

# Travel Insurance Policy Document

This **policy** is only available to **you** if **you** are permanently resident in the Republic of Ireland.

## Please note:

This document refers to new Annual or Single trip policies purchased on or after 29th January 2025, which are covered under Master Policy Number: MAPFRE/GC/ATST002/2024.

If you bought your policy before this date, please use the document link at the bottom of your schedule of insurance.

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## SCHEDULE OF BENEFITS (SINGLE TRIP & ANNUAL COVERS)

Description	Premium Cover		Standard Cover		Budget Cover	
	Cover Limit per Insured	Excess per Insured	Cover Limit per Insured	Excess per Insured	Cover Limit per Insured	Excess per Insured
<b>SECTION A: Your Pre Travel Cover</b>						
<b>Cancellation Charges</b>	Up to €7,000	€85 (€40 Loss of deposit)	Up to €3,000	€100 (€40 Loss of deposit)	Up to €1,000	€150 (€40 Loss of deposit)
<b>SECTION B: Your Travel Cover</b>						
<b>Curtailment Charges</b>	Up to €7,000	€85 (€40 Loss of deposit)	Up to €3,000	€100 (€40 Loss of deposit)	Up to €1,000	€150 (€40 Loss of deposit)
<b>Catastrophe</b>	Up to €2,000	€85	Not Available	N/A	Not Available	N/A
<b>Emergency Medical Expenses and Repatriation</b>	Up to €11,500,000	€125 or €55,000 for in-patient hospital claims where a PHI discount has been availed of	Up to €10,000,000	€135 or €55,000 for in-patient hospital claims where a PHI discount has been availed of	Up to €7,500,000	€150 or €55,000 for in-patient hospital claims where a PHI discount has been
Dental Treatment	€300		€300		€300	
Funeral Costs	€1,500		€1,500		€1,500	
<b>Hospital Benefit</b>	€25 per day up to €1,000	Nil	€20 per day up to €400	Nil	Not Available	N/A
<b>Search &amp; Rescue Cover</b>	Up to €10,000	€85	Up to €7,000	€100	Not Available	N/A
<b>Personal Possessions</b>	Up to €3,500	€85	Up to €2,500	€100	Up to €1,000	€150
Single Item Limit	€500		€250		€150	
Valuables Limit in total	€500		€250		€150	
Travel Documents	€500		Not Available		Not Available	
<b>Delayed Baggage</b>	€100 a day up to €200	Nil	€100 a day up to €200	Nil	Not Available	N/A
<b>Personal Money</b>	Up to €800	€85	Up to €300	€100	Up to €200	€150
Cash Limit	€300		€200		€100	
Cash (aged under 18)	€100		€100		€100	
<b>Mugging Benefit</b>	€70 per day up to €700	Nil	Not Available	N/A	Not Available	N/A
<b>Unused Excursions</b>	Up to €200	Nil	Not Available	N/A	Not Available	N/A
<b>Personal Accident</b>	Max Benefit €40,000	Nil	Max Benefit €25,000	Nil	Max Benefit €15,000	Nil
Loss of limbs or sight (aged under 66)	€40,000		€25,000		€15,000	
Permanent Total Disablement (aged under 66)	€40,000		€25,000		€15,000	
Death benefit (aged 18 - 65)	8,000		€5,000		€5,000	
Death benefit (aged under 18)	€4,000		€2,500		€2,500	
All benefits (aged 66 and over)	€5,000		€5,000		€5,000	
<b>Missed Departure</b>	Up to €2,000		€85		Up to €700	
<b>Travel Delay</b>	€35 for each 12 hour period up to €490	Nil	€20 for the 1 <sup>st</sup> 12 hour period & €10 each subsequent 12 hour period up to €100	Nil	Not Available	N/A
<b>Holiday Abandonment</b>	Up to €7,000	€85	Up to €3,000	€100	Up to €1,000	€150
<b>Hotel Services Failure</b>	€70 per day up to €700	Nil	Not Available	N/A	Not Available	N/A
<b>Pet Care</b>	€35 a day up to €315	Nil	Not Available	N/A	Not Available	N/A
<b>Personal Liability</b>	Up to €3,250,000	€150	Up to €2,000,000	€150	Up to €1,000,000	€150
<b>Legal Expenses</b>	Up to €20,000	€150	Up to €15,000	€150	Up to €10,000	€150
<b>Connecting Flight Cover</b>	Up to €750	Nil	Up to €750	Nil	Not Available	N/A

## SCHEDULE OF BENEFITS (SINGLE TRIP & ANNUAL COVERS) cont.

Description	Premium Cover		Standard Cover		Budget Cover	
	Cover Limit per Insured	Excess per Insured	Cover Limit per Insured	Excess per Insured	Cover Limit per Insured	Excess per Insured
<b>WINTERSPORTS COVER - Available upon payment of an additional premium and shown on the validation certificate. (Limited to 24 days per policy year on annual policies).</b>						
<b>Ski Equipment</b>						
Owned	Up to €1,000	€85	€500	€100	€300	€150
Hired	€500		€250		€150	
Single Item Limit	€500		€250		€150	
Ski Hire	€35 a day up to €350	Nil	€20 a day up to €200	Nil	€10 a day up to €200	Nil
Ski Pack	€100 a day up to €500	Nil	€75 a day up to €300	Nil	€50 a day up to €300	Nil
Piste Closure	€35 a day up to €350	Nil	€20 a day up to €200	Nil	€10 a day up to €200	Nil
Avalanche Closure	Up to €400	€85	Up to €100	Nil	Up to €100	Nil
<b>GOLF COVER</b>						
<b>Available upon payment of an additional premium and shown on the validation certificate.</b>						
<b>Golf equipment</b>	Up to €1,500	€85	Not Available	N/A	Not Available	N/A
<b>Golf equipment Hire</b>	€50 a day up to €500	Nil				
<b>Non Refundable Golfing Fees</b>	€120 a day up to €500	Nil				
<b>CAMPING &amp; FIELD SPORTS EQUIPMENT COVER</b>						
<b>Available upon payment of an additional premium and shown on the validation certificate. (Only available under a single trip policy)</b>						
<b>Camping &amp; Field sports equipment owned by a group</b>	Up to €750	€75	Not Available	N/A	Not Available	N/A
<b>BUSINESS COVER</b>						
<b>Available upon payment of an additional premium and shown on the validation certificate.</b>						
<b>Business equipment</b>	Up to €3,250	€85	Not Available	N/A	Not Available	N/A
Single Item Limit	€800					
Computer Equipment Single Item Limit	€2,500					
Samples Limit	€800					
<b>Business equipment delay</b>	€150 a day up to €450					
<b>Business equipment hire</b>	€240 a day up to €1,200	€85				
<b>Business money</b>	Up to €1,600	€85				
Cash Limit	€800					
<b>CRUISE COVER</b>						
<b>Available upon payment of additional premium &amp; shown on the validation certificate.</b>						
<b>Extended Baggage</b>	Up to €4,500	€85	Not Available	N/A	Not Available	N/A
Single Article Limit	€750					
Valuables Limit in total	€700					
<b>Missed Port</b>	Up to €50 per port up to €500	Nil				
<b>Stateroom/Cabin Confinement</b>	€100 per 24hrs up to €600	Nil				
<b>Unused Excursions</b>	Up to €500	€85				
<b>Cruise Connection</b>	Up to €1,500	€85				
<b>TRAVEL DISRUPTION COVER</b>						
<b>Available upon payment of an additional premium and shown on the validation certificate.</b>						
<b>Extended Cancellation or Curtailment</b>	Up to €1,000	€85	Not Available	N/A	Not Available	N/A
<b>Extended Missed Departure</b>	Up to €500	€85				
<b>Extended Accommodation Costs</b>	Up to €1,000	€85				
<b>Extended Travel Delay</b>	€20 for first 12hrs (€10 each 12hrs thereafter up to €200)	Nil				
<b>Extended Holiday Abandonment</b>	Up to €1,000	€85				

## SCHEDULE OF BENEFITS (SNOW PRO PLUS & FIS RACING COVERS)

Description	Premium Cover	
	Cover Limit per Insured	Excess per Insured
<b>SECTION A: Your Pre Travel Cover</b>		
Cancellation Charges	Up to €7,000	€85 (€40 Loss of deposit)
<b>SECTION B: Your Travel Cover</b>		
<b>Curtailment Charges</b>	Up to €7,000	€85 (€40 Loss of deposit)
<b>Catastrophe</b>	Up to €2,000	€85
<b>Emergency Medical Expenses and Repatriation</b>	Up to €11,500,000	€125 or €55,000 for in-patient hospital claims where a PHI discount has been availed of
Dental Treatment	€300	
Funeral Costs	€1,500	
<b>Hospital Benefit</b>	€25 per day up to €1,000	
<b>Search &amp; Rescue Cover</b>	Up to €10,000	€85
<b>Personal Possessions</b>	Up to €3,500	€85
Single Item Limit	€500	
Valuables Limit in total	€500	
<b>Travel Documents</b>	€500	
<b>Delayed Baggage</b>	€100 a day up to €200	Nil
<b>Personal Money</b>	Up to €800	€85
Cash Limit	€300	
Cash (aged under 18)	€100	
<b>Mugging Benefit</b>	€70 per day up to €700	Nil
<b>Unused Excursions</b>	Up to €200	Nil
<b>Personal Accident</b>	Max Benefit €40,000	Nil
Loss of limbs or sight (aged under 66)	€40,000	
Permanent Total Disablement (aged under 66)	€40,000	
Death benefit (aged 18 - 65)	€8,000	
Death benefit (aged under 18)	€4,000	
All benefits (aged 66 and over)	€5,000	
<b>Missed Departure</b>	Up to €2,000	€85
<b>Travel Delay</b>	€35 for each 12hour period up to €490	Nil
<b>Holiday Abandonment</b>	Up to €7,000	€85
<b>Hotel Services Failure</b>	€70 per day up to €700	Nil
<b>Pet Care</b>	€35 a day up to €315	Nil
<b>Personal Liability</b>	Up to €3,250,000	€150
<b>Legal Expenses</b>	Up to €20,000	€150
<b>Connecting Flight Cover</b>	Up to €750	Nil
<b>WINTERSPORTS COVER</b>		
Available upon payment of an additional premium and shown on the validation certificate. (Limited to 24 days per policy year on annual policies).		
<b>Ski Equipment</b>		
Owned	Up to €1,000	€85
Hired	€500	
Single Item Limit	€500	
<b>Ski Hire</b>	€35 a day up to €350	Nil
<b>Ski Pack</b>	€100 a day up to €500	Nil
<b>Piste Closure</b>	€35 a day up to €350	Nil
<b>Avalanche Closure</b>	Up to €400	€85

# TRAVEL INSURANCE

## READ ME FIRST

The **Insurer** hereby draws **you** attention to some important features of the travel insurance **policy** under which **you** are covered. If **you** would like more information, please contact **us** at [www.getcover.ie](http://www.getcover.ie).

### HEALTH

The **policy** contains conditions relating to the health of the people travelling and others upon whose wellbeing the **trip** depends. **You** are required to disclose the condition of such people by following the medical screening process contained within this document.

### RECIPROCAL HEALTH AGREEMENT

Travelers to European Union countries can apply for a European Health Insurance Card online by visiting [www.ehic.ie](http://www.ehic.ie) or by contacting their local health office. This will entitle them to benefit from the reciprocal health agreements which exist between certain European Countries. In the event of a claim being accepted for medical expenses which has been reduced by more than the **excess** by the use of a European Health Insurance Card or Private Health Insurance, the deduction of the **excess** under the Emergency Medical Expenses and Repatriation section will not apply.

### PRIVATE MEDICAL INSURANCE

If, when **you** purchased this **policy**, **you** have confirmed that **you** have a private health insurance policy that includes inpatient hospital cover abroad of €55,000 or more, which covers **you** and all **insured persons** named on **your** validation **certificate**, **you** will have received a discount on the premium. If **you** have availed of this discount, this will be shown within **your** validation **certificate**.

In the event that **you** avail of the discount and this is confirmed in **your** validation **certificate**:

- a) **You** do not need to contact **our medical pre-screening company** to declare any **medical conditions**.
- b) The “Emergency Medical Expenses & Repatriation” section of this **policy** tops up this private health insurance cover and comes into effect when **you** have reached the in-patient hospital expenses limit under that **policy**.

If, under **your** private health insurance policy, **you** have to serve a “waiting period” (this is the period during which **you** are not fully covered under the **policy**), **you** cannot avail of the private health insurance discount and must contact **our** medical pre-screening company to declare any **medical conditions**.

**You** must ensure that the private health insurance policy covers all of the **insured persons** under this **policy**, including whilst participating in any sports or activities, and remains in force for the duration of **your period of insurance**.

### POLICY AGE LIMITS

**Single trip age limit** - This **policy** is not available to anyone aged 85 years or over at the time of purchase of the **policy**.

**Annual multi trip age limit** - This **policy** is not available to anyone aged 76 years or over at the time of purchase of the **policy**. If **You** reach 76 years during the **period of insurance**, cover will continue until the next renewal date but not after that.

Availability of “Hazardous Sports or Leisure Activities” will be restricted to **Category 2(66+)** for any persons aged 66 years of age, or over, on the date of purchasing this insurance **policy**. This cover is available on payment of the appropriate additional premium.

Children may travel independently of parents or guardians, provided they are accompanied by a responsible adult or are escorted to the departure gate by a responsible adult and are picked up by a responsible adult at the arrival gate.

### RESIDENCY

This **policy** is only available to **you** if **you** are permanently resident in the Republic of Ireland and have registered with a medical practitioner in the Republic of Ireland. **You** must be in the Republic of Ireland at the time of purchasing this **policy** and before starting **your trip**.

### PROPERTY CLAIMS

These claims are paid based on the value of goods at the time **you** lose them and not on a ‘new for old’ or replacement cost basis. An amount for wear, tear and depreciation will be deducted. Certain items of **personal possessions** are not covered. Written Police reports are required for all losses involving theft and other losses require alternative appropriate written reports, such as an airline property irregularity report, a hotel manager’s report, etc.

### CONDITIONS EXCLUSIONS AND WARRANTIES

Conditions, exclusions and warranties will apply to individual sections of **your policy** while general exclusions and conditions will apply to the whole of **your policy**. It is a condition of this **policy** that **you** take reasonable care to answer all questions honestly and to the best of **your** knowledge and not to make a misrepresentation of the facts of **your** state of health. Failure to do so may result in the **Insurer’s** non-liability for claims. Please see the section below entitled, Duty of Care.

## DUTY OF CARE

**You** must take care to answer all questions honestly and to the best of **your** knowledge. **You** must not make any misrepresentation of a fact that could influence the **Insurer** in accepting **your** insurance, this includes **your** destination, duration, age and state of health of all travellers on this **policy** or on whom **your trip** depends. If **you** are in any doubt, **you** should tell Getcover.ie. Making a misrepresentation of the facts may result in **your** claim being invalid.

## HAZARDOUS ACTIVITIES

**You** are required at all times to wear the appropriate safety equipment for that activity (for example protective clothing and/or suitable head protection). Please note that a General Exclusion of cover exists under **your policy** with **us** for claims arising directly or indirectly from **your** "self-exposure to needless peril". This means that **we** will not pay **your** claim if **you** do not meet this **policy** condition.

**You** are covered when **you** are participating in any of the "acceptable sports and leisure activities" listed within this **policy** document. **You** will only be covered when **you** are participating in any of the "hazardous sports and leisure activities" listed within this **policy** document or in any **wintersports/wintersports**, if **you** have advised **us** at the time **you** bought the **policy**, paid the appropriate additional premium before **your trip** commenced and the cover is shown on **your** validation **certificate**.

## PERSONAL LIABILITY

There is no cover for personal liability claims arising directly or indirectly from, happening through or in consequence of:

- a) ownership, possession or use of any vehicle, automobile, aircraft, watercraft or any mechanically propelled conveyance;  
Or
- b) Your participation in any "hazardous sport or leisure activity."

## POLICY LIMITS

All sections of the **policy** have limits on the amount the **Insurer** will pay under that section. There are also specific limits under the **personal possessions** and baggage section for: **single items**, **valuables**, items for which an original receipt, proof of purchase or an insurance valuation (obtained prior to loss) is not supplied.

## POLICY EXCESSES

Under most sections of the **policy**, claims will be subject to an **excess**. The **excess** will be applied per person, per section and per incident under which a claim is made. This means that **you** will be responsible for the first part of the claim. The amount **you** have to pay is the **excess**.

## REASONABLE CARE / UNATTENDED PROPERTY

**You** must exercise reasonable care to prevent **illness**, injury or loss or damage to **your** property, as if uninsured. There is no cover for property left **unattended** in a place to which the general public has access. There is no cover for loss of **cash** which was not carried on **your** person unless placed in a safety deposit box or similar locked, fixed receptacle.

## LAW APPLICABLE UNDER THIS CONTRACT

**You** and **we** are free to choose the laws applicable to the **policy**. **We** propose to apply the laws of the Republic of Ireland and by purchasing this **policy**, **you** have agreed to this.

## COMPLAINTS PROCEDURE

If **you** have any cause for complaint regarding this insurance, please refer to the Complaints Procedure.

## MANUAL EMPLOYMENT

In addition to non-manual work, the **policy** will automatically cover bar work and fruit picking. Other manual work may be covered with the agreement of Getcover.ie & the **Insurer** and the payment of the appropriate additional premium.

## DRIVING ABROAD

Cover under the medical expenses and Personal Accident sections of the **policy** are extended to include claims arising as a consequence of **you** travelling as a driver or passenger in any private motor vehicle or motorcycle under 50cc (providing the rider holds a full license and the rider and pillion passenger are wearing a crash helmet).

It should be noted that no coverage exists under the personal liability section of the **policy** for claims arising out of the use or possession of a motorized vehicle. Therefore, **you** are urged to seek confirmation from the vehicle owner or hirer that this area of coverage is adequately provided for under an alternative insurance **policy**.

Please note **you** are not covered under any section of the **policy** if **you** are travelling on a motorized vehicle for which **you** do not hold appropriate qualifications to ride in the Republic of Ireland.

## CANCELLATION

We hope **you** are happy with the cover this **policy** provides. However, if after reading this **policy** document, this insurance does not meet with **your** requirements, please tell Getcover.ie within 14 days of issue, by:

- a) emailing [info@getcover.ie](mailto:info@getcover.ie), or
- b) telephoning 01 526 7488, or
- c) writing to: Getcover & Company Limited, 4-5 Burton Hall Road, Sandyford, Dublin 18, D18 A094.

Providing that a claim does not exist and travel has not taken place Getcover.ie will refund **your** premium.

## SPECIAL NOTICE

This is not a private medical insurance **policy** and only gives cover in the event of an **accident** or sudden **illness** that requires emergency treatment whilst abroad. In the event of any medical treatment becoming necessary which results in a claim under this insurance, the **insured person** will be expected to allow **us**, or **our** representatives, unrestricted and reasonable access to all their medical records and information.

## TRAVEL INSURANCE

**Your** insurance is covered under master **policy** number **MAPFRE/GC/ATST002/2024**, valid for policies issued between 01/09/2024 to 31/08/2025, with travel finishing before 01/09/2026. Should **your** circumstances change and there is a **change in health** between the start of **your policy you** must inform **us** at the earliest opportunity. This is **your** travel insurance **policy**. It contains details of what is covered, conditions and what is not covered, for each **insured person** and is the basis on which all claims will be settled. It is validated by the issue of the validation **certificate**, which **we** recommend be attached to the **policy**.

