

Combined
Product
Disclosure
Statement
and
Financial
Services
Guide

Issued by Agile Underwriting Services Pty Limited
ABN 48 607 908 243 — AFSL 483374

Jane

Powered by  Insured
by Us

Pandemic/Epidemic Exclusion

- We will not pay for any claims directly or indirectly related to a Pandemic and/or Epidemic, including but not limited to Coronavirus.
- This policy will also not provide cover for claims relating to the fear or threat of a Pandemic and/or Epidemic, including but not limited to Coronavirus. In the event of a conflict between this general exclusion and any other term in Your policy terms and conditions, this general exclusion takes precedence. This exclusion applies to all sections of the policy with the exception of:
 - Section 1. Overseas medical and hospital expenses, and certain sub-sections of:
 - Section 6. Emergency accommodation expenses
 - Section 7. Cancellation costs as detailed below
 - Section 8. Cutting your trip short

Please make sure you read your policy documentation for full details on what is, and what is not covered in respect of Coronavirus.

Vaccination Requirement

- This insurance policy is only able to provide cover for Coronavirus under the Medical Expenses section and certain sub-sections of the Emergency accommodation expenses section, Cancellation costs section, and the Cutting your trip short section, provided you have received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records.

Testing

There is no cover under this policy for any costs relating to Coronavirus testing, unless You are admitted to hospital as an inpatient as a result of an Accidental Injury or unexpected Illness that is covered under section 1 overseas medical and hospital expenses.

Quarantine and/or self-isolation

There is no cover under this policy if (having no symptoms of or you not testing positive for Coronavirus) you are advised to quarantine or you choose to self-isolate due to a person you have come into contact with testing positive for Coronavirus.

Coronavirus Cover

Coronavirus cover for Medical Expenses—Section 1

Under the Overseas emergency medical and emergency hospital expenses section, We will only cover the associated emergency medical expenses in the event that You fall ill with Coronavirus overseas and the cost of treatment is not covered by any local authority, and, provided you have received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records.

Coronavirus cover for Emergency Accommodation—Section 6

Under Section 6. Emergency accommodation expenses, We will cover You, up to the amount shown in the table of benefits on page 29 for additional accommodation expenses related to Coronavirus in the following circumstances:

1. You cannot return to Australia as You originally planned due to You becoming seriously ill as a result of testing positive for Coronavirus, and, the Medical Emergency Assistance Company agrees Your extended stay is medically necessary.

We will pay for...

1. Your Reasonable extra accommodation costs (room only up to AUD 200 max)
2. Reasonable extra accommodation room only (up to AUD 200 max) for someone to stay with You and travel Home with You if this is necessary due to medical advice;
3. The Reasonable travel and accommodation room only (up to AUD 200 max) expenses for one Close relative or friend to travel from Australia to stay with You and travel Home with You if this is necessary due to medical advice.

Cover is still subject to You having received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records. Coverage hereunder shall also be subject to all other conditions and exclusions within the policy wording.

Coronavirus cover for Cancellation—Section 7

Under Section 7. Cancellation costs, We will only cover Irrecoverable costs related to Coronavirus in the following circumstances:

1. If an Insured person listed on Your policy has an official positive test result for Coronavirus within 14 days of their Trip departure date and after the policy was purchased which medically prohibits their ability to take their holiday, and/or
2. If an Insured person has been admitted to hospital due to testing positive for Coronavirus after the policy was purchased which medically prohibits their ability to take their holiday.

Cover is still subject to You having received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records. Coverage hereunder shall also be subject to all other conditions and exclusions within the policy wording.

Coronavirus cover for Cutting your Trip Short– Section 8

Under Section 8. Cancellation costs We will cover claims relating to Coronavirus for the following:

- Travel and accommodation expenses which You have paid or have agreed to pay under a contract and which You cannot get back.
- The cost of excursions, tours and activities which You have paid for either before You left Australia or those paid for locally upon arrival at Your Trip destination and which You cannot get back.
- Reasonable additional travel costs (economy class unless a higher grade of travel is confirmed as medically necessary and authorised by the Medical Emergency Assistance Company) to return to Australia (or costs to return Home if Your Trip is within Australia) if it is necessary and unavoidable for You to cut short Your Trip.

We will ONLY provide this cover in respect of Coronavirus if the cutting short of Your Trip is deemed medically necessary and unavoidable by a medical professional in the event:

1. You die as a result of testing positive for Coronavirus during Your Trip.
2. You suffer from serious Illness as a result of testing positive for Coronavirus during Your Trip.

Cover is still subject to You having received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records. Coverage hereunder shall also be subject to all other conditions and exclusions within the policy wording.

Please be aware: There is no cover under this section for any claims related to Coronavirus if you must cut your trip short as a result of the death, serious unexpected Illness or Accidental Injury of a Close relative, Business associate, a person who You are travelling with, or who You had planned to stay with during Your Trip.

Change in Government travel advice

Please be aware: We are unable to provide cover for any Coronavirus related claims under any other section of the policy. This includes any government advice 'not to travel 'or preventing travel, if the Australian Department of Foreign Affairs & Trade (DFAT) and/or smartraveller.gov.au has advised against all travel, or against any non–essential travel, or any change in regulation brought about by Coronavirus.

Emergencies

If You need to go to hospital

If You or anyone in Your Travelling party is hospitalised, You or a member of Your Travelling party must contact Our Medical Emergency Assistance Company as soon as it is practical. If You do not do this, We may not pay for any expenses, evacuation or airfares.

We can help You in medical emergencies and with other things like finding local hospitals, or local consulates or embassies, or staying in contact with Your Family.

You can contact Us 24 hours, 7 days a week. Phone: +61 2 9159 6649

You can also find important traveller information on Our Website travelwithjane.com

After You have called Us

The following things may happen:

- We may need to assess Your condition by contacting the hospital You are in to obtain necessary medical reports, and We may need to contact Your general practitioner at Home;
- You will need to follow the instructions of Our Medical Emergency Assistance Company, subject to medical advice, as to where You can be treated to ensure You receive quality medical care;
- We may also consider it necessary to return You to Australia or evacuate You to another country.

If You have a Medical condition but are not hospitalised

If You or a member of Your party listed on Your Certificate of Insurance, becomes ill or suffers an Accidental Injury but does not require hospitalisation or repatriation to Australia, and where the costs are likely to be under AUD\$1,000, You do not need to contact Our Medical Emergency Assistance Company immediately. It may be more convenient to pay the costs Yourself and claim later. Be sure to keep all receipts and obtain copies of any medical reports to submit with Your claim.

Passport stolen, lost or damaged

If Your passport is lost, stolen or damaged, call Our Medical Emergency Assistance Company so We can help You find a local consulate and so We can tell You what You need to make a claim.

Contact Details

We have simplified Our contact points so You can easily get in touch with Us.

FOR ENQUIRIES RELATING TO	PLEASE CONTACT
Policy questions and coverage Any questions, just call or email.	hello@travelwithjane.com
Cancelling your policy You can cancel your policy at any time.	www.travelwithjane.com/change-your-policy/
Making a claim online You can claim directly through our online portal.	www.travelwithjane.com/claims
Making a claim Get in touch straight away and we can help.	www.travelwithjane.com/claims
Making a complaint. If You are not happy... We want to know.	1300 705 031 complaints@agileunderwriting.com

Important contact details

Medical Emergency Assistance Company
 We're here to help 24/7.

+61 2 9159 6649

Online sales and support

hello@travelwithjane.com

Online claims support

www.travelwithjane.com/claims/

Table of contents

Coronavirus Cover	3
Emergencies	5
Contact Details	6
Product Disclosure Statement (PDS)	8
Things You Should Know Before You Buy	13
Making a Claim	17
Pre-Existing Medical Conditions	23
Benefits Table: Limits of What We Cover	29
Your Benefits	31
Additional Options	54
What We Don't Cover at all (general exclusions)	70
Definitions	78
Privacy Policy	83
Financial Services Guide	84

Product Disclosure Statement (PDS)

The purpose of this PDS

This product disclosure statement (PDS) contains important information about the Leisure Travel Insurance Policy (policy). This PDS sets out the benefits, limitations, exclusions and terms and conditions of the policy. It is designed to help You decide if the insurance is right for You. You should read this document carefully before deciding whether to purchase the insurance.

The coverholder

This insurance is issued by Agile Underwriting Services Pty Limited (AGILE) (ABN 48 607 908 243) (AFS licence No. 483374) of Level 5, 63 York St, Sydney NSW 2000 on behalf of the insurer. AGILE is a coverholder acting under an authority from the insurer.

The policy is underwritten by certain underwriters at Lloyd's. When arranging this Policy, AGILE is acting under a binder agreement as an agent of the insurer and not as agent for You or any Insured person. References to 'We', 'Our' and 'Us' in this document means the insurer.

About Lloyd's

Lloyd's is the world's specialist insurance and reinsurance market, bringing together an outstanding concentration of underwriting expertise and talent. Around 80 syndicates underwrite insurance at Lloyd's, covering all classes of business. Together they interact with thousands of brokers daily to create insurance solutions for businesses in over 200 countries and territories around the world.

In Australia, Lloyd's is proud to be a member of the Insurance Council of Australia and strives to comply with the agreement it has made under the General Insurance Code of Practice.

About Your Certificate of Insurance

Your Certificate of Insurance contains important details about Your policy such as the period of insurance, Your premium, what cover options and Excesses will apply, and any changes to the policy wording. It also contains Our contact details and Your policy number, which You'll need to make a claim.

What makes up Your premium

Your premium is the amount You pay to be insured. Your premium is determined by a number of factors which indicate the level of risk We need to cover You for. These factors include where You are going, how long You are going for, how many people are in Your Travelling party and their ages, any Pre-existing Medical Conditions and other benefits the policy gives You. Of course, the higher the risk is, the higher the premium.

Your premium also includes amounts that We are required to pay, such as government charges, taxes or levies (e.g. stamp duty and GST) that apply to Your policy. You will find these amounts on Your Certificate of Insurance.

Check Your documents

It's important that You check all the details on the documents We send You. If You notice an error or if You have a question, please contact Us at www.travelwithjane.com/get-in-touch. If You find You need to change the cover for whatever reason, get in contact with Us. We may be able to modify the policy.

14-day cooling-off period

If for some reason You have changed Your mind about Your policy, You can cancel it within a 14-day cooling-off period. This period starts on the day You are issued with Your Certificate of Insurance.

We will refund Your premium in full as long as:

- Your Trip hasn't started
- You haven't made a claim; and
- You don't want to make a claim or exercise any other right under the policy.

You can also cancel Your policy at any other time, but do be aware that We will not refund any part of Your premium.

Extending Your policy

We can consider policy extensions as long as:

1. You are the correct age for the plan selected;
2. Your health has not changed, or the health of Your traveling companions and/or Dependants has not changed;
3. Your personal circumstances have not changed to an extent that may impact Our decision to continue to insure You, or cause Us to apply any special conditions; and
4. You have not made a claim and You are not aware of a claim that may be made on Your original policy.

The premium for an extension is calculated based on the relevant plans rates at the time of the extension. If We update this PDS, Your extension will operate under the

terms of the PDS in use at the date We process Your extension. We will not grant an extension to a policy where the total Trip duration will exceed 12 months.

If, due to unexpected circumstances beyond Your control, for example, due to unexpected Illness or Accidental Injury or unavoidable delays affecting Your return flight or Public transport, Your Trip cannot be completed within the Period of cover outlined in Your Certificate of Insurance, cover will be extended for You at no extra cost for up to 30 days. This also applies to one person travelling with You who is authorised to stay with You by the Medical Emergency Assistance Company, provided the extension is due to medical reasons.

All requests for more than 30 days must be authorised by us. Please see page 7 for full contact details.

Your duty of disclosure

Before You enter into, vary or extend an insurance contract, You have a duty of disclosure under the *Insurance Contracts Act 1984* and *Insurance Contracts Amendment Act 2013 (Cth)* (2013 Amendment).

When We ask You questions that are relevant to Our decision to insure You and on what terms, You must tell Us anything that You know and that a Reasonable person in the circumstances would include in answering the questions.

When amending or extending Your contract of insurance, We will ask You specific questions about any change in Your circumstances. You must tell Us about any change to something You have previously told us, otherwise You will be taken to have told Us that there is no change.

You have this duty until We agree to insure, amend or extend the contract.

If You do not tell Us anything You are required to tell Us, We may cancel Your contract or reduce the amount We will pay You if You make a claim, or both.

If Your failure to tell Us is fraudulent, We may refuse to pay a claim and treat the contract as if it never existed.

General Insurance Code of Practice

The General Insurance Code of Practice (the Code) outlines certain minimum standards of service that You should expect from insurers that have adopted it. Lloyd's and Travel with Jane proudly support and embrace its objectives of raising the standards of practice and service in the insurance industry. You can obtain a copy of the Code from www.codeofpractice.com.au.

Jurisdiction and choice of law

This policy is governed by and construed in accordance with the law of New South Wales, Australia, and You agree to submit to the exclusive jurisdiction of the courts of New South Wales. You agree that it is Your intention that this “Jurisdiction and choice of law” clause applies.

Updating the PDS

It may be that We will need to update this PDS from time to time. If so, We will send You a new PDS or supplementary PDS. Where the amendment is not material, We may provide the updated information on Our Website.

Things You Should Know Before You Buy

Your medical history affects your cover

The purpose of medical cover in a travel insurance policy is to cover You for an Accidental Injury or an unexpected Illness.

You are only covered for certain Medical Conditions under this policy. It's important that You consider Your medical history carefully. Hospital expenses and other care in foreign countries can be expensive.

If You already have a Medical Condition before You buy the policy, it will only be covered if You meet the criteria for automatically covered conditions shown in this PDS on page 23 and You are not receiving active treatment or investigations.

You may purchase cover for Your Pre-existing Medical Condition as long as You pay the additional premium at the time You buy Your policy.

See Your Pre-existing Medical Conditions on page 23 to know which Medical Conditions are automatically covered in Your policy.

If You experience any change in health between the date Your policy was purchased and the date of travel, You must review Your Pre-existing Medical Conditions on page 23 to make sure Your Medical Conditions are automatically covered by Your policy. If You need emergency medical treatment during Your Trip.

Who can purchase a policy

You can be insured under this policy if:

- You are an Australian citizen, or a holder of a valid Australian permanent residency visa, and You permanently reside in Australia;
- You hold a current Australian Medicare card (that is not a visitor Medicare card);
- You are between the ages of 18 and 69;
- Your Trip begins and ends in Australia;
- You have been in Australia for a minimum of 6 months in the year prior to purchasing Your insurance policy;
- You must be travelling with the intention to return to the Australia within Your Trip dates unless an extension has been agreed with Us and We have confirmed in writing;
- You are not travelling with the intention of receiving medical treatment;
- You are travelling for leisure only—business travel cover can be purchased separately for an additional premium. Please contact Agile for more information.

This is not a private medical insurance policy

This is not a private medical insurance policy and is only designed to cover You for emergency treatment. Your policy is not a private medical insurance policy and does not cover private medical treatment, private hospital costs or other related expenses incurred, unless these have been specifically agreed and authorised by the Medical Emergency Assistance Company as part of a medical emergency covered by this policy.

This policy is only designed to cover You for emergency treatment. Emergency treatment means unforeseen and unplanned treatment that is needed for the sudden onset of an Acute Condition, which for medical reasons and in the opinion of Our Medical Emergency Assistance Company, cannot be delayed until You return to Australia and could be undertaken in Australia if You were to return home (at Your own cost). The decision of the Medical Emergency Assistance Company is final.

An Acute Condition means: A Illness or Injury that is likely to respond quickly to treatment which aims to return You to the state of health you were in immediately before suffering the Illness or Injury, or which leads to Your full recovery.

When your cover starts and ends

You are covered for cancellation benefits as soon as You have paid the premium and We have issued You with a Certificate of Insurance.

Cover for all other benefits starts on the date of departure and ends on Your date of return as shown on Your Certificate of Insurance, or when You return Home, whichever happens first.

Your policy will auto-extend if You are unable to complete Your travel and return Home due to an insured Medical condition. Extended coverage ceases up to the point at which You are medically certified as fit enough to return Home and We complete Your repatriation.

If, due to unexpected circumstances beyond Your control, for example, due to unexpected Illness or Accidental Injury affecting Your return flight or Public transport, Your Trip cannot be completed within the Period of cover outlined in Your Certificate of Insurance, cover will be extended for You at no extra cost for up to 30 days.

This also applies to one person travelling with You who is authorised to stay with You by the Medical Emergency Assistance Company if the extension is due to medical reasons.

All requests for more than 30 days must be authorised by Us. Please see page 7 for full contact details.

Cover for your listed dependants

Your policy covers Your Dependants who are named on Your Certificate of Insurance. However, cover is not available for children who are born, or adopted overseas during Your Trip.

Please be aware: Dependants must be named on Your policy in order to confirm cover. Please ensure all Dependants that You require cover for are declared and listed on Your Certificate of Insurance. Please also refer to Pre-existing Medical Conditions on page 23 and make sure You are familiar with what will and will not be covered.

Coronavirus Cover

Please be aware: We will not pay for any claims directly or indirectly related to a Pandemic and/or Epidemic, including but not limited to Coronavirus.

This policy will also not provide cover for claims relating to the fear or threat of a Pandemic and/or Epidemic, including but not limited to Coronavirus. In the event of a conflict between this general exclusion and any other term in Your policy terms and conditions, this general exclusion takes precedence.

This exclusion applies to all sections of the policy with the exception of Section 1 Overseas medical and hospital expenses, and certain sub-sections under Section 6 Emergency accommodation expenses, Section 7 Cancellation costs and Section 8 Cutting Your Trip Short as detailed below.

