

The purpose of this fact sheet is to inform you of your rights.
It does not relieve the insurer or the distributor of their obligations to you.

LET'S TALK INSURANCE!

Name of distributor: _____

Name of insurer: _____

Name of insurance product: _____



IT'S YOUR CHOICE

You are never required to purchase insurance:

- that is offered by your distributor;
- from a person who is assigned to you; or
- to obtain a better interest rate or any other benefit.

Even if you are required to be insured, **you do not have to** purchase the insurance that is being offered. **You can choose** your insurance product and your insurer.



HOW TO CHOOSE

To choose the insurance product that's right for you, we recommend that you read the summary that describes the insurance product and that must be provided to you.



DISTRIBUTOR REMUNERATION

A portion of the amount you pay for the insurance will be paid to the distributor as remuneration. The distributor **must** tell you when the remuneration exceeds 30% of that amount.



RIGHT TO CANCEL

The Act allows you to rescind an insurance contract, **at no cost**, within 10 days after the purchase of your insurance. However, the insurer may grant you a longer period of time. After that time, fees may apply if you cancel the insurance. **Ask** your distributor about the period of time granted to cancel it **at no cost**.

If the cost of the insurance is added to the financing amount and you cancel the insurance, your monthly financing payments might not change. Instead, the refund could be used **to shorten the financing period**. **Ask your distributor for details**.

The *Autorité des marchés financiers* can provide you with unbiased, objective information.
Visit www.lautorite.qc.ca or call the AMF at 1-877-525-0337.

Reserved for use by the insurer:

Product Summary

HSBC Single Trip All Inclusive Package

Single Trip Travel Insurance Coverage for:
Emergency Medical, Trip Cancellation, Trip Interruption, Baggage

Insurer's Contact Information

Name: **AIG Insurance Company of Canada**
AMF Registration Number: 2000533077
Website: aig.ca
Address: 120 Bremner Boulevard, Suite 2200, Toronto, ON, M5J 0A8
Phone Number: 1-416-596-3000
Fax Number: 1-855-453-1063
Toll Free: 1-800-387-4481

Administrator's Contact Information

Name: **Travel Guard Group Canada, Inc.**
Address: 120 Bremner Boulevard, Suite 2200, Toronto, ON, M5J 0A8
Phone Number: 1-416-646-3723
Fax Number: 1-416-646-3759

Claims Administrator's Contact Information

Name: **Global Excel Management**
Address: 73 Queen Street, Sherbrooke, QC J1M 0C9
Phone Number: 1-819-566-8833
Fax Number: 1-819-566-8447
Toll Free: 1-888-566-8028

Distributor's Contact Information

Name: **HSBC BANK CANADA**
Address: 300-885 West Georgia Street
Vancouver, British Columbia
V6C3E9
Phone Number: 1-888-310-4722

INTRODUCTION

This Product Summary has been designed to help you understand the coverages and benefits along with the exclusions, pre-existing conditions and terms and conditions of the HSBC Single Trip All Inclusive Package ("Plan"). The premium you will pay for this Plan is determined by your age, trip cost and trip duration. You can obtain a copy of the Summary of Coverage through the distributor's website.

This document has been created to assist you, without the advice of a licensed insurance advisor, in determining if the product is right for you and corresponds to your needs.

You may view this document and the insurance policy at <https://www.aig.ca/qc-distribution-lists>

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YOUR RIGHT TO EXAMINE YOUR POLICY

You have 10 days from the date you purchased your insurance to review your policy and ask questions when you are not sure. If, in that 10 days, you believe the Plan does not provide the coverage you are looking for, you are entitled to a full refund of the premium you paid.

If, within the 10 days, you have departed on your trip or you have reason to file a claim, you are not eligible to receive a refund. You are also not entitled to a refund after the 10 days right to examine your policy period described above.

We require your request for a refund in writing. Please email the administrator at refund@travelguard.ca and allow for 15 business days for the refund to appear on your credit card. You will need to provide both your full name and policy number.

SIMILAR PRODUCTS

There are other types of products on the market that provide similar coverage. You should check to ensure that you are not covered by another insurance offering the same coverage as the one described below.

WHO CAN I CALL WITH QUESTIONS?

If you want to discuss the coverage or have any questions with respect to the coverage offered to you, prior to purchasing the policy or after you have purchased the policy, feel free to call Global Excel Management (GEM) at the following phone numbers:

Toll Free: 1-888-566-8028

Collect: 1-819-566-8028

ELIGIBILITY CRITERIA:

Who may purchase this policy?

Single Trip Plan

1. you are a Canadian resident; **and**
2. you are less than eighty-five (85) years of age; **and**
3. coverage must be purchased for:
 - a) the entire duration of your trip; **and**
 - b) the full amount of the cost of your trip; **and**;
4. you are insured under a provincial or territorial Government Health Insurance Plan (GHIP) for the entire duration of your trip.

Is there family coverage

1. all insureds listed on the confirmation of insurance are Canadian residents; **and**
2. all insureds meet the definition of spouse and/or dependent child and/or children.

Dependent Child and/or Dependent Children: Unmarried persons who are Your natural, adopted, step or foster children, dependent on You for support and care and less than 21 years of age, or full-time students less than 26 years of age, or mentally or physically incapable of self-support. You must be the legal guardian of any foster children and they must reside at Your same address.

Spouse: The person legally married to You, or if there is no such person, the person who has been living with You in a conjugal relationship for at least one (1) year, regardless of gender.

Who May Not Purchase This Insurance?

You cannot purchase this insurance if:

1. you have been diagnosed with a Terminal Condition which means the doctor has advised you there is no recovery expected and your expected life span is less than 12 months; **and/or**
2. you have undergone a bone marrow transplant or an organ transplant that requires the use of anti-rejection (immune suppression) drugs; **and/or**
3. you require dialysis of any type for a kidney disease; **and/or**
4. in the last 12 months, your doctor has prescribed, and you are using, home oxygen.

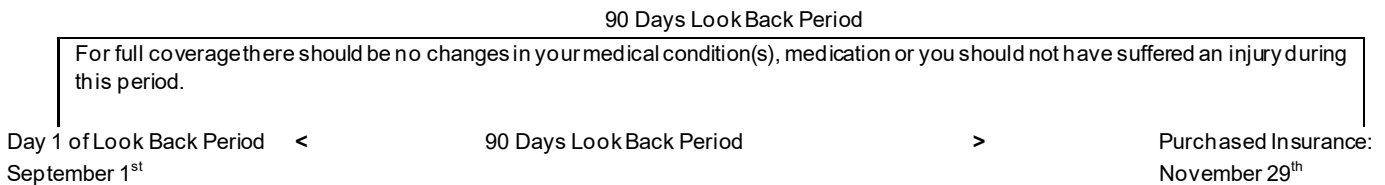
Coverage will be declared null and void in the case of fraud or attempted fraud by you, or if you conceal or misrepresent any material fact or circumstance concerning this insurance.

WHAT LIMITATIONS ARE THERE WITH RESPECT TO MY HEALTH?

If you have to cancel your trip, your trip is interrupted or you have a medical emergency while on your trip, and you are filing a claim based on medical reasons, the Claims Administrator will review your medical history.

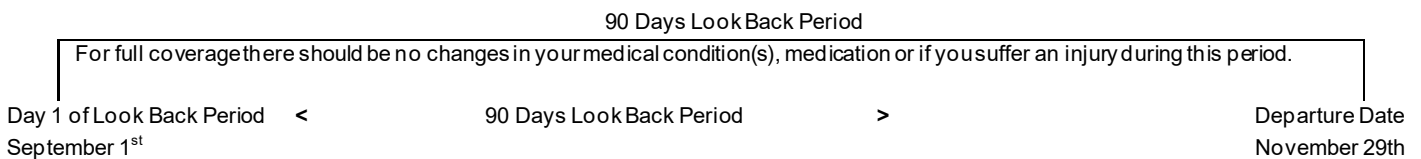
Trip Cancellation – All Ages

Any sickness, injury or medical condition which was not stable **90 days prior to your purchase date** may affect the outcome of your claim. For example:

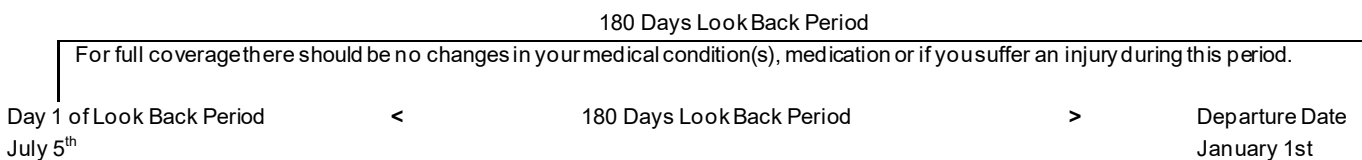


Emergency Medical

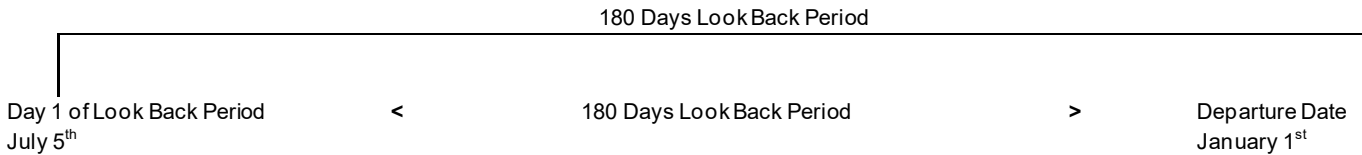
Ages 0-64: Any sickness, injury or medical condition which was not stable **90 days prior to your departure date** may affect the outcome of your claim. For example:



Ages 65-74: Any sickness, injury or medical condition which was not stable **180 days prior to your departure date** may affect the outcome of your claim. For example:



Ages 75-84: Any sickness, injury or medical condition for which you have taken medication, been prescribed medication, received treatment, experienced a deterioration of the condition or had cause to seek treatment at any time within the 180-day period immediately preceding and including Your Departure Date and this exclusion applies whether or not the condition has been Stable and Controlled. For example:



It does not matter if your sickness, injury or medical condition has been stable and controlled **you will not have coverage while on your trip** should you require emergency medical attention for that sickness, injury or medical condition. **You will be responsible for the payments.**

Stable and Controlled: Any Medical Condition (other than a Minor Ailment) for which there has been no new Treatment or newly prescribed medication; no change in Treatment or Change in Prescribed Medication; no new, more frequent or more severe symptoms; no test results showing deterioration; no investigations initiated for symptoms whether or not Your diagnosis has been determined; no Hospitalization and no referral to a specialist.

WHAT ARE THE TOP TWO (2) COVERAGES THE PLAN DOES NOT OFFER?

- Coverage on this Plan does not cover risks, or pay claims, related to Cuba, as Cuba related risks and claims are not serviced and supported by our United States affiliates (upon which we rely for service and support).
- This Plan will not cover any loss, injury, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Iran, Syria, North Korea or the Crimea region.

For a full list please refer to the Summary of Coverage; General Exclusions 1 through 27 on pages 40 through 42.

WHAT COVERAGE DOES THE PLAN OFFER?

This Plan provides coverage for the insurance that you have purchased through HSBC. Coverage begins on the day you purchase your Plan.

Emergency Medical coverage begins on the day you are scheduled to leave on your trip and ends the day you are scheduled to return home. These dates are shown on the confirmation of insurance, emailed to you, as the departure date and return date. Emergency medical coverage ends as soon as you return to your home province; even if that date is prior to your scheduled return date.

Some of the benefits are:

1. An unforeseeable occurrence of symptoms for a sickness or injury while on a trip that receives emergency medical treatment and unless is treated immediately by a physician, may lead to death or to serious impairment of your health.
2. Should you require emergency dental treatment to repair or replace sound natural teeth or permanently attached artificial teeth because of an injury due to an accidental blow to the face and you must seek treatment from a physician or dentist immediately following the injury.
3. Medical Repatriation provides coverage should your treating physician and the insurer's medical department recommend you return home for further emergency medical treatment.

4. When recommended by your attending physician, the cost for a medical attendant, which cannot be a relative or travelling companion, accompany you to your country of residence. The cost will include round trip economy airfare, overnight lodging and meals where and when necessary.

Emergency Dental Treatment: Immediate and medically necessary dental services or supplies provided by a licensed registered dentist, Hospital, or other licensed provider, that is the result of an acute unexpected condition that arose during a trip.

Emergency Medical Treatment: Medically necessary services or supplies provided during a trip by a licensed Physician, hospital or other licensed provider, that are required to treat any injury or sickness or other sudden, acute and unexpected condition that arose during the trip, and that cannot be reasonably delayed until you return to your home province without endangering your health.

You are required to call the Claims Administrator, or have someone call on your behalf, for approval prior to seeking any medical treatment. Your coverage may be limited should you fail to call.

Trip Cancellation coverage begins on the day you purchase your insurance and ends the day you are scheduled to leave on your trip. These dates are shown on the confirmation of insurance, emailed to you, as the plan start date and the departure date.

The Plan provides coverage if you have to cancel your trip because of a covered reason. Here are a couple of coverage reasons:

1. sickness, injury or death of an insured or family member, or a relative is hospitalized overnight or dies;
2. the Canadian Government issues a defer travel recommendation prior to leaving for your trip and you must cancel your trip.

Cancel for Any Reason coverage begins on the day you purchase your insurance and ends the day you are scheduled to leave on your trip. These dates are shown on the confirmation of insurance, emailed to you, as the plan start date and the departure date.

The Plan provides coverage if you have to cancel your trip and the reason for cancelling **is not a covered risk under this package**.

If you have not started a claim under any other benefit you can claim up to \$400.

Trip Interruption coverage begins on the day you are scheduled to leave on your trip and ends the day you are scheduled to return home. These dates are shown on the confirmation of insurance, emailed to you, as the departure date and return date.