This **policy** is designed to cover most eventualities whilst **you** are on **your trip**. It does not provide cover in all circumstances and **we** expect that **you** take all possible care to safeguard against **accident**, injury, loss or damage as if **you** had no insurance cover.

## THE INSURER

The **Insurer** and administrator for this **policy** is:

MAPFRE ASISTENCIA Compania Internacional de Seguros y Reaseguros SA, trading as MAPFRE ASSISTANCE Agency Ireland, is authorised by Direccion General de Seguros y Fondos de Pensiones del Ministerio de Economia y Hacienda in Spain and is regulated by the Central Bank of Ireland for conduct of business rules. The principal place of business of MAPFRE ASSISTANCE Agency Ireland is at Ireland Assist House, 22-26 Prospect Hill, Galway. Registered in Republic of Ireland. Reg No 903874.

This policy document only constitutes a valid evidence of insurance when it is issued in conjunction with a validation certificate.

## TERRITORIAL LIMITS

**Area 1** Europe – The continent of Europe west of the Ural Mountains, including all countries with a Mediterranean coastline (except Algeria, Israel, Lebanon and Libya).

**Area 2** Australia / New Zealand and Area 1

The territorial limit of **Area 2** also includes temporary cover for customers travelling to, or returning from, Australia who stopover in another country which would normally be covered by **Area 3**.

*The following rules and exceptions apply:*

- *USA and/or Canada stopovers are not included in this temporary cover.*
- *The temporary cover applies for up to 10% of the trip duration, subject to a maximum of 9 days. For Example:*
  - Customers travelling for 30 days have 3 days stopover cover;
  - Customers travelling for 60 days have 6 days stopover cover;
  - Customers travelling for 90 days or more have 9 days stopover cover.

**Area 3** Worldwide including USA and Canada.

## POLICY QUERIES

If you would like more information, have a query or if you feel the insurance may not meet your needs, email [Getcover.ie](mailto:info@getcover.ie) at [info@getcover.ie](mailto:info@getcover.ie) or call 01 526 7488.



## IMPORTANT CONDITIONS RELATING TO HEALTH

**You** must comply with the following conditions to have the full protection of **your policy**.

If **you** do not comply, **we** may at **our** option, cancel the **policy** or refuse to deal with **your** claim or reduce the amount of any claim payment.

### WHAT WE WILL NOT COVER

This **policy** will not provide cover during the **period of insurance**, if **you**:

- travel against the advice of a **medical practitioner**, or
- are travelling specifically to receive medical treatment, surgery or investigations outside of **your home** area, or
- have any medical condition for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**, or
- travel against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider.

### WHAT DO YOU NEED TO DO NEXT?

If, when **you** purchased this **policy**, **you** have confirmed that **you** have a private health insurance **policy** that includes inpatient hospital cover abroad of €55,000 or more **you** do not need to contact **our medical pre-screening company** to declare those **medical conditions**. If, under **your** private health insurance **policy**, **you** have to serve “waiting period” (this is the period during which **you** are not fully covered under the **policy**), **you** must contact **our medical pre-screening company** to declare any **medical conditions**.

To ensure **you** have full cover under the “**Cancellation and Curtailment**” section, the “Emergency medical expenses and repatriation” section and the “Hospital benefit” section of the **policy**, at the time of purchase of the **policy**, **you** must:

- declare any **Pre-existing medical condition** that requires **you** to contact the **medical pre-screening company**, and **we** must agree in writing to cover **you**,
- not have been diagnosed with a terminal condition,
- not be on a waiting list for treatment or investigation or have knowledge of the need for surgery, treatment or investigation,
- not have any undiagnosed **medical conditions**.

**You** should only contact the **medical pre-screening company** if the answer to any of questions 1, 2, 3 or 4 below is YES. If all the appropriate answers are NO then there is no need to contact the **medical pre-screening company** and **your pre-existing medical condition(s)** will be covered.

**You** should also refer to the ‘general exclusions which apply to all sections of the insurance’.

1. Have **you** or anyone travelling with **you**, EVER suffered from, been investigated for, diagnosed with, received treatment, surgery or taken any medication for:
  - a. any respiratory condition (relating to the lungs or breathing)
  - b. any heart condition
  - c. any circulatory condition
  - d. any type of cancer
  - e. any type of diabetes
  - f. a stroke, or
  - g. high blood pressure?



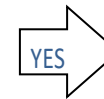
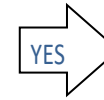
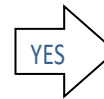
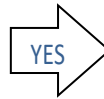
2. In the last 2 years - have **you**, been:
  - a. treated for any serious or re-occurring **medical condition**
  - b. asked to take regular prescribed medication, or
  - c. referred to a specialist or consultant at a hospital for tests, diagnosis or treatment?



3. Are **you** waiting for any tests, treatment or non-routine hospital appointment?



4. Has **your** doctor changed **your** regular prescribed medication in the last 12 months?



If **you** have answered YES to the questions on the left **you** must tell **us**, in order to obtain cover for **your medical condition(s)**, although an increased premium or **excess** may be required to do so.

To enable **us** to consider **your medical condition**, please contact the **medical pre-screening company** on: **01 261 2009**

9am - 5pm, Monday to Friday

Should **we** require any additional premium, and **you** accept **our** offer, this should be paid to Sedgwick Ireland, and sent within 14 days of **our** offer.

Should **you** decide not to pay the additional premium the declared **medical condition** will not be covered. Full confirmation of **our** terms and conditions will be sent out to **your** address after **your** call.

Any additional **medical conditions** not declared to **us** will not be covered.

If **your** answer changes to ‘YES’ at any point after the purchase of this **policy** **you** must call to inform **us** of this **change in health** to ensure **you** are fully covered for **your trip**.

Full cover is available under this **policy**. If **your** answers to any of the above change to YES during the **period of insurance**, please contact **us** on **01 261 2009** - 9am - 5pm, Monday to Friday.

Exclusions that apply if **your** relative, the person **you** are intending to stay with, **your** travelling companion or **your** close business associate has **medical conditions**

**We** are unable to provide cover for any claim arising as a result of a pre-existing **medical condition** of a relative, the person **you** are intending to stay with, travelling companion, close business associate where the person has

- i. an existing **medical condition** but has yet to receive a diagnosis
- ii. received a terminal prognosis; or
- iii. been put on a waiting list, or have the knowledge of the need, for surgery; treatment; or investigation at a hospital, clinic or nursing home.

## CHANGES IN HEALTH

If **you** have not availed of a private health insurance discount and **your** health or **your** ongoing medication changes between the date the **policy** was bought and the date of travel, **you** must advise **us** on **01 261 2009** - 9am - 5pm, Monday to Friday, as soon as possible. **We** will advise **you** what cover **we** are able to provide, after the date of diagnosis. **We** reserve the right to increase the premium, increase the **excess**, exclude the condition or withdraw the cover should the stability of the condition make it necessary.

## PREGNANCY

**Our** policies include emergency medical expenses cover for pregnancy and childbirth from week 0 to week 28 inclusive whilst **you** are away. From the start of week 29 to week 40 of the pregnancy, there is no cover for claims relating to normal pregnancy and normal childbirth or cancellation. However, medical expenses and cancellation cover will be provided, should complications arise with **your** pregnancy which fall within the definition of **complications of pregnancy and childbirth**.

Please note, **we** will not cover denial of boarding by **your** carrier, so **you** should check that **you** will be able to travel with the carrier/airline in advance. It is essential, if at the time of booking **your trip**, **you** are aware that **you** are pregnant, that **you** ensure that **you** are able to have the required vaccinations for that **trip**; no cover will be provided for cancellation in the event that, after booking **you** discover travel is advised against, or **you** are unable to receive the appropriate and required vaccinations for that country.

## WHILE YOU ARE AWAY

### 24 HOUR EMERGENCY ASSISTANCE SERVICE

#### MEDICAL TREATMENT ABROAD

In the event of any death, **illness**, injury, **accident** or hospitalisation involving anyone insured under this **policy**, which requires inpatient or outpatient treatment anywhere in the world, **you** must notify the **Emergency Assistance Service** as soon as reasonably possible. If **you** do not, this could mean that **we** will not provide cover or **we** will reduce the amount **we** pay for medical expenses.

**By telephone:** on +353 (0) 91 560 687 Ref: Getcover.ie 2024 **Policy**

#### RETURNING EARLY TO THE REPUBLIC OF IRELAND

If **you** have to return to the Republic of Ireland under the Emergency Medical Expenses and Repatriation section, the **Emergency Assistance Service** must authorise this. If they do not, this could mean that **we** will not provide cover or **we** may reduce the amount **we** pay for **your** return to the Republic of Ireland. The **Emergency Assistance Service** reserve the right to repatriate **you** should **our** medical advisors view **you** as being fit to travel.

The **Emergency Assistance Service** may be contacted from anywhere in the world to provide assistance to **you**.

## WHEN YOU RETURN HOME

### Making a Claim

If **you** wish to make a claim you can contact the claims department at:

1. Telephone: +353 (0) 91 560 687. Open 9am - 5pm, Monday to Friday.
2. Write to: Getcover Claims, MAPFRE ASSISTANCE Agency Ireland Travel Claims, Ireland Assist House, 22-26 Prospect Hill, Galway.

Please ensure **you** indicate:

- a) the section of the **policy** on which **you** want to claim,
- b) the master **policy** number – **MAPFRE/GC/ATST002/2024**, and
- c) **your policy** number.

#### You need to:

- produce **your** validation **certificate** confirming **you** are insured before a claim is admitted.
- give **us** full details in writing of any incident that may result in a claim under any section of the **policy** at the earliest possible time.
- provide all necessary information and assistance **we** may require at **your** own expense (including, where necessary, medical certification and Private Health Insurance).
- pass on to **us** immediately every writ, summons, legal process or other communication in connection with the claim.

- provide full details of any House Contents and All Risks insurance policies **you** may have.
- ensure that all claims are notified within 31 days of the incident occurring.
- not abandon any property to **us** or the claims office.
- not admit liability for any event or offering to make any payment without **our** prior written consent.

**You** must comply with the following conditions to have full protection of **your policy**.

If **you** do not comply **we** may cancel the **policy** or refuse to deal with **your** claim or reduce the amount of any claim payment.

**You** must contact **us** by phone or email if **you** want to make a claim using the relevant details below:

## 1. Claims

### All non-medical emergency claims:

**You** must contact MAPFRE ASSISTANCE Agency Ireland Travel Claims Ireland:

Telephone: 00353 (0) 91 560 687. Open 9am - 5pm, Monday to Friday.

To make a claim under the Legal Expenses section, **you** must contact Arc Legal Assistance Ltd, The Gatehouse, Lodge Park, Lodge Lane, Colchester, CO4 5NE.

Tel: 0044 844 770 9000 Open 9am-5pm Monday-Friday

The claim notification must be made within 31 days or as soon as possible after that following any **bodily injury, illness, disease, incident, event, redundancy** or the discovery of any loss, theft or damage which may lead to a claim under this **policy**.

**You** must also tell **us** if **you** are aware of any court claim form, summons or impending prosecution. Every communication relating to a claim must be sent to **us** as soon as possible. **You** or anyone acting on **your** behalf must not negotiate, admit or repudiate (refuse) any claim without **our** permission in writing and cooperate fully with **us** in **our** investigations into the circumstance of **your** claim.

**You** or **your** legal representatives must supply at **your** expense, all information, evidence, details of household insurance, proof of ownership and medical certificates as required by **us**. **You** should refer to the section under which **you** are claiming for further details of the evidence that **we** need to deal with **your** claim.

**We** reserve the right to require **you** to undergo an independent medical examination at **our** expense.

**We** may also request and will pay for a post mortem examination.

**You** must retain any property which is damaged, and if requested, sent it to **us** at **your** expense. If **we** pay a claim for the full value of the property and it is then recovered, it will then become **our** property.

**We** may refuse to reimburse **you** for any property which **you** cannot provide proof of ownership such as an original receipt or bank or credit card statements.

## 2. Transferring of rights

**We** are entitled to take over any rights in the defence or settlement of any claim and to take proceedings in **your** name for **our** benefit against any other party.

## 3. Fraud

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

- Make a claim under the **policy** knowing the claim to be false or fraudulently exaggerated in any way; or
- Make a statement in support of a claim knowing the statement to be false in any way; or
- Submit a document in support of a claim knowing the document to be forged or false in any way; or
- Make a claim for any loss or damage caused by **your** wilful act or with **your** connivance

Then

- We** will not pay the claim
- We** will not pay any other claim which has been or will be made under the **policy**
- We** may make the **policy** void from the date of the fraudulent act
- We** will be entitled to recover from **you** the amount of any claim already paid under the **policy**
- We** will not refund any premium
- We** may inform the Garda of the circumstances.

## SPORTS AND LEISURE ACTIVITIES

**You** are covered when **you** are participating in any of the “acceptable sports and leisure activities” listed within this **policy** document. **You** will only be covered when **you** are participating in any of the category 2, 3 or 4 “hazardous sports and leisure activities” listed within this **policy** document or in any **wintersports/wintersports**, if **you** have advised **us** at the time **you** bought the **policy**, paid the appropriate additional premium before **your trip** commenced and the cover is shown on **your** validation **certificate**.

**You** are required at all times to wear the appropriate safety equipment for that activity (for example protective clothing and / or suitable head protection). Please note that a General Exclusion of cover exists under **your policy** with **us** for claims arising directly or indirectly from **your** “self exposure to needless peril”. This means that **we** will not pay **your** claim if **you** do not meet this **policy** condition.

### Category 1 Acceptable sports and leisure activities.

The following activities are automatically included within the cover:

Category 1 - Acceptable sports & leisure activities Description / Title	Medical Excess is:	Personal Accident Cover:	Personal Liability Cover:
Aerobics	Standard	Standard	Standard
Archery (if adequately supervised, amateur)	Standard	Standard	Standard
Archaeological Digging	Standard	Standard	Standard
Assault Course	Standard	Standard	Standard
Badminton (amateur)	Standard	Standard	Standard
Banana Boating	Standard	Standard	Standard
Baseball (amateur)	Standard	Standard	Standard
Basketball (amateur)	Standard	Standard	Standard
Beach Games	Standard	Standard	Standard
Billiards / Snooker / Pool	Standard	Standard	Standard
Black Water Rafting (grades 1- 3 only)	Standard	Standard	Standard
Bowls	Standard	Standard	Standard
Bum Boarding	Standard	Standard	Standard
Bungee Jump (up to a maximum of 2 jumps per trip, under qualified supervision)	Standard	Standard	Standard
Camel Riding / Trekking	Standard	Standard	Standard
Canoeing (grades 1 - 3 including white water)	Standard	Standard	Standard
Catamaran Sailing (in territorial waters only)	Standard	Excluded	Excluded
Cheerleading (including competitions)	Standard	Excluded	Excluded
Clay Pigeon Shooting	Standard	Standard	Standard
Climbing (on climbing wall only)	Standard	Standard	Standard
Cricket (amateur)	Standard	Standard	Standard
Croquet	Standard	Standard	Standard
Curling	Standard	Standard	Standard
Cycling (other than excluded below)	Standard	Standard	Standard
Dingy Sailing (on flat water)	Standard	Standard	Standard
Dragon Racing	Standard	Standard	Standard
Dry Skiing	Standard	Standard	Standard
Dune Surfing	Standard	Standard	Standard
Elephant Riding	Standard	Standard	Standard
Falconry	Standard	Standard	Standard
Fell Walking (under 2,000m)	Standard	Standard	Standard
Fishing	Standard	Standard	Standard
Flow Riding	Standard	Standard	Standard
Football (amateur)	Standard	Standard	Standard
Glass Bottom Boats	Standard	Standard	Standard
Golf (amateur)	Standard	Standard	Standard
Gymnastics	Standard	Standard	Standard
Handball	Standard	Standard	Standard
Hiking (under 2,000 metres altitude)	Standard	Standard	Standard
Hockey	Standard	Standard	Standard
Horse Riding (no competitions, polo, hunting, racing or jumping)	Standard	Standard	Standard
Hot Air Ballooning (ROI organised pleasure rides only)	Standard	Standard	Standard
Hot Dogging (flat water or river up to grade 2)	Standard	Excluded	Excluded
Hovercraft driving / passenger	Standard	Excluded	Excluded
Ice Skating (1 day max per trip)	Standard	Standard	Standard
Inner Tubing / Tubing	Standard	Standard	Standard

Category 1 - Acceptable sports & leisure activities Description / Title	Medical Excess is:	Personal Accident Cover:	Personal Liability Cover:
Irish Dancing (including competitions)	Standard	Standard	Standard
Jet Boating (no racing)	Standard	Excluded	Excluded
Jet Skiing (no racing)	Standard	Excluded	Excluded
Jogging	Standard	Standard	Standard
Kayaking (grades 1 - 3 including white water)	Standard	Standard	Standard
Korfball	Standard	Standard	Standard
Marathon Running (amateur, under 2,000 metres altitude)	Standard	Standard	Standard
Motorcycling including Mopeds up to 50cc (subject to appropriate licence and wearing a helmet, no racing)	Standard	Excluded	Excluded
Narrow river & canal boat cruises	Standard	Standard	Standard
Netball (amateur)	Standard	Standard	Standard
Octopush	Standard	Standard	Standard
Orienteering	Standard	Standard	Standard
Paintballing	Standard	Excluded	Excluded
Parascending / Parasailing (over water)	Standard	Standard	Standard
Pony Trekking	Standard	Standard	Standard
Racquetball	Standard	Standard	Standard
Rambling (under 2,000m altitude)	Standard	Standard	Standard
Refereeing	Standard	Standard	Standard
Reindeer Sleigh Ride	Standard	Standard	Standard
Ringos	Standard	Standard	Standard
River Canoeing (grades 1 - 3)	Standard	Standard	Standard
Roller Blading / Roller Skating	Standard	Standard	Standard
Rounders	Standard	Standard	Standard
Rowing	Standard	Standard	Standard
Running, Sprint / Long Distance (amateur)	Standard	Standard	Standard
Safari ( <b>ROI</b> organised, not involving the use of firearms)	Standard	Standard	Standard
Sail Boarding	Standard	Standard	Standard
Sailing (in <b>territorial waters</b> only)	Standard	Excluded	Excluded
Scuba Diving if <b>you</b> are not qualified. Maximum depth 18 metres & must be under instruction from a PADI or equivalent certified scuba diving school.	Standard	Standard	Standard
Scuba Diving (to a maximum depth of 30 metres but not exceeding <b>your</b> PADI dive level. Must be adequately supervised)	Standard	Standard	Standard
Shark Cage Diving (must be <b>ROI</b> organised <b>trip</b> & professionally supervised)	Standard	Standard	Standard
Snorkelling	Standard	Standard	Standard
Soft Ball	Standard	Standard	Standard
Speed Sailing (in <b>territorial waters</b> only)	Standard	Excluded	Excluded
Squash (amateur)	Standard	Standard	Standard
Surfing (amateur)	Standard	Standard	Standard
Swimming	Standard	Standard	Standard
Swimming with dolphins	Standard	Standard	Standard
Table Tennis	Standard	Standard	Standard
Tall Ship Crewing	Standard	Standard	Standard
Tennis (amateur)	Standard	Standard	Standard
Tenpin Bowling	Standard	Standard	Standard
Trampolining	Standard	Standard	Standard
Track Events	Standard	Standard	Standard
Tree Canopy Walking	Standard	Standard	Standard
Trekking (under 2,000 metres altitude)	Standard	Standard	Standard
Triathlon	Standard	Standard	Standard
Tug of War	Standard	Standard	Standard
Ultimate Frisbee	Standard	Standard	Standard
Volleyball (amateur)	Standard	Standard	Standard

Category 1 - Acceptable sports & leisure activities Description / Title	Medical Excess is:	Personal Accident Cover:	Personal Liability Cover:
Wakeboarding	Standard	Standard	Standard
War Games (no weapons)	Standard	Standard	Standard
Water Polo (amateur)	Standard	Standard	Standard
Water Skiing (amateur)	Standard	Standard	Standard
Whale Watching	Standard	Standard	Standard
White Water Rafting (Grades 1 to 3 only)	Standard	Standard	Standard
Windsurfing (amateur)	Standard	Standard	Standard
Wind tunnel flying (pads and helmets)	Standard	Standard	Standard
Working abroad including administrative office-based positions, working on a <b>crui</b> se ship, teaching positions, manual work being restricted to bar/restaurant work & fruit picking (not involving the use of agricultural machinery)	Standard	Standard	Standard
Yachting (racing/crewing in <b>territorial waters</b> only)	Standard	Excluded	Excluded

### Hazardous sports & leisure activities

The following activities are considered to be “hazardous sports & leisure activities.” **You** will only be covered whilst participating in this “hazardous sport or leisure activity,” if **you** have paid the appropriate additional premium before **your trip** commenced and the activity is shown on **your** validation **certificate**.