Coronavirus cover for Medical Expenses: Under the Overseas medical and hospital expenses section, We will only cover the associated emergency medical expenses in the event that You fall ill with Coronavirus overseas and the cost of treatment is not covered by any local authority, and, provided You have received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records. Cover is still subject to all other conditions and exclusions within the policy wording.

Coronavirus cover for Additional Accommodation expenses: Under Section 6. Emergency accommodation expenses, We will only pay for additional accommodation expenses related to Coronavirus Up to the amount shown in the table of benefits on page 29 if You or and Insured person listed on your policy cannot return to Australia as You originally planned due to You becoming seriously ill as a result of Coronavirus during Your Trip, and, the Medical Emergency Assistance Company agrees Your extended stay is medically necessary.

We will only agree cover if You have received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days

prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records.

Cover is still subject to all other conditions and exclusions within the policy wording.

Coronavirus cover for Cancellation: Under Section 7. Cancellation costs, We will only cover Irrecoverable costs related to Coronavirus in the following circumstances:

- If an Insured person listed on Your policy has an official positive test result for Coronavirus within 14 days of their Trip departure date, and after the policy was purchased which medically prohibits their ability to take their holiday, and/or
- If an Insured person has been admitted to hospital due to testing positive for Coronavirus after the policy was purchased which medically prohibits their ability to take their holiday

Provided You have received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records.

Cover is still subject to all other conditions and exclusions within the policy wording.

Coronavirus cover for Cutting your trip short: Under Section 8 Cutting Your Trip Short, We will only provide cover if the cutting short of Your Trip is deemed medically necessary and unavoidable by a medical professional as a result of Your death, or Your serious Illness and you test positive for Coronavirus during the trip. Provided You have received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records.

Cover is still subject to all other conditions and exclusions within the policy wording.

Change in travel advice due to Coronavirus

Please be aware: We are unable to provide cover for any Coronavirus related claims under any other section of the policy. This includes any government advice 'not to travel' or preventing travel, if the Australian Department of Foreign Affairs & Trade (DFAT) and/ or smartraveller.gov.au has advised against all, or against any non-essential travel, or any change in regulation brought about by Coronavirus.

Making a Claim

Your pre-claim checklist

If something happens either before You travel, or, on Your Trip overseas and You think You may be making a claim on Your policy, You should use this checklist to help You get what You need to support Your claim.

When You submit Your claim, You will be required to tell Us what happened and provide Us with all the documents We ask for.

It is important that You obtain as much documentation as possible at the time of the event as it can be difficult to obtain some documents once You return to Australia.

If the claim relates to medical expenses:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical tests requested and treatment given.
- ✓ Have documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.
- ✓ You have up to 30 days following Your return to Australia to lodge Your claim.

If the claim relates to Trip Cancellation:

- ✓ You will need to provide Us with documents such as Your original booking invoice and receipts, a Trip cancellation invoice, written confirmation from Your airline or travel agent, and unused travel tickets and itineraries, and evidence that You are not entitled to a refund by any other means including credit note.

BE AWARE: This insurance policy will only respond to claims for costs that You are not entitled to recover elsewhere, We refer to these as 'Irrecoverable costs'.

We will only consider claims that:

- ✓ Relate to an insured peril on the policy.
- ✓ Relate to Irrecoverable costs that cannot be compensated elsewhere.

In the event You need to claim on Your policy, You will need to provide Us with evidence demonstrating that You are not entitled to compensation from another source.

Recovering Costs

Please refer to Our guide on the next page, this outlines organisations that are contractually required to offer You a refund provided You meet a certain criteria.

- ✓ Recovering the cost of a package holiday
 - Immediately contact Your travel agent or travel provider to discuss the best option in cancelling or altering Your Trip.
 - Most booking agents will waive cancellation or amendment fees.
 - Some booking agents will offer travel credits to be used within 12 months.

- ✓ Recovering the cost of flights
 - Immediately contact Your airline.
 - Many airlines offer refunds, and some offer to waive cancellation.
 - When You purchase a flight, an airline is responsible for getting You to Your destination.
 - The standard consumer rights apply when You purchase domestic flights and international flights departing Australia or New Zealand.

- ✓ Recovering the cost of accommodation
 - Immediately contact Your accommodation provider directly.
 - Many accommodation providers will offer free cancellations bookings.

- ✓ Recovering the cost of excursions
 - Immediately contact Your tour provider.
 - The standard consumer rights apply when You purchase Your tours and excursions.

- ✓ Recovering the costs of short stay accommodation such as Airbnb
 - Immediately contact Your host or the Parent organisation provider.
 - Refunds on these platforms are often at the discretion of the platform or the host.

If something is lost or stolen:

- ✓ Report it to the local police within 24 hours and get a written report.
- ✓ Report to Your airline or transport provider as soon as possible that they have lost or damaged Your luggage, or that You notice something has been taken from Your bag and get a written report.
- ✓ Report to Your Carrier as soon as possible that they have lost or damaged Your luggage or You notice something has been taken from Your bag and get a written report.
- ✓ Get original receipts, valuations, or other proof of ownership of any items related to the claim.

Do not admit fault or liability

On Your Trip, DO NOT, unless We have approved:

- admit that You are at fault; or
- offer or promise to pay any money; or
- become involved in litigation.

Submitting Your claim

The best way to submit Your claim is via Our online claims system. If You are unable to claim online We can assist You with a downloadable claim form instead.

It is important that You give Us the information We require; if not, We may have to reduce the amount of Your claim or We may not be able to process Your claim at all.

Our online claims system is available at: www.travelwithjane.com/claims.

Claims processing

We want to process Your claim as quickly as We can. To do this, You can help greatly by providing the documentation We need when You submit Your claim. Once We have a completed claims form, and all necessary supporting information, Your claim will be assessed. We will let You know if We need additional information.

Dispute resolution

Lloyd's aim is to provide the highest service to its Australian Policyholders and to this end has developed the following procedures for the fair handling of complaints from Lloyd's Policyholders including Insured persons under this policy.

There are established procedures for dealing with complaints and disputes regarding Your insurance or claim. These are set out below:

STEP	YOUR ACTION	RESPONSE
1	Address your enquiry or complaint relating to this policy or a claim to Proclaim Management Solutions Pty. Ltd (Proclaim) as Lloyd's appointed claims administrator. In most cases, this will resolve your enquiry or complaint.	Proclaim will acknowledge your enquiry or complaint immediately by telephone or e-mail. Proclaim aims to resolve your complaint where possible within five (5) business days.
2	If step 1 does not resolve the matter, or you are not satisfied with the way your enquiry or complaint has been dealt with, you should contact: Lloyd's Australia Limited Level 9, 1 O'Connell Street Sydney NSW 2000	Your dispute will be acknowledged in writing within five (5) working days of receipt, and will be reviewed by a person with appropriate authority to deal with the dispute. The length of time required to resolve your enquiry or complaint will depend on

STEP	YOUR ACTION	RESPONSE
	<p>Telephone: (02) 8298 0783 E mail: idraustralia@lloyds.com Fax: (02) 8298 0788</p> <p>Please call Lloyd's first to discuss your dispute. However, Lloyd's may ask you to confirm the details of your dispute in writing.</p> <p>Depending on the nature of your dispute, you may be referred to an alternative complaints scheme for resolution.</p> <p>When you lodge your dispute with Lloyd's, Lloyd's will usually require the following information:</p> <ul style="list-style-type: none"> • name, address and telephone number of the policyholder • the type of insurance policy involved (household, motor, etc) • details of the policy concerned (policy and/or claim reference numbers, etc) • name and address of the agent through whom the policy was obtained • details of the reasons for lodging the complaint • copies of any supporting documentation you believe may assist Lloyd's in addressing your complaint appropriately. 	<p>the individual issues raised, however in most cases you will receive a full written response to your complaint dispute within fifteen (15) working days of receipt.</p> <p>If your dispute cannot be finalised within that time, Lloyd's will continue to work on it and Lloyd's will regularly advise you of its progress.</p> <p>Lloyd's investigation will include discussions with the various parties involved and a review of all papers and documentation relating to the dispute.</p>
3	<p>If your dispute is not resolved in a manner satisfactory to you, Lloyd's will then provide you with details about the Australian Financial Complaints Authority (AFCA), which is an independent body that operates nationally in Australia and aims to resolve disputes between policyholders and their insurers. This service is free of charge to you.</p> <p>Disputes relating to domestic and some small business general insurance policies can be reviewed under AFCA if they remain unresolved following the procedures outlined above.</p> <p>Retail clients not eligible for referral to the AFCA, and wholesale clients, may be eligible for referral to the Financial Ombudsman Service (UK). Such referral must occur within six months of the final decision by Complaints at Lloyd's. Further details will be provided by the Complaints Department with their final decision to you.</p>	<p>You must refer the matter to the AFCA within 24 months of the date of Lloyd's written decision.</p> <p>AFCA's contact details are as follows:</p> <p>Website: www.afca.org.au</p> <p>Email: info@afca.org.au</p> <p>Telephone: 1800 931 678 (free call)</p> <p>In writing to: Australian Financial Complaints Authority, GPO Box 3, Melbourne VIC 3001</p>

What currency we pay claims in

We will pay all claims in Australian dollars (AUD). We will use the rate of currency exchange applying at the time You incurred the expense.

Help us recover anything we have paid

You must do everything You can to help Us recover any money We pay relating to Your claim. You are required to let Us know if You become aware of a third party from whom We can recover money.

Depreciation

If You make a claim, be aware that We will apply depreciation to claims for luggage and personal effects unless they are listed as valuable items on Your Certificate of Insurance. We calculate the rate of depreciation by taking things into account like wear and tear, the items usual lifespan and the items market value.

We may need to contact other parties

We may, at Our discretion, undertake in Your name and on Your behalf, proceedings for Our own benefit to recover compensation or secure indemnity from any party relating to anything covered by this policy.

You are to assist and permit to be done all acts and things as 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. This applies regardless of 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.

Subrogation following recovery of monies

If We recover money from someone else, We reserve the right to apply the money in the following order:

1. Firstly to Us, for Our administration and legal costs as a result of the recovery;
2. Secondly to Us, the amount that We paid to You under the policy;
3. Thirdly to You, the amount of Your uninsured loss (less Your Excess);
4. Fourthly to You to cover Your Excess.

If We pay Your total loss, any unpaid monies will return to Us. If You receive a payment from another party for anything that We have paid You, You must pay Us the amount of that payment up to the amount of the claim We paid You. If You recover any property that was part of this claim, You must pay Us the amount of the claim We paid You.

Other insurance

If any loss, damage or liability covered under Your policy is covered under another insurance policy, You must give Us details of such insurance. Where You would be covered under this policy for the relevant loss, damage or liability but another policy under which You are the contracting insured also covers (all or part of) the relevant loss, damage or liability, You can choose which policy to claim under.

Where You would be covered under Your policy for the relevant loss, damage or liability but another policy covers You for all or part of the relevant damage, if You are not a contracting party under the other policy but have a right to claim under the other policy by operation of section 48 of the *Insurance Contracts Act 1984* (CT) or otherwise, We will not pay Your claim to the extent Your loss, damage or liability is covered by the other policy.

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 (or if another insurance policy does not cover the loss, damage or liability) and You are not paid the full amount of Your claim, We will make up the difference where covered by Our policy. We may seek contribution from Your other insurer. You must give Us any information or assistance We reasonably ask for to help Us make a claim from Your other insurer.

Can you claim an input tax credit?

If You are entitled to claim an input tax credit on the premiums You pay, You must let Us know of the amount of that input tax credit (as a percentage) when You first make a claim. If You don't, You may receive a GST liability.

Pre-Existing Medical Conditions

While this insurance policy is designed to cover only unforeseen medical events, We will insure certain Medical Conditions that You know about before You purchase Your policy. We refer to these as “Pre-existing Medical Conditions.” Cover for Pre-existing Medical Conditions may be automatic (see page 25). If not listed for automatic coverage, You may seek additional cover for Pre-existing Medical Conditions from Us, and if We agree, such cover will be shown on Your Certificate of Insurance after payment of an additional premium.

What is a pre-existing medical condition?

A Pre-Existing Medical Condition is:

- pregnancy;
- a Medical Condition where You are aware of the symptoms, or a related Complication You know about;
- a medical or dental condition where You have received, or are waiting for, medical treatment;
- any condition for which You take prescribed medicine;
- any condition for which You have received surgery or attended hospital;
- any condition for which You have received, or are waiting for, tests, investigations or consultation with a medical specialist;
- any condition for which You have received or been advised to attend a follow-up consultation; or
- any Chronic or ongoing Medical Condition or terminal Illness.

This definition applies to You, Your travelling companion, a Close relative, or any other person.

Getting cover for your pre-existing medical condition

There are four things you need to consider relating to Pre-existing Medical Conditions:

- pregnancy;
- Medical Conditions that are automatically covered;
- Medical Conditions that are not covered;
- any other Medical Condition We don't list.

Pregnancy

This section shows You what You are covered for relating to medical expenses, cancellation costs or additional expenses related to pregnancy under the following policy sections:

- Overseas medical and hospital expenses;
- Overseas dental expenses;
- Cancellation costs;
- Emergency medical transport & repatriation expenses;
- Out of pocket expenses when hospitalised.

However, We will not pay medical expenses for:

- regular care following the birth;
- childbirth, regardless of the stage of pregnancy;
- newborn care;
- repatriation of child.

You are not covered under this section if You are undergoing fertility treatment and are not pregnant, now or before Your Trip commences, for any treatment or any resulting pregnancy. The following table explains what cover You can get based on Your stage of pregnancy.

PREGNANCY CONDITIONS		
IF YOU...	THAT...	THEN...
have a single pregnancy without Complications*	did not arise from an assisted reproduction program including in vitro fertilisation	We will cover You under all plans for Trips ending on or before the 26 th week of Your pregnancy
	arises from an assisted reproduction program including in vitro fertilisation	We will cover you if You pay an additional premium under Getting cover for your pre-existing medical condition p.23 for Trips ending on or before the 26 th week of Your pregnancy
have a pregnancy with twins without Complications *	did not arise from an assisted reproduction program including in vitro fertilisation	We will cover You if You pay an additional premium under Getting cover for your Pre-Existing Medical Condition for a Trip ending on or before the 19 th week of Your pregnancy
	arises from an assisted reproduction program including in vitro fertilisation	We will not cover You under any plan
have experienced any pregnancy Complications * before the policy is issued		We will not cover You under any plan

Cover Is subject to the insuring clauses and policy exclusions, refer to pages 70–78 of this PDS.

For example, We will not pay any claim if You travel even though You know You are travelling against medical advice; You are unfit to travel; You are travelling to receive medical treatment; or You arrange to travel when You know that there are circumstances that could lead to the Trip being disrupted or cancelled.

*Complications are defined as “any secondary diagnosis occurring prior to, during the course of, concurrent with, or as a result of the pregnancy, which may adversely affect the pregnancy outcome.”

Pre-existing medical conditions we cover automatically (with some restrictions)

We will cover You automatically for a Pre-Existing Condition listed below, as long as You have not been hospitalised for the condition within the last two years.

- acne;
- allergies, limited to rhinitis, Chronic sinusitis, eczema, food intolerance, hay fever;
- Bell’s palsy;
- benign positional vertigo;
- bunions;
- carpal tunnel syndrome;
- cataracts;
- coeliac disease;
- congenital blindness;
- congenital deafness;
- *diabetes mellitus (type I) – providing You:
 - were diagnosed over 12 months ago; and have no eye, kidney, nerve or vascular complications;and
 - do not also suffer from a known cardiovascular disease, hypertension, hyperlipidaemia or hypercholesterolaemia; and
 - are under 50 years of age at the date of policy purchase.
- *diabetes mellitus (type II) – providing you:
 - were diagnosed over 12 months ago; and have no eye, kidney, nerve or vascular Complications;and
 - do not also suffer from a known cardiovascular disease, hypertension, hyperlipidaemia or hypercholesterolaemia.
- dry eye syndrome;
- epilepsy – providing there has been no change to Your medication regime in the past 12 months;
- folate deficiency;
- gastric reflux;
- goitre;
- glaucoma;
- graves’ disease;
- hiatus hernia;

- *hypercholesterolaemia (high cholesterol) – provided You do not also suffer from a known cardiovascular disease and/or diabetes;
- *hyperlipidaemia (high blood lipids) - provided You do not also suffer from a known cardiovascular disease and/or diabetes;
- *hypertension (high blood pressure) – provided You do not also suffer from a known cardiovascular disease and/ or diabetes;
- hypothyroidism, including Hashimoto’s disease;
- impaired glucose tolerance;
- incontinence;
- insulin resistance;
- iron deficiency anaemia;
- macular degeneration;
- Meniere’s disease;
- migraine;
- nocturnal cramps;
- osteopaenia;
- osteoporosis;
- pernicious anaemia;
- plantar fasciitis;
- Raynaud’s disease;
- sleep apnoea;
- solar keratosis;
- trigeminal neuralgia;
- trigger finger;
- vitamin B12 deficiency;

** Diabetes (type I and type II), hypertension, hypercholesterolaemia and hyperlipidaemia are risk factors for cardiovascular disease. If You have a history of cardiovascular disease, and it is a Pre-Existing Medical Condition, cover for these conditions is also excluded.*

If You have been hospitalised for one of these conditions in the last two years, You may declare Your Medical Condition and purchase cover for Your Pre-Existing Medical Condition and pay the additional premium when You purchase Your policy.

