

Important telephone numbers

Customer services:		08450 264 264
Health declaration (to declare a medical condition or change in your circumstances)		0845 618 0344
24-hr Emergency medical assistance:	Outside your home country:	+44 20 8666 9221
	Within your home country:	020 8666 9221
24-hr Personal assistance:	Outside your home country:	+44 20 8666 9221
	Within your home country:	020 8666 9221
24-hr Legal helpline:	Outside your home country:	+44 20 8603 9804
	Within your home country:	020 8603 9804
Claims sections 1-12 and 14-16:		020 8603 9958
Claims section 13:	Outside your home country:	+44 20 8603 9804
	Within your home country:	020 8603 9804

This policy is available in large print, audio and Braille.

Please contact us on
Phone 08450 264 264 Textphone 020 8666 9562

and we will be pleased to organise an alternative version for you.

CheapTravelInsurance.com is a trading name of Grovelawn Insurance Services Limited,
Registered address Numeric House, 98 Station Road, Sidcup, Kent DA15 7BY Registered No. 5288164

Sections 1-12 and 14-16 of CheapTravelInsurance.com travel insurance is underwritten by Mondial Assistance Europe NV and is administered in the UK by Mondial Assistance (UK) Limited, Registered in England No 1710361
Registered Office Mondial House, 102 George Street, Croydon CR9 1AJ. www.mondial-assistance.co.uk

Grovelawn Insurance Services Limited and Mondial Assistance (UK) Limited are authorised and regulated by the Financial Services Authority (FSA).

Mondial Assistance Europe NV is authorised by De Nederlandsche Bank (DNB) in the Netherlands and is regulated by the Financial Services Authority for the conduct of UK business.

Mondial Assistance (UK) Limited acts as an agent for Mondial Assistance Europe NV with respect to the receipt of customer money; and for the purpose of settling claims and handling premium refunds.

Grovelawn Insurance Services Limited will act as agent for Mondial Assistance Europe NV with respect to the receipt of customer money and handling premium refunds.

Section 13 of CheapTravelInsurance.com travel insurance is underwritten by a consortium of Association of British Insurers member companies and Lloyds Syndicates and is administered by International Passenger Protection Limited, IPP House, 22-26 Station Road, West Wickham, Kent BR4 0PR United Kingdom

International Passenger Protection Limited, the consortium of Association of British Insurers member companies and Lloyds Syndicates are authorised and regulated by the Financial Services Authority (FSA)

International Passenger Protection Limited will act as agent for the consortium of Association of British Insurers and Lloyds Syndicates with respect to the receipt of customer money and for the purpose of settling claims.

On behalf of International Passenger Protection Limited, Mondial Assistance Europe NV and Mondial Assistance (UK) Limited and Grovelawn Insurance Services Limited will act as an agent for the receipt of customer money and handling premium refunds



Travel Insurance Policy Wording

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Summary of cover

The following table shows the maximum amount **we** will pay and policy **excesses** for each section of cover. **You** should read the rest of this booklet for the full terms and conditions.

Section/Cover	Standard Cover Limits (up to)	Excess*	Super Cover Limits (up to)	Excess	Backpacker Cover Limits (up to)	Excess*
1. Cancellation or curtailment (Optional)	£1,000	£75 (£20 loss of deposit)	£3,000	£50 (£20 loss of deposit)	£1,000	£75 (£20 loss of deposit)
2. Emergency medical and associated expenses	£5 million	£75	£10 million	£50	£3 million	£75
Transport and accommodation	£1,000	Nil	£1,000	Nil	£1,000	Nil
Funeral expenses	£2,500	Nil	£2,500	Nil	£2,500	Nil
Dental	£200	£75	£200	£50	£200	£75
In-patient benefit	£25 per day - max £1,000	Nil	£25 per day - max £1,000	Nil	£25 per day - max £1,000	Nil
Search and rescue	£30,000	Nil	£30,000	Nil	£30,000	Nil
3. Loss of passport	£100	£75	£250	£50	£200	£75
4. Delayed possessions	£25	Nil	£75	Nil	N/A	N/A
5. Personal possessions (optional)	£500	£75	£2,000	£50	£750	£75
Single, article pair or set	£300		£300		£150	
Valuables	£300		£300		£200	
Tobacco, alcohol and fragrances	£50		£50		£50	

* See note on page 5

Summary of cover - Continued

Section/Cover	Standard Cover Limits (up to)	Excess*	Super Cover Limits (up to)	Excess	Backpacker Cover Limits (up to)	Excess*
6. Personal money (optional) (Cash over 16s) (Cash under 16s)	N/A N/A N/A	N/A N/A N/A	£500 £100 £50	£50	£200 £120 £50	£75
7. Personal accident Death Loss limb / sight Permanent total disablement	£10,000 £10,000 £10,000	Nil Nil Nil	£25,000 £25,000 £25,000	Nil Nil Nil	£15,000 £15,000 £15,000	Nil Nil Nil
8. Missed departure	£300	£75	£600	£50	N/A	N/A
9. Delayed departure Abandonment	£20 per day max £200 £1,000	Nil £75	£20 per day max £200 £3,000	Nil £50	N/A N/A	N/A N/A
10. Personal liability	£1 million	£100	£2 million	£100	£1 million	£100
11. Legal expenses	£10,000 per policy	£200	£25,000 per policy	£200	£10,000 per policy	£200
12. Hijack	£50 per day max £1,000	Nil	£100 per day max £2,000	Nil	N/A	N/A
13. End supplier failure	N/A	N/A	£3,000	Nil	N/A	N/A

* See note on page 5

Summary of cover - Optional cover

The below limits are only applicable if they are shown on **your** policy schedule and **you** have paid the extra premium.

Section/Cover	Standard Cover Limits (up to)	Excess*	Super Cover Limits (up to)	Excess	Backpacker Cover Limits (up to)	Excess*
14. Winter sports cover Ski pack Delayed ski equipment Ski equipment (single item) Piste closure Avalanche closure	£250 £15 per day max £300 £500 £300 £20 per day max £200 £30 per day max £150	£75 Nil £75 Nil Nil	£250 £15 per day max £300 £500 £300 £20 per day max £200 £30 per day max £150	£50 Nil £50 Nil Nil	£250 £15 per day max £300 £500 £300 £20 per day max £200 £30 per day max £150	£75 Nil £75 Nil Nil
15. Golf cover Green fees Delayed golf equipment Golf equipment (single item)	£75 per day max £300 £30 per day max £300 £1,000 £300	Nil Nil £75	£75 per day max £300 £30 per day max £300 £1,000 £300	Nil Nil £50	N/A N/A N/A	N/A N/A N/A
16. Business cover Delayed business equipment Business equipment (courier costs) (single item) (computer equipment) (business samples) Business money (cash)	£150 per day max £750 £2,000 £500 £500 £1,500 £500 £1,000 £500	Nil £75	£150 per day max £750 £2,000 £500 £500 £1,500 £500 £1,000 £500	Nil £50	N/A N/A	N/A N/A

* See note below

Note

- Some sections of cover also have extra sub limits, for example the Personal accident section restricts certain benefits depending on the age of the **person insured**.
- Where the discounted premium has been paid to double the **excess**, the **excess** amount will be twice the amount shown.

Important information

Thank you for taking out CheapTravellInsurance.com travel insurance.

Your policy schedule shows the sections of the policy you have chosen, the people who are covered and any special terms or conditions that may apply.

Your policy does not cover everything. You should read this policy carefully to make sure it provides the cover you need. If there is anything you do not understand you should call Cheaptravelinsurance.com travel insurance on 08450 264 264, Textphone 020 8666 9562 or write to Cheaptravelinsurance.com, Gemini House, Hargreaves Road, Swindon, Wiltshire SN25 5AZ.

Insurer

Sections 1-12 and 14-16 of **your** CheapTravellInsurance.com travel insurance is underwritten by Mondial Assistance Europe NV and is administered in the **United Kingdom** by Mondial Assistance (UK) Limited. Section 13 is underwritten by a consortium of Association of British Insurers member companies and Lloyds Syndicates and is provided by International Passenger Protection Limited.

How your policy works

Your policy and policy schedule is a contract between **you** and **us**. **We** will pay for any claim **you** make which is covered by this policy and happens during the **period of insurance**. Unless specifically mentioned, the benefits and exclusions within each section apply to each **person insured**.

Certain words have a special meaning as shown under the heading 'Definition of words'. These words have been highlighted by the use of bold print throughout the policy document.

Telling us about relevant facts

Before **you** travel **you** must tell **us** about anything that may affect **your** cover. If **you** are not sure whether something is relevant, **you** must tell **us** anyway. **You** should keep a record of any extra information **you** give **us**. If **you** do not tell **us** about something that may be relevant, **your** cover may be refused and **we** may not cover any related claims.

Cancellation rights

If **your** cover does not meet **your** requirements, please notify **us** within 14 days of receiving **your** policy schedule and if requested return all **your** documents for a refund of **your** premium.

You can contact Cheaptravelinsurance.com at Gemini House, Hargreaves Road, Swindon, Wiltshire SN25 5AZ, phone **08450 264 264**.

