that we paid to you under your policy.
3. To you, your uninsured loss (less your excess).
4. To you, your excess.

Once we pay your total loss we will keep all money left over.

If we have paid your total loss and you receive a payment from someone else for that loss or damage, you must pay us the amount of that payment up to the amount of the claim we paid you.

If we pay you for lost or damaged property and you later recover the property or it is replaced by a third party, you must pay us the amount of the claim we paid you.

**HOW GST MAY AFFECT YOUR CLAIM**

If you are entitled to claim an input tax credit in respect of a cost for which a claim is made, or would be entitled to an input tax credit if you were to incur the relevant cost (i.e. in replacing a lost or stolen item), the amount we would otherwise pay will be reduced by the amount of that input tax credit.

If you are entitled to claim an input tax credit in respect of your premium you must inform us of the amount of that input tax credit (as a percentage) at the time you first make a claim. If you fail to do so, you may have a liability for GST if we pay you an amount under your policy.
Travel Insurance

CCI Personal Insurance
GPO Box 180
Melbourne VIC 3001

catholicinsurance.org.au
1300 655 003
join our community

24 hour Emergency Assistance
1800 010 075 (within Australia)
+61 7 3305 7499 (reverse charge from overseas)

Catholic Church Insurance Limited ABN 76 000 005 210, AFS Licence No. 235415 (CCI) arranges personal insurance as promoter of the underwriter Allianz Australia Insurance Limited ABN 15 000 122 850 AFS Licence No. 234708 (Allianz). Travel Insurance is issued and managed by AWP Australia Pty Ltd ABN 52 097 227 177 AFS License No. 245631 trading as Allianz Global Assistance as agent of Allianz.