The Plan provides coverage if you are unable to continue on your trip, because of a covered reason. Here are a couple of coverage reasons:

1. sickness, injury or death of an insured or family member, or a relative is hospitalized overnight or dies;
2. the Canadian Government issues a defer travel recommendation after you have left on your trip and you must return home.

Missed Connection coverage begins when you miss your connection due to a Schedule Change of the airline that is providing transportation for a portion of your trip.

The Plan provides coverage if you are unable to continue on your trip, because of a covered reason. Here are a couple of coverage reasons:

1. you are required to take two (2) flights to get to your final destination and the second flight is cancelled causing you to take a later flight;
2. your flight is delayed and, by the time you arrive at the dock, your cruise has departed.

The common carrier must certify the delay of the regularly scheduled airline flight. You must provide original receipts at time of claim to be reimbursed for any money you have paid.

Schedule Change - The later departure of an airline carrier causing you to miss your next connecting flight via another airline carrier (or connecting cruise ship, ferry, bus or train), or the earlier departure of an airline carrier rendering unusable the ticket you have purchased for your prior connector flight via another airline carrier (or connecting cruise ship, ferry, bus or train). Schedule change does not mean a change resulting from a supplier default, strike or a labour disruption.

Trip Delay - coverage begins on the day you were scheduled to return home from your trip. Should your trip be delayed beyond the time your flight was scheduled to leave

The Plan provides coverage if you have a delay because of a covered reason. Here are some coverage reasons:

1. Common carrier cancellation or delay of a regularly scheduled airline flight;
2. You or your travelling companion's lost or stolen passports, travel documents, or money;
3. You or your travelling companion is quarantined;
4. Injury or sickness of you or your Travelling Companion.

Baggage and Personal Effects coverage begins on the day you are scheduled to leave on your trip and ends the day you are scheduled to return home. These dates are shown on the confirmation of insurance as the departure date and return date. This benefit provides coverage for items such as baggage, passports and visas, travel documents and credit cards.

Special Limitations apply to this coverage: Maximum Coverage for all items claimed is \$750 per person

First One (1) Item	Maximum Coverage for claiming is \$500
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*****For example purposes only:** If the insured claims \$300 for the first item, the remaining \$700 can be used toward any other baggage that is lost. When submitting the claim the maximum that can be claimed for is \$1,000, no matter how many various items are listed on the claim form.

Baggage Delay coverage applies when luggage is delayed or misdirected (sent somewhere other than the intended destination) for more than 12 hours from the time you land at your final destination. **You must pay for the personal items** you need and submit the original receipts at time of claim.

This benefit does not apply if baggage is delayed on the return flight home and the insured has reached the return destination.

Accidental Death and Dismemberment coverage begins on the day you are scheduled to leave on your trip and ends the day you are scheduled to return home. These dates are shown on the confirmation of insurance, emailed to you, as the departure date and return date.

The accident must occur while you are on the trip and is covered under the plan. If more than one (1) loss is sustained by you as a result of the same Accident, only one (1) amount, being the largest applicable to the losses incurred, will be paid. The insurer will not pay more than \$25,000 of the Maximum Limit for all Losses due to the same Accident.

Table of Losses	Maximum Limit
Life	\$100,000
Loss of Sight in Both Eyes	\$100,000
Loss of Limbs Severed Above Wrist and Ankle.....	\$100,000
Loss of Speech or Loss of Hearing.....	\$100,000
Loss of Sight in One Eye.....	\$50,000
Either Hand or Foot	\$50,000

This benefit does not provide coverage for medical costs due to the injury sustained such as: hospital bills, emergency room visit, medical supplies, doctor's visit, ambulance services and/or ambulance (air or ground). The coverage is a onetime pay based on the chart above.

Accident/Accidental: A sudden, unexpected, unintended, unforeseeable, external event, occurring during an Insured Trip that independently of any other cause, results in Injury (or damage, if the context relates to property loss or damage).

Accidental Bodily Injury: meaning one (1) of: (i) the actual severance of a limb above Your ankle or wrist joint; or (ii) the complete loss of eyesight in both eyes and/or hearing in both ears.

Accidental Death

Accidental death meaning bodily Injury caused by an accident which results in death if the Injury, accident and death occurs while You are on a Trip.

CAN I CANCEL MY POLICY?

You have the right to cancel this insurance within 10 days from the date you purchased your coverage. For refunds after 10 days, refunds will be issued if a supplier cancels or alters service and all of your non-refundable prepaid travel arrangements insured by us are refunded to you and no penalty has been applied. No refund of premium will be made in the event that a claim has been paid, incurred or reported under the Plan.

CAN MY POLICY BE EXTENDED?

Optional Policy Extensions

Provided you have purchased the Single Trip Plan, if you have started your Trip and need coverage for a longer period, you can apply for a policy extension. You must apply, be approved by us prior to your scheduled Return Date and pay an additional premium. In order to apply for a policy extension, you must be in good health and cannot have any Medical Condition for which surgery or Hospitalization is anticipated. No policy extensions are available if a claim has been incurred. To apply for a policy extension, feel free to call Global Excel Management (GEM) at the following phone numbers:

Toll Free: 1-888-566-8028

Collect: 1-819-566-8028

If we approve the policy extension, it does not cover, provide services or pay claims for expenses resulting directly or indirectly from any sickness or injury which first appeared, was diagnosed or for which you received medical treatment after the scheduled departure date and prior to the purchase of the policy extension.

Automatic Coverage Extension

Coverage is automatically extended should you require Emergency Medical Treatment while on a trip until the earlier of:

1. one hundred and twenty (120) hours from such Medical Treatment; **or**
2. until the date Our medical department deems you are medically able to travel.

Coverage is automatically extended should you be hospitalized due to a Medical Emergency until the earlier of:

1. the period of Hospitalization plus one hundred and twenty (120) after discharge from the Hospital; **or**
2. until the date Our medical department deems you are medically able to travel.

Coverage is automatically extended for up to seventy-two (72) hours when there is a delay of a Common Carrier that you are already booked as a passenger.

WHAT BENEFIT(S) DO MOST PEOPLE CLAIM FOR?

1. You have to cancel your trip because there is a travel advisory from the Canadian Government advising travellers not to travel to a country specifically listed as a destination on your itinerary of your insured trip.
2. You or a family member is so sick, or there has been an injury that is so serious, it causes the trip to be interrupted.
3. Injury or sickness of your business partner must be so serious that they cannot run the business and you must interrupt the trip as you are required to take responsibility of the daily management of the business.

If claiming for medical reasons you will need to provide a letter or statement from a physician certifying that the illness or injury was so serious that it prevented you from continuing on your trip.

4. The airline either delays or cancels the flight or flights, for which the insurance was purchased, because of weather conditions which prevents you from reaching your destination.
5. You and/or your travelling companion is directly involved in, or delayed by, an automobile accident on the way to the airport or final destination.
6. Your baggage is lost, stolen or damaged. When filing a claim because the baggage was stolen, the insured will need to provide a police report.

At time of claim, the original receipt(s) must be included with the claim form for any individual items that are worth \$150 and more.

7. Occasionally, baggage does not arrive at the same airport as the passenger. It may even take a few days for the baggage to be rerouted to the traveler's destination. When you purchase this Plan coverage would commence at the time when you have to purchase clothing and toiletry items, which were included in your baggage and are required for your trip.

Original receipts must be submitted at time of claim in order to be reimbursed.

CLAIMS PROCEDURES AND PAYMENT OF CLAIMS

To Claim For Emergency Medical and Dental Benefits:

You must notify the Claims Administrator prior to any Emergency Medical Treatment and prior to any surgery, invasive procedure or Hospitalization.

The assistance coordinators will provide you guidance and will make every effort, although there are no guarantees, to pay providers directly.

To Claim For Trip Cancellation, Interruption and Delay Benefits:

You must notify the Claims Administrator immediately of a cancellation, interruption or delay no later than the next business day following a cancellation, interruption or delay.

To Claim For Change of Mind:

You must notify the Claims Administrator of your cancellation of a scheduled Trip prior to Your Departure Date from Your Home Province because You have changed Your mind provided Your Trip has been paid in full.

To Claim For Baggage and Personal Effects Benefits:

You must notify Us immediately of the loss or damage to baggage or personal effects. You must also report the loss or damage to police, local or conveyance authorities, tour operator representatives, the hotel manager or official transportation representative and obtain a written report.

What information to do you need to submit?

As a condition to the payment of benefits under this insurance, certain information will be needed from the insured, or their authorized representative, to file a claim.

Within 90 days of the date that the insured person experienced the circumstances that are resulting in the claim for reimbursement, the insured or their authorized representative must submit the following information to the Claims Administrator:

- the completed claims form; **and**
- written proof of the loss; **and**
- original receipts and itemized bills for all expenses; **and**
- proof that the full cost of the trip was paid in full; **and**
- original documentation of any refunds or expense reimbursement received from Common Carrier or other entity.

In addition, the following documents must also be submitted, as applicable:

Baggage Delay:

- Proof of delay of checked baggage from the common carrier.
- Original, itemized receipts for the essential items that the insured person purchased.

Lost/Stolen Baggage:

- A police report or other report to local authorities.
- The written report regarding the loss or damage.
- An itemization and description of the stolen or damaged items and their estimated value.
- A copy of the receipts, credit card statements, or cancelled cheques for the personal effects or business items stolen or damaged.
- Estimate of repairs, if applicable.
- Photo of the damaged item, if applicable.
- A declaration page from any other applicable insurance or a notarized statement that an insured person has no other insurance.
- A letter of coverage or denial from the transportation carrier, if applicable.
- Original receipts or sales slips for all items claimed under loss/stolen baggage as proof that the insured person owned the articles.

All claims documentation must be submitted to the Claims Administrator no later than one (1) year after the date of loss or insured occurrence. Any claims submitted after one (1) year from the date of occurrence may not be processed and you may be responsible for all claims expenses.

Administration of Claims: your claim cannot be reviewed until we receive your completed claim form and all supporting documentation as requested.

Upon review of your claim:

1. If it is determined to be a payable claim you will receive a call advising your claim is approved and your claims payment will be sent to your home.
2. If it is determined your claim is a deniable claim you will receive a call from Global Excel Management advising why your claim is not payable. You will be provided the opportunity to submit additional documentation to support your claim at which time it will be reviewed and they provide you with a final decision.

If any documents are missing or your claim form is not completed correctly you will be notified. In addition it will extend the time in which your claim is paid.

GENERAL PROVISIONS

In the event that you are not satisfied with your purchase of the Single Trip All Inclusive Package please visit the Complaint Resolution Policy <https://www.aig.ca/complaint-resolution-policy>

NOTICE OF RESCISSION OF AN INSURANCE CONTRACT

NOTICE GIVEN BY A DISTRIBUTOR

Section 440 of the Act respecting the distribution of financial products and services (chapter D-9.2)

THE ACT RESPECTING THE DISTRIBUTION OF FINANCIAL PRODUCTS AND SERVICES GIVES YOU IMPORTANT RIGHTS.

The Act allows you to rescind an insurance contract, without penalty, within 10 days of the date on which it is signed. However, the insurer may grant you a longer period.

To rescind the contract, you must give the insurer notice, within that time, by registered mail or any other means that allows you to obtain an acknowledgement of receipt.

Despite the rescission of the insurance contract, the first contract entered into will remain in force. Caution, it is possible that you may lose advantageous conditions as a result of this insurance contract; contact your distributor or consult your contract.

After the expiry of the applicable time, you may rescind the insurance contract at any time; however, penalties may apply.

For further information, contact the Autorité des marchés financiers at 1-877-525-0337 or visit www.lautorite.qc.ca.

NOTICE OF RESCISSION OF AN INSURANCE CONTRACT

To: _____
(name of insurer)

(address of insurer)

Date: _____
(date of sending of notice)

Pursuant to section 441 of the Act respecting the distribution of financial products and services, I hereby rescind insurance contract no.: _____
(number of contract, if indicated)

Entered into on: _____
(date of signature of contract)

In: _____
(place of signature of contract)

(name of client)

(signature of client)

HSBC Single Trip All Inclusive Package

Travel Insurance and Global Assistance

HSBC Product Code 396300 P1 03/21

PLEASE READ THIS SUMMARY OF COVERAGE CAREFULLY

This Summary of Coverage summarizes the coverage available to eligible persons under Master Policy #9501340 issued to HSBC Bank of Canada by AIG Insurance Company of Canada.

The Master Policy, this Summary of Coverage, Your Confirmation of Insurance and any document attached to it when issued, and any amendment agreed upon in writing after it is issued, constitutes the entire contract of insurance as it applies to You. No agent has authority to change the contract or waive any of its provisions.

MATERIAL FACTS No statement made by the insured or a person insured at the time of application for the contract may be used in defense of a claim under or to avoid the contract unless it is contained in the application or any other written statements or answers furnished as evidence of insurability.

Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that You read and understand Your Summary of Coverage before You travel as Your coverage may be subject to certain limitations or exclusions.

This Summary of Coverage provides complete descriptions of the benefits, terms, conditions, limitations and exclusions of Your insurance coverage.

This insurance is designed to cover certain medical expenses resulting from unanticipated accidents. You may not have coverage for Medical Conditions and/or symptoms that existed before Your Trip. Check to see how this applies in Your Summary of Coverage and how it relates to Your Departure Date and Purchase Date.

In the event of an Accident, Injury or Sickness Your prior medical history may be reviewed when a claim is made.

If Your coverage provides travel medical assistance, You may be required to notify the designated assistance company prior to Treatment. Your coverage may limit benefits should You not contact the assistance company within a specified period.

This Summary of Coverage contains a clause that may restrict Your right to designate a beneficiary. See Section XI. Other Information on page 43 of this Summary of Coverage for detailed information with respect to this restriction. Further information can also be obtained from Travel Guard Canada.