If during this 14 day period **you** have travelled, made a claim or intend to make a claim then **we** can recover all costs that **you** have used for those services.

Please note that **your** cancellation rights are no longer valid after this initial 14 day period.

Policy excess

Under some sections of **your** policy, **you** will have to pay an **excess**. This means that **you** will be responsible for paying the first part of the claim for each **person insured**, for each section, for each incident. The amount **you** have to pay is the **excess**. Where the discounted premium has been paid to double the **excess**, the amount deducted will be twice that shown in **your** summary of cover.

Important information

Data protection

Information about **your** policy may be shared between Grovelawn Insurance Services Limited, Mondial Assistance (UK) Limited and Mondial Assistance Europe NV for underwriting and administration purposes.

You should understand that the sensitive health and other information **you** provide will be used by **us**, **our** representatives (if appropriate), the **insurer**, other insurers and industry governing bodies and regulators to process **your** insurance, handle claims and prevent fraud. This may involve transferring information to other countries (some of which may have limited or no data protection laws). **We** have taken steps to ensure **your** information is held securely.

Your information will not be shared with third parties for marketing purposes. **You** have the right to access **your** personal records.

Financial Services Compensation Scheme (FSCS)

For **your** added protection, the **insurer** is covered by the FSCS. **You** may be entitled to compensation from the scheme if the **insurer** cannot meet its obligations. This depends on the type of business and the circumstances of the claim.

Insurance cover provides protection for 90% of the claim, with no upper limit.

Further information about the compensation scheme arrangements is available from the FSCS, telephone number **020 7892 7300**, or by visiting their website at **www.fscs.org.uk**.

Governing law

Unless agreed otherwise, English law will apply and all communications and documentation in relation to this policy will be in English. In the event of a dispute concerning this policy the English courts shall have exclusive jurisdiction.

Contracts (Rights of Third Parties) Act 1999

We, the **insurer** and **you** do not intend any term of this contract to be enforceable by any third party pursuant to the Contract (Rights of Third Parties) Act 1999.

Renewal of your insurance cover

If **you** have annual multi-trip cover, Cheaptravelinsurance.com will send **you** a renewal notice prior to the expiry of the **period of insurance** as shown on **your** policy schedule.

The terms of **your** cover and the premium rates may be varied by **us** at the renewal date. Cheaptravelinsurance.com will give **you** at least 21 days written notice before the renewal date should this happen.

At renewal **you** must tell **us** about relevant facts and check to see that **you** still comply with the Health declaration (see pages 13-14) as this may affect the cover provided. If **you** do not comply with the Health declaration, this may invalidate **your** insurance.

Definitions of words

When the following words and phrases appear in the policy document or policy schedule, they have the meanings given below. These words are highlighted by the use of bold print.

Accident

An unexpected event caused by something external and visible, which results in physical bodily injury, leading to total and permanent loss of sight, total and permanent loss of use of a limb or permanent disablement or death, within a year of the incident.

Appointed adviser

The solicitor or appropriately qualified person, firm or company, including **us**, who is chosen to act for **you** in **your** claim for compensation.

Area of cover

You will not be covered if **you** travel outside the area **you** have chosen as shown on **your** policy schedule.

• Area 1 - Europe

UK, Continental Europe, Mediterranean islands, the **Channel Islands**, the Isle of Man, Morocco, Algeria, Tunisia, Libya, Egypt, Israel, Turkey, Madeira, Canary Islands, the Azores, the Republic of Ireland, Iceland, Russia, Estonia, Latvia, Lithuania, Belarus, Ukraine, Moldova and Georgia.

• Area 2 - Australia and New Zealand

• Area 3 - Worldwide (excluding USA)

Worldwide, excluding United States of America, Canada and all islands in the Caribbean Sea including the Bahamas.

• Area 4 - Worldwide (including USA)

Worldwide

Business associate

Any person in **your home** country that **you** work closely with, whose absence from work means that the director of **your** business needs **you** to cancel or curtail **your journey**.

Business equipment

Computer, television, fax and phone equipment (including mobile phones, PDAs) and any other equipment which is needed to carry out **your** business duties.

Business money

Cash, cheques, postal and money orders, current postage stamps, travellers' cheques, coupons or vouchers which have a monetary value, admission tickets and travel tickets, all held for business purposes.

Business samples

Demonstration goods or samples of goods sold by **your** company.

Channel Islands

Jersey, Guernsey, Alderney, Sark and Herm.

Couple

For annual multi-trip cover, two adults who have been permanently living together at the same address for more than six months and who will be travelling together. Each adult may travel independently.

Departure point

The airport, international train station or port where **your** outward journey to **your** destination begins, and where **your** final journey back **home** begins (including any connecting transport **you** take later).

Doctor

A legally qualified doctor holding the necessary certification in the country in which they are currently practising, other than **you** or a **relative**.

End supplier

A scheduled airline, ferry, cruise, coach or rail company, caravan, mobile home, campsite or car rental company, hotel, villa, cottage or similar accommodation owner, excursion or safari operator or theme park.

Excess

The deduction **we** will make from the amount otherwise payable under this policy for each **person insured**, for each section, for each claim incident. If the discounted premium has been paid to double the excess, the amount deducted will be doubled from that shown in the summary of cover table.

Family

Two adults and all of their children (including foster children) aged 17 and under if in full time education. All persons must live at the same address. Each adult can travel independently, however, all insured children must travel with at least one of the insured adults.

Golf equipment

Golf clubs, golf bag, golf trolley and golf shoes.

Home

Your usual place of residence in the **UK**, the **Channel Islands** or the Isle of Man.

Insurer

- For sections 1-12 and 14-16
Mondial Assistance Europe NV
- For section 13
A consortium of Association of British Insurers member companies and Lloyds Syndicates and is provided by International Passenger Protection Limited.

Journey

A trip that takes place during the **period of insurance** which begins when **you** leave **home** and ends when **you** get back **home** or to a hospital or nursing home in **your home** country, whichever is earlier.

- For single trip cover
 - **you** will only be covered if **you** are aged 80 or under at the date **your** policy was issued.
 - any other trip which begins after **you** get back is not covered.
 - a trip which is booked to last longer than 91 days (17 days if **you** are aged between 76 and 80 at the date **your** policy was issued) is not covered.
- For annual multi-trip cover
 - **you** will only be covered if **you** are aged 75 or under at the start date of **your** policy for area 1 (65 and under for all other areas).
 - a trip which is booked to last longer than 31 days is not covered.
 - trips within **your home** country must be for at least 2 nights and have:
 - i pre-booked transport or accommodation; or
 - ii be more than 25 miles from **your home** (unless it involves a sea crossing).
 - **you** will be covered for taking part in **winter sports** activities for up to 17 days in total during the **period of insurance** when the extra premium has been paid for this cover.
- For backpacker cover
 - **you** will only be covered if **you** are aged 39 or under at the date **your** policy was issued.
 - any other trip which begins after **you** get back is not covered.
 - a trip which is booked to last longer than 547 days is not covered.

Legal action

Work carried out to support a claim that **we** have agreed to. This includes settlement negotiations, hearings in a civil court, arbitration and any appeals resulting from such hearings other than an application by **you**:

- to the European Court of Justice, European Court of Human Rights or similar International body; or
- to enforce a judgment or legally binding decision.

Legal costs

Fees, costs and expenses (including Value Added Tax or equivalent local goods and services tax) which **we** agree to pay for **you** in connection with **legal action**. Also, any costs which **you** are ordered to pay by a court or arbitrator (other than damages, fines and penalties) or any other costs **we** agree to pay.

Pair or set

A number of items of **personal possessions** (not including **ski equipment**) that belong together or can be used together.

Period of Insurance

- For single trip cover
Cancellation cover (when the premium has been paid for this cover) begins from the issue date shown on **your** policy schedule and ends at the beginning of **your journey**. The cover for all other sections starts at the beginning of **your journey** and finishes at the end of **your journey**.
- For annual multi-trip cover
Cancellation cover (when the premium has been paid for this cover) begins on the start date shown on **your** policy schedule or the date **you** booked **your journey**, whichever is the later and ends at the beginning of **your journey**. The cover for all other sections starts at the beginning of **your journey** and finishes at the end of **your journey**.
- For single trip and annual multi-trip cover
All cover ends on the expiry date shown on **your** policy schedule, unless **you** cannot finish **your journey** as planned because of death, injury or illness or there is a delay to the public transport system that cannot be avoided. In these circumstances **we** will extend cover free of charge until **you** can reasonably finish that **journey**.

Personal money

Cash, cheques, postal and money orders, current postage stamps, travellers' cheques, coupons or vouchers which have a monetary value, admission tickets and travel tickets, all held for private and not business purposes.

Personal possessions

Each of **your** suitcases, trunks and similar containers (including their contents) and articles worn or carried by **you** (including **your valuables**).

Redundancy

Loss of permanent paid employment (except voluntary redundancy), after a continuous working period of two years with the same employer if **you** are aged 18 and over or 65 and under.

Relative

Your mother (in-law), father (in-law), step parent (in-law), sister (in-law), brother (in-law), wife, husband, son (in-law), daughter (in-law), step child, foster child, grandparent, grandchild, uncle, aunt, nephew, niece, cousin, partner (including common law and civil partnerships) or fiancé(e).