The **Insurer** will not:

- Cover any child aged under 10, who is not supervised by an adult when participating in a “hazardous sport or leisure activity;” or
- provide any cover if **you** receive any financial reward or gain as a result of participating in the “hazardous sport or leisure activity.”

Category 2 - Hazardous sports & leisure activities Covers all activities listed under category 2 & category 1 Description / Title	Medical Excess is:	Personal Accident Cover:	Personal Liability Cover:
Boxing Training (no contact)	Standard	Standard	Standard
Camogie	€250	Excluded	Excluded
Cave Rafting	Standard	Standard	Standard
Cycle Touring (up to 4,000 metres altitude)	Standard	Standard	Standard
Deep Sea Fishing	Standard	Standard	Standard
Dingy Sailing (competitive)	Standard	Standard	Standard
Dog Sledging	Standard	Standard	Standard
Dune Buggy Driving	€250	Excluded	Excluded
Expedition training/winter mountaineering skill training	Standard	Standard	Standard
Fencing	Standard	Standard	Excluded
Flying as a passenger in a private plane	Standard	Standard	Standard
Frisbee (competitive)	Standard	Standard	Standard
Gaelic Football	€250	Standard	Standard
Go Karting (specific use)	€250	Excluded	Excluded
Helicopter or small aircraft (as passenger, other than for transport purposes)	Standard	Excluded	Standard
Hiking (between 2,000 metres and 6,000 metres altitude)	€400	Excluded	Excluded
Hot Air Ballooning (Non-ROI organised pleasure rides only)	Standard	Standard	Standard
Hurling	€250	Excluded	Excluded
Hydro Zorbing	Standard	Standard	Standard
Kick Sledding	Standard	Standard	Standard
Lacrosse	€250	Excluded	Excluded
Manual Labour (up to heights of 3 metres (excluding the use of mechanical machinery))	Standard	Excluded	Excluded
Marathon Running (amateur, between 2,000 metres and 4,000 metres altitude)	Standard	Standard	Standard
Martial Arts (training only)	Standard	Standard	Standard
Motorcycling (between 50cc and 350cc; subject to holding appropriate licence and wearing a helmet)	€250	Reduced by 50%	Excluded
Mountain Biking including cross country mountain biking (excluding downhill mountain biking)	€250	Reduced by 50%	Excluded

<b>Category 2 - Hazardous sports &amp; leisure activities (cont.)</b> <b>Covers all activities listed under category 2 &amp; category 1</b> <b>Description / Title</b>	<b>Medical Excess is:</b>	<b>Personal Accident Cover:</b>	<b>Personal Liability Cover:</b>
Outwardbound Pursuits	Standard	Standard	Standard
Off Roding	€250	Reduced by 50%	Excluded
Rambling (between 2,000 metres and 4,000 metres altitude)	€250	Standard	Standard
Reindeer Ride, Snowmobiling & Tobogganing (Lapland only)	Standard	Reduced by 50%	Excluded
Rugby (amateur)	€250	Excluded	Excluded
Safari (non <b>ROI</b> organised, paid for and not involving the use of firearms)	Standard	Excluded	Standard
Scuba Diving (to a maximum of 50m but not exceeding <b>your</b> PADI dive level)	Standard	Standard	Standard
Sea Canoeing (under qualified supervision)	Standard	Excluded	Excluded
Trekking (between 2,000 metres and 4,000 metres altitude)	€250	Standard	Standard

<b>Category 3 - Hazardous sports &amp; leisure activities</b> <b>Covers all activities listed under category 3, category 2 &amp; category 1</b> <b>Description / Title</b>	<b>Medical Excess is:</b>	<b>Personal Accident Cover:</b>	<b>Personal Liability Cover:</b>
Abseiling	€400	Reduced by 50%	Excluded
American Football (amateur)	€400	Reduced by 50%	Excluded
Black Water Rafting (grades 4 to 6)	€400	Excluded	Excluded
Canoeing (grades 4 - 5, including white water)	€400	Excluded	Excluded
Gliding (as passenger)	€400	Excluded	Excluded
Ice Swimming	Standard	Excluded	Excluded
Kayaking (grades 4 - 5, including white water)	€400	Excluded	Excluded
Land Yachting	€400	Excluded	Excluded
Parachute jumping (except in the USA, 2 jumps max, under qualified supervision)	€400	Excluded	Excluded
Paragliding (except in the USA, 2 jumps max, under qualified supervision)	€400	Excluded	Excluded
Parapente (except in the USA, 2 jumps max, under qualified supervision)	€400	Excluded	Excluded
Parascending/Parasailing (over land, must be under qualified supervision)	€400	Excluded	Excluded
River Canoeing (grades 4 - 5)	€400	Excluded	Excluded
Rock Abseiling	€400	Reduced by 50%	Excluded
Sailing/Yachting/Motor Cruising - outside <b>territorial waters</b> (offshore) (vessel < 45ft in size)	€400	Reduced by 50%	Excluded
Sand Boarding	€400	Excluded	Excluded
Sand Dune Surfing/Skiing	€400	Excluded	Excluded
Sand Yachting	€400	Excluded	Excluded
Ski-Dooing	Standard	Excluded	Excluded
Sky Diving (except in the USA, 2 jumps max, under qualified supervision)	€400	Excluded	Excluded
Snow Mobiling	Standard	Excluded	Excluded
Tandem Skydive (2 jumps max per <b>trip</b> , must be under qualified supervision)	€400	Excluded	Excluded
White Water Rafting (Grades 4 to 6)	€400	Excluded	Excluded
Zip Lining / Zip Lining in water	€400	Excluded	Excluded

<b>Category 4 - Hazardous sports &amp; leisure activities</b> <b>Covers all activities listed under category 4, category 3, category 2 &amp; category 1</b> <b>Description / Title</b>	<b>Medical Excess is:</b>	<b>Personal Accident Cover:</b>	<b>Personal Liability Cover:</b>
Animal Riding (other than specified & under adequate supervision)	€400	Excluded	Excluded
BMX Cycling (not competitions, helmet must be worn)	€400	Excluded	Excluded
Canyoning	€400	Excluded	Excluded
Cycle Touring (between 4,001 metres and 6,000 altitude)	€400	Excluded	Excluded
Glacier Hiking (up to 5,000 metres altitude, using ice hacks & crampons)	€400	Excluded	Excluded
Gorge Walking	€400	Excluded	Excluded
Hang Gliding (except in the USA, under qualified supervision)	€400	Excluded	Excluded
High Diving (on an amateur basis and excludes cliff diving)	€400	Excluded	Excluded
Horse Jumping (no Polo, hunting)	€400	Excluded	Excluded
Ice Hockey (on an amateur basis)	€400	Excluded	Excluded
Kite Surfing	€400	Excluded	Excluded
Micro Lighting	€400	Excluded	Excluded
Parasailing (except in the USA, under qualified supervision)	€400	Excluded	Excluded
Quad Biking	€400	Excluded	Excluded
Rock Climbing (under 2,000 metres, either as a qualified person or under qualified supervision)	€400	Excluded	Excluded
Rock Scrambling (under 4,000 metres)	€400	Excluded	Excluded
Show Jumping	€400	Excluded	Excluded
Skate Boarding	€400	Excluded	Excluded
Snow Sledging	€400	Excluded	Excluded
Tobogganing	€400	Excluded	Excluded
Trekking (between 4,001 metres and 6,000 metres altitude)	€400	Excluded	Excluded
Wrestling (amateur)	€400	Excluded	Excluded

<b>Category 2(66+)- Hazardous sports &amp; leisure activities</b> <b>Covers all activities listed under Category 2(66+) &amp; Category 1</b> <b>Description / Title</b>	<b>Medical Excess is:</b>	<b>Personal Accident Cover:</b>	<b>Personal Liability Cover:</b>
Cycle Touring (up to 4,000 metres altitude)	Standard	Standard	Standard
Dingy Sailing (competitive)	Standard	Standard	Standard
Flying as a passenger in a private plane	Standard	Standard	Standard
Helicopter or small aircraft (as passenger, other than for transport purposes)	Standard	Standard	Standard
Hiking (between 2,000 metres and 6,000 metres altitude)	€400	Excluded	Excluded
Hot Air Ballooning (Non-ROI organised pleasure rides only)	Standard	Standard	Standard
Motorcycling (between 50cc and 350cc; subject to holding appropriate licence and wearing a helmet)	€250	Excluded	Reduced by 50%

If **you** wish to participate in a category 2, 3, 4 or 2(66+) hazardous sport or activity, please contact **us** at: [www.getcover.ie](http://www.getcover.ie).



## DEFINITIONS

Any word defined below will have the same meaning wherever it is shown in **your policy** in bold print. These definitions have been listed in alphabetical order.

### Accident, accidental

A sudden, unexpected event caused by something external and visible, which results directly and solely in loss, damage or physical **bodily injury**.

### Act of terrorism

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

### Bodily injury

Means an identifiable physical injury sustained by **you** caused by sudden, unexpected, external and visible means, including injury as a result of unavoidable exposure to the elements.

### Business equipment

Any business owned property that is fundamental to the business. Examples of equipment include devices such as tablets, tools and laptops.

### Business money

Bank and currency notes and coins and cheques which are issued to **you** by **your** employer (or if **you** are self-employed is issued from **your** business bank account) solely for business purposes.

### Camping and field sports equipment

Equipment which is owned by a Cub/Scout or Brownie/Guide group or similar group for children aged 16 and under, that is organising the insured **trip**.

### Cash

Euros or foreign currency in note or coin form.

### Certificate

An insurance validation **certificate** issued by Getcover.ie which describes **you** and all **insured person(s)** who are covered under this **policy**.

### Change in health

Any deterioration or change in **your** health between the date the **policy** was bought and the date of travel, this includes, new medication, change in regular medication, deterioration of a previously stable condition, referral to a specialist, investigation of an undiagnosed condition or awaiting treatment/consultation.

### Claims handler

Getcover Claims, MAPFRE ASSISTANCE Agency Ireland Travel Claims Ireland, Assist House, 22-26 Prospect Hill, Galway.

### Close business associate

A business partner, director or employee of **yours** who has a close working relationship with **you**.

### Close Relative

Mother, father, sister, brother, wife, husband, daughter, son, grandparent, grandchild, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, aunt, uncle, niece, nephew, step parent, step child, step-sister, stepbrother, foster child, legal guardian, next of kin, or fiancé/fiancée or common law partner (any couple, including same-sex, in a common law relationship or who have co-habited for at least 6 consecutive months).

### Common-law partner(s)

Any couple (including same sex) in common law relationship or who have cohabited in **your country of residence** for at least 6 months prior to the commencement of **your trip**.

### Complications of pregnancy and childbirth

Toxaemia, gestational hypertension, pre-eclampsia, ectopic pregnancy, hydatidiform mole, (molar pregnancy), postpartum haemorrhage, retained placenta membrane, placental abruption, hyperemesis gravidarum, placenta praevia, stillbirths, miscarriage, medically necessary emergency Caesarean section, medical necessary termination and premature births of more than 12 weeks (or 16 weeks if **you** know **you** are having more than one baby) before the expected delivery date.

### Country of residence

The Republic of Ireland in which **you** live, for no less than 6 months of the year.

### COVID

Means COVID-19, coronavirus disease, severe acute respiratory syndrome coronavirus (SARSCOV-2) or any mutation or variation of these.

### Cruise

A pleasure voyage of more than 72 hours duration, sailing as a passenger on a purpose built ship on sea/s or oceans and includes stops at various ports.

### Curtailment/Curtail/Curtailed

Means the cutting short of **your trip** by **your** early return **home** or **your** repatriation to a hospital or nursing **home** in **your home** country. Payment will be made on the number of full days of **your trip** that are lost from the day **you** are brought **home**.

### Emergency Assistance Service

MAPFRE ASSISTANCE Agency Ireland **Emergency Assistance Service** TEL: +353 1 91 560 687 - 24 hours a day, 365 days a year.

### Excess

The first amount **you** and each person named on the validation **certificate** have agreed to pay towards a claim for each incident under each section of this **policy**, as outlined within the Schedule of Benefits.

### Family

Single **trip** policies - Up to two (2) adults and all their dependent children or grandchildren under the age of 18 in full time education.

Annual multi-**trip** policies - Up to two (2) adults and all their dependent children or grandchildren, under the age of 23, who are in full time education and living at **home** or are attending college away from home but who return

each weekend for 2-3 nights. Independent travel allowed by all **insured persons**.

Students on an annual multi-trip policy who are attending college away from home but who return each weekend for 2-3 nights are allowed to travel independently for the period they reside at the home address full time (IE during the summer and during mid-term breaks).

#### **Fragile articles**

Means any item(s) carried as **your personal possessions** which could be easily damaged or destroyed.

#### **Golf Equipment**

Those items that are usually worn, used or held during the participation in Golf. For example, Golf Clubs, Golf Bags, Golf Shoes.

#### **Home**

**Your** usual place of residence in the Republic of Ireland, for no less than 6 months of the year.

#### **Illness**

Any disease, infection or **bodily injury** which is unexpectedly contracted by **you** prior to **your trip** or unexpectedly manifests itself for the first time during **your trip**.

#### **Insurance Government Levy (IGL)**

A Government tax which must be paid by **you** in addition to the insurance premium.

#### **Insurer**

MAPFRE ASSISTANCE Agency Ireland

#### **Irrecoverable**

Means that we will only cover costs that you have not already recovered, for which reasonable remedy was not offered or provided by another source and which you are not entitled to recover or regain from another source.

#### **Medical Condition**

Means any disease, **illness** or injury.

#### **Medical Practitioner**

Means a registered practicing member of the medical profession who is not related to **you** or any person with whom **you** are travelling.

#### **Medical Pre-Screening Company**

Outsourced Services Group (OSG), on behalf of MAPFRE ASSISTANCE Agency Ireland

#### **Mobility Aids**

Wheelchair, motorised wheelchair, walking frame, walking stick or crutches owned by **you**.

#### **Mugging**

A violent attack on **you** that takes place with a view to theft, and is made by person(s) not previously known to **you**.

#### **Off Piste**

Skiing within ski area boundaries, off marked and groomed pistes and in between groomed trails and runs, where ski lifts and emergency services are easily accessible and ending back at a ski area lift. Not including back country or areas marked or prohibited from entry.

#### **On Piste**

Piste skiing, including skiing on areas in and around the resort, but off the actual marked pistes, such as skiing on a hillside between marked pistes, or skiing down slopes adjacent to marked runs, but always finishing at the bottom of tows or lifts within the resort and never in areas cordoned off or restricted. All other areas are considered as '**Off Piste**'.

#### **Offshore**

Over 12 Nautical miles off the shore.

#### **One-way trip**

A journey where **you** are emigrating. The cover will begin when **you** leave **your home** and ends no later than 72 hours after the time **you** first leave the immigration control of **your** final destination country.

#### **Pair or Set**

Two or more items of **personal possessions**, which are complimentary or used or worn together.

#### **Period of insurance**

If annual multi **trip** cover is selected, the period of 12 months for which **we** have accepted the premium as stated on **your** validation **certificate**. During this period, any **trip** not exceeding 31 days, or 90 days if the extended **trip** option has been paid for. **Wintersports trips** are further limited to 24 days in total in each **period of insurance**. Under these policies, Policy A – **your** pre travel **policy**, will be operative from the date stated on **your** validation **certificate** or the time of booking any **trip** (whichever is the later date) and terminates on commencement of any **trip**.

If single **trip** cover is selected, the period of the **trip** and terminating upon its completion, but not in any case exceeding the period shown on **your** validation **certificate**. Under these policies:

SECTION A – **your** pre-travel **policy**, will be operative from the time **you** pay the premium.

SECTION B – **your** travel **policy**, whichever cover is selected, the insurance starts from when **you** leave **your home**, or for a business **trip** **your** place of business (whichever is the later), to start the **trip** and ends at the time of **your** return to **your home** or place of business (whichever is the earlier) on completion of the **trip**.

However, any **trip** that had already begun when **you** purchased this insurance will not be covered, except where this **policy** replaces or **you** renew an existing annual multi **trip policy** which fell due for renewal during the **trip**.

Please note: if, due to unexpected circumstances beyond **your** control and included in the conditions of this cover, **you** cannot finish **your trip** within the **Period of Insurance** set out on **your** validation **certificate**, **we** will extend **your** cover for up to 30 days at no extra charge.

If the reason **you** cannot finish **your trip** is linked to **COVID**, **we** will still extend **your** cover for up to 30 days at no extra charge.

#### **Personal Money**

Bank notes, currency notes and coins in current use, traveller's and other cheques, postal or money orders,

pre-paid coupons or vouchers, event and entertainment tickets, phone cards and credit/debit or charge cards all held for private purposes.

### Personal Possessions

Luggage, clothing, valuables and personal items which are owned and carried by **you** for your individual use during the trip and have been either taken or purchased on the trip.

### The following are not included in the definition:

- Animal skins, antiques, bicycles, boats and/or ancillary equipment, bonds, contact or corneal lenses, coupons, diving equipment, documents of any kind, golf equipment, marine and craft equipment, mobile phones, personal money, business money, musical instruments, sailboards or related equipment or fittings of any kind, samples or merchandise or business goods or specialised equipment relating to a trade or profession, securities, silks, sports equipment, ski equipment, stamps, surfboards, telescopes, television sets, travellers cheques, vehicles and or their accessories.

### Policy

Your validation **certificate**, this **policy** document and endorsements.

### Pre-existing medical condition – means

- 1) Any:
  - a) respiratory condition (relating to the lungs or breathing),
  - b) heart condition,
  - c) circulatory condition,
  - d) any type of cancer,
  - e) any type of diabetes,
  - f) stroke, or
  - g) high blood pressure.
- 2) Within the last 2 years any
  - a) treatment for any serious or re-occurring medical condition,
  - b) request to take regular prescribed medication, or
  - c) referral to a specialist or consultant at a hospital for tests, diagnosis or treatment.
- 3) Where **you** are waiting for any tests, treatment or non routine hospital appointment
- 4) Any **medical condition** for which **your** doctor has changed **your** regular prescribed medication in the last 12 months.

### Accepted Medical Conditions

The following **medical conditions** are covered without additional charge and subject to the normal terms and conditions of this insurance, provided:

- a) **you** are not awaiting surgery for the condition, and
- b) **you** have been fully discharged from any post-operative follow-up and ongoing treatment or investigation.