Limitation of Action

Every action or proceeding against an Insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act* (for actions or proceedings governed by the laws of Alberta and British Columbia), the *Insurance Act* (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), or other applicable legislations.

This Summary of Coverage is the only contract under which benefits are paid. Please read Your Summary of Coverage with care so You will understand the coverage.

WARNING:

THIS POLICY INCLUDES RESTRICTED BENEFITS

1. Your Summary of Coverage may not provide coverage for medical conditions and/or symptoms that existed before Your Trip. Check to see how this applies in Your Summary of Coverage and how it relates to Your Departure Date and Purchase Date.
2. You must contact Us before seeking medical attention and a failure to call will result in Your being responsible for 30% of any eligible expenses incurred, or no reimbursement, unless Your Medical Condition prevents You from calling. You must call as soon as medically possible or have someone call on Your behalf.

3. Our medical department must approve all medical procedures (including, but not limited to, cardiac procedures and cardiac catheterization) in advance. A failure to call will result in Your being responsible for 30% of any eligible expenses incurred unless Your Medical Condition prevents You from calling, in which case You must call as soon as medically possible or have someone call on Your behalf.
4. If You choose not to receive Treatment or services from a Provider as directed by Us You may be responsible for 70% of any eligible expenses incurred.
5. The coverage provided by this Summary of Coverage does not apply to risks and claims related to Cuba, as Cuba related risks and claims are not serviced and supported by Our United States affiliates (upon which We rely for service and support), unless such coverage would be permissible under all applicable sanctions.
6. The Insurer will not be liable to provide any coverage or make any payment hereunder if to do so would be in violation of any sanctions law or regulation which would expose the Insurer, its parent company or its ultimate controlling entity to any penalty under any sanctions law or regulations.
7. This policy will not cover any loss, injury, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Cuba, Iran, Syria, North Korea or the Crimea region.
8. This Summary of Coverage offers coverage to Canadian Residents only and must be purchased prior to Your Departure Date.

YOU ARE NOT ELIGIBLE FOR ANY COVERAGE UNDER THIS POLICY IF:

1. A licensed Physician has diagnosed You with a Terminal Condition.
2. You have undergone a bone marrow transplant or an organ transplant (excluding corneal transplant) that requires the use of anti-rejection (immune suppression) drugs.
3. You require dialysis of any type for a kidney disease.
4. In the last 12 months You have been prescribed or utilized home oxygen therapy at any time.

SCHEDULE OF BENEFITS/RISKS All Coverage is Per Person

The following chart lists the coverage available when coverage is purchased. For details of individual coverage and benefit limits please refer to the individual section of the document.

Eligible Benefits: Please refer to the specific benefit within the Summary of Coverage wording for coverage limits.

III - Emergency Medical and Dental

Emergency Medical Expense	\$3,000,000
Ambulance Transportation	Eligible Benefits
Emergency Evacuation and Repatriation	Eligible Benefits
Return of Your Vehicle	Eligible Benefits
Bedside Companion Travel and Subsistence	Economy Class Airfare and \$1,000 for hotel and meals
Return of Dependent Children	Eligible Benefits
Return to Your Trip Destination	Eligible Benefits
Preparation and Return of Remains	\$5,000
Subsistence Allowance	\$3,500 (\$350/Day)
Emergency Professional Services	\$300/Profession
Hospital Expenses	\$750 (\$75/Day)
Return of Travel Companion	Eligible Benefits
Emergency Dental Accidental Blow to the Face	\$1,000
Emergency Dental Treatment	\$300

III - Trip Cancellation, Trip Interruption, Trip Delay

TRIP CANCELLATION	100% of Trip Cost Up To \$20,000
Medical Conditions and Death	
Adoption and Pregnancy	
Government Recommendations and Visas	
Travel Advisory	
Employment and Occupation	
Business Meeting	
Call to Service	
Delays of Your Scheduled Carrier	
Principal Residence and Business Operations	
Legal Commitment	
Quarantine or Hijacking	
Cruise Cancellation	\$1,000

CANCEL FOR ANY REASON	\$400
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TRIP INTERRUPTION	
Medical Conditions and Death	Eligible Benefits
Adoption and Pregnancy	Eligible Benefits
Travel Advisory	Eligible Benefits
Employment and Occupation	Eligible Benefits
Call to Service	Eligible Benefits
Delays of Your Scheduled Carrier	Eligible Benefits
Principal Residence and Business Operations	Eligible Benefits
Legal Commitment	Eligible Benefits
Quarantine or Hijacking	Eligible Benefits
Cruise Interruption	Eligible Benefits
Missed Connection	Eligible Benefits
Transportation Delay	Eligible Benefits
Delays of Your Travel Companion's Scheduled Carrier	Eligible Benefits

TRIP DELAY	
Medical Conditions and Death	Eligible Benefits
Adoption and Pregnancy	Eligible Benefits
Quarantine or Hijacking	Eligible Benefits
Missed Connection	Eligible Benefits
Transportation Delay	Eligible Benefits

V - Travel Accident

Flight Accident	\$100,000
Travel Accident	\$50,000

VI - Baggage & Personal Effects

Baggage & Personal Effects	\$1,000
Passport Replacement	\$200
Baggage Delay	\$400 (> 12 hours)

VII - Features and Services

24 Hour Emergency Medical Assistance	Included
Emergency Travel Assistance	Included
Concierge Services	Included

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WARNING: THIS POLICY INCLUDES RESTRICTED BENEFITS

SCHEDULE OF BENEFITS

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IMPORTANT INFORMATION

Some words have very specific meanings that are set out in the Definitions Section. With the exception of titles, these words are capitalized in this Summary of Coverage document when the definition applies.

Along with this Summary of Coverage document, You should have received a Confirmation of Insurance that sets out details specific to the product You purchased.

All of these documents make up Your contract of insurance. If You did not receive all of these documents, if any information contained in these documents is incorrect, or if You have questions regarding Your coverage, it is Your responsibility to contact Us.

You should bring all of these documents with You when You travel.

I. DEFINITIONS

Accident/Accidental: A sudden, unexpected, unintended, unforeseeable, external event, occurring during an Insured Trip that independently of any other cause, results in Injury (or damage, if the context relates to property loss or damage).

Accidental Bodily Injury: meaning one (1) of: (i) the actual severance of a limb above Your ankle or wrist joint; or (ii) the complete loss of eyesight in both eyes and/or hearing in both ears.

Accidental Death

Accidental death meaning bodily Injury caused by an accident which results in death if the Injury, accident and death occurs while You are on a Trip.

Business Meeting: A meeting (not including legal proceedings) arranged prior to Your Purchase Date between companies with unrelated ownership which pertains to Your full-time occupation or profession and which was the sole purpose of Your Trip.

Canadian resident: means an insured who has a provincial or territorial government health care plan in place and:

- Is a Canadian citizen with a primary permanent residence in Canada; or,
- Has landed immigrant status in Canada and a primary permanent residence in Canada; or,
- Has a permit to study or work in Canada.

Change in Prescribed Medication: means the medication dosage or frequency has been reduced, increased, stopped and/or new medications have been prescribed. Exceptions:

- an adjustment to the insulin or Coumadin (Warfarin) dosage You are currently taking provided it is not newly prescribed or stopped and there has been no change to Your Medical Condition; and

- a change from a brand name medication to a generic brand medication (insofar as the dosage is not modified).

Common/Scheduled Carrier: Means an air, land, or sea conveyance operated under a license for the transportation of passengers for hire.

Confirmation of Insurance: Your most recent computer printout, printed form, electronic copy, invoice, or Summary of Coverage document that sets out the product You have purchased.

Contamination: The act or process of rendering something harmful or unsuitable to people by nuclear and/or chemical and/or biological substances causing illness, Injury and/or death.

Cruise: Travel for which You have booked, prior to Your departure from Your Home Province, overnight accommodation arrangements on a seaworthy passenger vessel.

Departure Date: The date on which You are scheduled to leave Your Home Province on a Trip.

Departure Point: The city that You depart from Your Home Province on the first day of Your Trip.

Dependent Child and/or Dependent Children: Unmarried persons who are Your natural, adopted, step or foster children, dependent on You for support and care and less than 21 years of age, or full-time students less than 26 years of age, or mentally or physically incapable of self-support. You must be the legal guardian of any foster children and they must reside at Your same address.

Depreciated Value: Means 90% of the original purchase price (original receipt required) if such item is 0 to 12 months old at the date of loss.

Means 70% of the original purchase price (receipt required) if such item is 13 to 24 months old at the date of loss.

Means 50% of the original purchase price (receipt required) if such item is 25 to 36 months old at the date of loss.

Means 30% of the original purchase price (receipt required) if such item is 37 to 48 months old at the date of loss.

Means 20% of the original purchase price (receipt required) if such item is 49 to 60 months old at the date of loss.

Means nil if such items are more than 60 months old at the date of loss.

Emergency: An unforeseen occurrence of, symptoms of Sickness, or of Injury, that occurs during a Trip (or for Trip cancellation, that occurs immediately prior to Your Trip), which requires immediate Treatment from a Physician or

that requires Hospitalization, failing which there could be a serious impairment to Your health.

Emergency Dental Treatment: Immediate and medically necessary dental services or supplies provided by a licensed registered dentist, Hospital, or other licensed Provider, that is the result of an acute and unexpected condition that arose during a Trip.

Treatment: Medically necessary services or supplies provided during a Trip by a licensed Physician, Hospital or other licensed Provider, that are required to treat any Injury or Sickness or other sudden, acute and unexpected condition that arose during the Trip, and that cannot be reasonably delayed until You return to Your Home Province without endangering Your health.

Expected Medical Treatment: Medical consultation or Hospitalization that Your prior medical history indicates as being probable or certain to occur.

Follow-up Treatment: Treatment that continues beyond the initial Emergency.

Follow-up Visit: The re-examination of You to monitor the effects of earlier medical Treatment related to the initial Emergency, except while Hospitalized. Follow-up visit does not include further diagnostic or investigative testing related to the initial Emergency.

Government Health Insurance Plan (GHIP): Health insurance coverage that Canadian provincial or territorial governments provide for their residents.

Home Province: Your Canadian province or territory of residence.

Hospital: A medical facility which is legally accredited to provide medical, diagnostic and surgical Treatment to in-patients during the acute phase of their Sickness or Injury, which is primarily engaged in the aforesaid activities and which operates under the supervision of a staff of physicians and has a registered nurse continuously on duty.

A Hospital does not mean an institution licensed as a home for the aged, rest home, nursing home, convalescent hospital, health spa, or a rehabilitation centre or Treatment facility for drug or alcohol abuse and/or addiction.

Hospitalization or Hospitalized: The state of being admitted to a Hospital and receiving Emergency Medical Treatment on an inpatient basis.

Immediate Family Member: Any one (1) or more of Your Spouse, natural, step, or adopted children, persons for

whom You are the legal guardian, parents, parents-in-law, son-in-law, daughter-in-law, step-parents, sisters, brothers, sisters/brothers-in-law, step-sisters/brothers, grandparents, grandchildren, aunts, uncles, nieces, and nephews.

Injury: A bodily injury sustained during a Trip, which is caused, directly and independently of all other causes, by an Accident.

Insurance Coverage: Insurance provided and underwritten by AIG Insurance Company of Canada, 120 Bremner Boulevard, Suite 2200, Toronto, Ontario, Canada, M5J 0A8. The Summary of Coverage is administered on AIG Insurance Company of Canada's behalf by Travel Guard Group Canada, Inc. and its affiliates (Travel Guard).

Insured: The person named as the primary traveler and/or one (1) or more other person(s), if any, named as 'other travellers' on the Confirmation of Insurance, each as the context requires.

Insurer: AIG Insurance Company of Canada, 120 Bremner Boulevard, Suite 2200, Toronto, ON M5J 0A8.

Key-employee: An employee whose continued presence is critical to the ongoing affairs of the business during Your or Your Travel Companion's absence.

Medical Condition: Means an irregularity in a person's health which required, or requires, medical advice, consultation, investigation, Treatment, care, service or diagnosis by a Physician; includes complications of pregnancy within the first 31 weeks.

Medical Consultation: Any investigative medical service, including history taking, examination, testing, advice, or Treatment by a Physician for a symptom, Sickness, illness, or disease that may or may not have been definitively diagnosed.

Medical Emergency: An unforeseen occurrence of, symptoms of Sickness, or of Injury, that occurs during a Trip (or for Trip cancellation, that occurs immediately prior to Your Trip), which requires immediate Treatment from a Physician or that requires Hospitalization, failing which there could be a serious impairment to Your health.

Mental or Emotional Disorders: Emotional or anxiety states, situational crisis, anxiety or panic attacks, or other mental health disorders treated with tranquilizers or anxiolytic drugs. (Example: a mental or nervous health disorder like: anxiety, depression, neurosis, psychosis and others or any related physical complications).

Minor Ailment: Any Sickness or Injury which does not require: the use of medication for a period of greater than 15 days; more than one (1) Follow-up Visit to a Physician, Hospitalization, surgical intervention, or referral to a specialist; and which ends at least 30 consecutive days prior to the Departure Date of each Trip. However, a chronic condition or any complication of a chronic condition is not considered a minor ailment.

Mountain Climbing: The ascent or descent of a mountain requiring the use of specialized equipment, including but not limited to pick-axes, anchors, bolts, crampons, carabineers, and lead or top-rope anchoring equipment.

Physician: A medical doctor, other than Yourself, Your Immediate Family Member, Your Travel Companion or their Immediate Family Member, who is licensed to administer medical Treatment and prescribe drugs in the place where he or she provides medical services. The following are not considered to be Physicians: Traditional Chinese Medicine practitioners (TCM) and bonesetters, naturopath, herbalist, and homeopath.

Premium: The cost of Your insurance coverage plus any additional amounts required for any optional coverage You have purchased.