Resident

A person who has their main **home** in the **UK**, the **Channel Islands** or the Isle of Man and has not spent more than six months abroad during the year before the policy was issued.

Single parent family

One adult and all of their children (including foster children) aged 17 and under if in full time education. All persons must live at the same address. The adult can travel independently, however, all insured children must travel with the insured adult.

Ski equipment

This consists of skis, poles, boots, bindings, snowboards or ice skates.

Ski pack

Hired **ski equipment**, ski school fees and lift passes.

Travelling companion

Any person that has booked to travel with **you** on **your journey**.

United Kingdom (UK)

England, Scotland, Wales, and Northern Ireland.

Valuables

Jewellery, watches, items made of or containing precious metals or semi/precious stones, furs, binoculars, telescopes, computer games, any kind of photographic, audio, video, computer, television, fax and phone equipment (including mobile phones), MP3 players, PDAs, electronic games, TVs and CDs, mini discs, DVDs, cartridges, video and audio tapes.

We, our, us

Mondial Assistance (UK) Limited which administers the insurance on behalf of the **insurer**.

You, your, person insured

Each person shown on the policy schedule, for whom the appropriate insurance premium has been paid.

24-hour emergency medical assistance

Please tell **us** immediately about any serious illness or accident abroad where **you** have to go into hospital or **you** may have to return **home** early or extend **your** stay because of any illness or injury. If **you** are unable to do this because the condition is life, limb, sight or organ threatening, **you** should contact **us** as soon as **you** can. **You** must also tell **us** if **your** medical expenses are over **£250**. If **you** are claiming for a minor illness or accident **you** should, where possible, pay the costs and reclaim the money from **us** when **you** return. **You** can call 24 hours a day 365 days a year or email.

From outside **your home** country phone **+44 20 8666 9221**
Fax **+44 20 8603 0204** textphone **+44 20 8666 9562**

From within **your home** country phone **020 8666 9221**
Fax **020 8603 0204** textphone **020 8666 9562**

email **international_dept@mondial-assistance.co.uk**

Please give **us your** age and **your** policy number. Say that **you** are insured with Cheaptravelinsurance.com travel insurance.

Below are some of the ways the 24-hour emergency medical assistance service can help.

Confirmation of payment

We will contact hospitals or **doctors** abroad and guarantee to pay their fees, providing **you** have a valid claim.

Repatriation

If **our** medical advisers think it would be in **your** medical interests to bring **you** back to **your home** or to a hospital or nursing home in **your home** country, **you** will normally be transferred by regular airline or road ambulance. Where medically necessary in very serious or urgent cases, **we** will use an air ambulance. **We** will consult the treating **doctor** and **our** medical advisers first. If **you** need to go home early, the treating **doctor** must provide a certificate confirming that **you** are fit to travel. Without this the airline can refuse to carry any sick or injured person.

You can contact **us** at any time, day or night. **You** will be answered by one of **our** experienced assistance co-ordinators who **you** should give all relevant information to. Please make sure **you** have details of **your** policy before **you** phone.

24-hour personal assistance

We will help (where possible) to give **you** all the emergency contact numbers **you** need to report lost or stolen items while you are on your journey. This includes

- contact numbers of the bank or building society that **you** have your debit or credit card with;
- contact numbers for **your** mobile phone network provider;
- contact numbers for International directory enquiries;
- contact numbers to arrange an emergency fund transfer from a friend or family member;
- details of who to contact to arrange an emergency passport;
- basic assistance on availability of local medical services, if **your** holiday representative cannot help.

From outside **your home** country Phone: +44 20 8666 9221
Textphone: +44 20 8666 9562, Fax: +44 20 8603 0204

From within **your home** country Phone: 020 8666 9221
Textphone: 020 8666 9562, Fax: 020 8603 0204

email: international_dept@mondial-assistance.co.uk

We are open 24 hours a day, 365 days a year.

Please give **us your** policy number. Say that **you** are insured with Cheaptravelinsurance.com travel insurance.

Reciprocal health arrangements

European Health Insurance Card (EHIC) - the replacement for the E111

- The EHIC entitles **you** to reduced-cost, sometimes free, medical treatment that becomes necessary while **you** are in a European Economic Area (EEA) country or Switzerland. The EEA consists of the European Union (EU) countries plus Iceland, Liechtenstein and Norway.
- The card gives access to state-provided medical treatment only. Remember, this might not cover all the things **you** would expect to get free of charge from the NHS in the **UK**. **You** may have to make a contribution to the cost of **your** care.
- **You** may apply for an EHIC online at www.dh.gov.uk/travellers or by calling **0845 606 2030**. Application forms are also available from the Post Office.

Australia

- If **you** are travelling to Australia **you** can enrol in Medicare which will entitle **you** to subsidised hospital treatments and medicines. **You** can do this by contacting a local Medicare office in Australia.
- All claims for refunds under the Medicare scheme must be made before **you** leave Australia. For more information on Medicare visit: www.medicareaustralia.gov.au or email: medicare@medicareaustralia.gov.au.

If **you** make use of these arrangements or any other worldwide reciprocal health arrangement which reduces **your** medical expenses, **you** will not have to pay an **excess**.

Health declaration and health exclusions

If **you** need to make a claim arising from a medical condition that has not been declared and accepted by **us**, it is unlikely that your claim will be paid.

These apply to 'Cancellation or curtailment charges - Section 1' and 'Emergency medical and associated expenses - Section 2'.

It is very important that you read and understand the following and declare any existing medical conditions to us.

- 1 You** will not be covered for any directly or indirectly related claims arising from the following if at the time of taking out this insurance **you**:
 - a** have been prescribed any medication, received any treatment or had a consultation with a **doctor** or hospital specialist in the past 12 months for any medical condition;
 - b** have ever been diagnosed with or treated for any of the following, before **you** bought **your** policy:
 - any cardiovascular problems for example, heart attack, angina, chest pain or palpitations;
 - any other heart condition;
 - hypertension (raised blood pressure);
 - blood clots;
 - raised cholesterol; or
 - any cerebrovascular problems for example stroke, transient ischaemic attack (TIA) or brain haemorrhage.
 - c** are awaiting treatment for any medical condition or the results of any medical tests or investigations.

Unless

You have declared any existing medical conditions to **us** and **we** have accepted cover.

You should contact **us** as soon as possible after booking **your journey** at www.mondialhealthscreen.co.uk phone **0845 618 0344** to declare a medical condition (or conditions). For annual multi-trip cover, **you** should also contact **us** if **you** develop a medical condition after **your** policy was issued or if **your** existing medical condition changes after **your** policy was issued.

This confidential service will be able to confirm if cover can be provided for **your** medical conditions.

If necessary, **we** may need **you** to get extra medical information (at **your** cost) from **your doctor** to see if cover applies. Based on **our** assessment of the medical information supplied, **we** will decide if cover can be offered, if further terms need to be applied or if cover is offered subject to payment of an additional premium.

If an additional premium is required, cover will not start until full payment has been received by **us** and written confirmation given by **us**.

If **we** are unable to cover the medical condition (or conditions), this will mean that **you** and any other person insured by **us** will not be covered for any directly or indirectly related claims arising from the medical condition (or conditions). This may even apply if the person with the medical condition (or conditions) purchases cover from another provider.

Each **person insured** by **us** would still be covered for any unrelated medical condition (or conditions) and other sections of cover subject to the terms and conditions of this policy.

2 You must be healthy, fit to travel and able to undertake **your** planned **journey**.

3 You will not be covered if **you** travel against the advice of a **doctor** or where **you** would have been if **you** had sought their advice before beginning **your journey**.

- 4 **You** will not be covered if **you** know **you** will need medical treatment or consultation at any medical facility during **your journey**.
- 5 **You** will not be covered if **you** had any undiagnosed symptoms for which **you** were awaiting investigations or consultations or the results of investigations and where the underlying cause had not been established.
- 6 **You** will not be covered if **you** are travelling specifically for the purpose of obtaining and / or receiving any elective surgery, procedure or hospital treatment.

Note

This is not a private medical insurance policy and only gives cover for emergency medical treatment in the event of accident or unexpected illness occurring during **your journey**.

General exclusions

The following exclusions apply to the whole of **your** policy:

We will not cover **you** for any claim arising from, or relating to, the following:

- 1 A relevant fact that **you** knew about before **you** travelled, unless **we** agreed to it in writing.
- 2 War, invasion, act of foreign enemy, hostilities (whether war is declared or not) civil war, civil commotion, rebellion, revolution, insurrection, military force, coup d'etat, terrorism, weapons of mass destruction.
- 3 Any epidemic or pandemic.
- 4 **You** not following any advice or recommendation made by the Foreign and Commonwealth Office, World Health Organisation or any government or other official authority. This includes where certain vaccinations or other preventative measures (such as malaria tablets) are recommended.
- 5 **Your** property being held, taken, destroyed or damaged under the order of any government or customs officials.
- 6 Ionising radiation or radioactive contamination from nuclear fuel or nuclear waste or any risk from nuclear equipment.
- 7 Any currency exchange rate changes.
- 8 The failure or fear of failure or inability of any equipment or any computer program, whether or not **you** own it, to recognise or to correctly interpret or process any date as the true or correct date, or to continue to function correctly beyond that date (except under the Emergency medical and associated expenses and Personal accident sections).
- 9 **You** acting in an illegal or malicious way.
- 10 **You** not enjoying **your journey** or not wanting to travel.
- 11 Any loss caused as a direct or indirect result of anything **you** are claiming for, for example loss of earnings, unless it says differently in the policy.
- 12 **You** taking part in a sports or leisure activity that is not listed or confirmed in writing as covered (see pages 16-17).
- 13 **You** taking part in a winter sport unless **you** have paid the extra premium to include this cover and the activity is listed or confirmed in writing as covered (see pages 16-17).