- Abnormal Smear Test
- Achilles Tendon Injury
- Acne,
- Adenoids
- Allergic Rhinitis
- Alopecia
- Anal Fissure/Fistula
- Appendectomy
- Asthma (no more than 1 inhaler, no hospital admissions in previous 12 months, no other medical conditions)
- Astigmatism

- Athlete's Foot (Tinea Pedis)
- Attention Deficit Hyperactivity Disorder
- Bell's Palsy (Facial Paralysis)
- Benign Prostatic Enlargement
- Bladder Infection (no ongoing treatment, no hospital admissions)
- Blepharitis
- Blindness
- Blocked Tear Ducts
- Breast – Fibroadenoma
- Breast Cyst(s)
- Breast enlargement/Reduction
- Broken Bones (other than head or spine & no longer in plaster)
- Bunion (Hallux Valgus)
- Bursitis (Housemaid's Knee)
- Caesarean Section
- Candidiasis (oral or vaginal)
- Carpal Tunnel Syndrome
- Cartilage Injury
- Cataracts
- Cervical Erosion
- Cervicitis
- Chalazion
- Chicken Pox (fully resolved)
- Cholecystectomy
- Chronic fatigue syndrome (if only symptom is fatigue and no hospital admissions)
- Coeliac Disease
- Cold Sore (Herpes Simplex)
- Common Cold(s)
- Conjunctivitis
- Constipation
- Corneal Graft
- Cosmetic Surgery
- Cyst – Breast
- Cyst – Testicular
- Cystitis (no ongoing treatment, no hospital admissions)
- Cystocele (no ongoing treatment, no hospital admissions)
- D & C
- Deaf Mutism
- Deafness
- Dental Surgery
- Dermatitis (no hospital admissions or consultations)
- Deviated Nasal Septum
- Diabetes (non-insulin) - no hospital admission in previous 12 months, no other medical conditions
- Diarrhoea and/or Vomiting (resolved)
- Dilatation and Curettage
- Dislocations (no joint replacements or hospital admissions)
- Dry Eye Syndrome
- Dyspepsia
- Ear Infections (resolved - must be all clear prior to travel if flying)
- Eczema (no hospital admissions or consultations)
- Endocervical Polyp
- Endocervicitis
- Endometrial Polyp
- Epididymitis
- Epiphora (Watery Eye)
- Epispadias
- Epistaxis (Nosebleed)
- Erythema Nodosum
- Essential Tremor
- Facial Neuritis (Trigeminal Neuralgia)
- Femoral Hernia
- Fibroadenoma
- Fibroid – Uterine
- Fibromyalgia
- Fibromyositis

- Fibrositis
- Frozen Shoulder
- Gall Bladder Removal
- Ganglion
- Glandular Fever (full recovery made)
- Glaucoma
- Glue Ear (resolved - must be all clear prior to travel if flying)
- Goitre
- Gout
- Grave's Disease
- Gynaecomastia
- Haematoma (external)
- Haemorrhoidectomy
- Haemorrhoids (Piles)
- Hammer Toe
- Hay Fever
- Hernia (not Hiatus)
- Herpes Simplex (Cold Sore)
- Hip Replacement (no subsequent arthritis and never any dislocation of a joint replacement)
- Hives (Nettle Rash)
- HRT (Hormone Replacement Therapy)
- Hyperthyroidism (Overactive Thyroid)
- Hypospadias
- Hypothyroidism (Underactive Thyroid)
- Hysterectomy (provided no malignancy)
- Impetigo
- Indigestion
- Influenza (full recovery made)
- Ingrowing Toe-nail (Acronyx)
- Inguinal Hernia
- Insomnia
- Intercostal Neuralgia (no admissions)
- Intertrigo
- Irritable Bowel Syndrome (IBS) (provided definite diagnosis made and no on-going investigations)
- Keinboeck's Disease
- Keratoconus
- Knee Injury - Collateral/cruciate ligaments
- Knee Replacement (no subsequent arthritis and never any dislocation of a joint replacement)
- Kohlers Disease
- Labyrinthitis
- Laryngitis
- Learning Difficulties
- Leptothrix
- Leucoderma
- Lichen Planus
- Ligaments (injury)
- Lipoma
- Macular Degeneration
- Mastitis
- Mastoidectomy (resolved - must be all clear prior to travel if flying)
- Menopause
- Menorrhagia
- Migraine (provided definite diagnosis is made and there are no ongoing investigations)
- Miscarriage
- Mole(s)
- Molluscum Contagiosum
- Myalgia (Muscular Rheumatism)
- Myalgic Encephalomyelitis (ME) (if the only symptom is fatigue and no hospital admissions)
- Myxoedema
- Nasal Infection
- Nasal Polyp(s)
- Nettle Rash (Hives)
- Neuralgia (no hospital admissions)
- Nosebleed(s)

- Nystagmus
- Osgood-schlatter's Disease
- Osteochondritis
- Otosclerosis
- Overactive Thyroid
- Parametritis
- Pediculosis
- Pelvic Inflammatory Disease
- Photodermatosis
- Piles
- Post Viral Fatigue Syndrome (if the only symptom is fatigue and no hospital admissions)
- Pregnancy (provided no complications)
- Prickly Heat
- Prolapsed Uterus (womb)
- Pruritis
- Psoriasis (no hospital admissions or consultations)
- Repetitive Strain Injury
- Retinitis Pigmentosa
- Rhinitis (Allergic)
- Rosacea Ruptured Tendons
- Salpingo-oophoritis
- Scabies
- Scalp Ringworm (Tinea Capitis)
- Scheuermann's Disease (provided no respiratory issues)
- Sebaceous Cyst
- Shingles (Herpes Zoster)
- Sinusitis
- Skin Ringworm (Tinea Corporis)
- Sleep Apnoea (no machine used to assist breathing)
- Sore Throat
- Sprains
- Stigmatism
- Stomach Bug (resolved)
- Strabismus (Squint)
- Stress Incontinence (no urinary infections)
- Synovitis
- Talipes (Club Foot)
- Tendon Injury
- Tennis Elbow
- Tenosynovitis
- Termination of Pregnancy
- Testicles – Epididymitis / Hydrocele / Varicocele
- Testicular Cyst
- Testicular Torsion (Twisted Testicle)
- Throat Infection(s)
- Thyroid - Overactive Thyroid Deficiency
- Tinnitus
- Tonsillitis
- Tooth Extraction / Toothache
- Torn Ligament
- Torticollis (Wry Neck)
- Trichomycosis
- Turner's Syndrome
- Umbilical Hernia
- Underactive Thyroid
- Undescended Testicle
- Urethritis (no ongoing treatment, fully recovered)
- URTI (Upper Respiratory Tract Infection) (resolved no further treatment)
- Urticaria
- Uterine Polyp(s)
- Uterine Prolapse
- Varicocele
- Varicose Veins - legs only, never any ulcers or cellulitis (if GP has confirmed that client is fit to travel)
- Vasectomy
- Verruca
- Vitiligo
- Warts (benign, non-genital)
- Womb Prolapse (uterus)

## Public Transport

A train, bus, coach, ferry service or scheduled airline flight operating to a published timetable to join the booked travel itinerary.

## Redundancy, Redundant

**You** becoming unemployed under the Protection of Employment Act. **You** must have been given a Notice of **redundancy** and be receiving payment under the current **redundancy** payments legislation.

### The following are not included in the definition:

- Any employment which has not been continuous and with the same employer for at least two years.
- Any employment which is not on a permanent basis;
- Any employment which is on a short term fixed contract;
- Any instance where **you** had reason to believe that **you** would be made **redundant** at the time of booking **your** trip.

## Relative

Spouse or partner who **you** are living together with, parents, grandparents, legal guardians, foster child, parents-in-law, daughter-in-law, son-in-law, brother-in-law, sister-in-law, step-parents, step-child, step-brother, step-sister, aunt, uncle, brother, sister, child, grandchild, niece, nephew or fiancé(e).

## ROI

Republic of Ireland.

## Single item

Any one article, pair, set or collection.

## Single parent family

One adult and all his/her dependent children under the age of 18 in full time education.

## Ski Equipment

Those items that are owned by **you** and are usually worn, used or held during the participation in **wintersports**. For example, Skis, ski bindings, ski boots, ski poles, snowboard, snowboard bindings and snowboard boots.

## Sports equipment

Those items which are usually worn, carried, used or held during the participation in a sporting activity.

### The following are not included in the definition:

- ski equipment
- golf equipment

## Territorial Waters

All waters within the jurisdiction of the country **you** are visiting during **your** trip.

## Travel Documents

Means passport, green cards, travel tickets and accommodation vouchers.

## Travelling Companion

A person(s) with whom **you** have booked to travel on the same travel itinerary and without whom **your** travel plans would be impossible.

## Trip

Means any holiday, business or pleasure **trip** or journey made by **you** within the territorial limits shown on **your** validation **certificate** which begins and ends in **your** home or place of business during the **period of insurance** and including one way **trips** as defined.

However any **trip** that had already begun when **you** purchased this insurance will not be covered, except where this **policy** replaces or **you** renew an existing annual multi **trip policy** which fell due for renewal during the **trip**.

If annual multi **trip** cover is selected, cover is provided for any **trip** not exceeding 31 days, or 90 days if the extended **trip** option has been paid for. **Wintersports trips** are further limited to 24 days in total in each **period of insurance**. If any **trip** exceeds 31 days, or 90 days if the extended **trip** option has been paid for, there is absolutely no cover under this **policy** for that **trip** (not even for the first 31 or 90 days of the **trip**), unless **you** have contacted Getcover.ie and they have agreed in writing to provide cover.

Your cover does not extend to cover trips within Ireland with the exception of Cancellation or Curtailment charges where you have pre-booked at least two nights accommodation in a hotel, motel, holiday camp, bed and breakfast, holiday cottage or similar accommodation rented for a fee. Each **trip** under annual multi **trip** cover is considered to be a separate insurance, with the terms, definitions, "what **you** are not covered for" and conditions contained in this **policy** applying to each **trip**.

## Unattended

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

## Valuables

Articles made of or containing gold, binoculars, camcorders, cameras, compact disc players, computer equipment and their accessories, computer games & computer game consoles and their accessories, furs, jewellery, leather goods, MP3 players & iPods, Mini-Disc players, photographic equipment, precious or semi-precious stones, silks, silver or other precious metals, spectacles, sunglasses, telescopes, watches.

## We/Us/Our

MAPFRE ASISTENCIA Compania Internacional de Seguros y Reaseguros SA, trading as MAPFRE ASSISTANCE Agency Ireland.

## Wintersports

**You** are required at all times to wear the appropriate safety equipment for that activity (for example protective clothing and / or suitable head protection). Please note that a General Exclusion of cover exists under **your** **policy** with **us** for claims arising directly or indirectly from **your** "self exposure to needless peril". This means that **we** will not pay **your** claim if **you** do not meet this **policy** condition.

Provided the appropriate additional premium has been paid the following are covered:

- Guided cross-country skiing (Nordic Skiing), mono skiing, off-piste skiing or snowboarding (in areas designated safe by resort management), recreational racing, skiing, snowboarding and snow sledging.

### The following are not included in the definition, but not limited to:

- Freestyle skiing, heli-skiing, ice hockey, lugging, off-piste skiing or snowboarding in areas designated as unsafe by resort management, off-piste skiing or snowboarding where there is an avalanche warning in

place, competitive snowboarding, parapenting, ski acrobatics and stunting, ski blading, ski bob racing, ski-doing, ski flying, ski jumping, ski racing or training, the use of skeletons or bobsleighs, snow mobiling, tobogganing;

If **you** have purchased the Snow Pro Plus or the Snow Pro Plus (FIS racing) **policy** please refer to the “special definitions” within this **policy**.

#### **You/ Yours/ Insured/Insured person(s)**

Any person named on **your** validation **certificate**.

## **THE INSURANCE**

### **SECTION A: Your Pre Travel Cover**

#### **Cancellation charges**

#### **What you Are Covered For:**

If **your trip** is cancelled due to any one of the reasons listed below occurring after payment of the policy premium and during the **period of insurance**, the **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits for **your** proportion only of any **irrecoverable** unused travel and accommodation costs and other pre-paid charges (including car hire and excursions) which **you** have paid or contracted to pay before **you** go on **your trip**, together with **your** proportion only of any reasonable additional travel expenses incurred if cancellation of the **trip** is necessary and unavoidable.

#### **Reasons for Cancellation:**

- a) death, **accidental bodily injury** or unexpected **illness** during the **period of insurance** of **you**, **your travelling companion**, or the person with whom **you** have arranged to stay whilst on the **trip** or **your relative** or **close business associate**;
- b) **you** suffering **complications of pregnancy or childbirth**;
- c) **you** being called for jury service or witness call;
- d) **your** posting overseas or emergency and unavoidable requirements of duty in the Armed Forces, Garda, Fire, Nursing or Ambulance Services;
- e) **your redundancy** notified during the **period of Insurance** which qualifies for payment under the current **redundancy** payments legislation;
- f) fire, flood or burglary at **your home** or place of business occurring or becoming apparent within 5 days prior to the commencement of the journey or holiday;
- g) **your** presence being required by the Garda following burglary at **home** or **your** place of business;
- g) **you**, **your travelling companion** or any person **you** have arranged to stay with during your trip receiving a **COVID** diagnosis within 14 days of the start of the **trip** or in the case of being admitted to hospital with **COVID** diagnosis within 28 days of the start of the **trip**; or
- h) **your close relative** or **close business associate** being admitted to hospital with a **COVID** diagnosis at the time of the Trip or the death of **your close relative** or **close business associate** due to **COVID**.

#### **What you Are Not Covered For:**

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;

- 2 claims arising directly or indirectly as a result of a **pre-existing medical condition you** have unless **you** have contacted the **medical pre-screening company** and **we** have agreed in writing to cover **you**;
- 3 claims arising if, at any time, **you**:
  - a) have any medical condition which a **medical practitioner** has advised **you** not to travel (or would have done so had **you** sought his/her advice), but despite this **you** still travel; or
  - b) intend to travel outside of **your home** area to receive any surgery, treatment or investigations (including any expenses incurred due to the discovery of other **medical conditions** during and/or complications arising from these procedures); or
  - c) have any **medical condition** for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**; or
  - d) travel against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider.
- 4 claims arising if **you**:
  - a) have any **medical condition** for which **you** are on a waiting list for or have knowledge of the need for surgery, treatment or investigation at the time of taking out this **policy** or at the time of booking the trip; or
  - b) have any **medical condition** which has been diagnosed as a terminal condition at the time of taking out this **policy** or at the time of booking the trip; or
  - c) have any **medical condition** affecting **you**, a **relative** or a **close business associate** that **you** are aware of at the time of taking out this **policy**, that could reasonably be expected to result in a claim on this **policy**.
- 5 any claim for pregnancy which falls outside of the definition of **complications of pregnancy and childbirth**;
- 6 claims arising which are not supported by written medical confirmation and clinical reports from medical service providers, as well as all other proof of the happening of an event causing cancellation;
- 7 claims for any costs associated with unused timeshare property;
- 8 claims arising where **you** have not received the necessary inoculations or vaccinations or **you** have not obtained the necessary visas or passports;
- 9 claims under subsection h) or i) (relating to COVID) that arise within 14 days of the date you purchased this insurance except where the insurance is purchased within 48 hours of booking the trip.

#### **SPECIAL CONDITION 1**

It is a condition of this section that any claim for cancellation be advised within 48 hours or as soon as reasonably possible.

#### **SPECIAL CONDITION 2**

for claims which occur as a result **COVID: You** will not be covered for claims arising within 14 days of the date **you** purchased this insurance, except where the insurance is purchased within 48 hours of booking the **trip**.

## SECTION B: Your Travel Cover

### Curtailment (if you have to come home early)

#### What you Are Covered For:

If **your trip** is **curtailed** (**you** having to return **home** early) due to any one of the reasons listed below occurring after payment of the policy premium and occurring during the **period of insurance**, the **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits for **your** proportion only of any **irrecoverable** unused travel and accommodation costs and other pre-paid charges (including car hire and excursions) which **you** have paid or contracted to pay, together with **your** proportion only of any reasonable additional travel expenses incurred if **curtailment** of the **trip** is necessary and unavoidable.

#### Reasons for Curtailment:

- a) death, **accidental bodily injury** or unexpected **illness** during the **period of insurance** of **you**, **your travelling companion**, or the person with whom **you** have arranged to stay whilst on the **trip** or **your relative** or **close business associate**;
- b) **you** suffering complications of pregnancy or childbirth;
- c) **you** being called for jury service or witness call;
- d) **your** posting overseas or emergency and unavoidable requirements of duty in the Armed Forces, Garda, Fire, Nursing or Ambulance Services;
- e) fire, flood or burglary at **your home** or place of business occurring or becoming apparent during the course of **your** holiday; or
- f) **your** presence being required by the Garda following burglary at **home** or **your** place of business;

#### What you Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;
- 2 claims arising directly or indirectly as a result of a **pre-existing medical condition** **you** have unless you have contacted the **medical pre-screening company** and **we** have agreed in writing to cover **you**;
- 3 claims arising if, at any time, **you**:
  - a) have any medical condition which a **medical practitioner** has advised **you** not to travel (or would have done so had **you** sought his/her advice), but despite this **you** still travel; or
  - b) intend to travel outside of **your home** area to receive any surgery, treatment or investigations (including any expenses incurred due to the discovery of other **medical conditions** during and/or complications arising from these procedures); or
  - c) have any medical condition for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**; or
  - d) travel against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider.
- 4 claims arising if **you**:
  - a) have any medical condition for which **you** are on a waiting list for or have knowledge of the need for surgery, treatment or investigation at the time of taking out this **policy** or at the time of booking the trip; or
  - b) have any medical condition which has been

diagnosed as a terminal condition at the time of taking out this **policy** or at the time of booking the trip; or

- c) have any medical condition affecting **you**, a **relative** or a **close business associate** that **you** are aware of at the time of taking out this **policy**, that could reasonably be expected to result in a claim on this **policy**.
- 5 any claim for pregnancy which falls outside of the definition of **complications of pregnancy and childbirth**;
- 6 claims arising which are not supported by written medical confirmation and clinical reports from medical service providers, as well as all other proof of the happening of an event causing **curtailment**;
- 7 claims for any costs associated with unused timeshare property;
- 8 claims arising where **you** have not received the necessary inoculations or vaccinations or **you** have not obtained the necessary visas or passports;

#### SPECIAL CONDITION

**You** must get (at **your** own expense) a medical certificate from a **medical practitioner** and the prior approval of the **Emergency Assistance Service** to confirm the necessity to return **home**, prior to **curtailment** of the **trip** due to death, **bodily injury**, **illness**, disease or **complications of pregnancy and childbirth**.

#### CATASTROPHE

##### What you Are Covered For:

The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits in the event that the Tour Operator is unable to assist and **you** are forced to move while in resort, from the pre-booked accommodation as a result of fire, lightning, explosion, earthquake, storm, tempest, hurricane, flood, tsunami, medical epidemic or local Government Directive which is confirmed in writing by local or national authority, for **irrecoverable** travel or accommodation costs necessarily incurred to continue with the **trip** or, if the **trip** cannot be continued for return **home**.

##### What you Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;
- 2 claims where a written report from local or national authority has not been obtained, stating that it was not acceptable for **you** to remain in resort, in **your** booked accommodation;
- 3 claims where the Tour Operator is responsible.