Prescribed Medication: A drug, medicine or medication only obtainable by the prescription of a licensed Physician for Emergency Medical Treatment or dentist for Emergency Dental Treatment, and dispensed by a licensed pharmacist.

Provider: The Hospitals, clinics, Physicians, and other medical service providers, the use of which must be approved by Us at the time of the Medical Emergency.

Purchase Date: The date You purchase Your insurance for Your Trip. This date is shown on Your Confirmation of Insurance as the 'plan start date'.

Recurrence: The appearance of symptoms caused by or related to a Medical Condition that was previously diagnosed by a Physician or for which Treatment was previously received.

Rental Car: An automobile rented by You from a commercial rental agency for Your personal use under a written rental agreement.

Return Date: The first to occur of:

- the date Your return to Your Home Province; or
- the date shown on Your most recent Confirmation of Insurance as Your 'Return Date'. If there has been an Automatic Extension of Coverage the return date is the first to occur of:

- i. the date You return to Your Home Province; or
- ii. the end of any extension of coverage determined in accordance with the Automatic Extension of Coverage Section.

Schedule Change - The later departure of an airline carrier causing You to miss Your next connecting flight via another airline carrier (or connecting Cruise ship, ferry, bus or train), or the earlier departure of an airline carrier rendering unusable the ticket You have purchased for Your prior connector flight via another airline carrier (or connecting Cruise ship, ferry, bus or train). Schedule change does not mean a change resulting from a supplier default, Strike or a labour disruption.

Sickness: An acute illness or unforeseen disease requiring Emergency Medical Treatment, Emergency Dental Treatment or Hospitalization due to the sudden onset of symptoms.

Spouse: The person legally married to You, or if there is no such person, the person who has been living with You in a conjugal relationship for at least one (1) year, regardless of gender.

Start Date: The date shown on Your most recent Confirmation of Insurance as the "plan start date".

Stable and Controlled: Any Medical Condition (other than a Minor Ailment) for which there has been no new Treatment or newly prescribed medication; no change in Treatment or Change in Prescribed Medication; no new, more frequent or more severe symptoms; no test results showing deterioration; no investigations initiated for symptoms whether or not Your diagnosis has been determined; no Hospitalization and no referral to a specialist.

Strike means a stoppage of work:

- a) announced, organized, and sanctioned by a labour union and
- b) which interferes with the normal departure and arrival of Common Carrier.

This includes work slowdowns and sickouts. The Insured's Trip cancellation coverage must be effective prior to when the strike is foreseeable. A strike is foreseeable on the date labour union members vote to approve a strike.

Subsistence Allowance: Expenses incurred as a result of Your emergency, including accommodation, meals, and essential telephone calls.

Summary of Coverage: This document, any riders or endorsements to this document, the application, and the

Confirmation of Insurance all of which form the entire contract.

Terminal Condition: A Medical Condition from which no recovery is expected and which carries a prognosis of death within 12 months of Your Departure Date.

Top-Up: Coverage purchased from Us to extend Your insurance for Your annual plan beyond Your selected Trip duration of ten (10) or thirty (30) days.

Travel Companion: The person with whom You are sharing travel arrangements and prepaid accommodation (to a maximum of three (3) people) in respect of a Trip.

Treatment: A medical, therapeutic or diagnostic procedure prescribed, performed or recommended by a licensed Physician, including but not limited to Prescription Medication, investigative testing, and surgery.

Trip: Your travel for which coverage under this Summary of Coverage has been purchased and is in effect. The purpose of the Trip is business or pleasure and is not to obtain health care or Treatment of any kind; the Trip has defined Departure Dates and Return Dates specified when the Insured applies.

Trip Cost: Is the dollar amount of Trip payments or deposits reflected on any required enrollment form which are subject to cancellation penalties or restrictions paid by the Insured prior to the Insured's Trip Departure Date. Trip cost will also include the cost of any subsequent pre-paid payments or deposits paid by the Insured for the same Trip, after enrollment for coverage under this Summary of Coverage provided the Insured amends their trip cost to add such subsequent payments or deposits and pays any required additional premium prior to the Insured's Departure Date.

University Health Insurance Plan (UHIP): Provides insurance to pay the cost of the hospital and medical services that students or employees and their families at Ontario participating universities and affiliated colleges might need to maintain their health while in Canada.

Vehicle: A private passenger automobile, minivan, recreational vehicle, or camper truck, which You use during Your Trip exclusively as conveyance of passengers other than for hire. It can be either owned by You or rented by You from a rental agency.

We, Us, Our: AIG Insurance Company of Canada, 120 Bremner Boulevard, Suite 2200, Toronto, ON M5J 0A8. This Summary of Coverage is administered on AIG Insurance Company of Canada's behalf by Travel Guard Group Canada, Inc. (Travel Guard Canada).

You, Your, Yourself and Insured: The person named as the Primary Traveller who has paid the required Premium, which is accepted by Us, and any additional person(s) shown as Other Traveller(s) on the Confirmation of Insurance; each as the context requires.

II. SPECIFIC DETAILS OF YOUR INSURANCE

AM I ELIGIBLE?

To be eligible for this coverage You must:

1. be a Canadian Resident and purchase Your All Inclusive Package prior to Your Departure Date for Your Trip;
2. have purchased Your All Inclusive Package not more than 18 months prior to Your Departure Date;
3. have purchased Your All Inclusive Package from Us for the full duration of Your Trip;
4. have purchased Your All Inclusive Package from Us for the full value of Your nonrefundable prepaid travel arrangements;
5. be covered under Your GHIP or UHIP for the full duration of Your Trip to be eligible for the maximum Emergency medical benefits; if You do not have GHIP or UHIP coverage while on Your Trip, Your aggregate limit for all Emergency Medical Benefits will be limited to \$20,000;
6. be less than 85 years of age at the time Your All Inclusive Package is purchased and be:
 - a. travelling for a maximum of 180 days if You are less than 65 years of age, or
 - b. travelling for a maximum of 30 days if You are 65 years of age or older and less than 75 years of age;
 - c. travelling for a maximum of ten (10) days if You are 75 years of age or older and less than 85 years of age.

Top-up of Coverage

If You purchased the All Inclusive Package - Annual Plan, and:

1. Your Trip is longer than Your Selected Trip Duration; and/or
2. Your Trip Cost exceeds \$3,000;

You must purchase this All Inclusive Package for additional coverage to insure Your full Trip duration and insure Your total non-refundable Trip Cost prior to Your Departure Date for coverage to be in force.

We will issue a new Confirmation of Insurance document for that period of time.

HOW DO I BECOME INSURED?

Coverage under this Summary of Coverage will not come into effect until all of the following conditions have been satisfied:

1. Your name appears on the Confirmation of Insurance;
2. You have paid the required Premium on or before Your Start Date.

WHEN DOES MY INSURANCE START AND END?

For Trip Cancellation and Cancel For Any Reason coverage: This Summary of Coverage comes into effect on Your Purchase Date and ends the earliest of:

1. the day indicated as Your Return Date on Your Confirmation of Insurance;
2. the day You return to Your Home Province to end Your Trip;
3. the day You have cause to file a Trip cancellation claim.

For all other coverage:

This Summary of Coverage comes into effect on Your Departure Date and ends the earliest of:

1. the day indicated as Your Return Date on Your Confirmation of Insurance;
2. the day You return to Your Home Province to end Your Trip;
3. the day You have cause to file a Trip Cancellation claim.

UNDER WHAT CIRCUMSTANCES CAN MY POLICY EXTEND?

Automatic Extension of Coverage

If You or Your Travel Companion are Hospitalized on Your scheduled Return Date Your coverage will automatically be extended at no additional Premium for the period of Hospitalization and up to 120 hours after discharge.

If You have a Medical Condition rendering You medically unable to travel on Your scheduled Return Date but You are not Hospitalized, Your coverage will be automatically extended for up to 120 hours after Your scheduled Return Date.

Coverage will automatically be extended for up to 72 hours when there is a delay of a Common Carrier on which You are pre-booked as a passenger.

Optional Extension of Coverage

If You choose to extend Your Trip beyond Your scheduled Return Date and You have not made a claim nor is there

reason to claim, You may apply for an extension of coverage subject to the following conditions:

1. the request for an extension must be made and approved by Us 24 business hours prior to Your original Return Date;
2. You must pay the required additional Premium before Your original Return Date; and
3. You must have been eligible for the insurance that You seek to extend at the time of Your original Purchase Date and at the time of the request for the extension.

CAN MY PREMIUM BE REFUNDED?

Refunds will be issued if a supplier cancels or alters service and all of Your non-refundable prepaid travel arrangements insured by Us are refunded to You and no penalty has been applied.

No refund of Premium will be made in the event that a claim has been paid, incurred or reported under this Summary of Coverage.

III. EMERGENCY MEDICAL AND DENTAL COVERAGE

A. Benefits – Emergency Medical and Dental Coverage

If You incur expenses due to a covered risk, on or after Your Departure Date and prior to or on Your Return Date, while You are on a Trip, We provide coverage for the following covered benefits up to the specific benefit limits set out below. Benefit limits are for each Insured under this Summary of Coverage. We do not pay more than the benefit limit.

Emergency Medical Coverage for Injury and Sickness

Covered Risk 1: Expenses incurred as a consequence of an Emergency and resulting from Injury, Sickness or death occurring on a Trip. This includes one (1) Follow-up visit (not including ongoing Treatment), when the medical process in dealing with the Emergency requires such a Follow-up visit. The Follow-up visit must take place within 14 days of the initial Emergency. In the case of Hospital confinement any coverage related to the Hospital confinement terminates upon release from Hospital.

Benefit Limit for Covered Risk 1:

\$3,000,000 per Insured

Benefits for Covered Risk 1:

1. Eligible Emergency Medical Expenses

If prescribed by a Physician and pre-authorized by Us in advance, We cover the cost of:

- a. care received from a Physician in or out of a Hospital;
- b. a Hospital room;
- c. rental or purchase (whichever is less) of a Hospital bed;

- d. wheelchair, brace, crutch or other medical appliance;
- e. tests that are needed to diagnose Your condition;
- f. Prescription Medication;
- g. the services of a licensed private duty nurse while You are Hospitalized; and
- h. one (1) Follow-up visit for Your Emergency that happened while on Your Trip which was covered under this Summary of Coverage.

2. Expenses for ambulance transportation:

We cover:

1. Reasonable and customary charges for a local licensed ground ambulance service to transport You to the nearest qualified medical service Provider in an Emergency; or
2. local taxi fare in lieu of ground ambulance transportation, where a ground ambulance is medically required but not available.
3. when approved in advance by Our medical department, the cost of an air ambulance to transport You to the nearest qualified medical service Provider in an Emergency.

3. Emergency Evacuation and Repatriation:

If We or Your attending Physician recommends Your return to Your Home Province because of Your Medical Condition or if We or Your attending Physician recommends Your return after Your Emergency Medical Treatment, and if approved in advance by Us, We cover, via the most cost effective itinerary:

1. up to the cost of a one-way economy airfare to return You to Your Home Province; or
2. the fare for additional airline seats to accommodate a stretcher to return You to Your Home Province; or
3. the fare for an upgrade to business class when a stretcher is not required to return You to Your Home Province; or
4. where medically necessary, medical air evacuation to a Hospital in Your Home Province, when the attending Physician or the Medical Department recommends that You be so transported for the purpose of obtaining immediate medical Treatment; and
5. the cost of round-trip economy airfare via the most cost-effective itinerary for a qualified medical attendant to accompany You, and the attendant's reasonable fees and expenses, if this is medically necessary or required by the airline.

4. Return of Your Vehicle:

If You are unable to drive Your Vehicle to Your original Departure Point due to an Emergency, We cover the reasonable costs to return Your Vehicle to Your residence. If You used a Rental Car during Your Trip, We will cover the cost of its return to the rental agency excluding the rental cost. No benefit is available for commercial vehicles.

Arrangements must be preauthorized by Us in advance and original receipts must be submitted for all eligible expenses.

5. Bedside Companion Travel and Subsistence:

If You are travelling alone and are admitted to a Hospital for three (3) days or more, We cover, until You are medically fit to return to Your Home Province:

1. the economy/charter class fare via the most cost-effective itinerary for the round-trip flight for someone to be with You;
2. a Subsistence Allowance for such person's hotel and meals (original receipts must be submitted for all eligible expenses) up to \$1,000 per Insured;
3. coverage for such person under this Summary of Coverage, subject to all of its terms, conditions, limitations and exclusions. For an Insured who is a Dependent Child or if You are mentally or physically disabled, a bedside companion is available immediately upon Hospital admission.

6. Return of Dependent Children Under Your Care:

If You are Hospitalized for more than 24 hours while on a Trip or if while on a Trip You must return to Your Home Province because of a Medical Condition validated by a Physician, We cover:

- a. the extra cost via the most cost-effective itinerary for Your Dependent Children to be transported to their Departure Point; and
- b. the round-trip economy airfare of a qualified escort when the airline requires it.

The Dependent Children must have been travelling with You and under Your care during Your Trip and they must be covered under this Summary of Coverage.

7. Return to Your Trip Destination:

Should Our medical department request You to return to Your Departure Point to receive immediate medical attention within Your period of coverage and provided Your attending Physician in Your Home Province then determines that You require no further medical attention for Your Medical Condition We cover the cost of a one-way economy air fare on a commercial flight or charter via the most cost effective itinerary to transport You to Your scheduled Trip destination. Once You return to Your Trip destination, a Recurrence of the Medical Condition which necessitated our return to Your Home Province or any related condition or complication will not be covered under this Summary of Coverage.

Please note: This benefit must be pre-authorized by Us in advance and can only be used once during a scheduled Trip. When this benefit has been used Your Departure Date under this Summary of Coverage then becomes the day You leave Your Departure Point to return to Your Trip destination.