Conditions

The following conditions apply to the whole of **your** policy. Please read these carefully as **we** can only pay **your** claim if **you** meet these:

- 1 **You** are a **resident** of the **UK**, the **Channel Islands** or the **Isle of Man**.
- 2 **You** take reasonable care to protect yourself and **your** property against accident, injury, loss and damage and act as if **you** are not insured and to minimise any potential claim.
- 3 **You** have a valid policy schedule.
- 4 **You** accept that **we** will not extend the **period of insurance**:
 - for single trip cover if the original policy plus any extensions have either ended, been in force for longer than 91 days (17 days if **you** are aged between 76 and 80 at the date **your** policy was issued) or **you** know **you** will be making a claim.
 - for annual multi-trip cover beyond the expiry of **your** policy.
 - for backpacker cover if the original policy plus any extensions have either ended, been in force for longer than 547 days or **you** know **you** will be making a claim.
- 5 **You** contact **us** as soon as possible with full details of anything which may result in a claim and give **us** all the information **we** ask for. Please see section 'Making a claim' on pages 18-20 for more information.
- 6 **You** accept that no alterations to the terms and conditions of the policy apply, unless **we** confirm them in writing to **you**.
- 7 **You** are not aged:
 - 81 or over at the date **your** policy was issued for single trip cover.
 - 76 or over at the start date of **your** policy for annual multi-trip cover for area 1 (66 and over for all other areas).
 - 40 or over at the start date of **your** policy for backpacker cover.
- 8 Take over and deal with, in **your** name, any claim **you** make under this policy.
- 9 Take legal action in **your** name (but at our expense) and ask **you** to give **us** details and fill in any forms (including Department for Work and Pensions forms), which will help **us** to recover any payment **we** have made under this policy.
- 10 With **you** or **your** Personal Representative's permission, get information from **your** medical records to help **us** or **our** representatives deal with any claim. This could include a request for **you** to be medically examined or for a post mortem to be carried out in the event of **your** death. **We** will not give personal information about **you** to any other organisation without **your** specific agreement.
- 11 Send **you home** at any time during **your journey** if **you** are taken ill or injured. **We** will only do this if the **doctor** treating **you** and **our** medical advisers agree. If there is a dispute, **we** will ask for an independent medical opinion.
- 12 Not accept liability for costs incurred for repatriation or treatment if **you** refuse to follow advice from the treating **doctor** and **our** medical advisers.
- 13 Only refund or transfer **your** premium if **you** decide that the policy does not meet **your** needs and **you** have contacted **us** within 14 days from the date **you** receive **your** policy and policy schedule. **We** can recover all costs that **you** have used if **you** have travelled or made a claim or intend to make a claim.
- 14 Not to pay any claim on this policy (except under the Personal accident section) for any amounts covered by another insurance. In these circumstances **we** will only pay **our** share of the claim.
- 15 If **you** cancel or cut short **your journey**:
 - All cover provided on **your** single trip or backpacker policy will be cancelled without refunding **your** premium.
 - All cover provided on **your** annual multi-trip policy for that **journey** will be cancelled without refunding **your** premium.
- 16 Ask **you** to pay **us** back any amounts that **we** have paid to **you** which are not covered by this policy.

We have the right to do the following

- 1 Cancel the policy if **you** do not tell **us** about a relevant fact or if **you** tell **us** something that is not true, which influences **our** decision as to whether cover can be offered or not.
- 2 Cancel the policy and make no payment if **you** make a fraudulent claim. **We** may in these instances report the matter to the police.
- 3 Only cover **you** for the whole of **your journey** and not issue a policy if **you** have started **your journey**.

Sports and leisure activities

Standard sports and leisure activities

- **The following activities are covered at no extra premium.**
Abseiling, archery, athletics, ballooning - hot air (organised pleasure rides only), banana boating, bungee jumping, canoeing (up to grade 2 rivers only not white water), climbing wall, cricket, deep sea fishing, football or soccer (children's club in resort only), glacier walking, golf, high rope activities, hiking (trekking and walking), hockey (under 16s using plastic sticks), horse riding (not competitions, racing, jumping, hunting, eventing, polo or rodeo), ice skating or blade skating (not speed skating), kayaking (up to grade 2 rivers only, not white water), mountain biking, parascending or parasailing (over water), pony trekking, rap jumping, ringos, roller skating or roller blading (wearing pads and helmets), rowing, sail boarding or windsurfing, safari trekking in a vehicle (organised tour), safari trekking on foot (organised tour), scuba diving to 30m (if **you** hold a certificate of proficiency or are diving with a qualified instructor), sledging (pulled by dogs or horses or reindeer as a passenger), snorkelling, surfing, tug of war, volley ball, wake-boarding, water polo, water-skiing, white water rafting (up to grade 3 river), windsurfing or sail boarding, zip-trekking (including over snow), zorbing.
- **The following activities are also covered however, cover under 'Section 10 - Personal liability' does not apply.**
Camel riding, catamaran sailing (if qualified), clay pigeon shooting, dinghy sailing, elephant riding, go karting, jet boating, jet skiing, paint balling (wearing eye protection), quad biking, rifle range shooting, sailing (if qualified and in territorial waters only), shooting, ski dooing, small bore target shooting, snow mobiling, yachting (if qualified in territorial waters only).

'Category A' sports and leisure activities

- **The following activities are only covered when the extra premium has been paid for Category A activities.**
Dry slope skiing, football or soccer (other than children's club in resort), hockey, kite surfing, sand dune surfing or skiing, street hockey (wearing pads and helmets).
- **The following activities are also covered when the extra premium has been paid for Category A activities however, cover under 'Section 10 - Personal liability' does not apply.**
Fencing.

'Category X' sports and leisure activities

- **Your policy does not provide any cover for the following activities.**
Base jumping, black water rafting, bouldering, boxing, canyoning, caving or pot holing, cave tubing or cave diving, flying (except passengers in licensed passenger carrying aircraft), free mountaineering, gliding (no cover for crewing or piloting), hang gliding, high diving (over 5 metres), hunting (fox or drag), hydrospeeding, martial arts, micro lighting, motor rallying or motor sport (all types on land or water), motorbike scrambling or dirt biking (and any other off road motorbiking), mountaineering (using ropes or guides), parachuting, paragliding or parapenting, paragliding, parascending or parasailing (over land), pot holing or caving, riding on a luge, river bugging, rock climbing, rodeo, shark diving (in cage), sky diving or sky surfing, water ski jumping, white water canoeing, white water sledging or hydrospeeding.

There is also no cover for:
 - taking part in a sporting activity where the organisers' guidelines have not been followed;
 - any professional sporting activity;
 - any kind of racing, except racing on foot; or
 - any kind of manual work.

We may be able to cover **you** for other activities that are not listed. Please contact Grovelawn Insurance Services Limited on phone **08450 264 264** textphone **020 8666 9562**. **You** may need to pay an extra premium.

Standard winter sports activities

- **If you have chosen to include winter sports cover and this is shown on your booking confirmation, the following activities are automatically covered.**
Skiing (including on dry slopes and indoor ski centres), snowboarding, big-foot skiing, cross-country skiing, glacier skiing, monoskiing, off-piste skiing or snowboarding (as long as you are skiing within the ski area boundaries of a recognised ski resort and following ski patrol guidelines), sledging, snow blading, snow tubing, and tobogganing.

'Category B' winter sports activities

- **The following activities are only covered if you have chosen to include winter sports cover and when the extra premium has been paid for Category B winter sports activities.**
Bobsleighting, heli-skiing and ice hockey.

'Category X' winter sports activities

- **Your policy does not provide any cover for the following activities.**
Cat-skiing, skeleton sledging, ski acrobatics, ski-flying, ski jumping, ski racing, ski stunting or snowcat skiing, or riding on a luge.

There is also no cover for:
 - taking part in a winter sports activity where the organisers' guidelines have not been followed;
 - any professional winter sports activity; or
 - any kind of racing.

We may be able to cover **you** for other activities that are not listed. Please contact Grovelawn Insurance Services Limited on phone **08450 264 264** textphone **020 8666 9562**. **You** may need to pay an extra premium.

Making a claim

For sections 1-12 and 14-16

To claim, please visit the website www.mondialtravelclaims.com. This will lead **you** to **our** online claims notification service where claim forms can be obtained immediately via email or by downloading directly from the site.

Alternatively, please phone **020 8603 9958**, textphone **020 8666 9562** (8am-6pm Monday to Friday and 9am-12 noon Saturday) and ask for a claim form or write to: Mondial Assistance travel insurance claims department, PO Box 1900, Croydon, CR90 9BA or email travel_claims@mondial-assistance.co.uk.