#### EMERGENCY MEDICAL EXPENSES AND REPATRIATION

##### SPECIAL CONDITIONS APPLICABLE TO EMERGENCY MEDICAL EXPENSES AND REPATRIATION

In the event of **your** death, incurring medical expenses in **excess** of €250, or **you** being involved in an **accident** or being admitted to hospital, the **Emergency Assistance Service** must be advised as soon as possible and liability shall only attach for expenses agreed by them. Failure to notify the **Emergency Assistance Service** could prejudice the **Insurer** and could result in the **Insurer's** non-acceptance of liability of such claims.

**We** reserve the right to repatriate **you** to Ireland when, in the opinion of the doctor in attendance and **our** senior medical officer, **you** are fit to travel. If **you** do not comply with this decision **we** reserve the right to withdraw cover with immediate effect.

The decision on the method of repatriation will be at the discretion of **our** senior medical officer subject to consultation with the doctor in attendance.

In the event of your bodily injury or illness, **we** reserve the right to relocate **you** from one hospital to another and arrange for **your** repatriation to Ireland at any time during the Trip. **We** will do this if in the opinion of the **medical practitioner** in attendance or **our** senior medical officer can be moved safely and/or travel safely to Ireland to continue treatment.

**You** must obtain prior consent of the **Insurer** before curtailing or extending **your** trip due to **your** injury or illness.

### What you Are Covered For:

The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits in respect of the following expenses necessarily incurred as a result of **you** sustaining **accidental bodily injury**, **unexpected illness**, **complications of pregnancy or childbirth** or **your** death:

#### 1 Emergency Medical Expenses

- a) cost of medical, surgical or hospital treatment (including emergency dental treatment up to the amount shown in the Schedule of Benefits for the immediate relief of pain to natural teeth only).
- b) ambulance and nursing fees and charges incurred outside of **your home** area.
- c) cost of transporting **your** remains to the Republic of Ireland, or the reasonable cost of a funeral in the country where death occurs, if other than **your** usual **country of residence**, up to the amount shown in the Schedule of Benefits; or
- d) reasonable additional transportation and accommodation costs incurred by **you** and any one of **your travelling companions**, as a result of **you** receiving medical advice from the doctor in attendance and the **Insurer's** medical advisors that **your** originally planned return journey to the Republic of Ireland is impossible due to medical reasons. (Payment shall be based upon the average cost of transportation and accommodation incurred prior to the originally planned return date, at the **Insurer's** discretion).
- e) In the event of a positive diagnosis of **COVID** abroad the policy will cover reasonable additional transport (economy class) and/or accommodation expenses incurred up to the standard of **Your** original booking if **You** must extend **Your** stay, up to the amounts of €2,000.

#### 2 Emergency Repatriation

- a) the cost of return to the Republic of Ireland of an injured or sick **Insured** by medically appropriate means where, in the opinion of the **Insurer's** medical advisors, such return is medically necessary.

### What you Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** (unless **you** use an EHIC (European Health

Insurance Card) which successfully reduces the amount of the claim by more than **your excess** as shown in the Schedule of Benefits);

- 2 the first €55,000 for in-patient hospital claims, where a private health insurance discount has been availed of and this is confirmed in **your validation certificate**.
- 3 claims arising directly or indirectly as a result of a **pre-existing medical condition you** have unless **you** have contacted the **medical pre-screening company** and **we** have agreed in writing to cover **you**;
- 4 claims arising if, at any time, **you**:
  - a) have any medical condition which a **medical practitioner** has advised **you** not to travel (or would have done so had **you** sought his/her advice), but despite this **you** still travel; or
  - b) intend to travel outside of **your home** area to receive any surgery, treatment or investigations (including any expenses incurred due to the discovery of other **medical conditions** during and/or complications arising from these procedures); or
  - c) have any medical condition for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**; or
  - d) travel against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider.
- 5 claims arising if **you**:
  - a) have any medical condition for which **you** are on a waiting list for or have knowledge of the need for surgery, treatment or investigation at the time of taking out this **policy** or at the time of booking the trip; or
  - b) have any medical condition which has been diagnosed as a terminal condition at the time of taking out this **policy** or at the time of booking the trip; or
  - c) have any medical condition affecting **you**, a **relative** or a **close business associate** that **you** are aware of at the time of taking out this **policy**, that could reasonably be expected to result in a claim on this **policy**.
- 6 any claim for pregnancy which falls outside of the definition of **complications of pregnancy and childbirth**;
- 7 claims arising for treatment or surgery which, in the opinion of the **Insurer's** medical advisors, is not essential or can reasonably be delayed until **your return home**;
- 8 claims arising from the additional costs of single or private hospital room accommodation;
- 9 claims arising from medical treatment of any kind received after **you** have returned to the Republic of Ireland;
- 10 claims arising from medical treatment of any kind not authorised at the time by a recognised registered **medical practitioner**;
- 11 claims arising from medical treatment of any kind occurring after **you** have refused the offer of repatriation when, in the opinion of the doctor in attendance and the **Insurer's** medical advisors, **you** are fit to travel;
- 12 claims arising in respect of elective medical treatment, physiotherapy treatment and other associated therapies;
- 13 claims arising out of **your** failure to contact the **Emergency Assistance Service**.
- 14 claims for emergency repatriation if **you** have specific cover for this under a private health insurance **policy**.



### 3 Treatment in Australia

Should **you** require medical treatment in Australia, **you** should enrol with MEDICARE. It is not necessary to enrol on arrival. **You** can simply do this at the first occasion on which **you** receive treatment. In-patient and out-patient treatment at a public hospital is then available free of charge.

Should **you** be admitted to hospital, immediate contact must be made with the **Emergency Assistance Service** and their authority obtained in respect of any treatment NOT available under MEDICARE before such treatment is provided.

### 4 EU, EEA or Switzerland

If **you** are travelling to countries within the European Union (EU), the European Economic Area (EEA) or Switzerland **you** are strongly advised to obtain a European Health Insurance Card (EHIC). **You** can apply either online through [www.ehic.ie](http://www.ehic.ie) or by contacting **your** local Health Office. The European Health Insurance Card (EHIC) will entitle **you** to benefit from the reciprocal health care arrangements which exist between countries within the EU / EEA or Switzerland.

In the event of liability being accepted for a medical expense which has been reduced by more than **your excess** amount, by using either a European Health Insurance Card (EHIC) or a private health insurance **policy**, **we** will not apply the deduction of the **excess** under the Emergency Medical Expenses & Repatriation section.

### HOSPITAL BENEFIT

#### What you Are Covered For:

The **Insurer** will pay **you** the amount shown in the Schedule of Benefits for each and every completed period of 24 hours for which **you** are an in-patient in a hospital abroad, as a direct result of **you** sustaining **accidental bodily injury** or unexpected **illness** which is covered under the Emergency Medical Expenses & Repatriation section.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 claims where the **Emergency Assistance Service** has not been contacted and a recommended hospital has been appointed.
- 2 claims arising directly or indirectly as a result of a **Pre-existing medical condition** of **you** or anyone travelling with **you** unless **you** have contacted the **medical pre-screening company** and **we** have agreed in writing to cover **you**;
- 3 claims arising if, at any time, **you**:
  - a) have any medical condition which a **medical practitioner** has advised **you** not to travel (or would have done so had **you** sought his/her advice), but despite this **you** still travel; or
  - b) intend to travel outside of **your home** area to receive any surgery, treatment or investigations (including any expenses incurred due to the discovery of other **medical conditions** during and/or complications arising from these procedures); or
  - c) have any medical condition for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**;or

d) travel against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider.

#### 4 claims arising if **you**:

- a) have any medical condition for which **you** are on a waiting list for or have knowledge of the need for surgery, treatment or investigation at the time of taking out this **policy**; or
- b) have any medical condition which has been diagnosed as a terminal condition at the time of taking out this **policy**; or
- c) have any medical condition affecting **you**, a **relative** or a **close business associate** that **you** are aware of at the time of taking out this **policy**, that could reasonably be expected to result in a claim on this **policy**.

### SEARCH & RESCUE

#### What you Are Covered For:

The **Insurer** will pay **you** up to up to the amount shown in the Schedule of Cover in respect of costs necessarily and reasonably incurred by official local search and rescue organisations in the locality in which you are in as a result of their:

- a) searching for you;
- b) rescuing you; or
- c) recovering you if you are missing or if you've been involved in a serious accident

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;
- 2 search and rescue costs, if the search and rescue has not been arranged and authorised by a locally based recognised search and rescue facility;
- 3 expenses incurred by persons acting as an informal search and rescue party; or
- 4 search and rescue costs that have arisen as a result of **you** directly, or indirectly, failing to take heed of any local warning notices about the area in which the need for **your** search and rescue has arisen, or where **you** are travelling unaccompanied.

### TRAVEL ASSISTANCE

#### What you Are Covered For:

##### Transfer of Emergency Funds

In the event of an emergency the **Emergency Assistance Service** will assist in contacting a friend or close relative in your home country to make arrangements for the transfer of funds to you in your overseas destination. The **Emergency Assistance Service** will not advance or supply the funds.

##### Message Relay

The **Emergency Assistance Service** will assist in the transmission of urgent messages to a close relative or close business associate if medical or travel problems disrupt a trip.

##### Drug Replacement

The **Emergency Assistance Service** will assist with the following:

- a) replacement of lost drugs or other essential medication, or lost or broken prescription glasses, or contact lenses, which are unobtainable abroad.
- b) sourcing and delivery of compatible blood supplies.

The **Emergency Assistance Service** will not pay for the replacement costs of any item or the costs of sourcing and delivering blood supplies.

### Tracing Personal Property

The **Emergency Assistance Service** will assist in tracing and re-delivery of personal property that has been lost or misdirected in transit if the carrier has failed to resolve the problem.

To be able to provide this service the **insured person** must have his/her personal property tag number available.

### Replacement Travel

The **Emergency Assistance Service** will assist with the replacement of lost or stolen tickets and travel documents; and provide a referral to suitable travel agencies. The **Emergency Assistance Service** will not pay for any item.

### Lost Credit Cards

The **Emergency Assistance Service** will provide advice of how to contact the appropriate card issuers if credit or charge cards are lost or stolen.

### Emergency Translation Facility

The **Emergency Assistance Service** will provide a translation service in the event of an emergency if the local provider of an assistance service does not speak English.

### Legal Help

The **Emergency Assistance Service** will provide a referral to a local English-speaking lawyer, embassy or consulate if legal advice is needed.

### Medical Referral

In a medical emergency the **Emergency Assistance Service** will provide the following:

- a) provision of the names and addresses of local doctors, hospitals, clinics and dentists when consultation or treatment is required.
- b) if possible arrange for a doctor to call and if necessary, for the **insured person** to be admitted to hospital.
- c) In the event that you need to contact the **Emergency Assistance Service** in connection with the above please call **+353 091 560 687**.

## PERSONAL POSSESSIONS

### What You Are Covered For: Lost, Stolen or Damaged

The **Insurer** will pay **you** up to the amount as shown in the Schedule of Benefits, for the value of **personal possessions** taken or purchased on the **trip** by **you** which are accidentally lost, stolen or damaged.

The maximum payment for any **single item** is shown as a sub-limit in the Schedule of Benefits. The maximum payment for **valuables** is shown as a sub-limit in the Schedule of Benefits. The maximum payment for any **single item** for which an original receipt, proof of purchase or insurance valuation (obtained prior to the loss) is not supplied is €90, subject to a maximum of €400 for all such items. The maximum payment for tobacco, alcohol or fragrances (perfumes, aftershaves etc) is €75.

### Travel Documents

The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits for the value of **travel documents** held by **you** which are lost or stolen. This includes reasonable additional travel and accommodation expenses (room only) **you** incur abroad whilst obtaining an emergency/temporary passport and/or visa and the cost of a temporary passport and/or visa to return **you home**.

### Delayed Baggage

The **Insurer** will pay **you** for the cost of purchase of necessities, up to the maximum as shown in the Schedule of Benefits should **personal possessions** be delayed or lost in transit on the outward journey for more than 24 hours. Payment made under this heading will be set against the amount of any claim arising if the **personal possessions** are permanently lost. **You** must supply receipts for the items purchased and confirmation from the carrier of the length of delay.

### What you Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;
- 2 wear, tear and depreciation of the article(s) (please refer to the Special Note below for guidelines);
- 3 claims arising from breakage of **fragile articles** unless caused by fire or **accident** to a vehicle;
- 4 claims arising from damage caused by leakage of powder or liquid carried within **personal possessions**;
- 5 claims arising for theft which are not reported to any appropriate police authority within 24 hours of discovery and an official written report obtained;
- 6 claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official written report obtained (and specifically for claims arising against or in connection with carriers and hotels, any claim not reported in writing to such carrier or hotel within 24 hours of discovery, and an official written report obtained). In the case of an airline, a Property Irregularity Report will be required;
- 7 claims arising for breakage of **sports equipment** (unless **ski equipment** and appropriate **wintersports / Wintersports** cover has been effected) whilst in use;
- 8 claims arising from delay, detention, seizure or confiscation by customs or other officials;
- 9 claims arising for loss, theft or damage to household goods or anything shipped as freight or under a Bill of Lading;
- 10 claims arising for loss of or damage to dentures or bridgework;
- 11 claims arising for **personal possessions** left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property;
- 12 claims arising for loss or theft of items from an **unattended** motor vehicle, unless taken from a locked boot or lockable roof rack and there is evidence of forced entry which is confirmed by a written police report;
- 13 claims arising for loss or damage to items carried on a vehicle roof rack;
- 14 claims arising for loss, theft or damage to **valuables** which at the time of such loss, theft or damage were located in checked-in luggage or a motor vehicle.

## SPECIAL NOTE APPLICABLE TO PERSONAL POSSESSIONS

The **Insurer's** liability for articles shall be further limited to take into account wear and tear. Please refer to the following link for full details:

<https://www.getcover.ie/pdfs/travel-depreciation-table.pdf>

If **you** are claiming for damaged or destroyed goods **you** must produce an estimate for or repair from a reputable dealer confirming the estimated cost of repair.

## PERSONAL MONEY

### What You Are Covered For:

The **Insurer** will pay **you** up to the amount as shown in the Schedule of Benefits in respect of the loss of **cash** which is the property of **you** and carried on **your** person (a reduced limit applies as shown in the Schedule of Benefits for children under 18 unless an adult premium has been paid for that person) or placed in a safety deposit box or similar locked, fixed receptacle. Cover for **personal money** is limited to the **personal money** limit as shown in the Schedule of Benefits.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;
- 2 claims arising for theft which have not been reported to any appropriate police authority within 24 hours of discovery and an official written report obtained;
- 3 claims for loss which have not been reported to any appropriate authority within 24 hours of discovery and an official written report obtained (and specifically for claims arising against or in connection with carriers and hotels, any claim not reported in writing to such carrier or hotel within 24 hours of discovery, and an official written report obtained);
- 4 claims arising from delay, detention, seizure or confiscation by Customs or other officials;
- 5 claims arising from shortages due to error, omission or depreciation in value;
- 6 claims arising for loss or theft of **personal money** which at the time of such loss or theft was located in checked-in luggage or an **unattended** motor vehicle at any time;
- 7 claims arising for **personal money** left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property.

## MUGGING BENEFIT

### What You Are Covered For:

The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits if, because of a **mugging** involving a violent and threatening attack, **you** receive a **bodily injury** and need medical treatment.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims for compensation for **mugging** unless:
  - a) **you** have made a report to the appropriate police authority within 48 hours of the incident and **you** have obtained an official written police report, and
  - b) **you** have obtained an appropriate written medical report from the treating doctor.

## UNUSED EXCURSIONS

### What You Are Covered For:

The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits, for the cost of excursions pre-booked and paid for in **ROI**, which **you** were unable to use as a direct result of **you** being a hospital in-patient, as a result of an **accident** or **illness** which is covered under the medical section of this **policy**.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for

1. anything mentioned in the 'What you are not covered for' section of the Emergency Medical Expenses and Repatriation cover; or
2. claims where the **Emergency Assistance Service** has not been contacted and a recommended hospital has been appointed.

## PERSONAL ACCIDENT

### Special Definitions (which are shown in italics)

#### *Loss of limb*

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

#### *Loss of sight*

- means total and **irrecoverable** *loss of sight* which shall be considered as having occurred:

- a) in both eyes if **your** name is added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist and;
- b) in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen scale.

#### *Permanent Total Disablement*

- means a physical or mental impairment that has a substantial and long-term adverse effect on **your** ability to carry out any form of employment and at least three of the following normal day to day activities:

- Dressing and undressing.
- Personal hygiene.
- Getting up and down a flight of stairs.
- Getting in and out of a bed or chair.
- General household duties including cleaning, ironing or shopping.

**We** will consider that **you** are unable to perform an activity when the following applies:

- **you** are unable to perform the activity even with the use of equipment and;
- **you** always need the help of another person to perform the activity.

### What You Are Covered For:

**We** will pay one of the benefits shown in the Schedule of Benefits if **you** sustain **bodily injury** during **your trip** which shall solely and independently of any other cause, result within two years in **your** death, *loss of limb*, *loss of sight* or *permanent total disablement*.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. Any benefit where **your** death, injury or loss does not occur within 2 years of the **accident**;
2. More than one benefit under this section of **your policy**.

## SPECIAL CONDITIONS RELATING TO PERSONAL ACCIDENT CLAIMS:

1. **Our medical practitioner** may examine **you** as often as **we** deem necessary in the event of a claim.
2. Under *Permanent Total Disablement*, **you** need to be in receipt of the applicable disability benefit from **your** local government body.
3. Under *Permanent Total Disablement*, **you** need to be certified by **our medical practitioner** that there is no likelihood of an improvement in **your** condition.

## MISSED DEPARTURE

### What You Are Covered For:

The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** overseas destination or returning **you** to the Republic of Ireland if **you** fail to arrive at the international departure point in time to board the **public transport** on which **you** are booked to travel on the initial international journey of the **trip** as a result of:

1. the failure of other **public transport** or
2. an **accident** to or breakdown of the vehicle in which **you** are travelling or
3. an **accident** or breakdown occurring ahead of **you** on a motorway or dual carriage way which causes an unexpected delay to the vehicle in which **you** are travelling or
4. strike, industrial action or adverse weather conditions.

**You** may claim under the Missed Departure section or the Travel Delay section for the same event, not both.

### Special conditions relating to claims

1. In the event of a claim arising from any delay occurring on a motorway or dual carriage way **you** must obtain written confirmation from the Garda or emergency breakdown services of the location, reason for and duration of the delay.
2. **You** must allow sufficient time for the **public transport** or other transport to arrive on schedule and to deliver **you** to the departure point.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;
- 2 claims arising as a result of **you** not having left enough time to reach the departure point on time;
- 3 claims arising from the failure of **public transport** services caused by strike, riot or civil commotion for which warning has been given prior to the commencement of departure to the departure point;
- 4 claims arising from the vehicle not having been properly serviced and maintained, in the event of vehicle breakdown;
- 5 claims arising from an **accident**/breakdown of a motor vehicle, where no written evidence of such **accident**/breakdown has been supplied;
- 6 claims arising from delay/cancellation of **public transport**, where no written evidence of such delay/cancellation has been supplied; or
- 7 claims arising where Missed Departure is caused as a result of a delay in a prior connecting flight.

## TRAVEL DELAY AND HOLIDAY ABANDONMENT

### What You Are Covered For:

If departure of the **public transport** on which **you** are booked to travel is delayed at the final departure point from or to the Republic of Ireland for at least 12 hours from the scheduled time of departure due to:

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

1. **We** will pay **you** the amount shown in the Schedule of Benefits for the delay. Or
2. **We** will pay **you** up to the amount shown in the Schedule of Benefits for any **irrecoverable** unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay if after a minimum 12 hours has elapsed, **you** choose to abandon **your trip**.