Pre-existing medical conditions we do not cover

We do not offer cover for the following Pre-Existing Medical Conditions if You:

- have a condition where You plan to have surgery or other medical treatment, including any fertility treatment;
- have a condition that arises from signs or symptoms that You are currently aware of, but:
 - You have not yet sought a medical opinion regarding the cause; or
 - You are currently under investigation to define a diagnosis; or
 - You are awaiting specialist opinion.
- have any form of cancer that You have previously been diagnosed with, or secondaries from that cancer;

- have a condition for which You have needed to go to hospital in the last two years unless you purchase cover for your pre-existing medical condition and you pay the additional premium when you purchase your policy;
- have a condition for which You have ever required spinal or brain surgery;
- have a condition that has caused a seizure in the past 12 months;
- have a Chronic or recurring pain (including back pain) requiring regular medication or other ongoing treatment such as physiotherapy or chiropractic treatment;
- have a condition that requires ongoing treatment with immunosuppressant therapy (e.g. arthritis, colitis, chronic respiratory disease);
- have an HIV infection;
- have a mental illness as defined by DSM-IV including:
 - dementia, depression, anxiety, stress or other nervous condition; or
 - behavioural diagnoses such as but not limited to autism; or
 - a therapeutic or illicit drug or alcohol addiction.
- have a new deep vein thrombosis (DVT) or pulmonary embolism (PE) if You have been diagnosed with one of these clots in the past and do not take preventative measures (as prescribed by a medical practitioner) for this Trip;
- have a heart or cardiovascular disease (CVD) if You have ever needed to see a specialist cardiologist, or been diagnosed with a form of CVD such as (but not limited to):
 - aneurysms;
 - angina (chest pain);
 - cardiomyopathy;
 - cerebrovascular accident (stroke);
 - disturbances in heart rhythm (cardiac arrhythmias);
 - previous heart surgery (including valve replacements, bypass surgery, stents);
 - myocardial infarction (heart attack);
 - transient ischaemic attack (TIA);
 - any history of any form of cardiovascular disease;
- have a chronic lung disease, its exacerbation, or new airways infections, if You have ever been diagnosed with a Chronic lung disease including:
 - emphysema;
 - Chronic bronchitis;
 - bronchiectasis;
 - Chronic Obstructive Airways Disease (COAD);
 - Chronic Obstructive Pulmonary Disease (COPD);
 - pulmonary fibrosis, or
 - asthma (in persons over 60 years of age).
- “Immunosuppressive therapy” means drugs prescribed to inhibit or prevent activity of the immune system. Clinically, they are used to:
 - prevent the rejection of transplanted organs and tissues (e.g. bone marrow, heart, kidney, liver);
 - treat autoimmune diseases or diseases that are most likely of autoimmune origin (e.g. rheumatoid arthritis, myasthenia gravis, systemic lupus erythematosus, Crohn’s disease and ulcerative colitis);

- treat some other non-autoimmune inflammatory diseases (e.g. long term allergic asthma control and other respiratory diseases).

Circumstances we do not cover

We do not offer cover where the following circumstances give rise to Your claim:

- You have been given the prognosis that You have a terminal Illness with a life expectancy of under 24 months.
- You will require oxygen for the Trip or You require oxygen therapy at Home.
- You have chronic renal failure treated by haemodialysis or peritoneal dialysis.
- You have been diagnosed with congestive heart failure.
- You have an AIDS-defining Illness or any condition associated with immunocompromise.
- You have had, or are on a waiting list for, an organ transplant.
- You take a blood-thinning prescription medication such as Warfarin (also known under the brand names Coumadin, Jantoven, Marevan, and Waran).

All other medical conditions not listed

Provided Your Pre-existing Medical condition has not been listed earlier, You may purchase cover for Your Pre-existing Medical condition provided You pay the additional premium when You purchase Your policy.

Benefits Table: Limits of What We Cover

This table shows the limits that apply to each of Your policy benefits.

For more detail and a full explanation of what is not covered under each benefit please refer to the page number in the table below.

NAME OF POLICY SELECTED AND SHOWN ON YOUR CERTIFICATE OF INSURANCE				
BENEFIT	SAVER	BASIC	COMPRE-HENSIVE	DOMESTIC
Excess	\$100	\$100	\$100	\$100
1. Overseas medical and hospital expenses (Page 32)	Unlimited	Unlimited	Unlimited	X
2. Overseas dental expenses (Page 34)	\$500	\$2,000	\$2,000	X
3. Cash in hospital (Page 35) (per day/Maximum)	\$100/ \$1,500	\$150/ \$3,500	\$200/ \$6,000	X
4. Emergency repatriation expenses (Page 36)	\$100,000	\$500,000	Unlimited	X
5. Overseas funeral expenses (Page 37)	\$10,000 per person	\$15,000 per person	\$20,000 per person	X
6. Emergency accommodation expenses* (Page 38)	\$2,000	\$5,000	\$6,000	\$2,000
7. Cancellation costs (Page 39)	X	\$5,000	\$15,000	\$10,000
8. Cutting Your Trip Short (Page 43)	X	\$2,500	\$8,000	\$5,000
9. Travel delay expenses* (Page 45)	X	\$1,500	\$3,000	\$1,500
10. Airfares for resumption of travel (Page 46)	X	\$1,500	\$3,000	X
11a. Personal belongings and Baggage (not including Personal Electronics/Gadgets) (Page 47)	X	\$1,500	\$6,000	\$3,000
11b. Personal Money (Page 49)	X	\$300	\$1,000	\$1,000
11c. Passport, Travel tickets, travel documents and driving licence (Page 50)	X	\$2,500	\$6,000	X
12. Legal liability (Page 51)	\$1,000,000	\$1,500,000	\$3,000,000	\$1,000,000
13. Legal Costs (Page 52) (per day/maximum)	X	\$500 / \$12,000	\$1,000 / \$25,000	X

*Sub-limits apply to this benefit and can be found in the relevant sections below.

Activities Automatically Covered under Your Policy

The table below lists activities that are automatically covered under all sections of Your policy with the exception of Section 12 Legal liability (page 51).

If You require cover for an activity that is not listed below, please check eligibility under our activities pack on page 54 and purchase the appropriate cover for an additional premium, or contact us to see if You are covered in advance of Your Trip on contact details displayed on page 7.

- Aerobics
- Angling (except Deep Sea)
- Archery
- Athletics - Track & field
- Badminton
- Baseball
- Basketball
- Beach Games
- Billiards
- Bird Watching
- Bowling
- Bowls
- Camel/Elephant Riding
- Camping
- Cricket
- Croquet
- Cross Country Running
- Curling
- Cycling
- Dancing
- Diving (indoor up to 5 metres)
- Elephant Trekking (Australia booked)
- Fell Walking
- Flag football
- Football
- Fresh Water/Sea Fishing (except Deep sea)
- Frisbee
- Fruit or Vegetable Picking
- Glass Bottom Boats
- Go Karting
- Golf
- Gymnastics
- Handball
- Highland games
- Hiking/Trekking/Walking up to 3,000m
- Horse Riding (except jumping or eventing)
- Ice Skating
- Jet Boating (as passenger on organised Trip with tour operator. No racing)
- Jet Skiing
- Jogging
- Judo (training only)
- Karate (training only)
- Karting
- Keepfit
- Kendo (training only)
- Kiting
- Korfball
- Lacrosse
- Land Yachting
- Low Ropes
- Martial Arts (training Only)
- Model Flying
- Model sports
- Motorcycling (on road wearing a helmet provided You hold an appropriate Australian licence for the capacity of the motorcycle You are riding). No cover off road.
- Mountain Biking (not downhill)
- Netball
- Octopush
- Orienteering
- Pedaloos
- Petanque
- Pigeon racing
- Pony Trekking
- Pool
- Ringos
- River Walking
- Roller Blading
- Roller skating
- Rounders
- Rowing
- Running, Sprint/Long Distance
- Safari (Non Australia Organised)
- Safari (Australia Organised)
- Safari Trekking
- Sail Boarding
- Sailing/Yachting inshore (recreational)
- Scuba Diving to 30m (with either recognised school and their qualified instructor or if You are qualified and not diving alone)
- Sea Fishing
- Sea Kayaking as a beach activity (subject to not kayaking alone, must wear a life jacket and be within sight of the shore)
- Sledging/Tobogganing
- Sleigh riding (reindeer, horses or dogs)
- Snooker
- Snorkelling
- Softball
- Squash
- Stoolball
- Stoopball
- Quoits
- Rackets
- Racquet Ball
- Rafting (grade 1 rivers only)
- Rambling
- Rap Running/Jumping
- Refereeing (amateur only and subject to that sport being covered)
- Rifle Range
- Street Hockey
- Summer Tobogganing
- Swim Trekking
- Swimming
- Swimming Open Water (organised and subject to boat escort e.g. swim trek. No cover for across Channel etc...)
- Swimming with Dolphins
- Sydney Harbour Bridge
- Table Tennis
- Tae Kwon Do (training only)
- Ten Pin Bowling
- Tennis
- Trampoline
- Tug of War
- Volleyball
- Wake Boarding
- Water Polo
- Water Skiing
- Whale Watching
- Windsurfing
- Working
- Yachting (inland and coastal waters)
- Yoga

Your Benefits

1. Overseas medical and hospital expenses
2. Overseas dental expenses
3. Cash in hospital
4. Emergency repatriation expenses
5. Overseas funeral expenses
6. Emergency accommodation expenses
7. Cancellation costs
8. Cutting Your Trip Short
9. Travel delay expenses
10. Airfares for resumption of travel
- 11a. Personal belongings and Baggage (not including Personal Electronics/Gadgets)
- 11b. Personal Money
- 11c. Passport, Travel tickets, travel documents and driving licence
11. Legal liability
12. Legal Costs

1. Overseas medical and hospital expenses

What You are covered for under section 1

You are covered...

Up to the amount shown in the table of benefits on page 29, for the necessary and Reasonable costs of emergency medical, surgical, and hospital treatment required in the event You suffer an unexpected Illness, contract Coronavirus, or, suffer a Serious Accidental Injury on Your Trip.

What You are not covered for under section 1

You are not covered for...

- Any costs relating to Coronavirus testing, unless You are admitted to hospital as an inpatient as a result of an Accidental Injury or unexpected Illness that is covered under section 1 overseas medical and hospital expenses.
- Any medical treatment relating to Coronavirus if You have not received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records.
- The Excess as shown in the table of benefits for each Insured person and for each incident.
- Any medical treatment that You receive because of a Medical condition or an Illness related to a Medical condition which You knew about at the time of purchasing this insurance and/or at the time of commencing travel and which could reasonably be expected to lead to a claim unless it is listed within Pre-existing Medical Conditions We cover automatically on page 25, or cover was confirmed in writing by Us.
- Any treatment or surgery which the Medical Emergency Assistance Company thinks is not immediately necessary and can wait until You return to Australia. The decision of the Medical Emergency Assistance Company is final.
- Any treatment or surgery which in the opinion of Our Medical Emergency Assistance company is considered to be cosmetic, experimental or elective.
- any treatment or surgery carried out in Australia.
- Any treatment or surgery carried out more than 12 months after the expiry of this insurance.
- Inpatient or private treatment which has not been notified as soon as possible and agreed by Us or the Medical Emergency Assistance Company.
- The extra cost of a single or private hospital room unless this is medically necessary and authorised by the Medical Emergency Assistance Company.
- Treatment in a private hospital or private clinic where suitable state facilities are available.
- Treatment in a private hospital or private clinic unless authorised and agreed by Us.
- Any search and rescue costs (costs charged to You by a government, regulated authority or private organisation connected with finding and

rescuing You. This does not include medical evacuation costs by the most appropriate transport).

- Any costs for the following:
 - telephone calls (other than the first call to the Medical Emergency Assistance Company to notify them of the medical problem);
 - taxi fares (unless a taxi is being used in place of an ambulance to take You to or from a hospital); or
 - Food and drink expenses (unless these form part of Your hospital costs if You are kept as an inpatient).
- Any costs You have to pay if You have refused to come back to Australia and the Medical Emergency Assistance Company considered You were fit to return Home.
- If You suffer an Injury or die as a result of a winter sports activity and You have not purchased the additional Snow Pack cover.
- Any costs Incurred after a 12-month period from the date when the unexpected Illness first presented or the Accidental Injury happened.
- Any treatment or surgery carried out more than 12 months after the expiry of this insurance whichever sooner.
- Any cost of treatment if there is evidence that You are travelling to receive medical treatment.
- If You received private hospital or medical treatment where public-funded services or care was available in Australia or under any reciprocal health care agreement between the Government of Australia and the government of any other country.
- If Your claim arises out of pregnancy or related Complications after 26 weeks of pregnancy in the case of a single baby or after 19 weeks of pregnancy in the case of twins.
- *Note for expectant mothers:* You should consider whether You should travel under this policy; cover is not provided for childbirth or the health of a newborn child, irrespective of when the child is born.
- If You neglect to observe appropriate preventative health measures for the region You are travelling to, including relevant vaccinations and hygiene measures. See www.who.int for further information.
- Any claim arising from You acting in a way which goes against the advice of a Doctor, or You travelling against the advice of Doctor or where You would have been if You had sought their advice before beginning Your Trip.
- Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical tests requested and treatment given.
- ✓ Have documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.
- ✓ You have up to 30 days following Your return to Australia to lodge Your claim.

2. Overseas dental expenses

What You are covered for under section 2

You are covered...

Up to the amount shown in the table of benefits on page 29, the necessary and Reasonable costs of emergency dental treatment You receive overseas.

Please Be Aware: the treating dentist must certify in writing that the treatment is required only for the relief of sudden and acute onset of pain to healthy, natural teeth, which are teeth that are whole or properly restored (with fillings only).

What You are not covered for under section 2

You are not covered for...

- The Excess as shown in the table of benefits for each Insured person and for each incident.
- Any dental treatment that is not specifically for the relief of sudden and acute onset of pain to healthy, natural teeth, which are teeth that are whole or properly restored (with fillings only).
- Any damage to Dentures.
- Any cost incurred in Australia.
- Any dental treatment which the Medical Emergency Assistance Company thinks is not immediately necessary and can wait until You return to Australia. The decision of the Medical Emergency Assistance Company is final.
- Any cost of treatment if there is evidence that You are travelling to receive dental treatment.
- Any cost of dental treatment for cosmetic dentistry, cosmetic surgery or involving the use of precious metals.
- Any dental treatment which has not been notified as soon as possible and agreed by Us or the Medical Emergency Assistance Company.
- Anything mentioned in 'General exclusions' on pages 70–66

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical tests requested and treatment given.
- ✓ Have documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.
- ✓ You have up to 30 days following Your return to Australia to lodge Your claim.

3. Cash in hospital

What You are covered for under section 3

You are covered...

Up to the maximum limits stated in table of benefits on page 29, for each 24-hour period You are in hospital if You are hospitalised overseas while on Your Trip for more than 48 hours.

What You are not covered for under section 3

You are not covered for...

- Any hospitalisation due to a Medical condition or an unexpected Illness related to a Medical condition which You knew about at the time of purchasing this insurance and / or at the time of commencing travel and which could reasonably be expected to lead to a claim unless it is listed within Pre-existing Medical Conditions We cover automatically, or cover was confirmed in writing by Us.
- Any hospitalisation which the Medical Emergency Assistance Company thinks is not immediately necessary and can wait until You return to Australia. The decision of the Medical Emergency Assistance Company is final.
- Any hospitalisation which in the opinion of Our Medical Emergency Assistance Company is considered to be cosmetic, experimental or elective.
- Any hospitalisation in Australia.
- Any hospitalisation if You have refused to come back to Australia and the Medical Emergency Assistance Company considered You were fit to return Home.
- Any hospitalisation and You are injured as a result of a winter sports activity and You have not purchased the additional winter sports cover.
- Any hospitalisation in a private hospital or private clinic unless authorised and agreed by Us.
- Any hospitalisation if there is evidence that You are travelling to receive medical treatment.
- Any hospitalisation if Your claim arises out of pregnancy or related Complications after 26 weeks of pregnancy in the case of a single baby or after 19 week of pregnancy in the case of twins.
- *Note for expectant mothers:* You should consider whether You should travel under this policy; cover is not provided for childbirth or the health of a newborn child, irrespective of when the child is born.
- Any hospitalisation due to You neglecting to observe appropriate preventative health measures for the region You are travelling to, including relevant vaccinations and hygiene measures. See www.who.int for further information.
- Any hospitalisation as a result of You acting in a way which goes against the advice of a Doctor, or You travelling against the advice of Doctor, or where You would have been travelling against the advice of Doctor if You had sought their advice before beginning Your Trip.
- Any hospitalisation for less than a 48 hour period.
- Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical tests requested and treatment given.
- ✓ Have documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.
- ✓ You have up to 30 days following Your return to Australia to lodge Your claim.

4. Emergency repatriation expenses

Important notice: You must contact the Medical Emergency Assistance Company immediately for approval in the event repatriation to Australia is medically necessary (please see contact details on page 7).

What You are covered for under section 4:

You are covered...

Up to the amount shown in the table of benefits on page 29 for the cost of Your return to Australia earlier than planned due to You becoming seriously ill or being injured. We will only provide cover if Your return is approved by the Medical Emergency Assistance Company, and It is deemed to be a medical necessity.

Please be Aware: the event of Your Accidental Injury or unexpected Illness We reserve the right to arrange for Your repatriation to Australia at any time during the Trip. We will do this if in the opinion of the Doctor in attendance or the Medical Emergency Assistance Company You can be moved safely and/or travel safely to Australia to continue treatment.

What You are not covered for under section 4

You are not covered for...

- The Excess as shown in the table of benefits for each Insured person and for each incident.
- Any costs relating to a Medical condition which You knew about at the time of purchasing this insurance and/or at the time of commencing travel and which could reasonably be expected to lead to a claim unless it is listed within Pre-existing Medical Conditions (page 23) We cover automatically, or cover was confirmed in writing by Us.
- Any claims arising directly or indirectly from Coronavirus.
- Any claims where the Medical Emergency Assistance Company have not been contacted to authorise Your early return back to Australia.
- Any search and rescue costs (costs charged to You by a government, regulated authority or private organisation connected with finding and

rescuing You. This does not include medical evacuation costs by the most appropriate transport).