For section 13

To claim, either visit the IPP website at www.ipplondon.co.uk and download a claim form and post this within 14 days to: IPP Claims Office, IPP House, 22-26 Station Road, West Wickham, Kent BR4 0PR United Kingdom or

Write to: IPP Claims Office, IPP House, 22-26 Station Road, West Wickham, Kent BR4 0PR United Kingdom
Phone **+44 20 8776 3752** Fax **+44 20 8776 3751**

Email info@ipplondon.co.uk Website www.ipplondon.co.uk

IPP will only accept claims submitted up to six months after the failure. Any claims submitted after the six-months period will NOT be processed.

You should fill in the form and send it to **us** as soon as possible with all the information and documents **we** ask for. It is essential that **you** provide **us** with as much detail as possible to enable **us** to handle **your** claim quickly. Please keep photocopies of all information **you** send **us**.

You will need to obtain some information about **your** claim while **you** are away. Below is a list of the documents **we** will need in order to deal with **your** claim.

For all claims

- **Your** original **journey** booking invoice(s) and travel documents showing the dates and times of travel.
- Original receipts and accounts for all out-of-pocket expenses **you** have to pay.
- Original bills or invoices **you** are asked to pay.
- Details of any other insurance **you** may have that may cover the same loss, such as household or private medical.
- As much evidence as possible to support **your** claim.

Cancellation or curtailment

- If **you** need to curtail **your journey** call within **your home** country **020 8666 9221**, Textphone **020 8666 9562**, outside **your home** country **+44 20 8666 9221**, Textphone **+44 20 8666 9562** immediately to get **our** prior agreement.
- Original cancellation invoice(s) detailing all cancellation charges incurred.
- For claims relating to illness or injury a medical certificate will need to be completed by the treating **doctor**. A certified copy of the death certificate is required in the event of death.
- If **your** claim results from any other circumstances, please provide evidence of these circumstances.

Medical expenses

- Always contact **our** 24-hour emergency medical service when **you** are hospitalised, require repatriation or where medical fees are likely to exceed **£250**.
- Medical evidence from the treating **doctor** to confirm the illness or injury and treatment given including hospital admission and discharge dates, if this applies.
- If **you** are advised by a **doctor** at **your** resort that **you** cannot go on **your** pre-booked excursions because of medical reasons, **you** should obtain a medical certificate from them confirming this.

If your passport is lost, stolen or destroyed

- Written confirmation from the Consulate where the loss happened detailing the date of loss, notification of loss and replacement together with a written report from the police.

Personal possessions and Personal money

- Report the theft, damage or loss to the police within 24 hours of discovery and ask them for a written police report.

- If appropriate, **you** should also report the theft, damage or loss to **your** courier or hotel / apartment manager and ask for a written report.
- Original receipts, vouchers or other suitable evidence of purchase / ownership / value for lost, stolen or damaged **personal possessions**.
- Confirmation, such as foreign exchange receipts and withdrawal slips, from **your** bank or bureau de change for issuing foreign currency, or suitable evidence for Sterling.
- Keep any damaged items as **we** may need to inspect them. If **we** make a payment, or **we** replace an item, the item will then belong to **us**.
- Obtain an estimate for repair for all damaged items.

For loss or damage in transit claims, including delayed possessions

- Please obtain a Property Irregularity Report (PIR) from the airline or a carrier's report from the rail company, shipping line or their handling agent. This should be done within 7 days of the delay / loss / damage. **You** have 21 days to write to the airline confirming details of essential replacement items purchased.

Personal accident

- Detailed account of the circumstances surrounding the event, including photographs and video evidence (if this applies).
- Medical evidence from the treating **doctor** to confirm the extent of the injury and treatment given including, hospital admission / discharge.
- Full details of any witnesses, providing written statements where available.
- A certified copy of the death certificate if this applies.

Missed departure

- Detailed account of the circumstances causing **you** to miss **your** departure together with supporting evidence from the public transport provider or accident / breakdown authority attending the private vehicle **you** were travelling in.

Delayed departure

- Written confirmation from the airline, rail company, shipping line or their handling agent of the scheduled and actual departure times and why the departure was delayed.

Personal liability

- A detailed account of the circumstances surrounding the claim, including photographs and video evidence (if this applies).
- Any writ, summons or other correspondence received from any third party. Please note that **you** should not admit liability, offer to make any payment or correspond with any third party without **our** written consent.
- Full details of any witnesses, providing written statements where available.

Legal expenses

- Detailed account of the circumstances surrounding the event, including photographs and video evidence (if this applies) within 90 days of the event causing **your** claim.
- Any writ, summons or other correspondence received from any third party. Please note that **you** should not reply to any correspondence from a third party without **our** written consent.
- Full details of any witnesses, providing written statements where available.

End Supplier Failure

- Contact the IPP Claims Office within 14 days, using any of the methods shown above.

Winter sports

Ski pack

- Medical evidence from the treating **doctor** to confirm the illness or injury and treatment given including hospital admission / discharge if this applies.
- If **you** are advised by a **doctor** at **your** resort that **you** cannot take part in **your** pre-booked ski activities because of medical reasons, **you** should obtain a medical certificate from them confirming this.

Ski equipment

- All appropriate evidence requested under the heading 'Personal possessions and Personal money' in this section.
- All hire receipts and luggage labels / tags.
- A written report from **your** airline or other carrier if **your ski equipment** is delayed or misdirected.

Piste closure

- Written confirmation from **your** tour operator, the local piste authority or ski lift operator confirming the reason for the closure and duration.

Golf cover

Delayed golf equipment

- Please obtain a Property Irregularity Report (PIR) from the airline or a carrier's report from the rail company, shipping line or their handling agent. This should be done within 7 days of the delay / loss / damage. **You** have 21 days to write to the airline confirming details of essential replacement items purchased.

Loss, theft or damage to golf equipment

- All appropriate evidence requested under the heading 'Personal possessions and Personal money' in this section.

Loss of green fees

- Medical evidence from the treating **doctor** to confirm the illness or injury and treatment given including hospital admission / discharge if this applies.
- If **you** are advised by a **doctor** at **your** resort that **you** should not play golf because of medical reasons, **you** should obtain a medical certificate from them confirming this.

Business cover

Business equipment and business samples

- Report the theft, damage or loss to the police within 24 hours of discovery and ask them for a written police report.
- If appropriate, **you** should also report the theft, damage or loss to **your** courier or hotel / apartment manager and ask for a written report.
- Original receipts, vouchers or other suitable evidence of purchase / ownership / value for lost, stolen or damaged **business equipment** and **business samples**.
- Keep any damaged items as **we** may need to inspect them. If **we** make a payment, or **we** replace an item, the item will then belong to **us**.
- Obtain an estimate for repair for all damaged items.

Making a complaint

We aim to provide **you** with a first class policy and service. However, there may be times when **you** feel **we** have not done so. If this is the case, please tell **us** about it so that **we** can do **our** best to solve the problem. If **you** make a complaint **your** legal rights will not be affected.

- **For sections 1-12 and 14-16**

In the first instance, please contact:

The Quality Standards Manager, Mondial Assistance (UK) Limited, Mondial House, 102 George Street, Croydon, CR9 1AJ Telephone: **020 8603 9853**

Please supply **us** with **your** name, address, policy number and claim number where applicable and enclose copies of relevant correspondence as this will help **us** to deal with **your** complaint, in the shortest possible time.

- **For section 13**

In the first instance, please contact The Claims Manager, IPP Claims Office, IPP House, 22-26 Station Road, West Wickham, Kent BR4 0PR United Kingdom.

If **you** are not satisfied with **our** final response **you** can refer the matter to the UK Financial Ombudsman Service.

Cancellation or curtailment charges - Section 1

If **you** think **you** may have to cut **your journey** short (curtail), **we** must be told immediately - see under the heading '24-hour emergency medical assistance' on page 13-14 for more information. **Your** policy schedule will show if this section is excluded.

WHAT YOU ARE COVERED FOR

We will pay up to the amount shown in **your** summary of cover in total, for **your** part of unused personal accommodation, transport charges and other travel expenses which have been paid or where there is a contract to pay that cannot be recovered from anywhere else.

We will provide this cover in the following necessary and unavoidable circumstances:

Cancellation

If **you** cancel **your journey** before it begins because one of the following happens:

- The death, serious injury or serious illness of **you**, someone **you** were going to stay with, a **travelling companion**, or a **relative** or **business associate** of **you** or a **travelling companion**.
- **You** or a **travelling companion** is called for jury service in **your home** country or as a witness in a court in **your home** country.
- **You** or a **travelling companion** is needed by the police following a burglary, or damage caused by serious fire, storm, flood, explosion, subsidence, vandalism, fallen trees, impact by aircraft or vehicle at **your home** or their home or usual place of business in **your home** country.
- **Your redundancy**.

Curtailment

You cut **your journey** short (curtail) after it has begun because of one of the following:

- Anything mentioned in **Cancellation** except **redundancy**.
- **You** are injured or ill and are in hospital for the rest of **your** journey.