8. Preparation and Return of Remains:

If You die during Your Trip We cover reasonable expenses incurred for any one (1) of the following:

1. reasonable transportation costs (using customary airline procedures) to return Your remains to Your Departure Point plus up to \$5,000 per Insured for the preparation of Your remains and a transportation container; or
2. reasonable transportation costs (using customary airline procedures) to return Your remains to Your Departure Point plus up to \$5,000 per Insured for the cremation of Your remains and the cost of a standard burial urn at the place of Your death; or
3. up to \$3,000 per Insured for the preparation of Your remains and the cost of a standard burial container plus up to \$2,000 per Insured for the burial of Your remains at the location where Your death occurred.

Benefit Limit: \$5,000 per Insured.

Further, if someone is legally required to identify Your body because You have died while on a Trip, We cover:

4. the cost of a round-trip economy airfare on a commercial flight or charter via the most cost effective itinerary to transport someone to identify Your body;
5. a Subsistence Allowance up to \$1,000 for commercial accommodations and meals for that person (original receipts must be submitted for all eligible expenses); and
6. that person under the terms of this insurance during the period in which he or she is required to identify Your body, up to three (3) business days.

9. Subsistence Allowance:

If a Medical Emergency prevents You or Your Travel Companion from returning to Your Departure Point of Your Insured Trip or if Your Emergency Medical Treatment or that of Your Travel Companion requires Your transfer to a location that is different from Your original destination or You or Your

Travel Companion are delayed beyond Your scheduled Return Date in order to obtain Emergency Medical Treatment, We cover a Subsistence Allowance for Your commercial accommodations and meals, essential telephone calls and taxi fares, up to a daily maximum of \$350, to a maximum of \$3,500 (original receipts must be submitted for all eligible expenses).

10. Emergency Professional Services:

We cover expenses resulting from an Emergency, for services from a licensed physiotherapist, chiropractor, chiropodist, podiatrist or osteopath if ordered by a Physician, up to \$300 per profession per Insured.

11. Hospital Expenses:

We cover Your incidental Hospital expenses (telephone calls, television rental) while You are Hospitalized for at least

48 hours. We cover these expenses up to \$75 per day to a maximum of \$750 (10 days) per Insured.

12. Return of Travel Companion:

If You must return to Your Home Province because of a covered Medical Condition and if You are travelling with a Travel Companion, We cover the Travel Companion for the extra cost of a one-way economy air fare on a commercial flight or charter via the most cost effective itinerary to return Your Travel Companion to his or her Departure Point.

Emergency Dental Coverage for Injury and Sickness

Covered Risk 2: Expenses incurred as a consequence of the unforeseen occurrence of symptoms of Sickness or Injury occurring on a Trip resulting in the necessity of immediate Treatment by a licensed registered dentist, Physician or Hospital.

Benefit Limit for Covered Risk 2:

Continuing care for an Accidental blow to the face or mouth - \$1,000 per Insured;

Emergency Dental Treatment other cause (no continuing care) - \$300 per Insured.

Benefits for Covered Risk 2:

Emergency Dental Treatment:

We cover:

- a. expenses You incur during Your Trip for care ordered, prescribed or received from a licensed dentist if You need Emergency Dental Treatment to repair or replace Your natural or permanently attached artificial teeth because of an Accidental blow Your face or mouth occurring on a Trip; OR
- b. expenses You incur during Your Trip, up to the benefit limit, for Emergency Dental Treatment required because of an Emergency due to a cause other than an Accidental blow to Your face or mouth; and
- c. expenses You incur for Prescription Medication as a result of such Emergency.

B. Conditions – Emergency Medical and Dental Coverage

All of the conditions set out in the General Conditions Section of this Summary of Coverage and all of the following conditions must be satisfied before a benefit is payable for Emergency Medical Treatment or Emergency Dental Treatment as set out in Section III, A:

1. You must not know of any reason why You will need to seek medical or dental attention before You leave on a Trip;
2. the portion of the expenses claimed are not covered by Your GHIP/UHIP or any other related insurance or reimbursement plan;

3. You must contact Us before seeking medical attention;
4. Our medical department must approve and arrange all surgery and heart procedures, including heart catheterization, in advance;
5. if You choose not to receive Treatment or services from the Provider, as directed by Us, You will be responsible not only for the amount of Your deductible, if applicable, but also for 30% of any eligible expenses incurred;
6. You must return to Your Home Province or Departure Point prior to any Treatment or following Emergency Treatment or Hospitalization if, on medical evidence, You are able to return to Your Home Province or Departure Point without endangering Your health and if, in these circumstances, You elect not to return to Your Home Province or Departure Point, then any expenses incurred for continuing medical Treatment or surgery with respect to such Emergency will not be covered AND all coverage and benefits under this Summary of Coverage will cease;
7. You must be covered by GHIP or UHIP for the full duration of Your Trip. If travelling outside Your Home Province for more than 183 days (212 for Ontario and Newfoundland residents) You must get written evidence of extension from Your GHIP or UHIP. If You do not have GHIP or UHIP for the full duration of Your Trip, Your aggregate limit for all Emergency Medical Benefits will be \$20,000;
8. the Emergency medical attention You receive must be outside of Your Home Province and be required as a consequence of an Emergency and ordered by a Physician.

C. Limitations – Emergency Medical and Dental Coverage

Our liability under this Summary of Coverage for expenses under this Emergency Medical and Dental Coverage is limited as follows.

1. A failure to contact Us before seeking medical attention will result in Your being responsible for 30% of any eligible expenses incurred unless Your Medical Condition prevents You from calling, in which case You must call as soon as medically possible or have someone call on Your behalf.
2. A failure to call and receive the approval of Our medical department before all surgery and heart procedures, (including, but not limited to heart catheterization) will result in Your being responsible for 30% of any eligible expenses incurred unless Your Medical Condition prevents You from calling, in which case You must call as soon as medically possible or have someone call on Your behalf.

D. Exclusions – Emergency Medical and Dental Coverage

These exclusions apply to the Emergency Medical and Dental Coverage set out in Section III, A. Your Emergency Medical and Dental Coverage is subject to all of the exclusions set out in the General Exclusions Section of this Summary of Coverage and the following exclusion:

For Insureds less than 65 years of age at the time Your coverage is purchased:

- a. We do not cover any loss or expense related directly or indirectly to any Medical Condition or any related condition if in the 90-day period immediately preceding Your Departure Date that condition has not been Stable and Controlled; or
- b. Your heart condition if in the 90-day period immediately preceding Your Departure Date:
 - i. You have had any heart condition that has not been Stable and Controlled, or
 - ii. You have been required to use, take, or been prescribed to take nitroglycerin in any form, more than once per a seven (7) day period;
- c. Your lung condition if in the 90-day period immediately preceding Your Departure Date:
 - i. You have had any lung condition that has not been Stable and Controlled, or
 - ii. You required the use of home oxygen or had to take oral steroids; for example prednisone or prednisolone.

For Insureds 65 years of age or older and less than 75 years of age at the time Your coverage is purchased:

We do not cover any loss or expense related directly or indirectly to:

- a. Your Medical Condition or any related condition if in the 180-day period immediately preceding Your Departure Date that condition has not been Stable and Controlled;
- b. Your heart condition if in the 180-day period immediately preceding Your Departure Date:
 - i. You have had any heart condition that has not been Stable and Controlled, or
 - ii. You have been required to use, take, or been prescribed to take nitroglycerin in any form, more than once per a seven (7) day period;
- c. Your lung condition if in the 180-day period immediately preceding Your Departure Date:
 - i. You have had any lung condition that has not been Stable and Controlled, or
 - ii. You required the use of home oxygen or had to take oral steroids; for example prednisone or prednisolone.

For Insureds 75 years of age or older and less than 85 years of age at the time Your coverage is purchased:

We do not cover any loss or expense related directly or indirectly to:

- a. any Medical Condition for which You have taken medication, been prescribed medication, received Treatment, experienced a deterioration of the condition or had cause to seek Treatment at any time within the 180-day period immediately preceding and including Your Departure Date and this exclusion applies whether or not the condition has been Stable and Controlled;
- b. Your heart condition if in the 180-day period immediately preceding Your Departure Date You have taken medication, been prescribed medication, received Treatment, experienced a deterioration of the condition or had cause to seek Treatment for any heart condition; or
- c. Your lung condition if in the 180-day period immediately preceding Your Departure Date You have taken medication, been prescribed medication, received Treatment, experienced a deterioration of the condition or had cause to seek Treatment for any lung condition.

IV. TRIP CANCELLATION, TRIP INTERRUPTION, TRIP DELAY AND CANCEL FOR ANY REASON COVERAGE

A. Benefits – Trip Cancellation, Trip Interruption and Trip Delay Coverage

We provide coverage for the following covered benefits up to the specific benefit limits set out below. Benefit limits are for each Insured under this Summary of Coverage. We do not pay more than the benefit limit.

Trip Cancellation

Covered Risks 1 to 12: You are covered for losses incurred in the event of Trip cancellation due to any one (1) or more of the following covered risks if occurring on or after Your Purchase Date and on or before Your Departure Date and providing that You have Insured the full value of Your non-refundable prepaid travel arrangements and that amount is greater than zero.

Covered Risk 1. Medical Conditions and Death

- a. One (1) or more of the following persons develops an Emergency Medical Condition or dies:
 1. You or Your Travel Companion;
 2. Your or Your Travel Companion's Immediate Family Member;
 3. Your or Your Travel Companion's caregiver;
 4. Your or Your Travel Companion's key employee; or
 5. Your or Your Travel Companion's business partner; OR;
- b. Your friend dies, OR;

- c. the person whose overnight guest You will be during Your Trip is admitted to Hospital following a Medical Emergency or dies following a Medical Emergency.

Covered Risk 2. Adoption and Pregnancy

- a. You, Your Spouse, Your Travel Companion or Your Travel Companion's Spouse:
 1. becomes pregnant after You book Your Trip and Your Departure Date Falls after the 26th week of pregnancy or nine (9) weeks after the expected delivery date;
 2. legally adopts a Dependent Child and the date of the adoption falls during Your Trip; OR;
- b. any one (1) of the following persons develops complications of pregnancy that falls within the first 31 weeks of pregnancy:
 1. You or Your Travel Companion;
 2. You or Your Travel Companion's Immediate Family Member.

Covered Risk 3. Government Recommendations and Visas:

1. Your or Your Travel Companion's travel visa (not an immigration or employment visa) is not issued for a reason beyond Your or Your Travel Companion's control and that the application is not a subsequent attempt for a visa that had been previously refused.
2. Your or Your Travel Companion's visa is stolen enroute to and from Your Trip destination.

Covered Risk 4. Travel Advisory – A “defer travel” recommendation or a written formal notice is issued by the Department of Foreign Affairs and International Trade of the Canadian Government or Health Canada advising travellers not to travel to a country, region or city specifically listed as a destination on the itinerary of Your Insured Trip and such recommendation or written formal notice is issued after both Your Start Date and the date You pay for prepaid travel arrangements.

Covered Risk 5. Employment and Occupation – You, Your Spouse, Your Travel Companion or Your Travel Companion's Spouse loses a permanent job because of layoff or dismissal without just cause (not applicable to self-employed persons or contract work); or Your employer, Your Spouse's employer or Your Travel Companion's employer initiates a job transfer which necessitates relocation of Your principal residence or that of Your Travel Companion, as the case may be.

Covered Risk 6. Business Meeting – A Business Meeting, that was scheduled before You or Your Travel Companion paid for prepaid travel arrangements, is cancelled due to a reason beyond Your or Your Travel Companion's or Your or Your Travel Companion's employer's control.

Covered Risk 7. Call to Service – You or Your Travel Companion is called to service during Your Trip as a reservist, firefighter, or active military/police staff.

Covered Risk 8. Delays of Your Scheduled Carrier – Your or Your Travel Companion's Scheduled Carrier is delayed by weather conditions, earthquakes, or volcanic eruptions for at least 30% of Your scheduled Trip duration and You or Your Travel Companion does not continue his or her Trip and You choose not to continue Your Trip.

Covered Risk 9. Principal Residence and Business Operations – You, Your Spouse, or Your Travel Companion is unable to occupy such person's principal residence or to operate such person's business because of a natural disaster or unintentional act.

Covered Risk 10. Legal Commitment – You, Your Spouse or Dependent Child or Your Travel Companion, Your Travel Companion's Spouse or Dependent Child is called to jury duty; is subpoenaed as a witness; or is required to be a defendant in a lawsuit.

Covered Risk 11. Quarantine or Hijacking – You, Your Spouse, Your Dependent Child, Your Travel Companion, or Your Travel Companion's Spouse or Dependent Child is quarantined or hijacked.

Benefits for Covered Risks 1 to 11:

1. If You must cancel Your Trip due to the occurrence of one (1) or more of Covered Risks 1 to 11, We cover up to the non-refundable prepaid cost of unused travel arrangements provided You have insured the full value of the non-refundable cost of Your Trip.
2. If You have prepaid shared accommodations and Your Travel Companion(s) must cancel his or her Trip due to the occurrence of one (1) or more of the Covered Risks 1 to 11, We cover the next occupancy charge when You elect to travel as originally planned.

Covered Risk 12. Cruise Cancellation – The cancellation of Your Cruise prior to Your departure from Your Departure Point, or after Your departure from Your Departure Point, but prior to the departure of the Cruise ship due to the mechanical failure, grounding, quarantine of the Cruise ship or the repositioning of the Cruise ship due to weather conditions, earthquakes, or volcanic eruptions.

Benefits for Covered Risk 12:

If You must cancel Your Trip due to the occurrence of Covered Risk 12 We cover the lesser of:

1. the change fee charged by the airline carrier(s) involved if a change is available to You; or
2. up to \$1,000 for Your non-refundable prepaid airfare which was scheduled to join You to or depart You from

Your Cruise or Cruise related land arrangement, but which is not included in Your Cruise package.