**You** may claim under subsection 1. or 2. above for the same event, not both.

**You** may claim under the Missed Departure section or the Travel Delay section for the same event, not both.

### Special conditions relating to claims

1. **You** must check in according to the itinerary supplied to **you**.
2. **You** must obtain confirmation from the carriers (or their handling agents) in writing of the number of hours of delay and the reason for the delay.
3. **You** must comply with the terms of contract of the travel agent, tour operator or provider of transport

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;
- 2 claims arising for delay caused by strike or industrial action, if the strike or industrial action was notified at the time the insurance was purchased;
- 3 claims arising due to **your** failure to check in as per **your** original itinerary;
- 4 any claim payable that can be paid under the section Missed Departure;
- 5 claims arising where travel delay is caused as a result of a delay in a prior connecting flight; or
- 6 claims that can be reasonably expected to be paid by the airline or tour operator.

## HOTEL SERVICES FAILURE

### What You Are Covered For:

The **Insurer** will pay **you** the amount shown in the Schedule of Benefits for each and every completed period of 24 hours where, due to strike or industrial action, **your** pre-booked hotel completely withdraws the following:

- a) water or electrical facilities;
- b) swimming pool facilities;
- c) kitchen services to the extent that no food is available; or
- d) chambermaid facilities.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 claims which are not substantiated by a written report from the tour representative and/or hotel confirming the exact length, nature and cause of the disruption;
- 2 claims arising from strike or industrial action which was notified at the time the insurance was purchased;
- 3 claims for services not normally available prior to any strike or industrial action; or
- 4 claims that can be paid through the tour operator.

## PET CARE

### What You Are Covered For:

In the event of a delay of more than 24 hours to **your** final planned inbound flight, rail or sea **trip** to the Republic of Ireland, the **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits in respect of additional kennel and/or cattery fees necessarily incurred as a direct result of the delay.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 claims not substantiated by a written report from the carrier stating the length and exact nature of the delay;
- 2 claims arising from delay caused by strike or industrial action if already notified at the time the insurance was purchased.

## PERSONAL LIABILITY

### What You Are Covered For:

The **Insurer** will pay **you** up to the amount as shown in the Schedule of Benefits for the legal liability of the **Insured** for **accidental** injury to third parties and/or **accidental** damage to third party property within the territorial limits of the **policy**. This cover is applicable only in respect of liability under the law of the country in which the event giving rise to the claim occurred, or under Irish law, (whichever is applicable to the case in point).

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits
- 2 claims arising directly or indirectly from, happening through or in consequence of:
  - a) employer's liability, contractual liability, or liability to a member of **your family** or **your travelling companion**;
  - b) animals belonging to, or in the care, custody or control of the **Insured**;
  - c) wilful, malicious or unlawful acts or the use of firearms;
  - d) the pursuit of trade, business or profession;
  - e) ownership or occupation of land or buildings (other than **your** temporary **trip** accommodation); or
  - f) the **Insured's** use of intoxicating liquor or drugs;
- 3 claims arising directly or indirectly from, happening through or in consequence of ownership, possession or use of any vehicle, automobile, aircraft, watercraft, or any mechanically propelled conveyance;
- 4 claims for legal fees and costs resulting from any criminal proceedings;
- 5 any claim where **you** have cover under another insurance **policy**.

## SPECIAL CONDITIONS APPLICABLE TO PERSONAL LIABILITY

No liability shall be admitted and no admission, arrangement, offer, promise or payment shall be made by the **Insured** without the written consent of the **Insurer**, who shall be entitled, if they so desire, to take over and conduct, in the name of the **Insured**, their defence of any claim or to prosecute for their own benefit any claims for indemnity, damages or otherwise against any third party. The **Insurer** shall have full discretion in the conduct of any negotiations, proceedings, or the settlement of any claims and the **Insured** shall, wherever possible, give all such information and assistance as the **Insurer** may require.

## LEGAL EXPENSES

### What you Are Covered For:

1. 30 minutes free legal advice on the telephone for enquiries relating to **your** insured **trip**.
2. The **Insurer** will pay up to the amount shown in the Schedule of Benefits, for legal costs incurred in pursuing claims for compensation and damages due to **your** death or personal injury whilst on the **trip**.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. proceedings in more than one country for the same event;
3. any claim against a carrier, travel agent, tour operator, tour organiser, the **Insurer** or their agents or the claims office;
4. any claim where the estimated recovery is less than €500;
5. costs that can be considered under an arbitration scheme or a complaints procedure;
6. any claim due to damage to any mechanically propelled vehicle;
7. any claim against another **insured person**, member of **your family**, a friend or **travelling companion**, whether insured by **us** or another provider.

### Special conditions relating to claims

1. Legal expenses claims are only considered on the condition that **you** use Arc Legal Assistance Ltd as **your** legal representative and they will always have complete control over the legal proceedings and the selection, appointment and control of lawyers.
2. Where a claim occurs **you** will supply any reports or information and proof to **us** and the claims office as may be required.
3. Any legal expenses incurred without **our** prior authorisation or that of the claims office will not be paid.
4. **We** will settle all claims under the law of the Republic of Ireland, unless **we** agree otherwise with **you**.
5. Legal proceedings in the USA or Canada follow the contingency fee system operating in North America.
6. **You** accept that if **you** are awarded compensation and receive payment then all sums paid out by **us** shall be paid out of that compensation.

## CONNECTING FLIGHT COVER

### What you Are Covered For:

If **your** inbound flight to the Republic of Ireland and/ or any connecting flights are missed due to the flight immediately prior to the connection being delayed by at least 3 hours or cancelled, the **Insurer** will pay **you**, up to the amount shown on the Schedule of Benefits, for any reasonable

additional travel expenses **you** incur in purchasing alternative transport, either by air, sea, rail or road, to complete this particular **trip**.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- a) any compensation if **you** have not got written confirmation from the airline or its authorised agent, which shows the reason for the delay, the scheduled departure time, the expected duration of the delay of **your** flight or full details of any refund given in respect of an unused flight;
- b) any compensation if **you** have chosen to use the flight ticket, relating to the flight that has been cancelled, at a later date for a totally separate **trip**;
- c) any delay which is due to strike or industrial action which had started or was announced before **you** took out this **policy**;
- d) any compensation for a flight cancellation, which is not due to a delay of in **excess** of three hours;
- e) if the time difference between the initial flight and the commencement of the connecting flight is less than three hours;
- f) **your** failure to check-in according to the itinerary supplied to **you**;
- g) any compensation which is payable under this section of cover, will take into account any refund **you** have received from the airline or its authorised agent in respect of any unused flight; or
- h) compensation under both the Connecting Flight Cover and Travel Delay sections of this **policy**.

## WINTERSPORTS COVER

Provided only when the appropriate additional premium has been paid.

If **you** have purchased the Snow Pro Plus or the Snow Pro Plus (FIS racing) **policy**, the following special definitions apply:

#### SPECIAL DEFINITIONS *(which are shown in italics)*

##### *Wintersports*

Means **you** are covered for: bob sleighing, cross country skiing, curling, dog sledding, heli-skiing/ boarding, ice skating, luge, mono skiing, **off piste** skiing / snowboarding (where there is a grade 1, 2 or 3 avalanche warning in place), competitive snowboarding, parapenting, recreational racing, *recreational racing*, ski blading, skiing, ski racing (under the Snow Pro Plus (FIS racing) **policy** only), ski touring (including where ropes are used for safety purposes), snowboarding, snowmobiling, snowparks, snow shoeing and tobogganing.

##### *Ski Equipment*

Means those items that are owned by **you** and are usually worn, used or held during the participation in *Wintersports*. For example, Skis, ski bindings, ski boots, ski poles, snowboard, snowboard bindings, snowboard boots, snow blades and any other recognised snow sports equipment.

##### *Recreational Racing*

Means any race which does not contain a points system which counts towards a professional or amateur circuit.

Please note that if **you** have purchased an annual

**policy**, **you** are covered for an unlimited number of **wintersports/wintersports trips** per year, providing each **trip** does not exceed 24 days.

## SKI EQUIPMENT

#### What You Are Covered For:

The **Insurer** will pay **you** in respect of loss or breakage of **ski equipment/ski equipment** up to the amount as shown in the Schedule of Benefits for owned or hired **ski equipment/ski equipment**. In the case of owned **ski equipment/ski equipment**, each claim is subject to a maximum payment for any **single item** shown in the Schedule of Benefits.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. claims arising for theft which are not reported to any appropriate police authority within 24 hours of discovery and an official written report obtained;
3. claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official written report obtained. For claims arising against or in connection with common carriers and hotels, any claim not reported in writing to such carrier or hotel within 24 hours of discovery and an official written report obtained, will not be covered. In the case of an airline, a Property Irregularity Report will be required;
4. claims arising from delay, detention, seizure or confiscation by Customs or other officials;
5. claims arising for loss, theft or damage to anything shipped as freight or under a Bill of Lading;
6. claims arising for **ski equipment/ski equipment** left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of property;
7. claims arising for loss or theft of items from an **unattended** motor vehicle, unless taken from a locked boot or lockable roof rack and there is evidence of forced entry which is confirmed by a written police report;
8. breakage, loss or theft of **ski equipment/ski equipment** over 5 years old.

#### SPECIAL NOTE APPLICABLE TO SKI EQUIPMENT

The **Insurer's** liability for **ski equipment/ski equipment** shall be further limited to take into account wear and tear. Please refer to the following link for full details:

<https://www.getcover.ie/pdfs/travel-depreciation-table.pdf>

## SKI HIRE

#### What you Are Covered For:

The **Insurer** will pay **you** up to the amount as shown in the Schedule of Benefits for each 24-hour period for the cost of necessary hire of **ski equipment/ski equipment** following:

- a) loss, theft or breakage of **your ski equipment/ski equipment**; or
- b) the misdirection or delay in transit of **your ski equipment/ski equipment**.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising for theft which are not reported to the appropriate police authority within 24 hours of discovery and an official written report obtained;
2. claims arising for loss or damage which are not reported to any appropriate authority within 24 hours of discovery and an official written report obtained. For claims arising against or in connection with common carriers and hotels, any claim not reported in writing to such carrier or hotel within 24 hours of discovery and an official written report obtained, will not be covered. In the case of an airline, a Property Irregularity Report will be required;
3. claims arising for loss, theft or damage to anything shipped as freight or under a Bill of Lading;
4. claims arising for property left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property;
5. claims arising for loss or theft of items from an **unattended** motor vehicle, unless taken from a locked boot or lockable roof rack and there is evidence of forced entry which is confirmed by a written police report;
6. claims arising from delay, detention, seizure or confiscation by Customs or other officials.

### SKI PACK

#### What You Are Covered For:

**We** will pay **you** up to the amount as shown in the Schedule of Benefits for each complete day that **you** are unable to use **your** ski pass, ski hire or tuition fees due to the following:

- (a) **you** being involved in an **accident** or due to **your illness**.
- (b) The loss or theft of **your** ski pass.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising from a medical condition which are not substantiated by a written report from the treating doctor confirming **your** inability to ski;
2. claims arising directly or indirectly as a result of **your pre-existing medical condition** unless **you** have contacted the **medical pre-screening company** and **we** have agreed in writing to cover **you**;
3. claims arising for theft which are not reported to any appropriate police authority within 24 hours of discovery and an official written report obtained;
4. claims arising for loss or theft which are not reported to any appropriate authority within 24 hours of discovery and an official written report obtained. For claims arising against or in connection with common carriers and hotels, any claim not reported in writing to such carrier or hotel within 24 hours of discovery and an official written report obtained, will not be covered. In the case of an airline, a Property Irregularity Report will be required;
5. claims arising for property left **unattended** in a place to which the general public has access or left in the custody of a person who does not have an official responsibility for the safekeeping of the property;
6. claims arising for loss or theft of items from an **unattended** motor vehicle, unless taken from a locked boot or lockable roof rack and there is evidence of forced entry which is confirmed by a written police report.

### PISTE CLOSURE

#### What You Are Covered For:

The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits, if **you** are skiing North of the earth's equator between 1st January-30th April, or South of the earth's equator between 1st June-31st October and at a destination of higher than 1600 metres above sea level and due to lack of snowfall or adverse weather in the pre-booked **wintersports/wintersports** resort and no alternative being available, **you** are not able to ski for a period in **excess** of 24 hours.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. claims arising which are not substantiated by a written report from the resort management;
2. claims arising due to lack of snow fall in a **wintersports/wintersports** resort which does not possess skiing facilities above 1,000 metres.

### AVALANCHE CLOSURE

#### What You Are Covered For:

The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits for additional travel and accommodation expenses in the event that **your** outward or return journey is delayed for at least 12 hours beyond the scheduled departure time as a direct result of avalanche.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. claims arising which are not substantiated by a written report from the resort management.

### GOLF COVER

**Provided only when the appropriate additional premium has been paid.**

### GOLF EQUIPMENT

#### What You Are Covered For:

The **Insurer** will pay **you**, up to the amount shown in the Schedule of Benefits, for **accidental** loss, theft of or damage to **golf equipment** which **you** own.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

1. the **excess** as shown in the Schedule of Benefits;
2. more than €70 per **single item**, up to a maximum of €280 in total for any one claim, if **you** are unable to provide the original receipt, proof of purchase or an insurance valuation which was obtained prior to the loss;
3. **golf equipment** which is over five years old;
4. any claim for loss or theft of **golf equipment** if **you** have not notified the police within 24 hours of its discovery and obtained a written report, which includes the crime reference number;
5. any claim, if the loss or theft occurs during a journey or whilst in the custody of an airline or other carrier, and **you** have not notified the carrier or their handling agent of the incident and obtained an official written report or a Property Irregularity Report (PIR);
6. claims arising from delay, detention, seizure or

- confiscation by Customs or other officials;
- 7 claims for loss, theft or damage to anything being shipped as freight or under a Bill of Lading;
- 8 damage to, or loss or theft of **golf equipment**, which is being carried on a vehicle roof rack;
- 9 damage to, or loss or theft of **golf equipment**, if it has been left:
  - a) **unattended** in a place to which the public have access;
  - b) left in an **unattended** motor vehicle; or
  - c) in the custody of a person who does not have an official responsibility for the safekeeping of the property; or
- 10 any claim for damage to **golf equipment** whilst in use.

#### GOLF EQUIPMENT HIRE

##### What You Are Covered For:

The **Insurer** will pay **you**, up to the amount shown in the Schedule of benefits if **your own golf equipment** is:

- a) lost, stolen or damaged; or
- b) misdirected or delayed in transit by more than 12 hours the **Insurer** will pay for the cost of hiring **you** the necessary **golf equipment** for each 24 hour period **you** are without **your own golf equipment**.

##### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 any claim for loss or theft of **your own golf equipment** if **you** have not notified the police within 24 hours of its discovery and obtained a written report, which includes the crime reference number;
- 2 any claim, if the loss or theft of **your own golf equipment** occurs during a journey or whilst in the custody of an airline or other carrier, and **you** have not notified the carrier or their handling agent of the incident and obtained an official written report or a Property Irregularity Report (PIR);
- 3 claims arising from **your own golf equipment** being delayed, detained, seized or confiscated by Customs or other officials;
- 4 claims following loss or theft of, or damage to **your own golf equipment** whilst being shipped as freight or under a Bill of Lading;
- 5 damage to, or loss or theft of **your own golf equipment**, which is being carried on a vehicle roof rack;
- 6 damage to, or loss or theft of **your own golf equipment**, if it has been left:
  - a) **unattended** in a place to which the public have access; or
  - b) left in an **unattended** motor vehicle; or
  - c) in the custody of a person who does not have an official responsibility for the safekeeping of the property.

#### NON-REFUNDABLE GOLFING FEES

##### What You Are Covered For:

The **Insurer** will pay **you**, up to the amount shown in the Schedule of Benefits, the proportionate value of any non refundable:

- 1 pre-paid green fees; and/or
- 2 **golf equipment** hire fees; and/or
- 3 tuition hire fees which are not used due to:
  - a) **you** being involved in an **accident**; or
  - b) **your** sickness; or
  - c) the loss or theft of documentation which prevents **you** from participating in the pre-paid golfing activity.

#### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 claims arising directly or indirectly as a result of **your pre-existing medical condition** unless **you** have contacted the **medical pre-screening company** and **we** have agreed in writing to cover **you**;
- 2 claims arising from a medical condition which is not substantiated by a written report from the treating doctor confirming **your** inability to play golf;
- 3 any claim for loss or theft of **your** documents if **you** have not notified the police within 24 hours of its discovery and obtained a written report, which includes the crime reference number; or
- 4 any claim, if the loss or theft of **your** documents occurs during a journey or whilst in the custody of an airline or other carrier, and **you** have not notified the carrier or their handling agent of the incident and obtained an official written report or a Property Irregularity Report (PIR).

#### CAMPING AND FIELD SPORTS EQUIPMENT

Provided only when the appropriate additional premium has been paid.

##### What You Are Covered For:

The **Insurer** will pay **you**, up to the amount shown in the Schedule of Benefits, for **accidental** loss, theft of or damage to the **camping and field sports equipment you** are responsible for during **your trip**.

##### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;
- 2 claims for theft of the **camping and field sports equipment you** are responsible for if **you** have not notified the police within 24 hours of its discovery and obtained a written report, which includes the crime reference number;
- 3 more than €75 per **single item**, up to a maximum of €250 in total for any one claim, if **you** are unable to provide the original receipt, proof of purchase or an insurance valuation which was obtained prior to the loss;
- 4 any claim if the loss, damage or theft occurs during a journey or whilst in the custody of an airline or other carrier, and **you** have not notified the carrier or their handling agent of the incident and obtained an official written report or a Property Irregularity Report (PIR);
- 5 wear, tear, or depreciation;
- 6 loss, theft or damage arising from the delay, detention, seizure or confiscation by Customs or other officials;
- 7 damage caused by the leakage of powder or liquid carried with the **camping and field sports equipment you** are responsible for;
- 8 any breakage of **fragile articles**, unless the breakage is caused by fire or an **accident** involving the vehicle in which **you** are being carried.

#### SPECIAL NOTE APPLICABLE TO CAMPING AND FIELD SPORTS EQUIPMENT

The **Insurer's** liability for **camping and field sports equipment** shall be further limited to take into account wear and tear. Please refer to the following link for full details:

<https://www.getcover.ie/pdfs/travel-depreciation-table.pdf>



## BUSINESS COVER

Provided only when the appropriate additional premium has been paid.

### What You Are Covered For:

#### a) Business equipment

The **Insurer** will pay **you**, up to the amount shown in the Schedule of Benefits, for **accidental** loss, theft of or damage to **your business equipment**. Following this **accidental** loss, theft or damage to **your business equipment**, the **Insurer** will also pay for any emergency courier expenses **you** have incurred up to €800, in obtaining any **business equipment**, which is essential to **your** intended business itinerary, up to the amount shown in the Schedule of Benefits.