WHAT YOU ARE NOT COVERED FOR

Under Cancellation and Curtailment

An **excess** of the amount shown in **your** summary of cover.

Any condition stated under Health declaration and health exclusions on pages 13-14.

More than the minimum market value of equivalent travel tickets, if **your** travel tickets have been paid for using an airline mileage reward scheme.

Anything caused by:

- **you** not having the correct passport or visa;
- **your** carriers' refusal to allow **you** to travel for whatever reason;
- any restriction caused by the law of any country or people enforcing these laws;
- bankruptcy or liquidation of the company providing **your** transport or accommodation, their agents or any person acting for **you**;
- anything the company providing **your** transport or accommodation, their agents, any person acting for **you** or **your** conference organiser is responsible for;
- **your** vehicle being stolen or breaking down;
- **you** not wanting to travel or not enjoying **your journey**;
- riot, civil commotion, strike or lock-out;
- **you** travelling in an aircraft (except as a passenger in a fully-licensed, passenger-carrying aircraft);
- **your** suicide, self-injury or deliberately putting yourself at risk (unless **you** were trying to save another person's life);
- **you** being under the influence of drugs (except those prescribed by a **doctor** but not for the treatment of drug addiction);
- the direct or indirect effect of **you** using alcohol or solvents;
- the death of any pet or animal.

Under Cancellation

Any extra cancellation charges, because **you** did not tell the company providing **your** transport or accommodation, their agents or any person acting for **you**, as soon as **you** knew **you** had to cancel. Financial circumstances or unemployment, except caused by **redundancy** which **you** find out about after the date **your** policy or travel tickets for **your journey** were bought (whichever is the later).

WHAT YOU ARE COVERED FOR

Note

We will calculate curtailment claims from the date it is necessary for **you** to return to **your home** country or the date **you** are hospitalised as an in-patient, for the rest of **your** journey. **We** will pay unused personal accommodation and other travel expenses based on each 24-hour period **you** have lost. If **you** need to be repatriated, **we** will not refund the cost of **your** unused return travel tickets. **We** will put the value of these tickets towards the extra transport costs **we** have to pay.

WHAT YOU ARE NOT COVERED FOR

Under Curtailment

Cutting short **your journey** unless **we** have agreed.

Any costs when **you** do not get a medical certificate (from the **doctor** who treated **you** in the place where **you** were staying) which says it was necessary for **you** to come **home** because of death, injury or illness. **Our** medical advisers must have agreed with the reason and that **you** were fit to travel.

The cost of **your** original pre-booked tickets if **you** have not used them and **we** have paid extra transport costs.

You travelling on a motorcycle, unless the rider holds an appropriate valid licence and all **persons insured** are wearing crash helmets.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Emergency medical and associated expenses - Section 2

If **you** are taken into hospital or **you** think **you** may have to come **home** early or extend **your journey** because of illness, injury or accident, or if **your** medical expenses are over **£250** **we** must be told immediately - see under the heading '24-hour emergency medical assistance' on page 11 for more information.

WHAT YOU ARE COVERED FOR

We will pay **you** or **your** Personal Representatives for the following necessary and unforeseen emergency expenses if **you** die, are injured, have an accident or are taken ill during **your journey**.

Cover outside your home country

Up to the amount shown in **your** summary of cover for reasonable fees or charges **you** incur for:

- **Treatment**
Medical, surgical, medication costs, hospital, nursing home or nursing services.
- **Transport and accommodation**
Reasonable extra transport and accommodation costs for **you** and any one other person who stays or travels with **you** or to **you** from **your home** country on medical advice. This includes **your** repatriation to **your home** country if medically necessary.
- **Funeral expenses**
The reasonable cost of transporting **your** body or ashes to **your home** or **we** will pay up to the amount shown in **your** summary of cover for **your** funeral expenses, in the place where **you** die outside **your home** country.
- **Search and rescue**
Mountain search and rescue services when deemed medically necessary.

We will also pay:

- **In-patient benefit**
The amount shown in **your** summary of cover if **you** are in hospital as an in-patient during the **journey** as well as any fees or charges paid under **Treatment**.
- **Dental**
Up to the amount shown in **your** summary of cover for emergency dental treatment to relieve sudden pain.

WHAT YOU ARE NOT COVERED FOR

Under Cover outside your home country except In-patient benefit and under Cover within your home country

An **excess** of the amount shown in **your** summary of cover, unless **your** claim is reduced because **you** used a European Health Insurance Card or any other reciprocal health arrangement (see 'Reciprocal health arrangements' on page 12 for more information). The cost of replacing any medication **you** were using when **you** began **your journey**.

Under Cover outside your home country and Cover within your home country

Any condition stated under Health declaration and health exclusions on pages 13-14. Extra transport and accommodation costs which are of a higher standard than those already used on **your journey**, unless **we** agree. Anything caused by:

- **you** travelling in an aircraft (except as a passenger in a fully-licensed, passenger-carrying aircraft);
- **your** suicide, self-injury or deliberately putting yourself at risk (unless **you** were trying to save another person's life);
- **you** being under the influence of drugs (except those prescribed by a **doctor** but not for the treatment of drug addiction);
- the direct or indirect effect of **you** using alcohol or solvents;
- **you** travelling on a motorcycle, unless the rider holds an appropriate valid licence and all **persons insured** are wearing crash helmets.

Any costs incurred 12 months after the date of **your** death, injury or illness.

Any costs for taxi fares and telephone calls (including mobile calls) resulting from an incident claimed for under this section.

WHAT YOU ARE COVERED FOR

Cover within your home country

Up to the amount shown in **your** summary of cover for:

- **Transport and accommodation**

Reasonable extra transport and accommodation costs for **you** and any one other person who stays or travels with **you** or to **you** from within **your home** country on medical advice; and the reasonable cost of transporting **you, your** ashes or body **home**.

WHAT YOU ARE NOT COVERED FOR

Under Cover outside your home country - Treatment

Services or treatments **you** receive within **your home** country.

Services or treatments **you** receive which the **doctor** in attendance and **we** think can wait until **you** get back to **your home** country.

Medical costs over **£250**, in-patient treatment or repatriation which **we** have not authorised.

The extra costs of having a single or private room in a hospital or nursing home.

The cost of all treatment which is not directly related to the illness or injury that caused the claim.

Under Cover outside your home country - Funeral expenses

Your burial or cremation within **your home** country

Under Cover outside your home country - Dental

Replacing or repairing false teeth or artificial teeth (such as crowns).

Dental work involving the use of precious metals.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Loss of passport - Section 3

WHAT YOU ARE COVERED FOR

We will pay the following if **your** passport is lost, stolen or destroyed on **your journey**.

Costs for issuing a temporary passport

Up to the amount shown in **your** summary of cover in total for the cost of extra transport, accommodation and administration costs **you** have to pay to get a temporary passport to enable **you** to return to **your home** country.

Remaining value of original passport

The equivalent cost (based on the current replacement costs) of the period remaining on **your** passport that is lost stolen or destroyed.

WHAT YOU ARE NOT COVERED FOR

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Delayed personal possessions - Section 4

WHAT YOU ARE COVERED FOR

Up to the amount shown in **your** summary of cover in total for essential replacement items, if **your personal possessions** (this does not include **valuables, ski equipment, golf equipment** or **business equipment**) are temporarily lost or stolen on **your** outward journey for more than 12 hours from when **you** arrived at **your** destination.

WHAT YOU ARE NOT COVERED FOR

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Note

You must send **us** the receipts for anything that **you** buy. If the items are permanently lost, **we** will take any amount that **you** are due to be paid under this section from the final claim settlement under Personal possessions - section 5. This will only be done when **your** policy schedule shows **you** have Personal possessions cover.

Personal possessions - Section 5

Your policy schedule will show if this section is excluded.

WHAT YOU ARE COVERED FOR

Up to the amount shown in **your** summary of cover in total for **your personal possessions** (this does not include **ski equipment, golf equipment or business equipment**) damaged, stolen, lost or destroyed on **your journey**.

We will pay up to the amount shown in **your** summary of cover for **valuables** whether jointly owned or not. There is also a single article, **pair or set** limit of up to the amount shown in **your** summary of cover.

Note

It will be **our** decision to pay either:

- the cost of repairing **your** items;
- to replace **your** belongings with equivalent items; or
- the cost of replacing **your** items. An amount for wear, tear and loss of value will be deducted.

WHAT YOU ARE NOT COVERED FOR

An **excess** of the amount shown in **your** summary of cover.

More than **£50** for tobacco, alcohol and fragrances and perfumes.

More than the part of the **pair or set** that is stolen, lost or destroyed.

Breakage of or damage to:

sports equipment while it is being used, fragile articles, audio, video, computer, television, fax and phone equipment.

Loss or damage due to the climate, wear and tear, loss in value, process of cleaning, moths or vermin.

The cost of replacing or repairing false teeth.

A claim for more than one mobile phone per **person insured**.

Loss or theft of, or damage to, the following.