Trip Interruption

Covered Risks 13 to 25: You are covered for losses incurred in the event of Trip interruption due to any one (1) or more of the following covered risks if occurring on or after Your Departure Date and on or before Your Return Date.

Covered Risk 13. Medical Conditions and Death

1. One (1) or more of the following persons develops an Emergency Medical Condition or dies:
 - a. You or Your Travel Companion;
 - b. Your or Your Travel Companion's Immediate Family Member;
 - c. Your or Your Travel Companion's caregiver;
 - d. Your or Your Travel Companion's key employee; or
 - e. Your or Your Travel Companion's business partner; OR;
2. Your friend dies, OR;
3. the person whose overnight guest You will be during Your Trip is admitted to Hospital following a Medical Emergency or dies following a Medical Emergency.

Benefits for Covered Risk 13

If You suffer Trip interruption due to the occurrence of Covered Risk 13 (other than Your death), We cover:

1. the non-refundable, unused Trip arrangements for which You have already paid less Your prepaid unused return transportation; AND
 - a. additional travel transportation expenses You incur via the most cost effective itinerary to return You to Your Departure Point of the Trip, OR
 - b. Your economy class transportation via the most cost effective itinerary to Your next destination; OR
 - c. Your economy class transportation via the most cost effective itinerary to rejoin Your tour or group; AND
2. a Subsistence Allowance for Your commercial accommodations and meals, essential telephone calls and taxi fares, up to a daily maximum of \$350, to a maximum of \$700 (original receipts must be submitted for all eligible expenses).

If You die while on Your Trip We cover:

1. the non-refundable unused portion of Your prepaid travel arrangements; AND
2. reasonable expenses incurred as outlined in Section III Emergency Medical Coverage, benefit 8. Preparation and Return of Remains.

Covered Risk 14. Adoption and Pregnancy – Any one (1) of the following persons develops complications of pregnancy within the first 31 weeks while You are on a Trip:

- a. You;
- b. Your Immediate Family Member;
- c. Your Travel Companion or Your Travel Companion's Immediate Family Member; or
- d. the legal adoption of a child by You or Your Travel Companion when the actual adoption date is scheduled to take place during Your Trip.

Benefits for Covered Risks 14:

If You suffer Trip interruption due to one (1) or more of Covered Risks 14, occurring while You are on a Trip, We cover:

1. the non-refundable, unused Trip arrangements for which You have already paid and additional travel transportation expenses via the most cost effective itinerary to Your Departure Point of the Trip, less Your prepaid unused return transportation; and
2. a Subsistence Allowance for Your commercial accommodations and meals, essential telephone calls and taxi fares, up to a daily maximum of \$350, to a maximum of \$700 (original receipts must be submitted for all eligible expenses).

Covered Risk 15. Travel Advisory – A "defer travel" recommendation or a written formal notice is issued after Your Departure Date by the Department of Foreign Affairs and International Trade of the Canadian Government or Health Canada advising travellers not to travel to a country, region or city specifically listed as a destination on Your itinerary of Your Insured Trip.

Benefits for Covered Risk 15:

If You suffer Trip interruption due to the occurrence of Covered Risk 15, We cover:

1. the non-refundable, unused Trip arrangements for which You have already paid and additional travel transportation expenses via the most cost effective itinerary to return You to Your Departure Point of the Trip, less Your prepaid unused return transportation; OR
2. Your economy class transportation via the most cost effective itinerary to Your next destination (in or outbound); AND
3. a Subsistence Allowance for Your commercial accommodations and meals, essential telephone calls and taxi fares, up to a daily maximum of \$350, to a maximum of \$700 (original receipts must be submitted for all eligible expenses).

Covered Risk 16. Employment and Occupation – You, Your Spouse, Your Travel Companion or Your Travel Companion's Spouse loses a permanent job because of layoff or dismissal without just cause (not applicable to self-employed persons or contract work); or Your employer, Your

Spouse's employer or Your Travel Companion's employer initiates a job transfer which necessitates relocation of Your principal residence or that of Your Travel Companion, as the case may be.

Covered Risk 17. Call to Service – You or Your Travel Companion is called to service during Your Trip as a reservist, firefighter, or active military/police staff.

Covered Risk 18. Principal Residence and Business Operations – You or Your Travel Companion is unable to occupy such person's principal residence or to operate such person's business because of a natural disaster or unintentional act.

Covered Risk 19. Legal Commitment – You, Your Spouse or Dependent Child or Your Travel Companion, Your Travel Companion's Spouse or Dependent Child is called to jury duty; is subpoenaed as a witness; or is required to be a defendant in a lawsuit.

Covered Risk 20. Quarantine or Hijacking – You, Your Spouse, Your Dependent Child, Your Travel Companion, or Your Travel Companion's Spouse or Dependent Child is quarantined or hijacked.

Benefits for Covered Risks 16 to 20:

If You suffer Trip interruption due to one (1) or more of Covered Risks 16 to 21, occurring while You are on a Trip, We cover:

3. the non-refundable, unused Trip arrangements for which You have already paid and additional travel transportation expenses via the most cost effective itinerary to Your Departure Point of the Trip, less Your prepaid unused return transportation; and
4. a Subsistence Allowance for Your commercial accommodations and meals, essential telephone calls and taxi fares, up to a daily maximum of \$350, to a maximum of \$700 (original receipts must be submitted for all eligible expenses).

Covered Risk 21. Cruise Interruption – The interruption of Your Cruise due to the mechanical failure, grounding or quarantine of the Cruise ship or the repositioning of the Cruise ship due to weather conditions, earthquakes or volcanic eruptions.

Benefits for Covered Risk 21:

If Your Cruise is interrupted due to the occurrence of Covered Risk 21, We cover the lesser of:

1. the change fee charged by the airline carrier(s) involved if a change is available to You; OR up to a maximum of \$1,000 for the extra cost of Your one-way economy airfare on a commercial flight or charter via

the most cost effective itinerary to return You to Your Departure Point.

Covered Risk 22. Missed Connection – You miss Your connection, due to a Schedule Change of the airline that is providing transportation for a portion of Your Trip.

Benefits for Covered Risk 22:

If Your Trip is interrupted due to the occurrence of Covered Risk 22 We cover:

1. a Subsistence Allowance for Your commercial accommodations and meals, essential telephone calls, and taxi fares, up to a daily maximum of \$350, to a maximum of \$700 (original receipts must be submitted for all eligible expenses); AND

The lesser of:

2. the change fee charged by the airline carrier(s) involved when such an option is available to You; OR up to \$2,000 for the extra cost of Your one-way economy airfare via the most cost effective itinerary to Your next destination (in or outbound).

Covered Risk 23. Delays of Your Scheduled Carrier – Your Scheduled Carrier is delayed by weather conditions, earthquakes, or volcanic eruptions for at least 30% of Your Trip and You or Your Travel Companion choose not to continue with their journey.

Covered Risk 24. Transportation Delay –

1. You miss a connection or interrupt Your Trip because of the delay of a private automobile resulting from the mechanical failure of that automobile, weather conditions, a traffic Accident, or an emergency police-directed road closure, causing You to miss a ferry, Cruise ship, bus, limousine, taxi, or train, when the delay is caused by the mechanical failure of the vehicle provided that such transportation was scheduled to arrive at least two (2) hours prior to Your scheduled departure.
2. Delay of Your Common Carrier (on which You are a passenger) resulting from the mechanical failure of that carrier, a traffic Accident, an emergency police-directed road closure, weather conditions, earthquakes or volcanic eruptions, causing You to miss a connection or resulting in the interruption of Your travel arrangements.

Benefits for Covered Risks 23 and 24:

If You suffer Trip interruption due to one (1) or more of Covered Risks 23 and 24, occurring while You are on a Trip, We cover:

1. up to \$2,000 for the non-refundable, unused Trip arrangements for which You have already paid and additional travel transportation expenses via the most cost effective itinerary to return You to Your next

2. destination (in or outbound) of the Insured Trip, less Your prepaid unused return transportation;
2. a Subsistence Allowance for Your commercial accommodations and meals, essential telephone calls and taxi fares, up to a daily maximum of \$350, to a maximum of \$700 (original receipts must be submitted for all eligible expenses)

Covered Risk 25. Delays of Your Travel Companion's Scheduled Carrier

Your Travel Companion's Scheduled Carrier is delayed by weather conditions, earthquakes, or volcanic eruptions for at least 30% of Your Trip and You choose to continue Your Trip.

Benefit for Covered Risk 25:

If Your Travel Companion's Trip is interrupted or cancelled due to Covered Risk 26, We cover the next occupancy charge applicable to You when You continue Your Trip.

Trip Delay

Covered Risks 26 to 29: You are covered for losses incurred in the event of Trip delay beyond Your scheduled Return Date due to any one (1) or more of the following covered risks.

Covered Risk 26. Medical Conditions and Death

One (1) or more of the following persons develops an Emergency Medical Condition or dies:

1. You or Your Travel Companion;
 2. Your Immediate Family Member;
- OR;
3. Your friend who is at Your destination dies.

Covered Risk 27. Adoption and Pregnancy –

- a. You, Your Immediate Family Member, Your Travel Companion, or Your Travel Companion's Immediate Family Member develops complications of a pregnancy that falls within the first 31 weeks while at Your Trip destination; or
- b. complication of the legal adoption by You or Your Travel Companion while on a Trip for the purpose of completing such adoption.

Covered Risk 28. Transportation Delay

You miss a connection or interrupt Your Trip because of the delay of a private automobile resulting from the mechanical failure of that automobile, weather conditions, a traffic Accident, or an emergency police-directed road closure, causing You to miss a ferry, Cruise ship, bus, limousine, taxi, or train, when the delay is caused by the mechanical failure of the vehicle provided that such transportation was scheduled to arrive at least two (2) hours prior to Your scheduled departure.

Delay of Your Common Carrier (on which You are a passenger) resulting from the mechanical failure of that carrier, a traffic Accident, an Emergency police-directed road closure, weather conditions, earthquakes or volcanic eruptions, causing You to miss a connection or resulting in the interruption of Your travel arrangements.

Covered Risk 29. Quarantine or Hijacking – You, Your Spouse, Your Dependent Child, Your Travel Companion, or Your Travel Companion's Spouse or Dependent Child is quarantined or hijacked.

Benefits for Covered Risks 26 to 29:

If You suffer Trip delay due to one (1) or more of Covered Risks 26 to 29, We cover:

1. a Subsistence Allowance for Your commercial accommodations and meals, essential telephone calls and taxi fares, up to a daily maximum of \$350, to a maximum of \$3,500 (original receipts must be submitted for all eligible expenses); and
2. The lesser of:
 - a. the change fee charged by the airline carrier(s) involved when such an option is available to You; OR,
 - b. the extra cost of Your one-way economy airfare via the most cost effective itinerary to return You to Your Departure Point.

Covered Risk 30. Missed Connection – You miss Your connection due to a Schedule Change of the airline that is providing transportation for Your return.

Benefits for Covered Risk 30:

If Your Trip is delayed due to the occurrence of Covered Risk 30 We cover:

1. a Subsistence Allowance for Your commercial accommodations and meals, essential telephone calls, and taxi fares, up to a daily maximum of \$350, to a maximum of \$700 (original receipts must be submitted for all eligible expenses); and
2. The lesser of:
 - the change fee charged by the airline carrier(s) involved when such an option is available to You; OR,
 - up to \$2,000 for the extra cost of Your one-way economy airfare via the most cost effective itinerary to Your next destination (in or outbound).

B. Conditions – Trip Cancellation, Trip Interruption and Trip Delay Coverage

All of the conditions set out in the General Conditions Section of this Summary of Coverage and all of the following conditions must be satisfied before a benefit is payable

under this Trip Cancellation, Interruption and Delay Coverage as set out in Section IV, A.

You must notify Us immediately and no later than the business day following the day when You become aware of a Trip cancellation, Trip interruption or Trip delay situation.

For Trip cancellation You must cancel Your Trip booking immediately.

C. Exclusions – Trip Cancellation, Trip Interruption and Trip Delay Coverage

These exclusions apply to the Trip Cancellation, Interruption and Delay Coverage set out in Section IV, A. The additional exclusions set out in the General Exclusions Section of this Summary of Coverage also apply.

We do not cover or pay any benefit for any loss or expense related in whole or in part, directly or indirectly, to any of the following.

1. Any cause if You or Your Travel Companion have knowledge at the time of booking Your Trip or purchasing Your insurance of any reason why the Trip might be cancelled, interrupted or delayed.
2. Your or Your Immediate Family Member's Medical Condition or any related condition if in the 90-day period immediately preceding Your Purchase Date that condition has not been Stable and Controlled.
3. Your or Your Immediate Family Member's heart condition if in the 90-day period immediately preceding Your Purchase Date:
 - i. that person has had any heart condition that has not been Stable and Controlled; or
 - ii. that person has been required to use, take, or been prescribed to take nitroglycerin in any form, more than once per a seven (7) day period.
4. Your or Your Immediate Family Member's lung condition if in the 90-day period immediately preceding Your Purchase Date:
 - i. that person has had any lung condition that has not been Stable and Controlled; or
 - ii. that person required the use of home oxygen or had to take oral steroids; for example prednisone or prednisolone.
5. The change in schedule of a medical test or surgery that was originally scheduled before Your Trip.
6. Travel for the purpose of visiting a person suffering from a Medical Condition and the Medical Condition (or ensuing death) of that person is the cause of cancellation, interruption or delay of Your Trip.
7. A travel visa or passport that is not issued due to a late application or that has been previously refused.
8. Default of a travel supplier for travel services purchased from any travel supplier listed on Our alert list on either Your Trip Start Date or Your Trip purchase date.

9. A defer travel recommendation issued by the Department of Foreign Affairs and International Trade of the Canadian Government or Health Canada, before either Your Trip Start Date or Your Trip purchase date.
10. The non-refundable portion of Your prepaid travel arrangements covered by this All Inclusive Package exceeds \$20,000.