- Any costs as a result of a winter sports activity and You have not purchased the additional winter sports cover.
- Any costs Incurred after a 12-month period from the date when the unexpected Illness first presented or the Accidental Injury happened.
- You neglect to observe appropriate preventative health measures for the region You are travelling to, including relevant vaccinations and hygiene measures.

See www.who.int for further information.

- Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical reason for repatriation.
- ✓ Have any documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.

5. Overseas funeral expenses

What You are covered for under section 5

You are covered...

In the event You die while overseas on Your Trip, We will pay You up to the amount shown in the table of benefits on page 29, for the cost of:

- Your burial or;
- Your cremation overseas or;
- The cost of transporting Your remains to Australia

What You are not covered for under section 5

You are not covered...

- For costs relating to funeral expenses in Australia.
- If You die as a result of a Pre-existing Medical condition (as defined under Definitions p.81) unless We have assessed and accepted Your condition and You have paid an additional premium).
- If You die as a result of an Accident that occurs while on the ski slopes unless You purchased additional coverage for approved winter sports activities under Our Snow Pack.
- If You die as a result of You intentionally injuring Yourself.
- Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical cause of death.
- ✓ Have any documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.

6. Emergency accommodation expenses

What You are covered for under section 6

You are covered...

Up to the amount shown in the table of benefits on page 29 if You cannot return to Australia as You originally planned due to You becoming seriously ill, testing positive for Coronavirus, or being injured, and, the Medical Emergency Assistance Company agrees Your extended stay is medically necessary.

We will pay for...

- Your Reasonable extra accommodation costs (room only max AUD200 per night)
- Reasonable extra accommodation (room only max AUD 200 per night) for someone to stay with You and travel Home with You if this is necessary due to medical advice;
- The Reasonable travel and accommodation (room only max AUD200 per night) expenses for one Close relative or friend to travel from Australia to stay with You and travel Home with You if this is necessary due to medical advice.

What You are not covered for under section 6

You are not covered for...

- The Excess as shown in the table of benefits for each Insured person and for each incident.
- Any costs relating to a Medical condition which You knew about at the time of purchasing this insurance and/or at the time of commencing travel and which could reasonably be expected to lead to a claim unless It is listed within Pre-existing Medical Conditions We cover automatically, or cover was confirmed in writing by Us.
- Any claims arising directly or indirectly from Coronavirus if You are advised to quarantine or You chose to self-isolate due to a person You have come into contact with testing positive for Coronavirus.
- Any claims where the Medical Emergency Assistance Company have not been contacted to pre-authorise.

- Any costs for the following:
 - telephone calls (other than the first call to the Medical Emergency Assistance Company to notify them of the medical problem);
 - taxi fares (unless a taxi is being used in place of an ambulance to take You to or from a hospital); or
 - Food and drink expenses (unless these form part of Your hospital costs if You are kept as an inpatient).
- Any costs You have to pay if You have refused to come back to Australia and the Medical Emergency Assistance Company considered You were fit to return Home.
- Any costs as a result of a winter sports activity and You have not purchased the additional winter sports cover.
- Any costs Incurred after a 12-month period from the date when the unexpected Illness first presented or the Accidental Injury happened.
- You neglect to observe appropriate preventative health measures for the region You are travelling to, including relevant vaccinations and hygiene measures.
See www.who.int for further information.
- We will not pay for additional transport and accommodation expenses when a claim is made under section 7 Cancellation costs p. 39.
- these benefits will be payable for up to 3 months from the date that Your Trip was interrupted.
- Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical reason for extending Your stay.
- ✓ Have any documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.

7. Cancellation costs

What You are covered for under section 7

You are covered...

Up to the amount shown in the table of benefits on page 29 for:

- travel and accommodation expenses which You have paid or have agreed to pay under a contract and which You cannot get back.
- the cost of excursions, tours and activities which You have paid for and which You cannot get back.
- the cost of visas which You have paid for and which You cannot get back

- the Reasonable cost of rearranging Your Trip, where the cost is less than cancellation fees or lost deposits arising because the Trip is cancelled. This benefit can only be claimed once per policy per Insured person.
- Your travel agent's cancellation fees, up to 10% of total amount paid to the travel agent, or up to a maximum of \$2,000 per policy when fees are required to be paid in full or the maximum amount of deposit is payable at the time of cancellation. We will not pay any travel agent's cancellation fees above the level of commission and/or service fees normally earned by the agent had the Trip not been cancelled.
- the loss of frequent flyer points You used to purchase an airline ticket if the airline ticket is cancelled and You cannot recover the lost points from any other source.

We will only pay in the following circumstances...

We will provide the cover listed above if the cancellation of Your Trip is necessary and unavoidable as a result of the following:

- Your unforeseen death, Accidental Injury, or unexpected Illness, Including Coronavirus provided You have an official positive test result confirming Your diagnosis of Coronavirus within 14 days of Your planned departure date after the policy was purchased; or if You have been admitted to hospital due to testing positive for Coronavirus after the policy was purchased which medically prohibits Your ability to take Your holiday.
- The unforeseeable death, Accidental Injury, or unexpected Illness of Your Close relative, Business associate or travelling companion who is a Resident in Australia and who is in Australia at the time the event occurs, unless this was related to a Pandemic and/or Epidemic, including but not limited to Coronavirus .
- You have to go to court to be a witness or be on a jury (but not as an expert witness).
- There is an Accident involving a vehicle You were planning to travel in, which happens within seven days before the date You planned to leave and means You cannot use the vehicle (applies to self-drive holidays).
- You, Your Close relative or member of Your Travelling party are a member of the armed forces, police, fire, nursing or ambulance services and You have to stay in Australia because of an emergency or You are posted overseas unexpectedly.
- It is necessary for You to stay in Australia after a fire, storm, Flood or burglary at Your Home or place of business within 48 hours before the date You planned to leave and You provide Us with a written statement from a relevant public authority confirming the reason and necessity.
- You cannot travel because a Natural Disaster, not known of at the time of purchasing this insurance, but only if that Natural Disaster occurs within 7 days of Your planned Trip date and has caused Your travel service provider to cancel Your pre-paid service and You are not entitled to a refund or compensation from any other source.
- If the Australian Department of Foreign Affairs & Trade (DFAT) and/or www.smartraveller.gov.au advise against all, or, all but essential travel to Your destination after You purchased Your policy or booked Your Trip whichever the latter. Please be aware that no cover is available if the change

in travel advice is as a result of Coronavirus – please see Covid notice on page 3 and Coronavirus exclusion in ‘You are not covered...’ below

What You are not covered for under section 7

You are not covered...

- For the Excess as shown in the table of benefits for each Insured person and for each incident.
- For cancelling Your Trip because of a Medical condition or an Illness related to a Medical condition which You knew about at the time of purchasing this insurance and/or at the time of commencing travel and which could reasonably be expected to lead to a claim unless it is listed within Pre-existing Medical Conditions We cover automatically, or cover was confirmed in writing by Us.
- For any change of plans because You or Your travelling companion change Your mind and decide not to proceed with Your original Trip, or choose not to travel
- If You arrange to travel when You know that there are circumstances that could lead to the Trip being disrupted or cancelled.
- If Your claim is related to the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfil any part of their obligation to You.
- For any costs that would not have been incurred had You told the appropriate holiday company, including but not limited to tour operators, travel agents, transport providers, or accommodation providers, as soon as You knew You had to cancel Your Trip.
- For any claims arising directly or indirectly from Coronavirus:
- If You do not have an official positive test result confirming Your diagnosis within 14 days of Your planned departure date after the policy was purchased; or You have been admitted to hospital due to testing positive for Coronavirus after the policy was purchased.
- If You have not received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if You were ineligible for vaccination or unable to receive the vaccine for medical reasons, and this is shown in Your medical records.
- Any claims arising due to volcanic ash carried by the wind.
- If You are advised to quarantine or You chose to self-isolate due to a person You have come into contact with having Coronavirus.
- If a medical professional advises You not to travel as You have underlying health conditions that place You 'at a higher risk' from Coronavirus.
- As a result of Australian Department of Foreign Affairs & Trade (DFAT) and/or smartraveller.gov.au advice against all, or all but essential travel to Your intended destination.
- As a result of local government restrictions or directives prohibiting or restricting entry (for example, self-isolation, quarantine or lockdown measures) to Your intended destination or on Your return Home.
- For You being unable to travel due to a failure to obtain the passport or visa needed for the planned Trip. This includes a failure to obtain ESTA Approval when You are travelling to the USA.

- For You failing to Check-in according to Your itinerary or the times advised to You by the travel provider.
- For costs which You have paid on behalf of any other person, unless that person is also an Insured person named on Your Policy Schedule. (An Excess will still be applied to each person who the costs relate to).
- For claims arising from Your business (other than severe damage to Your business premises within 48 hours of Your departure date).
- For claims arising from Your employment, including but not limited to, not being able to take leave from that employment (unless Your employer is the armed forces, police, fire, nursing or ambulance services and You have to stay in Australia because of an emergency or You are posted overseas unexpectedly).
- For claims arising from Your financial or contractual obligations or those of Your travelling companion, Close relative or Business associate.
- For any costs paid to a travel services provider (airline or Cruise company) if the same travel service provider is responsible for the cancellation.
- For any claim where You cannot go on a Trip because a tour operator cannot complete arrangements due to there not being the required number of people to start or finish a tour or Trip.
- For any costs You would have still had to pay even if You had not been due to travel, such as time share management fees or holiday club membership fees.
- For any claims arising from any Natural Disaster unless:
 1. The Natural Disaster was not publicly known of at the time of purchasing this insurance, (see www.smartraveller.gov.au for travel advisories and further information), and;
 2. The Natural Disaster occurs within 7 days of Your planned Trip date.
- For any loss that is insured or guaranteed by any other existing protection, specifically Package Travel Regulations, Australian Consumer Law for Flight delays & cancellations, ATOL, or Australian Federation of Travel Agents Limited (AFTA) protection, or from Your credit card provider under section 75 of the *Consumer Credit Act*, or any other specific legislation for transport or travel providers.
- For any costs already compensated or offered by Your transport and/or accommodation provider, even if this is a credit note or alternative travel arrangements.
- If Your claim is for a loss that is recoverable by any other method, including but not limited to, compensation under transport accident laws or a workers' compensation act or by any government sponsored fund, plan, medical benefit scheme or any other similar legislation required to be effected by or under a law.
- Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ You will need to provide Us with documents such as Your original booking invoice and receipts, a Trip cancellation invoice, written confirmation from Your airline or travel agent, any unused travel tickets and itineraries, and evidence that You are not entitled to a refund by any other means.
- ✓ This insurance policy will only respond to claims for costs that You are not entitled to recover elsewhere, We refer to these as 'Irrecoverable costs'.

- ✓ In the event You need to claim on Your policy, You will need to provide Us with evidence demonstrating that You are not entitled to compensation from another source.
- ✓ Please refer to Our guide on page 18, this outlines organisations that are contractually required to offer You a refund provided You meet certain criteria.
- ✓ Get in touch to report the claim as soon as reasonably possible on www.travelwithjane.com/claims or for 24-hour emergency assistance call our Medical Emergency Assistance Company +61 2 880 9428

8. Cutting Your Trip Short

Please be Aware: If You need to return Home to Australia earlier than planned, You must contact the Medical Emergency Assistance Company as soon as reasonably possible (please see contact details on page 6)

What You are covered for under section 8

You are covered...

We will pay up to the amount shown in the table of benefits for:

- Travel and accommodation expenses which You have paid or have agreed to pay under a contract and which You cannot get back.
- The cost of excursions, tours and activities which You have paid for either before You left Australia or those paid for locally upon arrival at Your holiday destination and which You cannot get back.
- Reasonable additional travel costs (economy class unless a higher grade of travel is confirmed as medically necessary and authorised by the Medical Emergency Assistance Company) to return to Australia (or costs to return Home if Your Trip is within the Australia) if it is medically necessary and unavoidable for You to cut short Your Trip.

Please note: If payment has been made using frequent flyer points, Avios air miles, loyalty card points, or similar loyalty card schemes, settlement of Your claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cutting short of Your Trip is necessary and unavoidable as a result of the following:

- You dying, Your unexpected Illness, You testing positive for Coronavirus, or Your Accidental Injury during Your Trip and a medical professional deems it medically necessary and unavoidable to cut Your Trip short.
- The death, serious unexpected Illness or Accidental Injury of a Close relative, Business associate, a person who You are travelling with, or a Close relative or friend living abroad who You had planned to stay with during Your Trip. (Please note: there is no cover for any claims relating to Coronavirus).

- If the police or relevant authority need You to return to Your Home in Australia after a fire, storm, Flood, burglary or vandalism to Your Home or place of business.
- If You are a member of the armed forces, police, fire, nursing or ambulance services which results in You having to return to Your Home in Australia due to an unforeseen emergency or if You are posted overseas unexpectedly.
- Because a Natural Disaster, not publicly known of at the time of purchasing this insurance and that occurs during Your Trip, and the advice on www.smartraveller.gov.au is to return to Your Home

Please note: We will calculate claims for cutting short Your Trip from the day Your return to Australia begins or the day You go into hospital overseas as an inpatient. Your claim will be based on the number of complete days You have not used.

What You are not covered for under section 8

You are not covered for...

- The Excess as shown in the table of benefits for each Insured person and for each incident.
- Cutting Your trip short due to Your unexpected Illness, You testing positive for Coronavirus, or Your Accidental Injury during Your Trip if a medical professional does not deem it medically necessary and unavoidable for You to return home.
- Cutting short Your Trip because of a Medical condition which You knew about at the time of purchasing this insurance and/or at the time of commencing travel and which could reasonably be expected to lead to a claim unless It Is listed within Pre-existing Medical Conditions We cover automatically, or cover was confirmed in writing by Us.
- Any claim for You having to cut your trip short due to the death, serious unexpected Illness or Accidental Injury of a Close relative, Business associate, a person who You are travelling with, or a friend living abroad who You had planned to stay with during Your Trip that is related to a Pandemic and/or Epidemic including but not limited to Coronavirus
- Any claims where the Medical Emergency Assistance Company have not been contacted to authorise Your early return to Australia.
- Any claim where You cannot go on a Trip because a tour operator cannot complete arrangements due to there not being the required number of people to start or finish a tour or Trip.
- Any additional expenses incurred should You decide to travel to any destination other than Australia in the event of cutting short Your Trip. If You have to cut short Your Trip and You do not return to Australia We will only be liable for the equivalent costs which You would have incurred had You returned to Australia.
- You being unable to continue with Your travel due to Your failure to obtain the passport or visa You need for the Trip.
- The cost of Your intended return travel to the Australia if We have paid additional travel costs for You to cut short Your Trip.
- Costs where Your inability to use pre-paid activities, excursions, or tours due to unexpected Illness or Accidental Injury is not verified in writing by Your treating Doctor.

- Any claim arising from You acting in a way which goes against the advice of a Doctor, or You travelling against the advice of Doctor, or where You would have been if You had sought their advice before beginning Your Trip.
- If Your claim is related to the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfil any part of their obligation to You.
- We will not pay for any claim under this section when a claim is made under Section 7. Cancellation costs (See page 39).
- If You arrange to travel when You know that there are circumstances that could lead to the Trip being disrupted or cancelled.
- Your claim is for a loss that is recoverable by any other method, including but not limited to, compensation under transport accident laws or a workers' compensation act or by any government sponsored fund, plan, medical benefit scheme or any other similar legislation required to be effected by or under a law.
- Any costs are already accepted or offered by Your transport and/or accommodation provider, even if this is a credit note or alternative travel arrangements.
- Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Get in touch to report the claim as soon as reasonably possible on www.travelwithjane.com/claims or for 24-hour emergency assistance call +61 2 880 9428.
- ✓ If You are cutting Your Trip short due to medical reasons make sure You get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical reason for cutting Your Trip short.
- ✓ Have any documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.

9. Travel delay expenses

What You are covered for under section 9:

You are covered...

Up to the amount shown in the table of benefits on page 29, if Your pre-paid scheduled transport is delayed, cancelled or rescheduled as a result of poor weather, strike, Industrial action and/or mechanical breakdown.

You are covered for...

- Reasonable additional expenses for accommodation, meals and transfers between transport terminals and accommodation where You are delayed for six hours or more for each 12-hour period of delay provided You eventually go on the holiday.

- The cost of Your unusable, non-recoverable, pre-paid accommodation, transfers, tours, events and attractions if You are unable to reach Your next destination on time.

Please be Aware:

- If You make a claim under both of these covers, We will only pay the higher of the two.
- You must be able to give Us all receipts and written confirmation from the Carrier outlining the reasons for the cancellation, rescheduling or delay and if they offered You any compensation.
- We will only consider additional expenses You have if they are Reasonable and necessary and the same class as You originally booked.
- We will not pay for flights or other transport costs or upgrades for You to continue Your journey.

What You are not covered for under section 8

You are not covered for...

- If You arrange to travel when You know that there are circumstances that could lead to the Trip being disrupted or cancelled.
- Any costs related to the financial collapse of any transport, tour or accommodation provider.
- Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER THE CLAIMS CHECKLIST:

- ✓ Get in touch to report the claim as soon as reasonably possible on www.travelwithjane.com/claims or for 24-hour assistance call our Medical Emergency Assistance Company +61 2 880 9428.

10. Airfares for resumption of travel

What You are covered for under section 10:

You are covered...

Up to the amount shown in the table of benefits on page 29 if You need to return to Your Home in Australia during Your Trip because an immediate Family member (spouse, Partner, child, step child or Parent), who is residing in Australia or New Zealand, suffers from an unexpected death, unexpected serious (life threatening) Accidental bodily Injury, or unexpected serious (life threatening) Illness and You want to resume Your Trip.

We will pay...

The Reasonable cost of return airfare to allow You to resume Your Trip provided You do not already have a return leg fare booked.