#### b) Business equipment delay

The **Insurer** will pay **you** for the hire or purchase of essential items, up to the amount shown in the Schedule of Benefits, if **your business equipment** is delayed or lost in transit on **your** outward journey for more than 24 hours.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;
- 2 more than €70 per **single item**, up to a maximum of €280 in total for any one claim, if **you** are unable to provide the original receipt, proof of purchase or an insurance valuation which was obtained prior to the loss;
- 3 claims for theft of **your business equipment**, if **you** have not notified the police within 24 hours of its discovery and obtained a written report, which includes the crime reference number;
- 4 any claim if the loss, damage or theft occurs during a journey and **you** have not notified the carrier or their handling agent of the incident and obtained an official written report or a Property Irregularity Report (PIR);
- 5 wear, tear, or depreciation;
- 6 loss, theft or damage arising from the delay, detention, seizure or confiscation by Customs or other officials;
- 7 damage caused by the leakage of powder or liquid carried with **your business equipment**;
- 8 any breakage of **fragile articles**, unless the breakage is caused by fire or an **accident** involving the vehicle in which **you** are being carried;
- 9 damage to, or loss or theft of **your business equipment**, if it has been left/located:
  - a) **unattended**, in a place to which the public have access;
  - b) in the custody of a person who does not have an official responsibility for the safekeeping of the property;
  - c) in an **unattended** motor vehicle; or
  - d) in checked-in luggage;
- 10 loss, theft or damage to anything being shipped as freight or under a Bill of Lading;
- 11 any claim for **business equipment** delay, if **you** cannot supply receipts for the essential items purchased and written confirmation from the carrier as to the length of delay.

### SPECIAL NOTE APPLICABLE TO BUSINESS EQUIPMENT

The **Insurer's** liability for **business equipment** shall be further limited to take into account wear and tear. Please refer to the following link for full details:

<https://www.getcover.ie/pdfs/travel-depreciation-table.pdf>

## BUSINESS EQUIPMENT HIRE

### What You Are Covered For:

#### If your business equipment is:

- a) lost, stolen or damaged; or
- b) misdirected or delayed in transit by more than 12 hours

The **Insurer** will pay for the cost of **you** hiring the necessary **business equipment** for each 24 hour period **you** are without **your business equipment**, up to the amount shown in the Schedule of Benefits.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **insurer** shall not be responsible for:

- 1 any claim for loss or theft of **your own business equipment** if **you** have not notified the police within 24 hours of its discovery and obtained a written report, which includes the crime reference number;
- 2 any claim, if the loss or theft of **your own business equipment** occurs during a journey and **you** have not notified the carrier or their handling agent of the incident and obtained an official written report or a Property Irregularity Report (PIR);
- 3 claims arising from **your own business equipment** being delayed, detained, seized or confiscated by Customs or other officials;
- 4 claims following loss or theft of, or damage to **your own business equipment** whilst being shipped as freight or under a Bill of Lading;
- 5 damage to, or loss or theft of **your own business equipment**, which is being carried on a vehicle roof rack; or
- 6 damage to, or loss or theft of **your own business equipment**, if it has been left/located:
  - a) **unattended** in a place to which the public have access; or
  - b) in an **unattended** motor vehicle;
  - c) in the custody of a person who does not have an official responsibility for the safekeeping of the property; or
  - d) in checked-in luggage.

## BUSINESS MONEY

### What You Are Covered For:

The **Insurer** will pay **you** for the loss or theft of **your business money** and travellers cheques during **your trip**, up to the amount shown in the Schedule of Benefits.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 the **excess** as shown in the Schedule of Benefits;
- 2 any loss or theft of **business money**, if **you** have not notified the police within 24 hours of its discovery and obtained a written report, which includes the crime reference number;
- 3 any loss, if **you** have not taken reasonable steps to prevent a loss happening;
- 4 loss or theft of **business money** that is:
  - a) not on **your** person; or
  - b) not deposited in a safe, safety deposit box or similar locked fixed container in **your trip** accommodation
- 5 loss or theft of **business money** that does not belong to:
  - a) **your** employer; or
  - b) **you**, if **you** are self-employed;
- 6 loss or theft of traveller's cheques, if the issuer provides a replacement service;

- 7 depreciation in value, currency changes or shortage caused by any error or omission; or
- 8 loss or damage arising from delay, seizure, confiscation or detention by Customs or other officials.

## CRUISE COVER

**Provided only when the appropriate additional premium has been paid.**

This extension to the **policy** provides the following modifications to the insurance specifically in respect of any **cruise** taken by **you**. Under **your policy** with **us** a "**Cruise**" is defined as meaning "a **trip** involving a sea voyage of more than two days in total duration, where transportation and accommodation is primarily on an ocean going passenger ship".

### What You Are Covered For:

1. Under **your** existing **personal possessions** section the maximum the **Insurer** will pay for **personal possessions**, any **single item, pair or set** of articles and the total for all **valuables** is increased to the amounts shown in the Schedule of Benefits.
2. The **Insurer** will pay **you** the amount shown in the Schedule of Benefits for each scheduled pre-paid shore **trip** missed as a result of the ship on which **you** are travelling being unable to dock at the scheduled destination.
3. The **Insurer** will pay **you** the amount shown in the Schedule of Benefits for every complete 24 hours **you** are confined to **your** cabin due to **your** compulsory quarantine or on the orders of the ships doctor or any other **medical practitioner** on board the ship outside **your home** as a result of **bodily injury** or **illness you** sustain. The **Insurer** will pay this in addition to any amount payable under the Emergency Medical Expenses & Repatriation section. *This payment is meant to help you pay additional expenses such as phone calls incurred during your confinement.*
4. The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits for **irrecoverable** unused travel and accommodation costs in respect of excursions pre-booked in the Republic of Ireland which **you** have paid or are contracted to pay following a valid claim being made by **you** under the cancellation or **curtailment** section of the **policy**.
5. The **Insurer** will pay **you** up to the amount shown in the Schedule of Benefits for reasonable and additional onward travel expenses and room only accommodation costs, necessarily incurred in reaching the next available embarkation point in time to board the original **cruise** ship on which **you** are booked to travel, or **your** failure to disembark **your cruise** ship at the original disembarkation place and time to reach **your** international flight departure point as a result of:
  - a) the failure of any scheduled **public transport**;
  - b) the failure of **your** booked **cruise** ship;
  - c) strike, industrial action or adverse weather conditions.

### SPECIAL CONDITIONS RELATING TO CRUISE CONNECTION CLAIMS

1. **You** must allow sufficient time for the scheduled **public transport, cruise** ship or other transport to arrive on schedule and to deliver **you** to **your** embarkation point or international departure point.
2. No cover exists for claims arising directly or indirectly

from:

- a) strike or industrial action or air traffic control delay that existed or was publicly announced at the date of **you** purchasing this **policy** or at the time of booking any **trip**.
- b) withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Irish Aviation Authority, a Port Authority of any similar body in any country.
- c) additional expenses where the scheduled **public transport** operator has offered **you** reasonable alternative travel arrangements.
- d) any delay caused by the quarantine on a **cruise** ship that **you** were booked to travel on.

**You** may claim under subsection 3. above or the Hospital Benefit section of cover for the same event, not both. **You** may claim under subsection 4. above or the Cancellation or **Curtailment** section of cover for the same event, not both.

### SPECIAL CONDITIONS RELATING TO ALL CRUISE CLAIMS

1. **You** must report to the local Police or Port Authority in the country where the incident occurred (or where appropriate the ships purser or the **cruise** operator's representative) within 24 hours of discovery or as soon as possible after that and get a written report of the loss, theft or attempted theft of **your personal possessions**.
2. If **your personal possessions** are lost, stolen or damaged while in the care of a carrier, transport company, authority or hotel **you** must report to them, in writing, details of the loss, theft or damage and obtain written confirmation. If **your personal possessions** are lost, stolen or damaged whilst in the care of an airline **You** must:
  - a) get a Property Irregularity Report from the airline.
  - b) give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please keep a copy).
  - c) keep all travel tickets and tags for submission if **you** are going to make a claim under this **policy**.
3. **You** must keep receipts for items lost, stolen or damaged as these will help **you** to substantiate **your** claim.
4. **You** must give notice as soon as possible to **our Emergency Assistance Service** of any **bodily injury** or serious **illness** which necessitates **your** compulsory quarantine or if the ships doctor or another **medical practitioner** confines **you** to **your** cabin.
5. **You** must get a letter from **your cruise** operator's representative, hotel or accommodation provider where appropriate, confirming the reason and details of any missed shore **trip**.

### What You Are Not Covered For:

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 The **excess** shown in the Schedule of Benefits (except claims under subsections 2. and 3.).
- 2 Loss, theft of or damage to **valuables** left **unattended** at any time (including in a motor vehicle or in the custody of carriers) unless deposited in a hotel or ship's safe, safety deposit box or left in **your** locked cabin or other accommodation.
- 3 Loss, theft of or damage to **personal possessions** contained in an **unattended** motor vehicle unless taken from a locked boot or lockable roof rack and there is evidence of forced entry which is confirmed by a written police report.

- 4 Loss or damage due to delay, confiscation or detention by customs or any other authority.
- 5 Loss, theft of or damage to unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, deeds, manuscripts, securities, perishable goods (such as food stuffs), bicycles, **ski equipment** and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).
- 6 Loss or damage due to cracking, scratching, breakage of or damage to china, glass (other than glass in a watch face or a camera), porcelain or other brittle or **fragile articles** unless caused by fire, theft, or an **accident** to the vessel, aircraft or vehicle in which they are being carried.
- 7 Loss or damage due to breakage of **sports equipment** or damage to sports clothing whilst in use.
- 8 Loss or damage caused by wear and tear, depreciation (loss of value), deterioration, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
- 9 Claims under subsection 2 of what is covered:
  - a) Where a monetary amount (including on board credit) of compensation has been offered by the ship or tour operator.
  - b) Circumstances known to **you** prior to the date this **policy** is purchased by **you** or the time of booking any shore **trip** which could reasonably have been expected to give rise to cancellation or **curtailment** of the **trip**.
- 10 Any claims arising directly or indirectly from:
  - a) Any additional period of confinement or compulsory quarantine relating to treatment or surgery, including exploratory tests, which are not directly related to the **bodily injury** or **illness** which necessitated **your** confinement.
  - b) Confinement or compulsory quarantine relating to any form of treatment or surgery which in the opinion of the ships doctor or other **medical practitioner** in attendance and **our Emergency Assistance Service** can be delayed reasonably until **your** return to **your home**.
  - c) Confinement or compulsory quarantine as a result of a disease where **you** have not had the recommended inoculations and / or taken the recommended medication.
  - d) Any additional period of confinement or compulsory quarantine following **your** decision not to be repatriated after the date when in the opinion of **our Emergency Assistance Service** it is safe to do so.

## TRAVEL DISRUPTION

**Provided only when the appropriate additional premium has been paid.**

This extension to the cover provides the following amendments to the insurance, specifically for costs and expenses that are not recoverable from any other source.

### EXTENDED CANCELLATION OR CURTAILMENT CHARGES COVER

#### What You Are Covered For:

Sections **Cancellation costs** and **Curtailement costs** are extended to include the following cover.

The **Insurer** will pay **you**, up to the amount shown in the Schedule of benefits for:

- a) **your** proportion only of any **irrecoverable** unused travel and accommodation costs and other pre-paid charges (including car hire and excursions) which **you** have paid or contracted to pay before **you** go on **your trip**, if cancellation of the **trip** is necessary and unavoidable as a result of any of the following events occurring after payment of **policy** premium and occurring within the period of insurance; or
- b) **your** proportion only of any **irrecoverable** unused accommodation costs and other unused pre-paid charges (including car hire and excursions) which **you** have paid or contracted to pay, together with **your** proportion only of any reasonable additional travel expenses incurred if **curtailment** of the **trip** is necessary and unavoidable as a result of any of the following events occurring after payment of **policy** premium and occurring within the Period of Insurance:
  1. The Department Of Foreign Affairs or the World Health Organisation (WHO) or regulatory authority in a country to/from which **you** are travelling issuing a directive as follows:
    - a) prohibiting all travel or all but essential travel to or
    - b) recommending evacuation from the country or specific area or event to which **you** were travelling.

### SPECIAL CONDITION

For cover to apply, the directive must have come into force after **you** purchased this insurance or booked the **trip** (whichever is the later), or in the case of **curtailment** after **you** had left Ireland to commence the **trip**.

### What Is Not Covered

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 The **excess** as shown in the Schedule of benefits of each and every claim, per incident claimed for, under this section by each **insured person** (except claims under subsection 1. of What **You** Are Covered For under the Extended Delayed Departure cover above)
- 2 The cost of Airport Departure Duty/Tax (whether **irrecoverable** or not).
- 3 Travel tickets paid for using any airline mileage reward scheme, for example Air Miles.
- 4 Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
- 5 Claims arising directly or indirectly from:
  - a) strike or industrial action, adverse weather, cancellation of public transport or a directive prohibiting all travel or all but essential travel, to the country or specific area or event to which **you** were travelling, existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
  - b) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **you** are travelling.
  - c) Denied boarding due to **your** drug use, alcohol or solvent abuse or **your** inability to provide a valid passport, visa or other documentation required by the public transport operator or their handling agents.
- 6 Any costs incurred by **you** which are recoverable from the providers of the accommodation (or their administrators) or for which **you** receive or are expected to receive compensation or reimbursement.
- 7 Any costs incurred by **you** which are recoverable from

the public transport operator or for which **you** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.

- 8 Any accommodation costs, charges and expenses where the Public Transport operator has offered reasonable alternative travel arrangements.
- 9 Any costs for normal day to day living such as food and drink
- 10 Claims arising within 7 days of the date **you** purchased this insurance or the time of booking any **trip**, whichever is the later.
- 11 Anything mentioned in the General Exclusions applicable to all sections of **your policy**.

#### EXTENDED TRAVEL DELAY/ EXTENDED HOLIDAY ABANDONMENT

##### What You Are Covered For:

Sections 'Travel Delay' and 'Holiday Abandonment' are extended to include the following cover.

The **Insurer** will pay **you**, up to the amount shown in the Schedule of benefits:

- 1 If departure of the public transport on which **you** are booked to travel is cancelled or delayed, leading to **your** departure being delayed for more than 12 hours at the departure point of any connecting public transport in Ireland or the United Kingdom or to **Your** overseas destination or on the return journey to **your home**. This benefit is meant to help **you** pay for telephone calls made and meals and refreshments purchased during the delay provided **you** eventually continue the **trip**.
- 2 The Insurer will pay **you**, up to the amount shown in the Schedule of benefits for either:
  - a) **your** proportion only of any **irrecoverable** unused travel and accommodation costs and other pre-paid charges (including car hire and excursions) which **you** have paid or contracted to pay because **you** were not able to travel and use **your** booked accommodation as a result of:
    - i) the public transport on which **you** were booked to travel from Ireland being cancelled or delayed for more than 12 hours or
    - ii) **you** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 12 hours and **you** choose to cancel **your trip** because the alternative transport to **your** overseas destination offered by the public transport operator was not reasonable or
  - b) suitable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** overseas destination and/or in returning to Ireland as a result of:
    - i) the public transport on which **you** were booked to travel being cancelled, delayed for more than 12 hours, diverted or re-directed after take-off or
    - ii) **you** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 12 hours and **you** choose to make other travel arrangements for **your trip** because the alternative transport offered by the public transport operator was not reasonable.

The amount payable will be calculated after deduction of the amount of the refund on **your** ticket(s) together with any compensation from the public transport operator. **You** can only claim under subsections 1. or 2. for the same event, not both. If the same costs, charges or expenses are also covered under any other section of this **policy you** can only claim for these under one section for the same event.

##### What Is Not Covered

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 The **excess** as shown in the Schedule of benefits of each and every claim, per incident claimed for, under this section by each **insured person** (except claims under subsection 1. of What **You** Are Covered For under the Extended Delayed Departure cover above)
- 2 The cost of Airport Departure Duty/Tax (whether **irrecoverable** or not).
- 3 Travel tickets paid for using any airline mileage reward scheme, for example Air Miles.
- 4 Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
- 5 Claims arising directly or indirectly from:
  - a) strike or industrial action, adverse weather, cancellation of public transport or a directive prohibiting all travel or all but essential travel, to the country or specific area or event to which **you** were travelling, existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**;
  - b) an aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **you** are travelling;
  - c) being denied boarding due to **your** drug use, alcohol or solvent abuse or **your** inability to provide a valid passport, visa or other documentation required by the public transport operator or their handling agents.
- 6 Any costs incurred by **you** which are recoverable from the providers of the accommodation (or their administrators) or for which **you** receive or are expected to receive compensation or reimbursement.
- 7 Any costs incurred by **you** which are recoverable from the public transport operator or for which **you** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
- 8 Any accommodation costs, charges and expenses where the Public Transport operator has offered reasonable alternative travel arrangements.
- 9 Any costs for normal day to day living such as food and drink
- 10 Claims arising within 7 days of the date **you** purchased this insurance or the time of booking any **trip**, whichever is the later.
- 11 Anything mentioned in the General Exclusions applicable to all sections of **your policy**.

## EXTENDED MISSED DEPARTURE COVER

### What You Are Covered For:

Section 'Missed departure' cover is extended to include the following cover.

The **Insurer** will pay **you**, up to the amount shown in the Schedule of benefits for **your** proportion only of any reasonable additional accommodation (room only) and travel expenses incurred in reaching **your** overseas destination or returning to Ireland if **you** fail to arrive at the departure point in time to board any onward connecting public transport on which **you** are booked to travel, following completion of the initial international journey, including connections within Ireland or the United Kingdom on the return journey to **your home** as a result of:

- 1 the failure of other public transport or
- 2 strike or industrial action or adverse weather conditions or
- 3 **you** being involuntarily denied boarding (because there are too many passengers for the seats available) and no other suitable alternative flight could be provided within 12 hours.

If the same expenses are also covered under any other section of this cover **you** can only claim for these under one section for the same event.

### What Is Not Covered

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 The **excess** as shown in the Schedule of benefits of each and every claim, per incident claimed for, under this section by each **insured person** (except claims under subsection 1. of What **You** Are Covered For under the Extended Delayed Departure cover above)
- 2 The cost of Airport Departure Duty/Tax (whether **irrecoverable** or not).
- 3 Travel tickets paid for using any airline mileage reward scheme, for example Air Miles.
- 4 Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
- 5 Claims arising directly or indirectly from:
  - a) strike or industrial action, adverse weather, cancellation of public transport or a directive prohibiting all travel or all but essential travel, to the country or specific area or event to which **you** were travelling, existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
  - b) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **you** are travelling.
  - c) Denied boarding due to **your** drug use, alcohol or solvent abuse or **your** inability to provide a valid passport, visa or other documentation required by the public transport operator or their handling agents.
- 6 Any costs incurred by **you** which are recoverable from the providers of the accommodation (or their administrators) or for which **you** receive or are expected to receive compensation or reimbursement.
- 7 Any costs incurred by **you** which are recoverable from the public transport operator or for which **you** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.

- 8 Any accommodation costs, charges and expenses where the Public Transport operator has offered reasonable alternative travel arrangements.
- 9 Any costs for normal day to day living such as food and drink
- 10 Claims arising within 7 days of the date **you** purchased this insurance or the time of booking any **trip**, whichever is the later.
- 11 Anything mentioned in the General Exclusions applicable to all sections of **your policy**.

## ACCOMMODATION COVER

### What You Are Covered For:

As a result of, fire, flood, earthquake, explosion, tsunami, landslide, avalanche, volcanic eruption, hurricane, storm or an outbreak of food poisoning or an infectious disease affecting **your** accommodation or resort the **Insurer** will pay **you**, up to the amount shown in the Schedule of benefits for:

- 1 **your** proportion only of any **irrecoverable** unused travel and accommodation costs and other pre-paid charges (including car hire and excursions) which **you** have paid or contracted to pay because **you** were not able to travel and use **your** booked accommodation or
- 2 **your** proportion only of any reasonable additional accommodation and transport costs incurred:
  - a) up to the standard of **your** original booking, if **you** need to move to other accommodation on arrival or at any other time during the **trip** because **you** cannot use **your** booked accommodation or
  - b) with the prior authorisation of the Emergency Assistance Service to repatriate **you** to **your home** if it becomes necessary to **curtail** the **trip**. **You** can only claim under one of subsections 1. or 2. for the same event, not both. If the same costs and charges are also covered under any other section of this cover **you** can only claim for these under one section for the same event.