Cancel For Any Reason

If You are prevented from taking Your Trip for any reason not otherwise covered by this package, We will reimburse You for up to \$400 of the prepaid, forfeited, non-refundable payments or deposits for Your insured Trip arrangement(s) provided the following conditions are met:

1. this insurance coverage is purchased for the full cost of all non-refundable prepaid Trip arrangements that are subject to cancellation penalties and/or restrictions, and;
2. You cancel the insured Trip no less than 48 hours prior to the Departure Date.

This coverage will be terminated and no benefits will be paid under this Cancel for Any Reason coverage if the full costs of all prepaid, non-refundable Trip arrangements are not insured; any plan cost paid for this Cancel for Any Reason coverage will be refunded.

V. FLIGHT ACCIDENT AND TRAVEL ACCIDENT COVERAGE

A. Benefits – Flight Accident and Travel Accident Coverage

You are covered in the event of a flight Accident or a travel Accident sustained during a Trip due to one (1) of the following covered risks for Accidental death or Accidental Bodily Injury for the benefits set out below to a maximum benefit of:

- Flight Accident Maximum Benefit is \$100,000;
- Travel Accident Maximum Benefit is \$50,000.

Covered Risk 1

Bodily Injury is sustained due to a flight Accident or a travel Accident (as described in Section V, B) occurring on or after the date Your insurance starts and on or before the date Your insurance ends and while You are on a Trip and as a result, within the 12 months immediately following the Accident You:

1. die;
2. suffer loss of sight in both eyes;
3. have two (2) of Your limbs fully severed above Your wrist or ankle joints; or
4. suffer complete and irrecoverable loss of speech or loss of hearing.

Benefits for Covered Risk 1:

In the event of the occurrence of Covered Risk 1, We pay a benefit equal to 100% of the applicable Flight or Travel Accident Maximum Benefit Amount for such bodily Injury.

Please note: If Your body is not found within 12 months of the Accident, We will presume that You died as a result of Your injuries.

Covered Risk 2

Bodily Injury is sustained due to a flight Accident or travel Accident (as described in Section V, B) occurring on or after the date Your insurance starts and on or before the date Your insurance ends and while You are on a Trip and as a result, within the 12 months immediately following the Accident, You:

1. suffer loss of sight in one (1) eye; or
2. have one (1) of Your limbs fully severed above a wrist or ankle joint.

Benefits for Covered Risk 2:

In the event of the occurrence of Covered Risk 2, We pay a benefit of 50% of the applicable Flight Accident or Travel Accident Maximum Benefit Amount for such bodily Injury.

Benefit Limit for Covered Risk 1 and Covered Risk 2: If You have more than one (1) Accidental Bodily Injury while covered, We will pay no more than \$100,000 in total.

B. Conditions – Flight Accident and Travel Accident Coverage

All of the conditions set out in the General Conditions Section of this Summary of Coverage and all of the following conditions must be satisfied before a benefit is payable under this Flight Accident and Travel Accident Coverage.

1. Flight Accident: This flight Accident benefit, as described in the Benefits for Covered Risk 1 and Covered Risk 2 above, applies only to an Accidental Bodily Injury sustained by You while riding as a passenger (but not as a pilot, operator, or member of the crew) in, on, boarding, or alighting from any passenger plane having a current and valid airworthiness certificate. We will also provide coverage for the following:

- a. when You are a passenger in a land or water conveyance, that an airline provides at their expense, as a substitute for a passenger plane; covered by this insurance; or
- b. when You are a passenger in a limousine or bus provided by the airline or airport authority; or
- c. when You are at an airport prior to boarding or after deplaning a flight covered by this insurance;
- d. when You are travelling to or from airports in a scheduled helicopter flight to make a connection with a flight covered by this insurance; or

- e. when You are a passenger on a covered flight that is forced to land or disappears, and You are exposed to the elements.

2. Travel Accident: This travel Accident benefit, as described in the Benefits for Covered Risk 1 and Covered Risk 2 above, applies only to an Accidental Bodily Injury sustained by You during a Trip when the flight Accident coverage does not apply.

C. Exclusions – Flight Accident and Travel Accident Coverage

These exclusions apply to the Flight Accident and Travel Accident Coverage set out in Section V, A. The additional exclusions set out in the General Exclusions Section of this Summary of Coverage also apply. We do not cover any claim related in whole or in part, directly or indirectly, to:

1. a disease, even if the proximate cause of its activation or reactivation is the Accidental bodily Injury; or
2. hang-gliding, parachuting, bungee jumping or skydiving.

VI. BAGGAGE AND PERSONAL EFFECTS COVERAGE

If You incur expenses due to a covered risk, on or after Your Start Date and prior to or on Your Return Date We provide coverage for the following covered benefits up to the specific benefit limits set out below. Benefit limits are for each Insured under this Summary of Coverage. We do not pay more than the benefit limit.

A. Benefits – Baggage and Personal Effects Coverage

If You incur a loss due to a covered risk while on a Trip, We provide coverage for the following covered benefits, subject to any specific limits set out in the benefit provisions.

Covered Risk 1. Baggage Loss: Loss or damage to the baggage and personal effects that You own and use during Your Trip.

Benefits for Covered Risk 1:

The maximum coverage to replace a single article cannot be higher than \$500 (including its attachments, accessories and equipment, matched pair or set, or group of related articles). Overall maximum benefit limit is \$1,000.

Covered Risk 2. Lost Documents: Loss of Your passport, driver's license, birth certificate, or travel visa.

Benefits for Covered Risk 2:

We cover up to \$200 towards the replacement of one (1) or more of these documents.

Covered Risk 3. Baggage Delay: A delay of delivery of checked baggage of 12 hours or more by an airline or ground carrier on which You travelled while on a Trip.

Benefits for Covered Risk 3:

We cover up to \$400 for replacement of necessary personal effects.

B. Conditions – Baggage and Personal Effects Coverage

All of the conditions set out in the General Conditions Section of this Summary of Coverage and all of the following conditions must be satisfied before a benefit is payable under this Baggage and Personal Effects Coverage as set out in Section VI, A.

1. Benefits are payable only after You have exhausted recovery or reimbursement benefits available from any other insurance or coverage.
2. We will pay this benefit up to the applicable limit after making proper allowance for wear and tear or Depreciated Value for the loss of, damage to and delay of the baggage and personal effects that You own and that You use during Your Trip. In the event of theft, burglary, robbery, malicious mischief, disappearance or loss of an item covered under this benefit, You must obtain written documented evidence from the police immediately or, if the police are unavailable, the hotel manager, tour guide, or transportation authorities.
3. You must take all precautions to protect, save or recover Your baggage and person effects and advise Us as soon as possible.
4. We reserve the option to repair or replace Your property with another of a similar kind, quality, and value and to ask You to submit damaged items for appraisal.

C. Limitations – Baggage and Personal Effects Coverage

Our liability under this Summary of Coverage for expenses under this Baggage and Personal Effects Coverage is limited to \$1,000 per Summary of Coverage.

D. Exclusions – Baggage and Personal Effects Coverage

These exclusions apply to the Baggage and Personal Effects Coverage set out in Section VI, A. The additional exclusions set out in the General Exclusions Section of this Summary of Coverage also apply. We do not cover or pay any benefit for any loss or expense related in whole or in part, directly or indirectly, to:

1. loss or theft of: animals; bicycles except while checked as baggage on a Common Carrier, perishable items; household items and furniture; artificial teeth or limbs; hearing aids; eyeglasses of any type; contact lenses; money; tickets; securities; items related to Your occupation or profession; antiques or collectors' items; fragile items; items obtained illegally; or articles that are Insured on a valued basis; damage or loss resulting from wear and tear, deterioration, defect, mechanical breakdown, Your imprudence, or Your omission; or

2. unaccompanied baggage or personal effects; baggage or personal effects left unattended or in an unlocked vehicle; or
3. baggage or personal effects shipped under a freight contract; or
4. baggage that is delayed on Your final return flight to Your Home Province.

VII. FEATURES AND SERVICES

These services are available to You for the duration of Your Trip. Whether You need Emergency medical care or Emergency arrangements to return home, Our Emergency assistance coordinators, doctors and nurses can help You any time of day.

All Assistance Services listed below are not insurance benefits and are not provided by Us. Travel Guard provides assistance through coordination, negotiation, and consultation using an extensive network of worldwide partners. Expenses for goods and services provided by third parties are the responsibility of the traveller.

Canada and Continental USA: 1-866-878-0192 or International Collect at 416-646-3723

24 Hour Emergency Travel Assistance

- Lost baggage search; stolen luggage replacement assistance
- Lost passport/travel documents assistance
- ATM locator
- Emergency cash transfer assistance
- Travel information including visa/passport requirements
- Emergency telephone interpretation assistance
- Urgent message relay to family, friends or business associates
- Up-to-the-minute travel delay reports
- Arrangements for long-distance calling cards for worldwide telephoning
- Inoculation information
- Embassy or consulate referral
- Currency conversion or purchase assistance
- Up-to-the-minute information on local medical advisories, epidemics, required immunizations and available preventive measures
- Up-to-the-minute travel supplier Strike information
- Legal referrals/bail bond assistance
- Worldwide public holiday information

Emergency Travel Assistance

- Flight rebooking
- Hotel rebooking
- Rental vehicle booking
- Emergency return travel arrangements

- Roadside assistance
- Rental Vehicle return assistance
- Guaranteed hotel check-in
- Missed connections coordination

Concierge Services

- Restaurant referrals and reservations
- Ground transportation
- Event ticketing
- Tee times and course Recommendations
- Floral services

VIII. GENERAL CONDITIONS

All of the following conditions apply to all coverage under this Summary of Coverage.

1. Your coverage will be declared null and void if, for any reason:
 - a. the required Premium is not received by Us; or
 - b. You are ineligible for coverage in accordance with any section of this Summary of Coverage; questionnaire.
2. The benefit, benefit limits and all other amounts expressed in this Summary of Coverage are expressed in Canadian currency. Where covered losses are billed in foreign currency, the rate of exchange is based on the rate effective on the date when We pay the claim. No sum payable shall bear interest. To facilitate direct payment to providers, We may elect to pay the claim in the currency of the country where the charges were incurred based on the rate of exchange established by any chartered bank in Canada:
 - a. on the last date of service; or
 - b. on the date the claim was incurred if a cheque is issued directly to physicians, Hospitals or any other Providers.
3. If You are covered under more than one (1) of Our Policies, or have similar coverage with another insurance company, the total amount paid to or for You will not exceed Your actual expenses and the maximum to which You are entitled is the largest amount specified for that benefit under any one (1) of Our Policies with the exception of the Flight Accident benefit which has a maximum payable of \$100,000 if You are covered under more than one (1) of Our Policies providing that benefit.
4. The coverage outlined in this Summary of Coverage is last payor only. If, at the time of loss, You have insurance from another source, or if any other party is also responsible, to pay for benefits also provided under this Summary of Coverage, We will pay eligible expenses only in excess of those covered by that other insurance company or insurance companies or other responsible party or parties, including insurance plans provided through credit cards, third party liability, group

or individual basic or extended health insurance plans or contracts including any private or provincial or territorial auto insurance plan, providing Hospital, medical or therapeutic coverage, or any third party liability insurance in force concurrently with this Summary of Coverage.

5. In the event of a payment of a claim under this Summary of Coverage, We have the right to proceed, in Your name, but at Our expense, against third parties who may be responsible for giving rise to a claim under this Summary of Coverage. You will execute and deliver documents as necessary and cooperate fully with Us so as to allow Us to fully assert Our rights. You will do nothing to prejudice such rights.
6. We have full rights of subrogation; however, We do not subrogate against any retiree plan benefit if the lifetime maximum limits for all in country and out-of-country medical benefits is \$50,000 or less.
7. Notwithstanding any provision of this Summary of Coverage, this Summary of Coverage is subject to the statutory conditions of the Insurance Act applicable to contracts of Accident and Sickness insurance and the laws and regulations in Your Home Province. The laws and regulations of the province or territory in Canada in which You normally reside govern this Summary of Coverage and any provision in this Summary of Coverage which is in conflict with any such statute is hereby amended to conform to such statute.
8. Confirmation of Insurance: In the event that You are found to be ineligible for coverage or that a claim is found to be invalid or benefits are reduced in accordance with any Summary of Coverage provision, We have the right to collect from You any amount which We have paid on Your behalf to medical providers or other parties.
9. Your Summary of Coverage will be declared null and void in the case of fraud or attempted fraud by You, or if You conceal or misrepresent any material fact or circumstance concerning this insurance.
10. During the claims process, We may require You to have a medical examination by one (1) or more physicians chosen by Us and at Our expense.
11. We are not responsible for the availability, quality or results of any medical Treatment. We are not responsible for any transportation arranged by Us. We are not responsible for Your failure to obtain medical Treatment.
12. You must, at all times while You are covered under this Summary of Coverage, act in a prudent manner so as to minimize costs to Us.
13. If Your health status changes (including a Change in Prescribed Medication or Treatment) prior to departure for any Trip, You must notify Us immediately. At Our sole discretion, We may opt to waive the exclusion that precludes Your unstable Medical Condition from

coverage. This would allow You to continue with Your Trip and retain coverage for Your Medical Condition.

14. Any reference to age in this document is specific to Your age on the date You apply for insurance.
15. The coverage provided by this Summary of Coverage does not apply to risks and claims related to Cuba, as Cuba related risks and claims are not serviced and supported by Our United States affiliates (upon which We rely for service and support), unless such coverage would be permissible under all applicable sanctions.
16. The purpose of the Trip is business or pleasure and is not to obtain health care or Treatment of any kind.
17. The Insurer will not be liable to provide any coverage or make any payment hereunder if to do so would be in violation of any sanctions law or regulation which would expose the Insurer, its parent company or its ultimate controlling entity to any penalty under any sanctions law or regulations.
18. This Summary of Coverage will not cover any loss, Injury, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Cuba, Iran, Syria, Sudan, North Korea or the Crimea region.