Please be Aware:

- You only have this cover if You choose to not make a claim under Section 7. Cancellation costs (page 39) or Section 8. Cutting Your Trip Short (page 43).

- You must resume Your Trip within 60 days of Your return to Australia.
- There must be at least 7 days remaining on the period of Your Trip as shown on Your Certificate of Insurance from the date You returned to Australia.
- This cover is subject to the policy limits and exclusions, please see 'General exclusions' on pages 70–66.

REMEMBER THE CLAIMS CHECKLIST:

- ✓ Get in touch to report the claim as soon as reasonably possible on www.travelwithjane.com/claims or for 24-hour assistance call Medical Emergency Assistance Company +61 2 880 9428.

11. Personal belongings or Baggage (not including Personal Electronics/Gadgets)

What You are covered for under section 11

11a. Personal belongings and Baggage (not including Personal Electronics/Gadgets)

You are covered...

Up to the limits specified in the table of benefits on page 29 if Your Personal belongings and/or Baggage are stolen or Accidentally damaged during Your Trip.

Please be aware...

- There is no cover under section 11 for Personal Electronics and/or Gadgets.
- The Personal belongings and/or Baggage must not be hired, loaned or entrusted to You.
- The Personal belongings and/or Baggage must usually be carried or worn by You.
- Payment will be based on the value of the Personal belongings or Baggage at the time it was stolen or Accidentally damaged. A deduction will be made for wear, tear and loss of value depending on the age of the Personal belongings or Baggage.
- The maximum amount We will pay for any one item, Pair or set of items is shown in the table of benefits. Please refer to the definition of 'Pair or set of items' on page 80.
- The maximum amount We will pay for Personal belongings or Baggage is shown in the table of benefits.
- A Police Report that includes a statement of facts regarding the event must accompany all theft and vandalism claims.
- The maximum We will pay for Personal belongings or Baggage, which are stolen from an Unattended motor vehicle is \$100 for each Insured person(s), We will only pay if the theft or damage occurs between 9am and 9pm, and the Personal belongings or Baggage are kept in a locked boot, a locked and

covered luggage compartment, or a locked glove compartment, and there was evidence of forced and violent entry to the vehicle.

- You must take Reasonable care to keep Your Personal belongings and/or Baggage safe, and if they are stolen, You must take all Reasonable steps to get them back.
- If Your Personal belongings and/or Baggage are damaged by Your Public transport Carrier You must give written notice of the claim to them within the time limit in their conditions of carriage (You should also keep a copy).
- You must keep Your tickets and luggage tags.
- If Your Personal belongings and/or Baggage are damaged by an authority or Your accommodation provider, You must report the details of the damage to them in writing as soon as possible and get written confirmation.
- You must be able to prove that You own Your Personal belongings and/or Baggage that is/are stolen or damaged.

What is not covered under Section 11a

- The policy Excess, as outlined in Your Certificate of Insurance.
- Any claims for Personal Electronics including but not limited to mobile phones, smart phones, headphones, tablets or laptops.
- Any claims for Personal belongings and/or Baggage resulting from misplacement and/or Accidental loss.
- Any claims for theft unless they are reported to the appropriate local police authorities. A Police Report that includes a statement of facts regarding the event must accompany all theft and vandalism claims.
- Any claims for Personal belongings and/or Baggage which are left Unattended, unless stored in a locked safety deposit box or locked safe, or are locked in Your accommodation and there is evidence of force or forcible entry.
- Any claims for Personal belongings and/or Baggage left in Your accommodation's courtesy storage facility.
- Any claims for Personal belongings and/or Baggage which You have left Unattended in a motor vehicle unless:
 - The theft or damage occurs between 9am and 9pm; and
 - It is contained in the secure area of a motor vehicle (in the boot or otherwise hidden from view in the luggage area); and
 - There was evidence of forced and violent entry to the vehicle.
- Any claims for Winter sports equipment, golf equipment, sports equipment, adventure sports equipment, pedal cycles, Business Samples, Business equipment or other items used in connection with Your work, unless cover is specified on Your Certificate of Insurance.
- Any claims for cracked, scratched or broken glass, china or similar fragile items.
- Any claims for wear and tear, loss of value and damage caused by moths or vermin, or any process of cleaning, repairing or restoring.
- Any claims for any items shipped as freight or items delayed, detained or confiscated by customs or other officials.
- Any claims for personal money, business money, bonds, securities or documents of any kind.

- Any claims for damage where the item was dropped.
- Any claims for cosmetic damage where Your Personal belongings and/or Baggage are still operable, including but not limited to scratches and dents.
- Any expense incurred as a result of not being able to use Personal belongings and/or Baggage (such as loss of potential earnings).
- Any claims for costs resulting from unauthorised use of Your Personal belongings and/or Baggage.
- Any claims for satellite navigation systems (GPS), cameras, Personal Digital Assistants (PDAs), drones, games consoles (including hand-held consoles) and all the accessories for these items.
- Any claims for Personal belongings and/or Baggage delayed or detained by customs or other officials.
- Any loss that is not directly associated with the incident that caused the claim.
- Any claim for theft or damage more specifically insured by another policy.
- Any claims for food or drink.
- Any claims for contact and corneal lenses, medical and dental fittings, or hearing aids.
- Any claim for costs which You can recover from Your Public transport Carrier or by any other means.
- Anything mentioned in 'General exclusions' starting on page 70.

11b. Personal Money

You are covered...

We will pay up to the limit shown in the table of benefits if Your cash or travellers cheques are stolen during Your Trip if You can provide evidence You owned them and provide evidence of their value (this would include receipts, bank statements or cash withdrawal slips).

Please be aware...

- You must take Reasonable care to keep Your cash or travellers cheques safe.
- If Your cash or travellers cheques are stolen, You must take all Reasonable steps to get it back.
- You must report any theft to the police within 24 hours of discovering it and obtain a written police report. You must be able to prove that You own the stolen money, if You do not it may affect Your claim.
- The maximum amount We will pay for cash carried by one Insured person, whether jointly owned or not, is the cash limit as shown in the table of benefits.

What is not covered under 11b?

We will not pay for:

- The claims Excess, as outlined in Your statement of insurance.
- Claims for Cash or travellers cheques which are not with You unless it is stored in a locked safety deposit box, locked safe.
- Claims for cash or travellers cheques that were left Unattended.
- Claims for theft unless there is evidence of force or forcible entry.

- Any claims for theft unless they are reported to the appropriate local police authorities and You have a Police Report that includes a statement of facts regarding the event.
- Bonds, securities or documents of any kind.
- Shortages due to a mistake or loss due to a change in exchange rates.
- Cash or travellers cheques which are delayed, detained or confiscated by customs or other officials.
- Claims arising due to an authorised person fraudulently using Your credit or debit card.
- Any costs incurred by You, which You can recover from Your Public transport Carrier or that can be recovered by any other means.
- Anything mentioned in 'General exclusions' starting on page 70.

11c. Passport, Travel tickets, travel documents and driving licence

You are covered...

Up to the limit shown in the table of benefits if Your passport, visa, travel tickets, travel documents or driving licences are Accidentally damaged, lost, or stolen during Your Trip.

We will also pay Reasonable and necessary extra travel, communication and accommodation costs (room only) while You arrange a replacement or temporary replacement.

Please be aware...

- You must report any loss or theft to the police within 24 hours of discovery and provide Us with a satisfactory police report.
- If Passport, Travel tickets, travel documents and driving license are lost, stolen or damaged while in the care of Your accommodation provider You must report this to them immediately on discovery in writing and obtain a written confirmation of the loss, damage or theft.

What is not covered under section 11c...?

We will not pay for:

- The claim Excess, as outlined in Your Certificate of Insurance.
- Any claims for passport, visa, travel tickets, travel documents or driving licences which are left Unattended, unless stored in a locked safety deposit box or locked safe, or are locked in Your accommodation.
- Any items which are detained or confiscated by customs or other officials.
- Any costs incurred by You, which You can recover from Your Public transport Carrier or that can be recovered by any other means.
- Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER THE CLAIMS CHECKLIST:

- ✓ If Your Passport, Travel tickets, travel documents and/or driving license are lost or stolen report it to the local police within 24 hours and get a written report.

- ✓ If Your Passport, Travel tickets, travel documents and/or driving license are lost, damaged or stolen report to Your airline or transport provider as soon as possible and get a written report.
- ✓ Get original receipts, valuations, or other proof of ownership of any items related to the claim.
- ✓ Get in touch to report the claim as soon as reasonably possible on www.travelwithjane.com/claims or for 24-hour assistance call Medical Emergency Assistance Company +61 2 880 9428.

12. Legal liability

What You are covered for under section 12

You are covered...

Up to the total amount shown in the table of benefits (page 29) if, during an insured Trip, You are legally liable for Accidentally:

- injuring someone; or
- damaging or losing someone else's Personal belongings or Baggage.

Please Be Aware:

- You must give us notice of any cause for a legal claim against You as soon as You know about it, and send us any documents relating to a claim;
- You must help Us with Your claim and give Us all the information We need to allow them to take action on Your behalf;
- You must not negotiate, pay, settle, admit or deny any claim unless You get Our permission in writing; and
- We will have complete control over any legal representatives appointed and any proceedings, and We will be entitled to take over and carry out in Your name Your defence of any claim or to prosecute for Our own benefit any claims for indemnity, damages or otherwise against anyone else.

What You are not covered for under section 12

You are not covered for...

- The Excess as shown in the table of benefits for each Insured person and for each incident.
- Any liability arising from an Accidental Injury or loss or damage to property:
 - owned by You, a member of Your Family or household or a person You employ; or
 - In the care, custody or control of You or of Your Family or household or a person You employ (other than temporary holiday accommodation occupied but not owned by You).
- Any claim assumed by You under any contract or agreement unless such liability would have attached in the absence of such contract or agreement.
- Any liability for death, disease, unexpected Illness, Accidental Injury, loss or damage:
 - to members of Your Family or household, or a person You employ;

- arising in connection with Your trade, profession or business;
 - arising in connection with a contract You have entered into;
 - arising due to You acting as the leader of a group taking part in an activity;
 - arising due to You owning, possessing or using mechanically-propelled vehicles, watercraft or aircraft of any description, animals (other than domestic cats or dogs), firearms or weapons; or
 - as a result of a winter sports activity if You have not purchased the additional winter sports cover.
- You being required to pay any sort of fine or penalty, punitive, aggravated or exemplary damages;
 - Any conduct intended to cause bodily Injury, property damage or liability with reckless disregard for the consequences of You or any person acting with Your knowledge, consent or connivance.
 - Any disease that is transmitted by You.
 - Assault and/or battery committed by You or at Your direction.
 - Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER THE CLAIMS CHECKLIST:

- ✓ Do not admit liability, offer or promise compensation.
- ✓ Give details of Your name, address and travel insurance.
- ✓ Take photographs and videos, and get details of witnesses if You can.
- ✓ Tell Us as soon as reasonably possible about any claim that is likely to be made against You and send Us all the documents that You receive.
- ✓ You can get Us on: www.travelwithjane.com/claims or for 24-hour assistance call Medical Emergency Assistance Company +61 2 880 9428.

13. Legal Costs

What You are covered for under section 13

You are covered...

Up to the amount shown in the table of benefits for legal costs and expenses arising as a result of dealing with claims for compensation and damages resulting from Your death, unexpected Illness or Accidental Injury during Your Trip.

Please be Aware...

- We will have complete control over any legal representatives appointed and any proceedings;
- You must follow Our advice or that of Our agents in handling any claim; and
- You must use Reasonable efforts to get back all of Our expenses where possible. You must pay Us any expenses You do get back.
- All claims or legal proceedings including any appeal against judgement resulting from the same original cause, event, or circumstance, will be regarded as one claim.

- We may at Our discretion offer to settle a claim with You instead of initiating or continuing any claim or legal proceedings for damages and or compensation from a third party, and any such settlement will be full and final in respect to the claim.
- We may at Our discretion offer to settle a counter-claim against You instead of continuing any claim or legal proceedings for damages and or compensation from a third party.

What You are not covered for under section 13

You are not covered for...

- Any legal costs and expenses which We have not agreed to accept beforehand in writing.
- Any claim where We or Our legal representative believe that an action is not likely to be successful or if We believe that the costs of taking action will be greater than any award.
- The costs of making any claim against Us, Agile, Our agents or representatives, or against any tour operator, travel agent, accommodation provider, Carrier or any person who You have travelled with or arranged to travel with, pursuing any claim for compensation against the manufacturer, distributor or supplier of any drug, medication or medicine.
- Any fines, penalties or damages You have to pay.
- The costs of making any claim for Accidental Injury, loss or damage caused by or in connection with Your trade, profession or business.
- Any claims arising out of You possessing, using or living on any land or in any buildings.
- Any claims arising out of You owning, possessing or using mechanically-propelled vehicles, watercraft or aircraft of any description, animals, firearms or weapons.
- Any claim reported more than 180 days after the incident took place.
- Any claims from You becoming injured or dying as a result of a winter sports activity and You have not purchased the additional winter sports cover.
- The costs incurred in the defence against any civil claim or legal proceedings made or brought against You.
- The costs incurred after You have not accepted an offer from a third party to settle a claim or legal proceeding where the offer is considered by all parties to be Reasonable or You not accepting an offer from us to settle a claim.
- Anything mentioned in 'General exclusions' starting on page 70.

Additional Options

About these additional options

Your policy includes these additional optional covers only when You have selected the additional option (the 'pack'), paid the additional premium and the additional option is shown on Your Certificate of Insurance.

Snow Pack

SNOW PACK TABLE OF BENEFITS	LIMIT
Snow sports overseas emergency medical assistance	Unlimited
Funeral expenses	\$20,000
Snow sports overseas emergency medical & hospital expenses	Unlimited
Own snow sports equipment	\$1,500
Snow sport equipment hire	\$1,500
Unused snow sports costs	\$1,000
Piste closure	\$1,000
Bad weather & avalanche closure	\$750

Please be Aware:

You are not covered under this option for claims under Section 12 Legal liability (page 51) or if You participate in winter sports in backcountry or off-piste, or the activities listed under Adventure Pack p.65.



You must be under the age of 69 at the date Your Certificate of Insurance is issued.

Snow sports overseas emergency medical assistance

You are covered...

Up to the amount shown in the snow pack table of benefits for the cost of Your return to Australia earlier than planned due to You suffering an Accidental Injury or unexpected Illness during Your Trip. We will only provide cover if Your return is approved by the Medical Emergency Assistance Company, and It is deemed to be a medical necessity.

Please be Aware: the event of Your Accidental Injury or unexpected Illness We reserve the right to arrange for Your repatriation to Australia at any time during the Trip. We will do this if in the opinion of the Doctor in attendance or the Medical

Emergency Assistance Company You can be moved safely and/or travel safely to Australia to continue treatment.

You are not covered for...

- The Excess as shown in the table of benefits for each Insured person and for each incident.
- Any costs relating to a Medical condition which You knew about at the time of purchasing this insurance and/or at the time of commencing travel and which could reasonably be expected to lead to a claim unless it is listed within Pre-existing Medical Conditions (page 23) We cover automatically, or cover was confirmed in writing by Us.
- Any claims arising directly or indirectly from Coronavirus.
- Any claims where the Medical Emergency Assistance Company have not been contacted to authorise Your early return back to Australia.
- Any search and rescue costs (costs charged to You by a government, regulated authority or private organisation connected with finding and rescuing You. This does not include medical evacuation costs by the most appropriate transport).
- Any costs Incurred after a 12-month period from the date when the unexpected Illness first presented or the Accidental Injury happened.
- You neglect to observe appropriate preventative health measures for the region You are travelling to, including relevant vaccinations and hygiene measures. See www.who.int for further information.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits within the table of benefits.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical reason for repatriation.
- ✓ Have any documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.

Snow pack Funeral Expenses

You are covered...

In the event You die while overseas on Your Trip, We will pay You up to the amount shown in the snow pack table of benefits above, for the cost of:

- Your burial or;
- Your cremation overseas or;
- The cost of transporting Your remains to Australia

You are not covered...

- For costs relating to funeral expenses in Australia.
- If You die as a result of a Pre-existing Medical condition (as defined under Definitions p.81) unless We have assessed and accepted Your condition and You have paid an additional premium).
- If You die as a result of You intentionally injuring Yourself.
- Anything mentioned in 'General exclusions' starting on page 70.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical cause of death.
- ✓ Have any documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits within the table of benefits.

Snow pack emergency medical expenses

You are covered...

Up to the amount shown in the Snow pack table of benefits above, for the necessary and Reasonable costs of emergency medical, surgical, and hospital treatment required in the event You suffer an unexpected Illness, or suffer a serious Accidental Injury on Your Trip.

You are not covered for...

- Any treatment or surgery which the Medical Emergency Assistance Company thinks is not immediately necessary and can wait until You return to Australia. The decision of the Medical Emergency Assistance Company is final.
- Any treatment or surgery which in the opinion of Our Medical Emergency Assistance company is considered to be cosmetic, experimental or elective.
- any treatment or surgery carried out in Australia.
- Any treatment or surgery carried out more than 12 months after the expiry of this insurance.
- Inpatient or private treatment which has not been notified as soon as possible and agreed by Us or the Medical Emergency Assistance Company.
- The extra cost of a single or private hospital room unless this is medically necessary and authorised by the Medical Emergency Assistance Company.
- Treatment in a private hospital or private clinic where suitable state facilities are available.
- Treatment in a private hospital or private clinic unless authorised and agreed by Us.