- Items for which **you** are unable to provide a receipt or other proof of purchase
- Films, tapes, cassettes, computer games, electronic games, mini-discs, DVDs, video and audio tapes, cartridges or discs, unless they were pre-recorded, in which case **we** will pay up to the replacement cost.
- Goods which deteriorate, bottles or cartons, and any damage caused by these items or their contents.
- **Valuables** left in a motor vehicle.
- **Valuables** carried in suitcases, trunks or similar containers unless they are on **your** person all the time.
- **Valuables** unless they are on **your** person or locked in a safe or safety deposit box (if one is available) or locked in the accommodation **you** are using on **your journey**.
- Contact or corneal lenses, unless following fire or theft.
- Bonds, share certificates, guarantees or documents of any kind.
- **Personal possessions** unless they are on **your** person, locked in the accommodation **you** are using on **your journey** or they are out of sight in the locked boot or covered luggage area of a locked motor vehicle (no cover for **valuables**).
- **Personal money** (see section 6).
- Passport (see section 3).

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Personal money - Section 6

Your policy schedule will show if this section is excluded.

WHAT YOU ARE COVERED FOR

Up to the amount shown in **your** summary of cover for loss or theft of **your personal money** (but no more than the amount shown in **your** summary of cover for cash in total, whether jointly owned or not) while on **your journey**.

WHAT YOU ARE NOT COVERED FOR

An **excess** of the amount shown in **your** summary of cover.

Compensation unless **you** can provide receipts for the amount **you** had from the place where **you** got the currency.

Loss or theft of **personal money**, unless it is on **your** person, locked in a safe or safety deposit box (if one is available) or locked in the accommodation **you** are using on **your journey**.
Loss caused by a reduction in exchange rates or shortage caused by mistakes in exchanging currency.

Loss or theft of travellers' cheques if the place where **you** got them from provides a replacement service.

More than the minimum market value of equivalent travel tickets, if **your** travel tickets have been paid for using an airline mileage reward scheme.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Personal accident - Section 7

WHAT YOU ARE COVERED FOR

We will pay **you** or **your** Personal Representative one of the following amounts for an **accident** during **your journey**.

Death

Up to the amount shown in **your** summary of cover for death. (**We** will not pay more than **£3,000** if **you** are aged 15 and under or 66 and over at the time of the **accident**.)

Permanent loss

Up to the amount shown in **your** summary of cover for total and permanent loss of sight in one or both eyes or total and permanent loss of use of one or both hands or feet.

WHAT YOU ARE NOT COVERED FOR

Any condition stated under Health declaration and health exclusions on pages 13-14.

Any claim arising more than one year after the original **accident**.

Anything caused by:

- **your** sickness, disease or gradually occurring conditions, physical or mental condition that is gradually getting worse unless shown on **your** policy schedule;
- **you** travelling in an aircraft (except as a passenger in a fully-licensed, passenger-carrying aircraft);
- **your** suicide, self-injury or deliberately putting yourself at risk (unless **you** were trying to save another person's life);

WHAT YOU ARE COVERED FOR

Physical disablement

Up to the amount shown in **your** summary of cover for a permanent physical disability as a result of which there is no paid work which **you** are able to do. (**We** will not pay over **£1,000** if **you** are aged 66 and over at the time of the **accident**.)

Note

Death benefit payments will be made to **your** Personal Representatives.

WHAT YOU ARE NOT COVERED FOR

- **you** being under the influence of drugs (except those prescribed by a **doctor** but not for the treatment of drug addiction);
- the direct or indirect effect of **you** using alcohol or solvents;
- **you** travelling on a motorcycle, unless the rider holds an appropriate valid licence and all **persons insured** are wearing crash helmets.

We will not pay more than one of the benefits resulting from the same injury.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Missed departure - Section 8

WHAT YOU ARE COVERED FOR

We will pay **you** up to the amount shown in **your** summary of cover in total for the cost of extra accommodation and transport which **you** have to pay to get to **your journey** destination or back **home** because **you** do not get to the **departure point** by the time shown in **your** travel itinerary (plans) because:

- public transport (including scheduled flights) does not run to its timetable; or
- the vehicle **you** are travelling in has an accident or breaks down.

WHAT YOU ARE NOT COVERED FOR

Any claim unless **you**:

- get a letter from the public transport provider (if this applies) confirming that the service did not run on time
- get confirmation of the delay from the authority who went to the accident or breakdown (if this applies) affecting the vehicle **you** were travelling in
- have allowed time in **your** travel plans for delays which are expected.

Any delay caused by a riot, civil commotion, strike or industrial action which began or was announced before **your** policy or travel tickets for **your journey** were bought (whichever is later).

Failure of public transport caused by a riot, civil commotion, strike or industrial action which began or was announced before **you** left **home** or where **you** could have reasonably made other travel arrangements.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Delayed departure - Section 9

WHAT YOU ARE COVERED FOR

Compensation if the flight, international train or sea vessel **you** are booked on is delayed at its **departure point** from the time shown in **your** travel itinerary (plans) because of:

- a serious fire, storm or flood damage to the **departure point**;
- industrial action;
- bad weather;
- mechanical breakdown of the international train or sea vessel; or
- the grounding of the aircraft due to a mechanical or a structural defect.

We will pay:

Delay

The amount shown in **your** summary of cover for each full 24 hours of delay up to the amount shown in **your** summary of cover in total; or

Abandonment

Up to the amount shown in **your** summary of cover in total for **your** part of the unused costs of the **journey** which have been paid or where there is a contract to pay that cannot be recovered from anywhere else, if, after **you** have been delayed for more than 12 hours, **you** decide to abandon the **journey** before **you** leave **your home** country.

WHAT YOU ARE NOT COVERED FOR

Under Delay and Abandonment

Anything which is caused by **you** not checking in at the **departure point** when **you** should have done.

Missed connections.

Compensation unless **you** get a letter from the airline, railway company or shipping line giving the reason for the delay and showing the scheduled departure time and the actual departure time of the flight, international train or sea vessel.

Any delay caused by a riot, civil commotion, strike or industrial action which began or was announced before **your** policy or travel tickets for **your journey** were bought (whichever is later).

Under Abandonment

An **excess** of the amount shown in **your** summary of cover.

More than the minimum market value of equivalent travel tickets, if **your** travel tickets have been paid for using an airline mileage reward scheme.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Personal liability - Section 10

If **you** are hiring a motorised or mechanical vehicle while on **your journey you** must make sure that **you** get the necessary insurance from the hire company. **We** do not cover this under **our** policy.

WHAT YOU ARE COVERED FOR

We will pay up to the amount shown in **your** summary of cover plus any other costs **we** agree to in writing that relate to anything **you** cause during **your journey** for which **you** are legally liable and results in one of the following.

- Bodily injury of any person.
- Loss of or damage to property which **you** do not own and **you** or a **relative** have not hired, loaned or borrowed.
- Loss of or damage to the accommodation **you** are using on **your journey** that does not belong to **you** or a **relative**.

Note

Inform **us** as soon as **you** or **your** Personal Representatives are aware of a possible prosecution, inquest or fatal injury, which might lead to a claim under this section.

Please do not negotiate, pay, settle, admit or deny any liability to any third party, without **our** written consent.

WHAT YOU ARE NOT COVERED FOR

An **excess** of the amount shown in **your** summary of cover.

Any liability for bodily injury or loss of or damage to property that comes under any of the following categories.

- Something which is suffered by anyone employed by **you** or a **relative** and is caused by the work they are employed to do.
- Something which is caused by something **you** deliberately did or did not do.
- Something which is caused by **your** employment or employment of a **relative**.
- Something which is caused by **you** using any firearm or weapon.
- Something which is caused by any animal **you** own, look after or control.
- Something which **you** agree to take responsibility for which **you** would not otherwise have been responsible for.

Any contractual liabilities.

Any liability for bodily injury suffered by **you**, a **relative** or **travelling companion**.

Compensation or other costs caused by accidents arising from **your** ownership or possession of any of the following.

- The use of any land or building except for the accommodation **you** are using on **your journey**.
- Motorised or mechanical vehicles and any trailers attached to them.
- Aircraft, motorised watercraft or sailing vessels.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Legal expenses - Section 11

You can call **our** 24-hour legal helpline for advice on any travel related legal problem to do with **your journey**, arising under the law of England, Wales, Scotland and Northern Ireland

From within **your home** country

Phone **020 8603 9804** Textphone **020 8666 9562**

From outside **your home** country

Phone **+44 20 8603 9804** Textphone **+44 20 8666 9562**

WHAT YOU ARE COVERED FOR

If **you** die, are ill, or injured during **your journey** and **you** or **your** personal representative take **legal action** to claim damages or compensation for negligence against a third party **we** will do the following:

- Nominate an **appointed adviser** to act for **you**. If **you** and **we** cannot agree on an **appointed adviser**, the matter can be referred to an Alternative Resolution Facility.
- For each event giving rise to a claim pay up to the amount shown in **your** summary of cover for **legal action** for all **persons insured** on this policy.

Note

- **you** must conduct **your** claim in the way requested by the **appointed adviser**;
- **you** must keep **us** and the **appointed adviser** fully aware of all facts and correspondence including any claim settlement offers made to **you**;
- **we** will not be bound by any promises or undertakings which **you** give to the **appointed adviser**, or which **you** give to any person about payment of fees or expenses, without **our** consent;
- **we** can withdraw cover after **we** have agreed to the claim, if **we** think a reasonable settlement is unlikely or that the cost of the **legal action** could be more than the settlement.