IX. MAXIMUM LIMITS OF LIABILITY

General Liability: Our liability under this Summary of Coverage is limited solely to the payment of eligible benefits, up to the benefit limits specified herein, for any loss or expense.

X. GENERAL EXCLUSIONS

The following exclusions apply to all benefits available under this Summary of Coverage. In addition to any exclusion that apply to a specific benefit outlined within each section, We also do not cover any claim, loss or any expense related in whole or in part, directly or indirectly to:

1. expenses resulting from any Sickness, Injury or state of health prior to Your Summary of Coverage purchase date that would cause Expected Medical Treatment or Hospitalization during Your Trip;
2. reimbursement for expenses once the Emergency ends and in the opinion of the attending Physician or dentist, You are able to travel to Your Home Province for any further Treatment relating to the Sickness or Accident that led to the Emergency other than for a follow-up visit as listed under the benefits for Emergency Medical Treatment);
3. optional Summary of Coverage extensions: Sickness or Injury which first appeared, was diagnosed or received medical Treatment after Your Departure Date and prior to the date We approved Your extension of coverage;

4. any Treatment that is not Emergency Treatment. For example (and not inclusive of):
 - a. expenses incurred for medication commonly available without prescription; vaccinations, injections or medication received on a preventative basis or for the maintenance of a Medical Condition; contraceptives; fertility medication; vitamin preparations; general physical examinations; or routine medical tests;
 - b. transplants including but not limited to organ transplants or bone marrow transplants, artificial joints, or prosthetic devices/implants including any associated charges;
 - c. expenses incurred for acupuncture or naturopathic or holistic Treatment;
5. ionizing radiation or radioactive Contamination from any nuclear fuel or waste which results from the burning of nuclear fuels, or, the radioactive, toxic, explosive or other dangerous properties of nuclear machinery or any part of it;
6. expenses incurred for any portion of benefits that require prior authorization and arrangements by Us if such benefits were not authorized and arranged by Us;
7. more than one (1) Follow-up Treatment, Recurrence or complication of a Medical Condition or related condition, following Emergency Treatment of that condition during Your Trip if the medical department, determines that You were medically able to return to Your Home Province and You chose not to return;
8. more than one (1) Follow-up Treatment of any heart or lung condition, following Emergency Treatment for a related or unrelated heart or lung condition during Your Trip if the medical department, determines that You were medically able to return to Your Home Province and You chose not to return;
9. any Medical Condition, if Our medical department recommends that You return to Your Home Province following Your Emergency Treatment, and You choose not to travel;
10. expenses incurred for Treatment or services that are prohibited under Your GHIP/UHIP;
11. expenses in excess of reasonable and customary rates where Treatment has occurred before You or someone on Your behalf has called Us;
12. any medical expense incurred while travelling in Your Home Province;
13. routine pre-natal care; a child born during Your Trip; childbirth or complications of childbirth; pregnancy or complications thereof with in the nine (9) weeks before or anytime after the expected date of delivery;
14. Your Mental or Emotional Disorders;
15. Your committing or attempting to commit suicide or intentionally self-inflicted Injury (whether sane or insane);

16. any alcohol related Sickness, death, or Injury or the abuse of medication, drugs, alcohol or any other toxic substance during the Trip; Alcohol abuse includes having a blood alcohol level in excess of 80 milligrams of alcohol per 100 millilitres of blood;
17. a Trip undertaken in contravention of a Physician's recommendation or after the manifestation of medical symptoms which would cause an ordinarily prudent person to seek medical advice or Treatment in the 90 days prior to Your Departure Date; or where a Terminal Condition prognosis has been diagnosed by any Physician;
18. a Medical Condition or related condition that arises during a Trip You undertake with the prior knowledge that You will require or seek Treatment or surgery for that Medical Condition or a related condition;
19. a Medical Condition for which future investigation or Treatment is planned before Your Departure Date. This does not include routine monitoring;
20. the commission of or Your direct or indirect attempt to commit a criminal act or Injury occurring while You are committing or attempting to commit a criminal act;
21. Your participation in, and any claim resulting from activities including: rock or Mountain Climbing; hang-gliding; parachuting, bungee jumping or skydiving; Ski Jumping, Ski Flying, Helli-Skiing, Ski Acrobatics, Ski Stunting, Freestyle Skiing, Ski Racing, Ski Bob Racing, or On-Piste and Off-Piste Skiing in areas designated unsafe by resort management; Your participation as a professional athlete in a sporting event; and/or Your participation in a motorized race or motorized speed contest;
22. operating or learning to operate any aircraft, as pilot or crew; performing employment duties on any aircraft or ship; or performing duties in any regular armed forces service;
23. expenses incurred if You travel to a country that The Department of Foreign Affairs and International Trade of the Canadian Government or Health Canada has advised travellers not to travel to during the time of Your Trip. This exclusion applies if the advisory is issued prior to Your Departure Date;
24. war (declared or not), acts of foreign enemies or rebellion;
25. interest on a payment or reimbursement;
26. expenses incurred relating to travel in, to, or through Cuba, because such travel is not serviced and supported by the Insurer's United States affiliates.
27. any Medical Condition that changes or renders You ineligible for coverage prior to Your Departure Date. You must remain eligible prior to Your Departure Date to be covered under this insurance.

XI. CLAIM PROCEDURES AND CUSTOMER SERVICE INQUIRIES

Payment of Claims - To Whom Paid:

Benefits are payable to the Insured who applied for coverage and paid any required plan cost.

Any benefits payable due to that Insured's death will be paid to the survivors of the first surviving class of those that follow:

1. the beneficiary named by that Insured and on file with Us;
2. to his/her spouse, if living. If no living spouse, then;
3. to the Insured's estate.

If a benefit is payable to a minor or other person who is incapable of giving a valid release, the Insurer may pay up to \$3,000 to a relative by blood or connection by marriage who has assumed care or custody of the minor or responsibility for the incompetent person's affairs. Any payment the Insurer makes in good faith fully discharges the Insurer to the extent of that payment.

Benefits for Emergency Medical Expense/Emergency Evacuation and Repatriation of Remains services may be payable directly to the provider of the services. However, the provider:

1. must comply with the statutory provision for direct payment; and
2. must not have been paid from any other sources.

Please contact:

For residents of Quebec, New Brunswick, Newfoundland and Saskatchewan:
Travel Guard Canada
c/o Global Excel Management
73 Queen, Sherbrooke, Quebec J1M 0C9

All Other Provinces:
Travel Guard Canada
Attn: Claims Department
120 Bremner Boulevard, Suite 2200, Toronto, ON M5J 0A8

To Claim For Emergency Medical and Dental Benefits:

You must notify Us at the below numbers prior to any Emergency Medical Treatment and prior to any surgery, invasive procedure or Hospitalization.

Our assistance coordinators will provide guidance. We will make every effort, although We cannot guarantee, to pay Providers directly. You must provide Us with original receipts for incurred expenses including those for Subsistence Allowance expenses.

Quebec, New Brunswick, Newfoundland and Saskatchewan Residents, Call:

Canada and Continental USA: 1-888-566-8028 OR
International Collect at 1-819-566-8028

All Other Provinces Call:

Canada and Continental USA: 1-866-878-0192 OR
International Collect at 1-416-646-3723

To Claim For Trip Cancellation, Interruption and Delay Benefits:

You must notify Us immediately of a cancellation, interruption or delay no later than the next business day following a cancellation, interruption or delay. You must provide:

1. proof of all non-refundable, prepaid deposits or payments;
2. completed documentation if a Medical Condition was the cause for cancellation;
3. complete unused transportation tickets and vouchers;
4. original receipts for Subsistence Allowance expenses;
5. original receipts for new tickets;
6. reports from police or local authorities documenting the missed connection or travel delay; and
7. invoices and original receipts from travel service Providers.

To Claim For Change of Mind:

You must notify Us of Your cancellation of a scheduled Trip prior to Your Departure Date from Your Home Province because You have changed Your mind provided Your Trip has been paid in full.

To Claim For Baggage and Personal Effects Benefits:

You must notify Us immediately of the loss or damage to baggage or personal effects. You must also report the loss or damage to police, local or conveyance authorities, tour operator representatives, the hotel manager or official transportation representative and obtain a written report.

When filing Your claim You must submit:

1. a letter of coverage or denial from the transportation carrier and/or Your homeowner's insurance company;
2. the written report regarding the loss or damage; and
3. original receipts or sales slips for all lost or stolen articles claimed and proof that You owned the articles.

Failure to submit the written report to Us with Your claim will result in the denial of Your claim.

You must also submit a letter of coverage or denial from the transportation carrier and/or Your homeowner's insurance company. As proof of loss value, We may, at Our option, request original receipts, credit card original receipts or

sales slips for all lost or stolen articles claimed. For emergency courier fees, We will need a receipt of the imposed charges.

XII. OTHER INFORMATION

Beneficiary Designation and Change The Insured's beneficiary(ies) is (are) the person(s) designated by the Insured and on file with Us. If no beneficiary has been designated, payment will be made to the Insured's estate. An Insured over the age of majority and legally competent may change his/her beneficiary designation at any time unless the beneficiary designation is irrevocable, without the consent of the designated beneficiary(ies), by providing Us a written request for change. What the request is received, whether the Insured is then living or not, the change of beneficiary will relate back to and take effect as of the date of execution of the written request, but without prejudice to the Insurer on account of any payment made by it prior to receipt of the request.

NOTICE AND PROOF OF CLAIM

1. The Insured or a beneficiary entitled to make a claim, or the agent of any of them, must:
 - a. give written notice of claim to the Insurer;
 - i. by delivery of the notice, or by sending it by registered mail to the head office or chief agency of the Insurer in the province, or
 - ii. by delivery of the notice to an authorized agent of the Insurer in the province not later than 30 days after the date a claim arises under the contract on account of an accident, sickness or disability,
 - b. within 90 days after the date a claim arises under the contract on account of an accident, sickness or disability, furnish to the Insurer such proof as is reasonably possible in the circumstances of:
 - i. the happening of the accident or the start of the sickness or disability;
 - ii. the loss caused by the accident, sickness or disability,
 - iii. the right of the claimant to receive payment;
 - iv. the claimant's age, and
 - v. if relevant, the beneficiary's age, and
 - c. if so required by the Insurer, furnish a satisfactory certificate as to the cause or nature of the accident, sickness or disability for which claim is made under the contract and in the case of sickness or disability, its duration.
2. Failure to give notice of claim or furnish proof of claim within the time required by this condition does not invalidate the claim if:
 - a. the notice or proof is given or furnished as soon as reasonably possible, and in no event later than one

- (1) year after the date of the accident or the date a claim arises under the contract on account of sickness or disability, and it is shown that it was not reasonably possible to give the notice or furnish the proof in the time required by this condition, or
- b. in the case of the death of the person insured, if a declaration of presumption of death is necessary, the notice; or
 - c. proof is given or furnished no later than one (1) year after the date a court makes the declaration.

INSURER TO FURNISH FORMS FOR PROOF OF CLAIM

The Insurer must furnish forms for proof of claim within 15 days after receiving notice of claim, but if the claimant has not received the forms within that time the claimant may submit his or her proof of claim in the form of a written statement of the cause or nature of the accident, sickness or disability giving rise to the claim and of the extent of the loss.

RIGHTS OF EXAMINATION As a condition precedent to recovery of insurance money under the contract:

- a. the claimant must give the Insurer an opportunity to examine the person of the person insured when and as often as it reasonably requires while a claim is pending, and
- b. in the case of death of the person insured, the Insurer may require an autopsy, subject to any law of the applicable jurisdiction relating to autopsies.

10 DAY RIGHT TO EXAMINE

Please take the time to read Your Summary of Coverage and Your Confirmation of Insurance prior to Your Departure Date. If You have any questions or You are unsure about Your coverage You must contact Us at 1-877-202-3341 prior to Your Departure Date.

You have the right to cancel this insurance within 10 days from the date You purchased Your coverage. For refunds after 10 days, please refer to the 'Can My Premium Be Refunded?' section at the beginning of this document.

PRIVACY PRINCIPLES

We abide by the Privacy Principles of the AIG Insurance Company of Canada and want You, Our policyholders, Insureds and claimants (referred to as "Customers" or "You"), to be aware of how and why We handle personal information. We work hard to respect and maintain Your privacy. However, the very nature of Our business is such that the collection, use and disclosure of personal information is fundamental to the products and services We provide.

For the purposes of the Privacy Principles, personal information means information that identifies an individual. For example: an individual's name, birth date, address, age, health and financial information is personal information which We may collect, use and in certain circumstances, where necessary, disclose, in the course of providing insurance services and carrying on business. By applying for or purchasing AIG's products and services, You are providing Your consent to Our collection, use, and disclosure of Your personal information for insurance purposes and carrying on business, as set out in the Privacy Principles.

You may obtain a copy of the Privacy Principles on Our website at www.aig.ca or request a copy by contacting Us at:

The Privacy Officer
 c/o AIG Insurance Company of Canada
 120 Bremner Boulevard, Suite 2200
 Toronto, ON M5J 0A8
 1-800-387-4481

24-HOUR EMERGENCY ASSISTANCE

You must notify Us prior to any Emergency Medical Treatment and prior to any surgery, invasive procedure or Hospitalization. Failure to do so will result in Your being responsible for 30% of any eligible expenses incurred.

Québec, New Brunswick, Newfoundland and Saskatchewan Residents Call Global Excel Management:

Canada and Continental USA: **1-888-566-8028** OR International Collect at **1-819-566-8028**

All Other Provinces Call Travel Guard:

Canada and Continental USA: **1-866-878-0192** OR International Collect at **1-416-646-3723**