### What Is Not Covered

In addition to the General Exclusions of the **policy**, the **Insurer** shall not be responsible for:

- 1 The **excess** as shown in the Schedule of benefits of each and every claim, per incident claimed for, under this section by each **insured person** (except claims under subsection 1. of What **You** Are Covered For under the Extended Delayed Departure cover above)
- 2 The cost of Airport Departure Duty/Tax (whether **irrecoverable** or not).
- 3 Travel tickets paid for using any airline mileage reward scheme, for example Air Miles.
- 4 Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme.
- 5 Claims arising directly or indirectly from:
  - a) strike or industrial action, adverse weather, cancellation of public transport or a directive prohibiting all travel or all but essential travel, to the country or specific area or event to which **you** were travelling, existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
  - b) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **you** are travelling.
  - c) Denied boarding due to **your** drug use, alcohol or solvent abuse or **your** inability to provide a valid passport, visa or other documentation required by the public transport operator or their handling

agents.

- 6 Any costs incurred by **you** which are recoverable from the providers of the accommodation (or their administrators) or for which **you** receive or are expected to receive compensation or reimbursement.
- 7 Any costs incurred by **you** which are recoverable from the public transport operator or for which **you** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.
- 8 Any accommodation costs, charges and expenses where the Public Transport operator has offered reasonable alternative travel arrangements.
- 9 Any costs for normal day to day living such as food and drink
- 10 Claims arising within 7 days of the date **you** purchased this insurance or the time of booking any **trip**, whichever is the later.
- 11 Anything mentioned in the General Exclusions applicable to all sections of **your policy**.

#### SPECIAL CONDITIONS RELATING TO CLAIMS (APPLICABLE TO ALL EXTENDED SECTIONS OF COVER)

- 1 If **You** fail to notify the travel agent, tour operator or provider of transport or accommodation as soon as **You** find out it is necessary to cancel the **trip**, the amount the **Insurer** will pay will be limited to the cancellation charges that would have otherwise applied.
- 2 **You** must get (at **your** own expense) written confirmation from the provider of the accommodation (or their administrators), the local Police or relevant authority that **you** could not use **your** accommodation and the reason for this.
- 3 **You** must check in, according to the itinerary supplied to **you** unless **your** tour operator or airline has requested **you** not to travel to the airport.
- 4 **You** must get (at **your** own expense) written confirmation from the public transport operator (or their handling agents) of the cancellation, number of hours of delay or involuntarily denied boarding and the reason for these together with details of any alternative transport offered.
- 5 **You** must comply with the terms of contract of the public transport operator and seek financial compensation, assistance or a refund of **your** ticket from them, in accordance with the terms and/or (where applicable) **your** rights under EU Air Passengers Rights legislation in the event of denied boarding, cancellation or long delay of flights.
- 6 For Missed Departure claims: **You** must allow sufficient time for the public transport or other transport to arrive on schedule and to deliver **you** to the departure point.
- 7 **You** must get (at **your** own expense) written confirmation from the public transport operator/accommodation provider that reimbursement will not be provided.

#### CLAIMS EVIDENCE (APPLICABLE TO ALL EXTENDED SECTIONS OF COVER)

**We will require (at Your own expense) the following evidence where relevant:**

- 1 A copy of the advice against all travel or all but essential travel issued by The Department Of Foreign Affairs or the World Health Organisation (WHO) or the regulatory authority in a country to/from which **you** are travelling.
- 2 Booking confirmation together with a cancellation

invoice from **your** travel agent, tour operator or provider of transport/accommodation.

- 3 In the case of **curtailment** claims, written details from **your** travel agent, tour operator or provider of transport/accommodation of the separate costs of transport, accommodation and other pre-paid costs or charges that made up the total cost of the trip.
- 4 **Your** unused travel tickets.
- 5 A letter from the carriers (or their handling agents) confirming the number of hours delay, the reason for the delay and confirmation of **your** check in times.
- 6 Written confirmation from the public transport operator (or their handling agents) of the cancellation, number of hours of delay or involuntarily denied boarding and the reason for these together with details of any alternative transport offered.
- 7 Written confirmation from the company providing the accommodation (or their administrators), the local Police or relevant authority that **you** could not use **your** accommodation and the reason for this.
- 8 Receipts or bills for any transport, accommodation or other costs, charges or expenses claimed for.
- 9 Any other relevant information relating to **your** claim under this section that **we** may ask **you** for.

#### GENERAL EXCLUSIONS WHICH APPLY TO ALL SECTIONS OF THE INSURANCE

**You** are not covered under any section, *unless specified*, for any of the following circumstances:

- 1 Any **trip** under an annual multi-**trip policy** that exceeds 31 days duration, or 90 days if the extended **trip** option has been paid for. This includes not insuring **you** for part of a **trip** which is longer than 31 days (or 90 days if the extended **trip** option has been paid for), unless **you** have paid the appropriate additional premium.
- 2 Any costs incurred before departure except cancellation or after **you** return **home**.
- 3 more than the proportionate cost of **your trip** and any claim against the **policy** (all sections) where **you** have not insured for the full cost of **your trip**.
- 4 Loss of earnings, additional hotel costs, additional car hire, Visa's, ESTAs, additional parking fees, vaccinations, inoculations, kennel fees or any other loss unless it is specified in the **policy**.
- 5 The cost of taxi fares, telephone calls, faxes or any expenses for food or drink.
- 6 Any claim arising from any relevant information known by **you** at the time of buying this **policy** or which occurs between booking and travel unless it has been disclosed to **us** and **we** have agreed in writing any terms applicable.
- 7 The operation of law, or as a result of an unlawful act or criminal proceedings against anyone included in **your** booking, or any deliberate or criminal act by an **insured person**.
- 8 Within the last 2 years, any **Pre-existing medical condition** or health condition that has been diagnosed, been in existence or for which **you** have received treatment from a hospital or specialist consultant or for which **you** are awaiting or receiving treatment or under investigation, unless **we** have agreed cover in writing and any additional premium has been paid.
- 9 Any claim due to **your** carrier's refusal to allow **you** to travel for whatever reason.

- 10 Any costs which are due to any errors or omissions on **your Travel Documents**.
- 11 Delay, confiscation, detention, requisition, damage, destruction or any prohibitive regulations by Customs or other government officials or authorities of any country.
- 12 **You** travelling against the advice or recommendations published by the Department of Foreign Affairs applicable at the time of **your** departure.
- 13 **You** piloting or travelling in an aircraft not licensed to carry passengers.
- 14 **You** travelling on a motorised vehicle for which **you** do not hold appropriate qualifications to ride in the **ROI**.
- 15 If **you** are riding pillion, the rider must also hold appropriate qualifications.
- 16 **You** travelling on a motorcycle or moped without wearing a crash helmet, whether legally required locally or not.
- 17 Any payments made or charges levied after the date of diagnosis of any change in **your** health or medication after the **policy** was bought unless this has been advised to **us** and any revised terms or conditions have been confirmed in writing.
- 18 **Your** suicide, self-injury, reckless behaviour or any wilful act of self-exposure to danger or infection/ injury (except where it is to save human life).
- 19 In respect of all sections other than emergency medical expenses - war, terrorism, biological or chemical warfare, invasion, act of foreign enemy, hostilities (whether war has been declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.
- 20 Participation in any hazardous sports and activities that are listed in categories 2 - 4, unless the Appropriate additional premium has been paid and the **policy** endorsed.
- 21 **Your** failure to obtain the required passport, visa or ESTA.
- 22 **You, your travelling companion, close relative or close business associate** being under the influence of:
  - Drugs (except those prescribed by **your** registered doctor but not when prescribed for treatment of drug addiction);
  - alcohol (a blood alcohol level that exceeds 0.19% – approximately four pints or four 175ml glasses of wine);
  - solvents, or;
  - or anything relating to **you** or **your close relative's** or **close business associate's** prior abuse of alcohol or solvents.
- 23 Any claim that is due to any failure (including financial) of **your** travel agent or tour operator, any transport or accommodation provider, their agent or anybody who is acting as **your** agent, unless specified.
- 24 **We** will not cover any claims caused by or relating to **COVID**. Nor will **we** cover any claims relating to any fear or threat concerning these viruses. This general exclusion applies to all sections of cover apart from Section A – Cancellation cover Section B – Emergency Medical and other Expenses, provided that **you** are not travelling to a country or specific area or event to which the Travel Advice Unit of the Department of Foreign Affairs (DFA) [www.dfa.ie/travel/travel-advice](http://www.dfa.ie/travel/travel-advice) or the World Health Organisation (WHO) or similar body has advised against all or all but essential travel.
- 25 **Your** travel to a country or specific area or event to which the Travel Advice Unit of the Department of Foreign Affairs or the World Health Organisation

(WHO) or similar body has advised against all or all but essential travel unless this advice relates only to **COVID**. In this instance, only claims relating to **COVID** will not be considered.

## GENERAL CONDITIONS WHICH APPLY TO ALL SECTIONS OF THE INSURANCE

**You** must comply with the following conditions to have the full protection of **your policy**.

If **you** do not comply **we** may cancel the **policy** or refuse to deal with **your** claim or reduce the amount of any claim payment.

### 1. Dual Insurance

If at the time of any incident which results in a claim under this **policy**, there is another insurance covering the same loss, damage, expense or liability, **we** will not pay more than **our** proportional share (not applicable to the Personal Accident section).

### 2. Duty to take reasonable care not to make a misrepresentation

Please take reasonable care to answer all **our** questions honestly and to the best of **your** knowledge. If **you** do not answer **our** questions correctly, **your policy** may be cancelled or **your** claims rejected or not fully paid.

### 3. Reasonable precautions

At all times **you** must take all reasonable precautions to avoid injury, **illness**, disease, loss, theft or damage and take all reasonable steps to safeguard **your** property from loss or damage and to recover property lost or stolen.

### 4. Cancellation - Statutory cancellation rights

**You** can cancel this **policy** within 14 days of receiving it. This is called the 'cooling off period'. If **you** want to cancel the **policy** **you** need to:

Inform Getcover.ie, by:

- a. emailing [info@getcover.ie](mailto:info@getcover.ie), or
- b. telephoning 01 526 7488, or
- c. writing to: Getcover & Company Limited, 4-5 Burton Hall Road, Sandyford, Dublin 18, D18 A094.

If **you** have not travelled and no claim has been made and no incident likely to result in a claim has occurred, Getcover.ie will refund the premium **you** paid.

**You** may cancel this **policy** at any time, after the 14 day 'Cooling off' period. No refund of premium will be made.

The **policy** can be cancelled mid-term by **us** giving **you** 14 working days' notice in writing sent to **your** last known address.

**Our** discretion to cancel policies is restricted to the following reasons:

- a) if **we** are unable to collect a premium and have not received a response to two chaser letters
- b) **your** failure to co-operate in a way that affects **our** ability to process a claim
- c) suspected fraud or use of threatening or abusive behaviour.

No refund of premium will be made.

## INSURANCE COMPENSATION FUND

**We** are covered by the Insurance Compensation Fund Ireland established under the Insurance Act 1964 which has been amended by the Insurance (Amendment) Act 2011. You may be entitled to compensation from the scheme if **we** cannot meet **our** obligations. This depends on the type of business and circumstances of the claim.

The total amount that may be paid out of the fund in respect of any sum due to a person under a policy shall not exceed 65% of the sum due to the policyholder or €825,000 whichever is less. Further information about compensation fund arrangements is available from [www.centralbank.ie](http://www.centralbank.ie).

## DATA PROTECTION ACT NOTICE

**We** will need to obtain personal information from **you** to provide **you** with the policy of insurance.

This means any information obtained from **you** in connection with this policy provided to **you** by **us** (or **our** subsidiaries) must be collected lawfully and in accordance with Data Protection Legislation.

**We** use your personal data in the following ways:

- to provide **you** with policy cover, including underwriting and claims handling. This may include disclosing information to other insurers, regulatory authorities, or to **our** agents who provide services on **your** behalf under the policy;
- to confirm, maintain, update and improve **our** customer records;
- to identify and market products and services that may be of interest to **you**, (subject to your prior consent);
- to analyse and develop our relationship with **you**;
- to help in processing any applications **you** may make;
- to carry out studies of statistics and claim rates;
- for the analysis and the prevention of fraud;
- for the analysis and the prevention of payment defaults;
- for statistical studies by **us** and/or any sectorial organisation in Europe.

Where **you** have given **your** consent, **we** may share some of **your** personal information with **our** partner companies or companies within **our** group so that they can provide **you** with information about other products, services and promotions that may be of interest to **you** by letter, telephone, SMS or e-mail.

**We** will only disclose **your** personal information to third parties if:

- it is necessary for the performance of **your** policy of insurance with **us**;
- **you** have given **your** consent, including marketing consent; or
- such disclosure is required or permitted by law.

**You** can change your mind about **your** marketing consent at any time by contacting our Data Protection Officer, Ireland Assist House 22-26 Prospect Hill, Galway. Or email: [DPO.IRELAND@mapfre.com](mailto:DPO.IRELAND@mapfre.com)

**We** disclose **your** personal information to third parties where:

- it is necessary for the performance of **your** insurance policy;

- if **you** have given **your** consent; or
- if such disclosure is required or permitted by law.

**We** deal with third parties that **we** trust to treat **our** customers' personal information with the same stringent controls that **we** apply ourselves.

Some of the personal information required from **you** is sensitive information such as details of any current or past medical conditions for **you** and **your** fellow travellers on the policy. This is a 'special category of information' under Data Protection legislation. **We** will not use sensitive information about **you** except for the specific purpose for which **you** provide it including enabling **us** to quote for **your** policy cover, to confirm policy cover and to provide the services described in the policy. **You** must ensure that **you** only provide sensitive information about other people identified on the insurance policy where **you** have their consent or the legal right to disclose their personal information, including their sensitive personal information.

To assist with fraud prevention and detection **we** may:

- share information about **you** across **our** group, with other insurers and, where **we** are entitled to do so under the Data Protection legislation, the police and other law enforcement agencies
- pass **your** details to a central insurance application and claims checking system, whereby it may be checked against information held by that central insurance application and claims checking system and shared with other insurers
- check **your** details with fraud prevention agencies and, if **you** give **us** false or inaccurate information and **we** suspect fraud, **we** will record this with the fraud prevention agency and other organisations may also use and search these records to:
  - a) help make decisions about credit and credit related services for **you** and members of **your** household;
  - b) help make decisions on motor, household, credit, life and other insurance proposals and claims for **you** and members of **your** household;
  - c) trace debtors, recover debt, prevent fraud and to manage **your** insurance policies;
  - d) check **your** identity to prevent money laundering;
  - e) undertake credit searches and additional fraud searches.

**You** are entitled on request to receive a copy of the personal information **we** hold about **you**. This will be information that **you** have given **us** during **your** policy. **We** do not hold any information relating to **your** credit status. If **you** would like a copy of **your** information, please contact **our** Data Protection Officer, Ireland Assist House 22-26 Prospect Hill, Galway. Or email: [DPO.IRELAND@mapfre.com](mailto:DPO.IRELAND@mapfre.com)

**We** are hereby released from any liability for any claim if **you** refuse disclosure of the data to a third party, which in turn prevents **us** from providing cover under this policy.

**You** agree **we** will store the Personal Data according to Data Protection legislation.

**You** agree that if **you** travel outside the European Economic Area ("EEA"), it may be necessary for **us** to transfer **your** data outside of the EEA in order to fulfil **our** obligations to **you** in the provision of the services under the terms of this policy. The fulfilment of **our** obligations may include sharing **your** data with our service providers



whom **we** may engage to ensure the provision of those services to **you**. **We** undertake not to transfer **your** data outside of the EEA or share **your** data with **our** service providers for any other reason than the fulfilment of **our** obligations under the terms of this policy. **You** have provided **your** consent for such transfer and sharing of data. Further details of how data is shared outside the EEA can be found in **our** Privacy policy on our website.

**We** keep records of any transactions **you** enter with **us** or **our** partner companies for up to six years. This is to enable a response to all claims under the policy, validation of policy cover, any enquiries, complaints or disputes that arise in that period and to comply with **our** legal and regulatory requirements.

**We** may keep other personal information about **you** if it is necessary for **us** to do so to comply with the law

## COMPLAINTS PROCEDURE

1. If **your** query or complaint relates to the sale of **your** policy or a site related issue, in the first instance, please write to:

The Operations Manager  
Getcover & Company,  
4-5 Burton Hall Road,  
Sandyford,  
Dublin 18,  
D18 A094.  
email: info@getcover.ie  
Tel: 01 526 7488

If **you** are dissatisfied with **our** decision after following the above procedure, then **you** can write to:

The Financial Services & Pensions Ombudsman  
Lincoln House,  
Lincoln Place,  
Dublin 2  
Email: info@fspoi.ie  
Website: [www.fspoi.ie](http://www.fspoi.ie)  
Tel: +353 1 567 7000

2. If **you** would like to complain about the outcome of **your** claim, or assistance provided, please forward details of **your** complaint in the first instance by writing to:

Customer Service Department  
MAPFRE Assistance Agency Ireland,  
Ireland Assist House,  
22-26 Prospect Hill,  
Galway  
Tel: 091 560 687  
Email: customer.service@mapfre.com

If **you** are still not satisfied with **our** decision after following the above procedure, **you** may then write to:

The Financial Services & Pensions Ombudsman  
Lincoln House,  
Lincoln Place,  
Dublin 2  
Email: info@fspoi.ie  
Website: [www.fspoi.ie](http://www.fspoi.ie)  
Tel: +353 1 567 7000

Please note the Financial Services Ombudsman's Bureau will not consider **your** complaint until a final response letter has been issued. Please quote **your** insurance reference number and **your** claim number in all **your** correspondence to all parties involved with this procedure. This procedure is intended to provide **you** with a prompt and practical service with any complaints that **you** may have.

Alternatively, if you have purchased your policy online, you can submit a complaint through the Online Dispute Resolution (ODR) platform at <http://ec.europa.eu/odr>

## STAMP DUTY

Stamp duty has been or will be paid to the Revenue Commissioners in accordance with the provisions of Section 5 of the Stamp Duty Consolidation Act 1999.

## FRAUD PREVENTION

To keep premiums low **we** do participate in a number of Industry initiatives to prevent and detect fraud. To help prevent crime **we** may:

- 1 Share information about **you** with other organisations and public bodies including the police.
- 2 Share information about **you** within MAPFRE ASSISTANCE Agency Ireland and with other **Insurers**.
- 3 Pass **your** details to recognised centralised insurance industry applications and claims review systems where **your** details may be checked and updated.
- 4 Check **your** details with fraud prevention agencies and databases. If **you** give **us** false or inaccurate information and **we** suspect fraud, **we** may record this with fraud prevention agencies.
- 5 Search records held by fraud prevention and credit agencies to:
  - a) Help make decisions about credit services for **you** and members of **your** household.
  - b) Help make decisions on insurance policies and claims for **you** and members of **your** household.
  - c) Trace debtors, recover debt, prevent fraud and to manage **your** insurance policies.
  - d) Check **your** identity to prevent money laundering.
- 6 Undertake credit searches and additional fraud searches.

MAPFRE/GC/ATST002/2024