- Any costs for the following:
 - telephone calls (other than the first call to the Medical Emergency Assistance Company to notify them of the medical problem);
 - taxi fares (unless a taxi is being used in place of an ambulance to take You to or from a hospital); or
 - Food and drink expenses (unless these form part of Your hospital costs if You are kept as an inpatient).
- Any costs You have to pay if You have refused to come back to Australia and the Medical Emergency Assistance Company considered You were fit to return Home.
- Any costs Incurred after a 12-month period from the date when the unexpected Illness first presented or the Accidental Injury happened.
- Any treatment or surgery carried out more than 12 months after the expiry of this insurance whichever sooner.
- Any cost of treatment if there is evidence that You are travelling to receive medical treatment.
- If You received private hospital or medical treatment where public-funded services or care was available in Australia or under any reciprocal health care agreement between the Government of Australia and the government of any other country.
- If Your claim arises out of pregnancy or related Complications after 26 weeks of pregnancy in the case of a single baby or after 19 weeks of pregnancy in the case of twins.
- *Note for expectant mothers:* You should consider whether You should travel under this policy; cover is not provided for childbirth or the health of a newborn child, irrespective of when the child is born.
- If You neglect to observe appropriate preventative health measures for the region You are travelling to, including relevant vaccinations and hygiene measures. See www.who.int for further information.
- Any claim arising from You acting in a way which goes against the advice of a Doctor, or You travelling against the advice of Doctor or where You would have been if You had sought their advice before beginning Your Trip.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical tests requested and treatment given.
- ✓ Have documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.
- ✓ You have up to 30 days following Your return to Australia to lodge Your claim.

Snow pack sports equipment

You are covered...

If during Your Trip, Your Snow sport equipment is lost, stolen or damaged We will pay You for:

- the value of the Snow sport equipment after allowing for Reasonable depreciation for items that are more than two years old; or
- arrange and pay for, or reimburse the cost of, repairing or replacing the Snow sport equipment with articles in the same condition, but not with articles better or more expensive than the Snow sport equipment was when new.

You are not covered if...

- 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.
- 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.
- The Snow sport equipment was being sent unaccompanied by You or under a freight contract.
- The loss or damage arises from any process of cleaning, repair or alteration.
- The loss or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin.
- The Snow sport equipment was left unsupervised in a public place.
- 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 loss and what You were reimbursed, up to the limit of Your cover.
- The claim arises from ice skating, bobsleighbing, 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.

Please be aware:

- You must report Your loss or theft to the police or responsible public-transport provider within 24 hours and provide Us with a written record prepared by the police or public-transport provider at the time the loss or theft is reported.
- 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.

- 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.
- No cover is provided for Snow sport equipment while it is in use.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

Snow sport equipment hire

We will Cover You ...

If during Your Trip, Your winter sports equipment is:

- lost, stolen or damaged and a claim has been accepted by us; or
- delayed by Your public-transport provider by more than 24 hours

then...

We will reimburse You the cost of hiring alternative winter sports equipment up to the maximum sum insured specified in the table above.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

Unused snow sports costs

You are covered... ..

If during Your Trip, You suffer an Accidental Injury or Illness and a Doctor determines that You are unable to use Your pre-booked and pre-paid ski passes, ski hire, tuition fees or lift passes, We will reimburse You for the non-refundable cost of the unused portion up to the limits shown in the table above.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

Note: Any claims must be accompanied by a copy of a medical report provided by a Doctor detailing the nature and extent of the Accidental Injury or Illness and as a result confirming Your inability to participate in winter sports.

Piste closure

You are covered...

If during Your Trip and during the ski season, all lift systems are closed for more than 24 hours due to insufficient snow, bad weather or power failure at Your pre-booked ski holiday resort, We will reimburse You for the cost of transport to the nearest alternative resort and additional ski passes at that resort up to the limit shown in the snow pack table of benefits above.

You are not covered...

- for any claims arising if Your holiday resort does not have skiing facilities greater than 1,000 metres above sea level; or
- for any claims if the resort is open and there is sufficient snow for normal on-piste skiing activities; or
- for any claims outside the ski season, which for the purpose of this section is defined as 15th December to 31st March in Northern Hemisphere resorts, and 15th June to 30th September in Southern Hemisphere resorts.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

Bad weather and avalanche closure

You are covered...

If, as a result of avalanche or bad weather Your pre-booked outward or return journey 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.

Cover is subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

Rental Vehicle Insurance Excess Pack

RENTAL VEHICLE INSURANCE EXCESS PACK TABLE OF BENEFITS	LIMIT
Rental Vehicle Insurance Excess Pack benefit	\$5,000

You are covered...

If You rent a vehicle from a rental company while on your Trip and it is involved in an accident, is damaged or is stolen while in Your care You are covered for the rental vehicle insurance excess up to the applicable limit shown in the table above.



Please be aware...

You must provide us with the written rental agreement from a licensed rental company and have taken the insurance option with them.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

Gadget Pack

Please note: The following sections only apply if You have paid the required extra premium and this is shown on Your insurance certificate. Cover only applies for the duration of Your trip, as stated on Your certificate of Insurance.

GADGET PACK TABLE OF BENEFITS	LIMIT
Excess	\$250
Accidental loss of Gadget	\$2,000
Accidental damage of Gadget	\$1,500
Theft of Gadget	\$2,000
Including: one item/pair set of items limit	\$1,000

Definitions relating to Gadget cover

Gadget means the item(s) insured under this policy, purchased by You and shown within the relevant proof of purchase. Only item(s) from the following list, which are under thirty-six (36) months old at the time You purchased this policy shall be covered: ipads, smart phones, smart watches, games consoles, cameras including digital cameras, camera lenses, video cameras, mobile phones, laptops, bluetooth headsets, E-Reader, in-car computers, head/ear phones, tablets, wireless speakers.

Immediate family means Your mother, father, child, brother, sister, spouse/civil partner and partner, who permanently reside with You.

Pair or set of items means items of personal property which are substantially the same, complementary, or designed to be used together.

Proof of Purchase means the original purchase receipt provided at the point of sale that gives details of the Gadget purchased, or similar documents that provide proof that You own the Gadget.

Violent and forcible entry means entry evidenced by visible damage to the fabric of the building, room, or vehicle at the point of entry.

You are covered for...

Accidental loss

We will pay up to the amount shown in the table of benefits for the cost of a replacement, less a deduction for wear, tear and depreciation (loss of value), if Your Gadget is accidentally lost.

Accidental damage

We will pay up to the amount shown in the table of benefits for the repair or replacement cost, less a deduction for Wear, tear and depreciation (loss of value), if Your Gadget is damaged as the result of an accident.

Theft

If Your Gadget is stolen We will pay up to the amount shown in the table of benefits for the cost of a replacement, less a deduction for Wear, tear and depreciation (loss of value). Where only part or parts of Your Gadget have been stolen, We will only pay to replace that part or those parts.

Please be aware:

- The most We will pay for any one claim will be the replacement value of Your Gadgets, limited to a maximum of five (5) Gadgets per policy, less a deduction for wear, tear and depreciation (loss of value); and in any case shall not exceed our maximum liability for the level of cover, as shown in the table of benefits.
- A deduction will be made for wear, tear and loss of value on claims made for Gadgets owned by You as follows:
 - Up to 12 months old – cover for 70% of the purchase price
 - Up to 24 months old – cover for 50% of the purchase price
 - Up to 36 months old – cover for 20% of the purchase price
 - 36 months or over – no cover

The maximum amount We will pay for any one item, Pair or set of items is shown in the table of benefits.

What You are not covered for...

- The excess as shown in the table of benefits for each insured person and for each incident.
- Any claim for a Gadget purchased under a private sale or by a business.
- Any Gadget which is thirty-six (36) months old or over at the date You purchased this policy.
- Any theft unless accompanied by a crime reference number. Lost property numbers are not acceptable in support of a theft claim.
- Any claim involving theft unless reported to the appropriate local Police authorities and Your mobile coverage provider (if applicable) within twenty-four (24) hours of discovery or as soon as possible after that.
- Loss, theft or damage to the Gadget contained in an unattended vehicle unless:
 - it is locked out of sight and in a secure baggage area, and
 - forcible and violent means have been used by an unauthorised person to effect entry into the vehicle and evidence of such entry is available.
- Any loss, theft or damage of the Gadget left as checked in luggage or while in the custody of a carrier, tour operator or public transport operator.
- Any loss, theft or damage to the Gadget as a result of confiscation or detention by customs, other officials or authorities.
- Theft of the Gadget from an unoccupied premises whilst on holiday, unless there is evidence of violent and forcible entry to the premises.
- Theft of the Gadget left unattended in a public place or a place to which the public has regular access.
- Theft of the Gadget from the person unless force, pickpocket or threat of violence is used.
- Theft or accidental damage to the Gadget whilst on loan to anyone else other than Your Immediate family.
- Theft of or damage to accessories other than SIM or PCIMA cards which were in the Gadget at the time of the damage or theft
- Any claim resulting from the failure of any electrical or computer equipment, software, micro-controller, microchip, accessories or associated equipment to correctly recognise and process any calendar date or time.
- Repair or other costs for:
 - routine servicing, inspection, maintenance or cleaning;
 - loss caused by a manufacturer's defect or recall of the **gadget**;
 - replacement of or adjustment to fittings, control knobs or buttons, batteries or aerials;
 - repairs carried out by anyone not authorised by us;
 - wear and tear or gradual deterioration of performance;
 - claims arising from abuse, misuse or neglect;
 - a **gadget** where the serial number has been tampered with in any way.

- Any kind of damage whatsoever unless the damaged **gadget** is provided for repair.
- The GST element of any claim if **you** are registered for GST.
- Reconnection costs or subscription fees of any kind.
- The cost of replacing any personalised ring tones or graphics, downloaded material (including apps) or software.
- Any expense incurred as a result of not being able to use the **gadget**, or any loss other than the repair or replacement costs of the **gadget**.
- Any claim that occurs whilst not on Your **trip**.
- Liability of any nature arising from ownership or use of the **gadget**, including any illness or injury resulting from it.
- Any damage as a result of **you** participating in **winter sports** activities unless the appropriate premium has been paid to include cover for **winter sports** activities.
- Any damage as a result of **you** participating in sports and activities which require payment of an additional premium unless the appropriate premium has been paid to cover that sport or activity.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

***Please note:** if you are insuring an item without SIM or PCIMA card capability, all exclusions relating to these items are not applicable.*

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ You must provide us with any receipts, documents or proof of purchase, that We request.
- ✓ You cannot transfer the insurance to someone else or to any other gadget without Our written permission.
- ✓ Cover excludes costs or payments recoverable from any party, under the terms of any other contract, guarantee, warranty, or insurance.
- ✓ You must bring any damaged gadget back to Australia for inspection.
- ✓ You cannot claim for the same loss under Section 11 – Personal belongings and baggage and this section.

Adventure Pack

ADVENTURE PACK TABLE OF BENEFITS	LIMIT
Adventure sport overseas emergency medical assistance	Unlimited
Adventure sport overseas emergency medical expenses	Unlimited
Own adventure sport equipment	\$1,000
Adventure sport equipment hire	\$1,000
Unused adventure sports costs	\$1,000

Please be Aware:

You are not covered under this option for claims under Section 12 Legal liability (page 51) or if You participate in winter sports in backcountry or off-piste, or the activities listed under Adventure Pack p.65.



Adventure-sport injuries covered under the Adventure Pack

If during Your Trip, You participate in the following amateur sports and activities:

- abseiling and zip lining – fully harnessed;
- animal conservation and handling – under appropriate supervision – and excludes hunting;
- battle re-enactment – not with firearms;
- cave/river tubing;
- caving/potholing;
- contact sports including any form of rugby, Australian Rules football or American football;
- deep sea fishing – with a licensed commercial operator;
- expeditions to or on the Kokoda Track/Trail;
- flying – passenger with a licensed commercial small aircraft or helicopter;
- hiking, trekking or tramping – peak altitudes from 3000m to 5000m, specialist climbing equipment not required;
- hang gliding, tandem gliding and paragliding – in tandem with a licensed instructor;
- mountain biking – non-competitive, downhill;
- outdoor rock climbing – with ropes and appropriate safety gear;
- sailing – Up to 24 kilometres off land, not racing;
- scuba diving – depth maximum 30 metres, holder of an open water diving licence recognised in Australia, or dive with a licensed instructor;
- sky diving, parachuting – in tandem with a licensed instructor;
- shooting – moving targets e.g. clay pigeon – at licensed gun ranges.

We will provide the following cover...

Adventure sport overseas emergency medical assistance

You are covered...

Up to the benefit limit shown in the overseas medical emergency assistance section of the table above, for Your overseas emergency repatriation deemed medically necessary by the emergency medical assistance company following an Accidental Injury that You sustain during Your Trip as a result of You participating in the above activities listed in the adventure pack.

Please be Aware: the event of Your Accidental Injury We reserve the right to arrange for Your repatriation to Australia at any time during the Trip. We will do this if in the opinion of the Doctor in attendance or the Medical Emergency Assistance Company You can be moved safely and/or travel safely to Australia to continue treatment.

You are not covered for...

- The Excess as shown in the table of benefits for each Insured person and for each incident.
- Any claims where the Medical Emergency Assistance Company have not been contacted to authorise Your early return back to Australia.
- Any search and rescue costs (costs charged to You by a government, regulated authority or private organisation connected with finding and rescuing You. This does not include medical evacuation costs by the most appropriate transport).
- Any costs Incurred after a 12-month period from the date when the Accidental Injury happened.
- You neglect to observe appropriate preventative health measures for the region You are travelling to, including relevant vaccinations and hygiene measures. See www.who.int for further information.
- Accidental Injury whilst participating in an activity not listed in the adventure pack above.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

Adventure sport overseas emergency medical expenses

You are covered...

Up to the benefit limit shown in the overseas medical emergency medical expenses in the table above, for the necessary and Reasonable costs of emergency medical, surgical, and hospital treatment required following an Accidental Injury that You sustain during Your Trip as a result of participating in the above activities listed in the adventure pack.

You are not covered for...

- Any treatment or surgery which the Medical Emergency Assistance Company thinks is not immediately necessary and can wait until You return to Australia. The decision of the Medical Emergency Assistance Company is final.

- Any treatment or surgery which in the opinion of Our Medical Emergency Assistance company is considered to be cosmetic, experimental or elective.
- any treatment or surgery carried out in Australia.
- Any treatment or surgery carried out more than 12 months after the expiry of this insurance.
- Inpatient or private treatment which has not been notified as soon as possible and agreed by Us or the Medical Emergency Assistance Company.
- The extra cost of a single or private hospital room unless this is medically necessary and authorised by the Medical Emergency Assistance Company.
- Treatment in a private hospital or private clinic where suitable state facilities are available.
- Treatment in a private hospital or private clinic unless authorised and agreed by Us.
- Any costs for the following:
 - telephone calls (other than the first call to the Medical Emergency Assistance Company to notify them of the medical problem);
 - taxi fares (unless a taxi is being used in place of an ambulance to take You to or from a hospital); or
 - Food and drink expenses (unless these form part of Your hospital costs if You are kept as an inpatient).
- Any costs You have to pay if You have refused to come back to Australia and the Medical Emergency Assistance Company considered You were fit to return Home.
- Any costs Incurred after a 12-month period from the date when the Accidental Injury happened.
- Any treatment or surgery carried out more than 12 months after the expiry of this insurance whichever sooner.
- Any cost of treatment if there is evidence that You are travelling to receive medical treatment.
- If You received private hospital or medical treatment where public-funded services or care was available in Australia or under any reciprocal health care agreement between the Government of Australia and the government of any other country.
- If Your claim arises out of pregnancy or related Complications after 26 weeks of pregnancy in the case of a single baby or after 19 weeks of pregnancy in the case of twins.
- *Note for expectant mothers:* You should consider whether You should travel under this policy; cover is not provided for childbirth or the health of a newborn child, irrespective of when the child is born.
- If You neglect to observe appropriate preventative health measures for the region You are travelling to, including relevant vaccinations and hygiene measures. See www.who.int for further information.
- Any claim arising from You acting in a way which goes against the advice of a Doctor, or You travelling against the advice of Doctor or where You would have been if You had sought their advice before beginning Your Trip.

- Any claim for the cost of emergency medical, surgical, and hospital treatment required following an Accidental Injury that You sustain during Your Trip as a result of participating in an activity not listed within the adventure pack above.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

REMEMBER YOUR PRE-CLAIM CHECKLIST:

- ✓ Call the Medical Emergency Assistance company as soon as possible on +61 2 9159 6649.
- ✓ Get a written medical report or certificate from Your treating overseas Doctor or dentist, or Your local GP or dentist, that clearly explains the Medical condition, the diagnosis provided, medical tests requested and treatment given.
- ✓ Have documents translated into English if necessary (they do not need to be professional translations).
- ✓ Keep originals of all documents that You submit electronically.
- ✓ You have up to 30 days following Your return to Australia to lodge Your claim.

Own adventure sport equipment

You are covered...

If during the Your Trip, Your adventure sport equipment is lost, stolen or damaged We will at our discretion either:

- reimburse the value of the adventure sport equipment after allowing for Reasonable depreciation for items that are more than two years old; or
- arrange and pay for, or reimburse the cost of, repairing or replacing the adventure sport equipment with articles in the same condition but not with articles better or more expensive than the adventure sports equipment were when new.

The maximum sum insured for all items is shown in the table above.

You are not covered for...

- damage to items while in use; or
- items left unattended; or
- electrical or mechanical breakdown; or
- damage caused by wear and tear, vermin or any process of cleaning, repairing, restoring or alteration; or
- items sent under the provision of any freight contract; or
- items forwarded in advance and unaccompanied; or
- loss or damage caused by detention, confiscation or destruction by customs or other officials or authorities.

Please be aware:

- You must report Your loss or theft to the police or responsible public-transport provider within 24 hours and provide Us with a written record prepared by the police or public-transport provider at the time the loss or theft is reported.

- 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.

Cover is also subject to the general exclusions shown at WHAT WE DON'T COVER AT ALL (general exclusions) p. 70 and policy limits.

Adventure sport equipment hire

You are covered for...