WHAT YOU ARE NOT COVERED FOR

Any claim:

- not reported to **us** within 31 days after the event giving rise to the claim;
- where **we** think a reasonable settlement is unlikely or where the cost of the **legal action** could be more than the settlement;
- involving **legal action** between members of the same household, a **relative**, a **travelling companion**, or one of **your** employees;
- where another insurer or service provider has refused **your** claim or where there is a shortfall in the cover they provide;
- against a travel agent, tour operator or carrier, **us**, the **insurer**, another **person insured** by this policy or **our** agent.

Legal costs:

- for **legal action** that **we** have not agreed to;
- if **you** refuse reasonable settlement of **your** claim. **You** should use Alternative Resolution Facilities such as mediation in this situation;
- if **you** withdraw from a claim without **our** agreement. If this occurs **legal costs** that **we** have been paid must be repaid to **us** and all **legal costs** will become **your** responsibility;
- that cannot be recovered by **us**, **you** or **your appointed adviser**, when **you** receive compensation. Any repayment will not be more than half of the compensation **you** receive;
- awarded as a personal penalty against **you** or the **appointed adviser** (for example not complying with Court rules and protocols);
- for bringing **legal action** in more than one country for the same event.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Hijack - Section 12

WHAT YOU ARE COVERED FOR

We will pay up to the amount shown in **your** summary of cover if **you** are hijacked during **your** journey.

End supplier failure - Section 13

This section is only in force if **you** have super cover.

WHAT YOU ARE COVERED FOR

The **insurer** will pay up to the amount shown in your summary of cover in total for costs **you** incur as a result of insolvency of your **end supplier**.

Insolvency prior to departure

Irrecoverable sums paid in advance if the **end supplier** becomes insolvent before **your** departure:
OR

Insolvency after departure

If the **end supplier** becomes insolvent after **your** departure:

- extra pro rata costs **you** have to pay to replace that part of the **end suppliers** arrangements to a similar standard to that which was originally booked; or
- if curtailment of the **journey** is unavoidable – the cost of return transport to **your home** country to a similar standard to that which was originally booked.

Note

Where possible **you** should contact **us** (see 'Making a claim' section on pages 18-20), before **you** make alternative arrangements so that **we** can agree to the costs.

WHAT YOU ARE NOT COVERED FOR

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

WHAT YOU ARE NOT COVERED FOR

End supplier arrangements that were booked outside **your home** country.

End Supplier arrangements that form part of an inclusive holiday.

The financial failure of the **end supplier** if:

- they become insolvent or if they are known to be under any threat of insolvency at the date **your** policy or travel tickets for **your** journey were bought (whichever is the later).
- they are a travel agency, booking agent, tour organiser or consolidator.
- they are bonded or insured elsewhere (even if the bond or insurance is insufficient to meet the claim).

Monies that are recoverable elsewhere or by any other means.

Any loss for which a third party is liable or which can be recovered by other legal means.

Any loss that is not directly associated with the incident that caused **you** to claim. For example, loss due to being unable to reach **your** pre-booked hotel following the financial failure of an airline.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Winter sports cover - Section 14

This section is only in force if shown on **your** policy schedule

WHAT YOU ARE COVERED FOR

Ski pack

We will pay up to the amount shown in **your** summary of cover in total for **your ski pack** costs that have been paid for and that cannot be recovered from anywhere else, if:

- **you** have to cancel or curtail **your journey**.
- **you** cannot ski because of an injury or illness during **your journey**.

Delayed ski equipment

We will pay up to the amount shown in **your** summary of cover in total for the hire of alternative **ski equipment** if **yours** is temporarily lost or stolen on **your** outward journey for more than 12 hours from when **you** arrived at **your** destination.

Ski equipment

We will pay up to the amount shown in **your** summary of cover in total for **your ski equipment** (including **ski equipment you** are legally liable for) and ski pass that is damaged, stolen, lost or destroyed on **your journey**.

There is also a single article limit of up to the amount shown in **your** summary of cover, whether jointly owned or not.

Note

It will be **our** decision to pay either:

- the cost of repairing **your** items;
- to replace **your** belongings with equivalent items; or
- the cost of replacing **your** items. An amount for wear, tear and loss of value will be deducted.

WHAT YOU ARE NOT COVERED FOR

Under Ski pack

Anything mentioned under the heading 'WHAT YOU ARE NOT COVERED FOR' within Cancellation or curtailment charges - section 1.

Anything mentioned under the heading 'WHAT YOU ARE NOT COVERED FOR' within Emergency medical and associated expenses - section 2.

Under Ski equipment

Anything mentioned under the heading 'WHAT YOU ARE NOT COVERED FOR' within Personal possessions - section 5.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

WHAT YOU ARE COVERED FOR

Piste closure

We will pay one of the following, if it is not possible for **you** to ski or snowboard at **your** pre-booked ski resort, because the ski-lifts and ski-schools that **you** are due to use are closed as a result of adverse weather conditions.

- Up to the amount shown in **your** summary of cover for the cost of extra transport or lift passes to let **you** ski or snowboard at another resort; or
- Up to the amount shown in **your** summary of cover if no other resort is available.

Avalanche closure

We will pay up to the amount shown in **your** summary of cover for extra transport and accommodation costs **you** need to pay to get **you** to **your journey** destination or back **home** because of an avalanche in **your** resort.

WHAT YOU ARE NOT COVERED FOR

Under Piste closure

Any compensation for the first full 24 hours at **your** booked ski resort.

Any **journey** in **your home** country.

Any claim unless **you** have a letter from the ski-lift or ski-school operators giving the reason for closing the piste and showing the number of days the piste was closed during **your journey**. Compensation which **you** can get from **your** tour operator or anywhere else.

Costs if the ski-lifts or ski-schools in **your** pre-booked resort were closed when **your** policy or travel tickets for **your journey** were issued, if this is less than 14 days before the beginning of **your journey**.

Any **journey** that takes place outside a recognised ski resort or the official resort opening dates.

Under Avalanche closure

Any claim unless **you** have a letter from the relevant authority or **your** tour operator's representative confirming the dates and location of the avalanche.

Compensation which **you** can get from **your** tour operator or anywhere else.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Golf cover - Section 15

This section is only in force if shown on **your** policy schedule

WHAT YOU ARE COVERED FOR

Loss of green fees

We will pay up to the amount shown in **your** summary of cover in total for **your** green fees that have been paid and that cannot be recovered from anywhere else, if:

- **You** have to cancel or curtail **your journey**.
- **You** get written advice from a **doctor** that **you** cannot play golf because of an injury or illness during **your journey**.

Delayed golf equipment

We will pay up to the amount shown in **your** summary of cover in total for the hire of alternative **golf equipment** if **yours** is temporarily lost or stolen on **your** outward journey for more than 12 hours from when **you** arrived at **your** destination.

Golf equipment

We will pay up to the amount shown in **your** summary of cover in total for **your golf equipment** that is damaged, stolen, lost or destroyed on **your journey**.

There is also a single article limit of up to the amount shown in **your** summary of cover for **your golf equipment** whether jointly owned or not.

WHAT YOU ARE NOT COVERED FOR

Under Loss of green fees

Anything mentioned under the heading 'WHAT YOU ARE NOT COVERED FOR' within Cancellation and curtailment - section 1 or Emergency medical and associated expenses - section 2.

Under Delay of golf equipment

Any claim unless you send us receipts of any items you have purchased or hired.

Under Golf equipment

Anything mentioned under the heading 'WHAT YOU ARE NOT COVERED FOR' within Personal possessions - section 5.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

Business cover - Section 16

This section is only in force if shown on **your** policy schedule

WHAT YOU ARE COVERED FOR

Delayed business equipment

We will pay up to the amount shown in **your** summary of cover in total for the hire of alternative **business equipment** if **you** is temporarily lost or stolen on **your** outward journey for more than 24 hours from when **you** arrived at **your** destination.

Business equipment

We will pay up to the amount shown in **your** summary of cover in total for **your business equipment** that is damaged, stolen, lost or destroyed on **your journey**.

We will also pay up to the amount shown in **your** summary of cover for the emergency courier costs to send alternative **business equipment** which is essential for **you** to continue with **your** original business itinerary.

There is also a single article limit, whether jointly owned or not, a limit for **computer equipment** and a limit for **business samples** of the amount shown in **your** summary of cover.

Note

It will be **our** decision to pay either:

- the cost of repairing **your** items;
- to replace **your** belongings with equivalent items; or
- the cost of replacing **your** items. An amount for wear, tear and loss of value will be deducted.

Business money

- We will pay up to the amount shown in **your** summary of cover for loss or theft of **your business money**, whether jointly owned or not, while on **your journey**.

WHAT YOU ARE NOT COVERED FOR

Under Business equipment

Anything mentioned under the heading 'WHAT YOU ARE NOT COVERED FOR' within Personal possessions - section 5.

Under Business money

Anything mentioned under the heading 'WHAT YOU ARE NOT COVERED FOR' within Personal money - section 6.

Please refer to Sections General exclusions, Conditions and Making a claim that also apply.

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