If during Your Trip, your adventure sport equipment is:

- lost, stolen or damaged and a claim has been accepted by us; or
- delayed by Your public-transportation provider by more than 24 hours

We will reimburse the cost of hiring alternative adventure sports equipment up to the limits shown in the table above.

You are not covered for...

We will not provide cover as shown in *WHAT WE DON'T COVER AT ALL (general exclusions) p. 70.*

Unused adventure sports costs

We will cover You...

If during Your Trip, You suffer an Accidental Injury or sickness and a Doctor certifies You are unable to partake in Your pre-booked and pre-paid adventure sports listed in the Adventure pack above then We will reimburse You for the non-refundable cost of the unused portion up to the maximum sum insured shown in the table above.

You are not covered for...

We will not provide cover as shown in *WHAT WE DON'T COVER AT ALL (general exclusions) p. 70.*

Please be aware:

Any claims must be accompanied by a copy of a medical report provided by a Doctor detailing the nature and extent of the Accidental Injury or sickness and as a result confirming Your inability to participate in adventure sport listed in the activity pack above.

What We Don't Cover at all (general exclusions)

There are things You will specifically not be covered for. These things are called “exclusions”. This PDS shows You that there are exclusions that appear under each benefit, as well as exclusions that apply to all benefits (or “general exclusions”). If You are unsure about any exclusions, please contact us at travelwithjane.com

We will not pay under any circumstances if:

1. Any costs of Coronavirus testing, unless You are admitted to hospital as an inpatient as a result of an accident or Illness that is covered under Section 1. Overseas medical and hospital expenses.
2. Any claims directly or indirectly related to a pandemic and/or epidemic, including but not limited to Coronavirus. This exclusion applies to all sections of the policy with the exception of Section 1. Overseas medical and hospital expenses, and under section 6 Additional Accommodation costs, and under Section 7. Cancellation costs, and under Section 8 Cutting your trip short, but only in the event that:
 - a. Under section 7 You have an official positive test result confirming Your diagnosis within 14 days of Your planned departure date after the policy was purchased; or You have been admitted to hospital due to testing positive for Coronavirus after the policy was purchased and are unable to go on holiday for medical reasons
 - b. Under section 8. Cutting your trip short, if the cutting short of Your Trip is deemed medically necessary and unavoidable by a medical professional as a result of Your death, or Your serious Illness and You testing positive for Coronavirus during Your Trip.
 - c. Under section 1,6,7 & 8 prior to Your Trip commencing, the Foreign and Commonwealth Office (FCO) had NOT advised against all (or all but essential) travel to Your intended destination,
 - d. Under section 1,6,7 & 8 you have received the recommended number of doses (including boosters where eligible) of an approved Coronavirus vaccine 14 days prior to your trip commencing. This vaccination requirement shall not apply if you were ineligible for vaccination, or unable to receive the vaccine for medical reasons, and this is shown in your medical records
3. You have a claim relating to the fear or threat of a Pandemic and/or Epidemic, Including but not limited to Coronavirus (COVID-19). This exclusion applies to all sections of the policy.
4. Any claim if having no symptoms of or you not testing positive for Coronavirus you are advised to quarantine or you choose to self-isolate

due to a person you have come into contact with testing positive for Coronavirus.

5. Any claim relating to a Medical condition which You knew about at the time of purchasing this insurance and/or at the time of commencing travel and which could reasonably be expected to lead to a claim unless It Is listed within Pre-existing Medical Conditions We cover automatically, or cover was confirmed in writing by Us.
6. You or anybody You are in collusion with do anything criminal, unlawful or dishonest or You have not been honest and frank with all answers, statements and submissions made in connection with Your insurance application or claim.
7. You do not act in a responsible way to protect Yourself and Your property and to avoid making a claim.
8. Your claim is for a loss that is recoverable by any other method, including but not limited to, compensation under transport accident laws or a workers' compensation act or by any government sponsored fund, plan, medical benefit scheme or any other similar legislation required to be effected by or under a law.
9. Any costs are already accepted or offered by Your transport and/or accommodation provider, even if this is a credit note or alternative travel arrangements.
10. Your claim is related to the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfil any part of their obligation to You.
11. If You do not follow advice from a government or other official body's warning in the mass media:
 - a. against travel to a particular country or parts of a country;
 - b. of a strike, riot, bad weather, civil commotion or contagious disease;
 - c. of a likely or actual Epidemic or Pandemic;
 - d. of a threat of an Epidemic or Pandemic that requires the closure of a country's borders; or
 - e. of an Epidemic or Pandemic that results in You being quarantined.

Please note: This exclusion applies both during Your Trip, and prior to You purchasing Your policy or booking Your Trip whichever the later.

12. If You did not take the appropriate action to avoid or minimise any potential claim under Your policy (including delay of travel referred to in the warning; See www.who.int, smartraveller.gov.au and dfat.gov.au for further information.
13. The Australian Department of Foreign Affairs & Trade (DFAT) and/or smartraveller.gov.au, has advised against all, or against any non-essential travel to Your destination prior to You purchasing Your policy or booking Your Trip whichever the later.

14. For any claim arising from civil riots, blockades, strikes or industrial action of any type (except for strikes or industrial action which were not existing or publicly announced by the date You purchased this insurance or at the time of booking any Trip).
15. For any claim relating to an incident or circumstances which were in the public domain or You were aware of, at the time You purchased this insurance, or at the time of booking any Trip, which could reasonably be expected to lead to a claim.
16. For any claim arising from natural catastrophe which were existing or in the public domain by the date You purchased this insurance or at the time of booking any Trip, whichever is the later.
17. Your claim is as a result of excessive consumption of alcohol by which We mean where You have drunk so much alcohol that a medical practitioner has stated that Your alcohol consumption has caused or actively contributed to Your Injury or Illness, the results of a blood test at the time of Injury or Illness shows that Your blood alcohol level exceeds 0.19% that is approximately 1.5 litres of beer or four 175mL glasses of wine or a witness report of a third party that has advised that You have notably impaired Your faculties and/or judgement.
18. If You, Your Close relative or a member of Your Travelling party is under the influence of, or is addicted to, intoxicating liquor or a drug, except a drug taken in accordance with the advice of their registered medical practitioner.
19. Your claims relates to any behavioural diagnoses such as autism; eating disorders; a drug or alcohol addiction.
20. Any claim if Your alcohol intake whilst taking any combination of medication or drugs known (or would reasonably be suspected) to cause drowsiness, impaired vision or judgment when combined with alcohol whether such drugs are prescribed or not.
21. If You, Your Close relative or a member of Your Travelling party commits suicide, attempts to commit suicide or deliberately injures himself or herself.
22. For any claim arising from You being involved in any deliberate, malicious, reckless, illegal or criminal act.
23. For a claim that arises from You acting in a way which goes against the advice of a Doctor, or You travelling against the advice of Doctor or where You would have been if You had sought their advice before beginning Your Trip
24. Any claim If You, Your Close relative or a member deliberately puts themselves/Yourself in danger (unless trying to save a human life).

25. For any claim involving You taking part in any sport or activity that is not listed on the Sports and activities section on page 30 or listed in the adventure pack and You have paid the appropriate additional premium and cover is confirmed on Your Certificate of Insurance.
26. For any claim arising from Your use of a quad bike.
27. For any claim related to Motor racing, rallying or vehicle racing of any kind.
28. If You, Your Close relative or a member of Your Travelling party participate flying an aircraft other than as a passenger in a licensed passenger aircraft operated by an airline.
29. If You, Your Close relative or a member of Your Travelling party takes part in a riot or civil commotion.
30. Any costs which You would have had to or would have chosen to pay had the reason for the claim not occurred (for example, the cost of food which You would have paid for in any case).
31. For any claim arising as a result of You failing to get the inoculations and vaccinations that You need in relation to Your Trip.
32. If You, Your Close relative or a member of Your Travelling party rides a motorcycle without wearing a helmet, or without having a valid licence as required in Australia and in the country of travel for the same class of motorcycle You (or they) are operating, or as a pillion passenger without a helmet.
33. If You, Your Close relative or a member of Your Travelling party races (except on foot); mountaineers or rock climbs.
34. For any claim where You are not wearing a seatbelt when travelling in a motor vehicle, where a seatbelt is available.
35. For any claim involving You taking part in any sport or activity unless the Policyholder has paid the necessary premium (if applicable) to extend Your policy to provide cover for this. Please see the Sports and activities section on pages 30 and 29 of this policy wording for further details.
36. For any claim relating to winter sports unless the Policyholder has paid the necessary premium to extend Your policy to provide cover under the snow pack for this and cover is listed on Your Certificate of Insurance.
37. For any claim relating to You, Your Close relative or a member of Your Travelling party diving underwater using an artificial breathing apparatus, unless an open water diving licence is held or when diving under licensed instruction.

38. Any claim relating to You taking part in any professional, semi-professional sporting activity.
39. Any claim relating to You taking part in any amateur sporting activity unless the Policyholder has paid the necessary premium to extend Your policy to provide cover under the adventure pack for this and the sport is listed within the adventure pack sports and cover is also listed on Your Certificate of Insurance.
40. If Your claim arises from Pre-existing Medical Conditions except as specified under Pre-existing Medical Conditions.
41. If there are ongoing payments under Section Overseas medical and hospital expenses (page 32) and We decide on the advice of a Doctor appointed by us that You are capable of being repatriated to Australia.
42. If You are travelling with the purpose of receiving medical treatment abroad.
43. If Your claim arises from any medical procedures in relation to AICD/ICD insertion during overseas travel. If You, Your Travelling party or a Close 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 to organise a repatriation to Australia for this procedure to be completed.
44. If Your claim relates to the cost of medication in use at the time the Trip began or for maintaining a course of treatment You were on prior to the Trip.
45. If Your claim relates to Fertility treatment at any time, including any resulting pregnancy.
46. If Your claims relates to Pregnancy with triplets or more.
47. If Your claim relates to Pregnancy in any of the following circumstances:
 - a. if You have experienced any pregnancy Complications prior to purchasing Your policy;
 - b. multiple pregnancies arising from services or treatment associated with an assisted reproductive program, including but not limited to in vitro fertilisation;
 - c. a single pregnancy after 26 weeks;
 - d. a pregnancy with twins after 19 weeks;
 - e. for childbirth at any time.
48. If Your claim relates to any search and rescue expenses (including costs charged to You by a government, regulated authority or private organisation connected with finding or rescuing an individual).
49. Any claim relating to You taking part in any professional, semi-professional activity.

50. Any claim involving You taking part in Manual labour.
51. If Your claim arises directly or indirectly from a sexually transmitted disease.
52. If Your claim is as a result of errors or omissions made in any booking arrangements or a failure to obtain relevant visa, passport or travel documents.
53. For any claim if You already have a more specific insurance covering it (for example, if an item You are claiming for under Section 11a Personal belongings or Baggage (not including Personal Electronics/Gadgets) that is covered on Your household contents insurance policy).
54. For any indirect losses, costs, charges or expenses (meaning losses, costs, charges or expenses which are not listed under the headings 'What You are covered for' in sections 1 to 13).
55. If Your claim arises during or is in connection with a Cruise.
56. If Your claim relates to any costs or expenses are incurred outside the period of the Trip.
57. If You are unable to prove Your financial loss.
58. If Your claim relates to Events for which the provision of cover or a liability to pay a benefit would expose Us and/or Our reinsurer(s) to any sanction, prohibition or restriction under United Nations resolutions or any sanctions, laws or regulations of the European Union, United Kingdom or Australia.
59. For any loss or expense of whatsoever nature directly or indirectly arising out of, contributed to, caused by, resulting from, or in connection with any of the following regardless of any other cause or event contributing concurrently or in any other sequence to the loss or expense:
 1. war, hostilities or any act of war (whether war be declared or not);
 2. invasion;
 3. act of an enemy foreign to the nationality, or enemy foreign to the country in, or over, which the act occurs;
 4. civil war;
 5. riot or civil commotion assuming the proportions of, or amounting to, an uprising;
 6. rebellion, insurrection, revolution or overthrow of any legally constituted Government;
 7. military or usurped power;
 8. explosions of a war weapon;
 9. utilisation of nuclear, chemical or biological weapons of mass destruction howsoever these may be distributed or combined;
 10. radioactive contamination;
 11. murder or assault subsequently proved beyond Reasonable doubt to have been the act of agents of a state foreign to the nationality of the Insured person whether war be declared with that state or not;
 12. terrorist activity.

For the purpose of this exclusion:

- Terrorist activity means an act, or acts, including a Cyber Act or Acts, of any person, or group(s) of persons, committed for political, religious,

ideological or similar purposes with the intention to influence any government and/or to put the public, or any section of the public, in fear.

- Terrorist activity can include, but not be limited to, the actual use of force or violence and/or the threat of such use. Furthermore, the perpetrators of terrorist activity can either be acting alone, or on behalf of, or in connection with any organisation(s) or governments(s).
- Utilisation of Nuclear weapons of mass destruction means the use of any explosive nuclear weapons or device or the emission, discharge, dispersal, release or escape of fissile material emitting a level of radioactivity capable of causing incapacitating disablement or death amongst people or animals.
- Utilisation of Chemical weapons of mass destruction means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing incapacitating disablement or death amongst people or animals.
- Utilisation of Biological weapons of mass destruction means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesised toxins) which are capable of causing incapacitating disablement or death amongst people or animals.
- Radioactive contamination means irradiation or contamination by nuclear material; or the radioactive, toxic, explosive or other hazardous or contaminating properties of any radioactive matter; or any device or weapon employing atomic or nuclear fission and / or fusion or other like reaction or radioactive force or matter.
- Cyber Act means an unauthorised, malicious or criminal act or series of related unauthorised, malicious or criminal acts, regardless of time and place, or the threat or hoax thereof involving access to, processing of, use of or operation of any Computer System.
- Computer System means any computer, hardware, software, communications system, electronic device (including, but not limited to, smart phone, laptop, tablet, wearable device), server, cloud or microcontroller including any similar system or any configuration of the aforementioned and including any associated input, output, data storage device, networking equipment or back up facility, owned or operated by the Insured or any other party.

Also excluded hereon is any loss or expense of whatsoever nature directly or indirectly arising out of, contributed to, caused by, resulting from, or in connection with any action taken in controlling, preventing, or suppressing any, or all, of 1 to 12 above.

In the event any portion of this exclusion is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

60. For a claim for any loss, damage, liability, cost or expense caused deliberately or Accidentally by:

1. the use of, or inability to, use any application, software, or programme in connection with any electronic equipment (for example a computer, smartphone, tablet or internet-capable electronic device);
2. any computer virus;
3. any computer related hoax relating to 1 and/or 2 above.

However, subject to the terms and conditions of Your policy, You are covered up to the amount(s) stated in the schedule for:

- Cancellation costs section
- Cutting Your Trip short Section
- Overseas hospital and medical expenses

as a result of Your serious unexpected Illness or Accidental Injury or death, or that of a Business Associate or Close relative for claims arising under Cancellation costs section or cutting Your Trip short section, due to any of 1, 2 or 3 above.

61. Any claims arising due volcanic ash carried by the wind.

Definitions

Because words can be interpreted in various ways, the following definitions are what We mean when we say certain words in this PDS.

Accident or Accidental or Accidentally means an unexpected, unintended, unforeseeable event causing loss or bodily Injury. The Accident must happen while You are on a Trip and covered under the policy.

Acute Condition means a Illness or injury that is likely to respond quickly to treatment which aims to return You to the state of health You were in immediately before suffering the Illness or injury, or which leads to Your full recovery

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

Business associate means any employee whose level of responsibility in the business is such that if both You and they were absent from the business for a period of five (5) full working days or more this would have a detrimental impact on the running of the business.

Business equipment means computer equipment, communication devices and other business-related equipment that You need in the course of Your business and that is not insured elsewhere. The equipment must be owned by Your employer or if You are self-employed, it must be owned by You.

Carrier means an aircraft, vehicle, train, vessel or other Public transport operated under a licence for transporting passengers, but excludes taxis.

Certificate of Insurance means the document showing details of the cover and which should be read with this policy wording.

Chronic means a persistent and lasting condition in medicine. We do not consider that Chronic pain has to be 'constant' pain, however in many situations it has a pattern of relapse and remission. The pain, disease or medical issue may be long-lasting, recurrent (occurred on more than two occasions) or characterised by long suffering.

Close relative(s) means a relative of Yours or of a member of Your Travelling party who is residing in Australia or New Zealand. It means Your or their spouse, de facto Partner, Parent, parent-in-law, daughter, son, daughter-in-law, son-in-law, brother, sister, brother-in-law, sister-in-law, grandchild, grandparent, step-parent, step-son, step-daughter, fiancé, fiancée, or guardian.

Complication means any secondary diagnosis occurring prior to, during the course of, concurrent with or as a result of the pregnancy which may adversely affect the pregnancy outcome.

Coronavirus means Coronavirus COVID 19, including any related and/or similar conditions howsoever called, or any mutation of these.

Cruise means a journey by ship/vessel sailing on the seas or oceans that includes stopping at various ports on which travel is taken as a paying passenger for pleasure as a holiday, for a minimum of two nights in duration.

Dependant means Your child or grandchild (including fostered or adopted child or grandchild) not in full-time employment who are under the age of 18 at the date of policy issue, travelling with You on the majority of the Trip, and listed as covered on Your Certificate of Insurance.

Doctor means a registered medical practitioner who is not You or related to You, who is currently registered with the Australian Medical Council (AMC) in the Australia (or foreign equivalent) to practice medicine.

Domestic cover means when travel involves an overnight stay and accommodation and/or transport is prearranged with a travel services provider within Australia.

Epidemic means a widespread occurrence of an infectious disease in a community at a particular time.

Excess means the amount which You must first pay for all losses arising from the one event before a claim can be made under Your policy.

Family means You and Your travel Partner named in the Certificate of Insurance and Your Dependants listed as covered on Your Certificate of Insurance.

Flood means a general and temporary covering of water of two or more acres of normally dry land.

Home means Your usual place of residence in Australia.

ICD see AICD

Illness means any disease, infection, bodily disorder which is unexpectedly contracted by You prior to Your Trip or unexpectedly manifests itself for the first time during Your Trip, and which necessitates treatment by a legally qualified medical practitioner, and results in You or any other person to which this insurance applies, being certified by that medical practitioner, at the time as being unfit to travel, or continue with Your original Trip.

Injury means a bodily Injury caused solely and directly by violent, Accidental, visible and external means, during Your Period of cover, which does not result from any Illness, sickness or disease, and which necessitates treatment by a legally qualified medical practitioner, and results in You or any other person to which this insurance applies, being certified by that medical practitioner, at the time as being unfit to travel, or continue with Your original Trip.

Insured person means the person or persons shown on the policy certificate.

Irrecoverable costs means any costs where You are not entitled to a refund by any other means, and/or costs that are not compensated elsewhere, and/or costs that are already accepted or offered by Your transport and/or accommodation provider, even if this is a credit note or alternative travel arrangements.

Manual labour means work involving physical labour.

Medical condition(s) means any disease, unexpected Illness or Injury, including any psychological conditions.

Natural Disaster means volcanic eruption, flood, tsunami, earthquake, landslide, hurricane, tornado or wildfire.

Pair or set of items means items of personal property which are substantially the same, complementary or designed to be used together.

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

Parent means a person with parental responsibility including a legal guardian acting in that capacity.

Partner means a person who is either an Insured person's husband or wife, civil partner, fiancé or fiancée, boyfriend or girlfriend and who permanently lives at the same address and has done so for a minimum of 6 continuous months before the Trip is booked and before the Trip commences.

Period of cover as defined in the policy certificate.

Personal belongings or Baggage means any Personal items owned by You and that You take with You or buy on Your Trip and which are designed to be worn or carried about with You. This includes items of clothing, personal jewellery. However, it does not mean any Personal Electronics, business samples or items that You intend to trade.

Personal Electronics means any electronic items owned by You that You take with You or buy on Your Trip, including but not limited to, mobile phones, smart phones, tablets, iPads, kindles, satnavs, cameras, lenses, camcorders, smart watches, smart glasses, head mounted displays, games consoles, headphones, wireless speakers, laptop computers, video recorders; cameras, photographic, audio, video, electronic and computer equipment.

Personal items means privately owned items (such as clothing and jewellery) normally worn or carried on the person.

Policyholder means the person who has paid for this policy and is shown on the policy certificate.

Pre-existing Medical condition means:

- pregnancy;
- a Medical condition where You are aware of the symptoms, or a related Complication You know about;
- a medical or dental condition where You have received, or are waiting for, medical treatment;
- any condition for which You take prescribed medicine;
- any condition for which You have received surgery or attended hospital;
- any condition for which You have received, or are waiting for, tests, investigations or consultation with a medical specialist;
- any condition for which You have received or been advised to attend a follow-up consultation; or
- any Chronic or ongoing Medical condition or terminal unexpected Illness.

This definition applies to You, Your travelling companion, a Close relative, or any other person.

Public transport means a bus, coach, ferry, sea-vessel or train operating according to a published timetable.

Reasonable means, for medical or dental expenses, the standard level of care given in the country You are in, including the use of the public health care system where there is a reciprocal health care agreement in place with the Government of Australia; for other expenses, the standard level You have booked for the rest of Your Trip; or as determined by us.

Rental vehicle means only a rented motorbike, sedan, campervan, hatchback or station wagon, four-wheel drive or mini bus rented from a licensed motor vehicle rental company.

Resident means an Australian citizen; or

- a holder of a valid Australian permanent resident visa, Partner/spouse visa or skilled working visa (457 or other skilled working visa); or
- a New Zealand passport holder permanently residing in Australia, who:
- has unrestricted right of entry into Australia;
- has access to long-term medical care in Australia (not including reciprocal health care agreements);
- has a permanent Australian residential address; and
- agrees to be repatriated, if required, back to Australia under this insurance.

Snow sport equipment/ Snow sports equipment means skis, poles, boots, bindings, snowboards or ice skates.

Travelling party means those people defined in Family and any travelling companion who has made arrangements to accompany You for at least 50% of the Trip and is shown on Your Certificate of Insurance.

Trip means the period of travel stated in the Certificate of Insurance. It begins on the date of departure as stated in the Certificate of Insurance and ends when You return to Your Home, or when the period of the Trip set out in the Certificate of Insurance ends, whichever happens first.

Unattended means when You do not have full view of Your property or where You are not in a position to prevent the unauthorised taking of Your property, unless it is left in a locked room or a locked safety deposit facility. Property left in a motor vehicle is considered to be Unattended even when the motor vehicle is locked and the property is out of view in an enclosed storage compartment, boot or luggage space.

We, Our, Us means certain underwriters at Lloyd's who deal with You through their agent, Agile Underwriting Services Pty Ltd.

You, Your or Yourself means the person or people named in the Certificate of Insurance.

Privacy Policy

We take your privacy seriously and adhere to the privacy policy detailed on our website at www.travelwithjane.com/privacy.

For further information about our privacy policy or to obtain a copy, please contact: Insured by Us at Level 5, 63 York St, Sydney NSW 2000 or at privacy@travelwithjane.com.

Date prepared

This PDS and Policy Wording was prepared on 29th March 2022 and its distribution has been authorised by Agile Underwriting Pty Ltd.

Financial Services Guide

How the money works, and where your money goes

This is a FSG issued by Agile Insurance Services Pty Ltd (AGILE) in relation to general insurance products promoted by AGILE. The purpose of this FSG is to help You to make an informed decision about whether to use the financial services AGILE can provide to You. It contains information on:

- who AGILE is and how We can be contacted or given instructions;
- the services AGILE offers to You and how they are provided;
- how AGILE and other relevant persons are remunerated;
- AGILE's compensation arrangements;
- Our commitment to protecting Your privacy;
- how complaints are dealt with; and
- other disclosure documents You may also receive.

Other disclosure documents you may receive

Where required, You will also be given a Product Disclosure Statement (PDS) before or at the time You acquire any product as a retail client. The PDS contains information on the benefits and significant characteristics of the product and is designed to assist You in making an informed decision about whether to buy the product or not. It may be more than one document.

1. ABOUT AGILE INSURANCE SERVICES (AGILE)

AGILE is an Australian licensed insurance underwriting agency, AFS 483374 and are a Coverholder at Lloyd's providing innovative, rapid and efficient product solutions. AGILE's details are as follows:

ABN:	48 607 908 243
AFSL:	483374
Head Office:	Level 5, 63 York St, SYDNEY NSW 2000
Postal Address:	Level 5, 63 York St, SYDNEY NSW 2000
Telephone:	1300 705 031
E-mail:	service@agileunderwriting.com
Website:	www.agileunderwriting.com

AGILE is part of the AGENT ZERO Group of Companies. With exceptional underwriting and claims teams, AGILE is committed to excellence, integrity and to providing quality service and insurance products. Around the world, AGILE's clients and brokers can expect the highest level of commitment and service. AGILE focuses on its clients, building strong relationships by offering responsive service, developing innovative products and providing market leadership built on financial strength.

2. ABOUT LLOYD'S

Lloyd's is a unique insurance market and has been in operation for more than 325 years. Lloyd's is the world's leading market for specialist insurance and has an unrivalled concentration of specialist underwriting expertise. With expertise earned over centuries led by expert underwriters and brokers who cover more than 200 countries and territories, the Lloyd's market develops the essential, complex and critical insurance needed to underwrite your most prized assets. Lloyd's is backed by diverse global capital and excellent financial ratings. More information can be found at www.lloyds.com

3. HOW AGILE PROVIDES ITS SERVICES

AGILE may provide a dealing service, with or without general advice, in relation to the general insurance products that AGILE distributes. When AGILE issues general insurance products, AGILE acts on insurers behalf, not Yours. In dealing with Us, AGILE will collect information from You to be able to market and issue the product and manage Your and AGILE's rights and obligations under the product. AGILE will also give You factual information about the product to help You decide whether to buy the policy.

4. HOW AGILE IS PAID FOR ITS SERVICES

Payment for the services AGILE provides

As the issuer of any insurance policy, We will charge You an agreed premium for that product based on a number of factors including Your risk profile and circumstances (plus relevant taxes and charges) which We will calculate and provide You with before You buy the product. In issuing this policy, AGILE underwrites on behalf of certain Underwriters at Lloyd's, and acts as agent for the Underwriters in performing its duties under a Binding Authority Agreement (Contract Number B601452296418AA).

AGILE receives a commission calculated as a percentage of the premium for performing this work.

Remuneration of our staff

All permanent AGILE employees are paid an annual salary. An annual bonus may be paid in some circumstances, which can be based on performance against sales targets and other performance criteria. All temporary AGILE employees receive hourly wages or such wages otherwise agreed for a fixed term or contract. Performance-based payments may also be paid in some circumstances. AGILE employees may also receive other non-monetary benefits such as attendance at business related conferences, study trips, other functions or gift vouchers.

Referral to AGILE by third parties

In certain cases, We may have a relationship with a third party who We may pay for referring You to us. We may pay them a referral fee which is a percentage of the net premium of an insurance policy (which is the total premium payable less GST and Stamp Duty).

This referral fee is already incorporated into the premium payable by You and the amount can vary, depending on the type of arrangement We have with the third party and the type of insurance product You purchase. The amount We pay them includes a reimbursement of expenses they incur in performing their role, for example marketing, postage, telephone, printing and call centre costs. The referral fee is normally payable to third parties on a monthly or quarterly basis, in arrears.

Further information

You can ask Us to give You more particulars of the remuneration or other benefits referred to above within a Reasonable period after receiving this FSG and before We provide You with the financial service to which this FSG relates, unless We agree otherwise.

5. MARKETING COMPANIES

AGILE may authorise a number of marketing and telemarketing companies to provide services on its behalf for which they receive remuneration from AGILE. See below for further details about their remuneration. These services may include an inbound and outbound call centre to assist You in applying for the policy and to answer any general queries You may have about the policy. The companies follow procedures set by AGILE and may also provide You with general advice which has been prepared and authorised by AGILE. In providing these services, the companies act on AGILE's behalf, not Yours. The companies may also act on behalf of other licensees. For further details, please contact AGILE on 1300 705 031.

Remuneration of a marketing company's staff

Depending on the particulars of each marketing or telemarketing campaign, a company's employees will receive a salary or a fee which is an hourly rate negotiated with the telemarketing company and may also receive one or more of the following benefits which are based on the employees' performance against sales targets and other performance criteria:

- soft dollar benefits which can include gift vouchers, meals, entertainment such as tickets to sporting events and gifts such as bottles of wine; &/ or ;
- weekly monetary bonuses.

These benefits are paid by the company and not AGILE. The identity and remuneration of individual operators should not impact the service provided or be material to Your decision to enter into an insurance contract with AGILE.

6. COMPENSATION ARRANGEMENTS

Please refer to the Financial Claims Scheme and Compensation Arrangements section contained within the PDS section of this booklet – Combined Policy Wording and PDS and FSG.

7. PERSONAL INFORMATION HANDLING PRACTICES

Collection, Use and Disclosure

We collect Your personal information (which may include sensitive information) when You are applying for, changing or renewing an insurance policy with Us or when We are processing a claim in order to help Us properly administrate Your insurance proposal, policy or claim. Personal information may be obtained by Us directly from You or via a third party such as Your insurance intermediary or employer (e.g. in the case of a group insurance policy). When information is provided to Us via a third party We use that information on the basis that You have consented or would reasonably expect Us to collect Your personal information in this way and We take Reasonable steps to ensure that You have been made aware of how We handle Your personal information. The primary purpose for Our collection and use of Your personal information is to enable Us to provide insurance services to You. Sometimes, We may use Your personal information for Our marketing campaigns, in relation to new products, services or information that may be of interest to You. We may disclose the information We collect to third parties, including service providers engaged by Us to carry out certain business activities on Our behalf (such as assessors and call centres in Australia). In some circumstances, in order to provide Our services to You, We may need to transfer personal information to other entities within the Agent Zero Group of companies, (such as the regional head

offices of AGILE located in other jurisdictions) or third parties with whom We, or those other Agent Zero Group entities, have sub-contracted to provide a specific service for Us and these may be outside of Australia. In particular, certain business process functions of AGILE are performed by a dedicated servicing unit located in the Philippines. Please note that no personal information is disclosed by Us to any overseas entity for marketing purposes. In all instances where personal information may be disclosed overseas, in addition to any local data privacy laws, We have measures in place to ensure that those parties hold and use that information in accordance with the consent You have provided and in accordance with Our obligations to You under the *Privacy Act 1998 (Cth)*.

Your Choices

In dealing with Us, You agree to Us using and disclosing Your personal information as set out in this statement and Our Privacy Policy. This consent remains valid unless You alter or revoke it by giving written notice to Our Privacy Officer. However, should You choose to withdraw Your consent it is important for You to understand that this may mean We may not be able to provide You or Your organisation with insurance or to respond to any claim.

How to Contact Us

If You would like a copy of Your personal information, or to correct or update it, please contact Our customer relations team on 1300 705 031 or email privacy@agileunderwriting.com. If You have a complaint or would like more information about how We manage Your personal information, please review Our Privacy Policy for more details or contact the Privacy Officer, AGILE Underwriting Services Pty Limited, Level 5, 63 York St, Sydney NSW 2000, Tel: 1300 705 031 or email privacy@agileunderwriting.com.

8. COMPLAINTS AND DISPUTE RESOLUTION

AGILE takes the concerns of its customers very seriously. AGILE has detailed complaint handling and dispute resolution procedures that You may access, at no cost to You. To obtain a copy of Our procedures, please contact Us on 1300 705 031 or complaints@agileunderwriting.com. To assist AGILE with Your enquiries, please provide us with Your claim or policy number (if applicable) and as much information You can about the reason for Your complaint or dispute. AGILE's complaints and dispute procedures are as follows:

Stage 1 – Complaint Handling Procedure

If You are dissatisfied with any of AGILE's products or services and You wish to lodge a complaint, please contact Us at:

Postal address: The Complaints Officer
 AGILE Underwriting Services Pty Limited
 Level 5, 63 York St, Sydney NSW 2001
 Telephone: 1300 705 031
 Email: complaints@agileunderwriting.com

We will respond to Your complaint within fifteen (15) business days, or if further investigation or information is required, We will work with You to agree on Reasonable alternative timeframes.

Stage 2 – Dispute Resolution Procedure

If You are dissatisfied with Our response to Your complaint, You may ask that Your complaint be treated as a dispute and referred to AGILE’s dispute resolution team at:

Postal address: Lloyd’s Underwriters’ General Representative in Australia
 Lloyd’s Australia Limited
 Level 9, 1 O’Connell Street Sydney NSW 2000
 Telephone: (+61 2) 9223 0752
 Facsimile: (+61 2) 9223 1466
 Email: idraustralia@lloyds.com

When You lodge Your dispute with Lloyd’s, they will usually require the following information:

- a) Name, address and telephone number of the Policyholder;
- b) The type of insurance policy involved;
- c) Details of the policy concerned (policy and/or claim reference numbers, etc.);
- d) Name and address of the insurance intermediary through whom the policy was obtained;
- e) Details of the reasons for lodging the complaint;
- f) Copies of any supporting documentation You believe may assist Lloyd’s in addressing Your dispute appropriately.

Following receipt of Your complaint, You will be advised whether Your dispute will be handled by either Lloyd’s Australia or the Complaints Department at Lloyd’s in London:

- a) Where Your complaint is eligible for referral to the Australian Financial Complaints Authority (AFCA), Your complaint will be reviewed by a person at Lloyd’s Australia with appropriate authority to deal with Your dispute. If Your complaint or dispute is not resolved to Your satisfaction or a final response has not been provided within 45 days, You may refer the matter to the Australian Financial Complaints Authority (AFCA), for review. AFCA provides a free and independent dispute resolution service for consumers who have general insurance disputes falling within its terms of reference and its contact details are:

Postal address: AFCA
GPO Box 3, Melbourne VIC 3001

Telephone: 1800 931 678

- b) Where Your complaint is not eligible for referral to AFCA, Lloyd's Australia will refer Your complaint to the Complaints Department at Lloyd's, who will then liaise directly with You. Complaints that cannot be resolved by Complaints may be referred to the Financial Ombudsman Service (UK). Further details will be provided at the appropriate stage of the complaints process.

How long will Stage 2 process take?

Your complaint will be acknowledged in writing within five (5) business days of receipt, and You will be kept informed of the progress of Lloyd's review of Your complaint at least every ten (10) business days.

The length of time required to resolve a particular dispute will depend on the individual issues raised, however in most cases You will receive a full written response to Your complaint within fifteen (15) business days of receipt, provided Lloyd's have received all necessary information and have completed any investigation required.

Stage 3 – External Dispute Resolution

If your complaint or dispute is not resolved to your satisfaction or a final response has not been provided within 45 days, you may refer the matter to the Australian Financial Complaints Authority (AFCA) for review. AFCA provides a free and independent dispute resolution service for consumers who have general insurance disputes falling within its terms of reference and its contact details are:

Postal address: AFCA
GPO Box 3, Melbourne VIC 3001


Telephone: 1800 931 678

10. WHO CAN I CONTACT IF I HAVE QUESTIONS?

We've simplified our contact points so you can easily get in touch with us.

FOR ENQUIRIES RELATING TO	PLEASE CONTACT
Policy questions and coverage Any questions, just call or email.	hello@travelwithjane.com
Cancelling your policy You can cancel your policy at any time.	www.travelwithjane.com/change-your-policy/
Making a claim online You can claim directly through our online portal.	www.travelwithjane.com/claims
Making a claim Get in touch straight away and we can help.	www.travelwithjane.com/claims

Jane

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