

Travel Insurance

Combined Financial Services Guide, Product Disclosure Statement and Policy Wording

Effective 14 January 2019 and authorised for distribution by nib Travel Services (Australia) Pty Limited QM1433-0319.

Product Disclosure Statement

Schedule of Benefits

This list is a summary of some of the benefits covered by this policy and the applicable limits. Please refer to the relevant sections in the policy Wording for full details of cover. Other applicable limits may apply.	Applicable Limits	
	Single	Family or Duo
Australian Travel Plan		
Cancellation or Holiday deferment Costs – Section A1	\$10,000	\$20,000
Emergency Travel arrangements and accommodation Expenses – Section A2	\$10,000	\$20,000
Agents Cancellation Fees – Section A3	\$1,500	\$3,000
Medical And Non-Medical Evacuation And Repatriation – Section B	\$5,000	\$10,000
Rental Vehicle Insurance Excess – Section C1	\$3,000	\$3,000
Return Of Rental Vehicle – Section C2	\$750	\$750
Luggage and Personal Effects – Section D1	\$4,000	\$8,000
Personal Computer Item Limit	\$1,000	\$1,000
Dentures or Dental Prosthesis Item Limit	\$800	\$800
Other Item Limit	\$500	\$500
Personal Liability – Section F1	\$300,000	\$300,000
Financial default – Section G	\$5,000	\$10,000
Australian Cancellation and Additional Expenses Travel Plan		
Applicable Limits Per Fare Paying Passenger	\$1,000	\$2,000
This policy will cover you, if you are travelling within Australia and you only want cover for the non-refundable part of pre-paid travel arrangements or additional travel, accommodation and meals. (Not available to non-residents of Australia.)		

Who are you dealing with?

About nib

This policy is underwritten by certain underwriters at Lloyd's (the insurer), managed by nib Travel Services (Australia) Pty Limited, ABN 81 115 932 173, AFS Licence No 308461 (nib) and arranged and promoted by Kangaroo Island Sealink Pty Ltd, ABN 69 007 122 367, AR 261366 (Sealink). For information on how these insurance providers work together and the services they provide, please refer to the Financial Services Guide at the back of this combined document.

Enquiries and assistance

For any enquiries and assistance please contact our Customer Service Centre on **1300 555 017** or email travel-service@nib.com.au.

Please note that calls to us will be recorded for training and verification purposes.

The PDS is designed to assist you in your decision to purchase this Travel Insurance.

There are two parts to this booklet. The first part is your Product Disclosure Statement (PDS) which details Important Information about this Policy and your Policy Wording which sets out the detailed terms, conditions and exclusions of the Policy.

The second part of this booklet is the Financial Services Guide (FSG) which provides information about who we are, who we do business with to provide you with insurance, how we and our business partners are paid, how to make a complaint and other details to help you decide whether to use any of the services offered by us.

Because we don't know your own personal circumstances, you should treat any advice in this booklet as purely general in nature. It doesn't consider your objectives, financial situation or needs. You should carefully consider the information provided with regard to your personal circumstances to decide if it's right for you.

Other documents you receive may comprise the PDS. You'll know when this happens because it'll say so in the document.

We may need to update information in this PDS. If we need to do this, we'll either send you a new PDS or a supplementary PDS. You can also get a copy of these simply by calling us.

Guidelines

- Insurance is not available to travellers outside Australia.
- The terms and conditions of the policy are subject to the laws of the Australian state or territory where the Certificate of Insurance is issued. You agree to submit to the jurisdiction of the courts of that state or territory.
- This policy must be issued prior to the commencement of your trip.
- Whilst this policy can be extended beyond the original trip the maximum duration available is 12 months from the departure date.
- An excess of \$25 applies to each claim except under Section C2 Return Of Rental Vehicle or Section E1 Death Expenses.
- There is no provision to suspend this policy during the period of insurance.
- There is no cover under this policy for an existing medical condition (including pregnancy). This exclusion will be waived if you require cover for the existing medical condition and pay any additional amount we ask for, per applicant, before your Certificate of Insurance is issued.
- You cannot substitute the nominated insured, whose name appears on the Certificate of Insurance.
- Medical, dental and ancillary costs incurred within Australia are not covered.
- Please include your departure and return dates when calculating your duration.
- If you wish to obtain details of stamp duty and taxes please call **1300 555 017**.

Applying for Travel Insurance

To apply for insurance, please call Sealink. When an insurance policy is issued you will receive a letter which confirms the issue of the Certificate of Insurance, the cover you have chosen including any additional benefits, the total amount paid by you, and information about the terms of your policy.

Significant risks

Existing medical conditions (including pregnancy)

You do not have to take cover for your existing medical condition. However, there is no cover under this policy for any claim arising as a result of, or exacerbated by, or consequential upon your existing medical condition unless you are offered cover for your existing medical condition and you pay any additional amount we ask for, per applicant, before your Certificate of Insurance is issued.

An existing medical condition is:

- (a) any chronic or ongoing (whether chronic or otherwise) medical or dental condition, illness or disease of which you were aware or should reasonably have been aware, and which is medically documented or under investigation prior to the issue of the Certificate of Insurance; or
- (b) any physical, Mental Illness or medical condition (including pregnancy), defect, illness or disease of which you were aware or should reasonably have been aware, and for which treatment, medication, preventative medication, advice, preventative advice or investigation have been received or prescribed by a medical or dental adviser in the 60 days prior to the issue of the Certificate of Insurance.

Note:

- Where any condition is the subject of an investigation, that condition falls within this definition, regardless of whether or not a diagnosis of the condition has been made.
- This definition applies to you, your travelling party, your relatives, your business colleague, or any other person you have a relationship with whose state of health could impact on your travel plans.

The following conditions are not considered to be existing medical conditions provided they are stable and you or anyone else to be covered are not waiting for treatment, on a hospital waiting list or awaiting results of medical tests or investigations in relation to any of these conditions. Cover for these listed conditions is provided free of charge.

- Acne
- Allergies – such as allergic rhinitis, chronic rhinitis, hayfever, sinusitis, anaphylaxis, dermatitis, eczema, psoriasis, urticaria, food intolerance, latex allergy
- Anaemia – including iron deficiency anaemia, B12 deficiency, folate deficiency, pernicious anaemia
- Asthma – not requiring cortisone medication or hospitalisation for the past 12 months including as an outpatient
- Bell's palsy
- Benign breast or renal cysts
- Bunions
- Carpal Tunnel syndrome
- Cataracts, dry eye syndrome, glaucoma, macular degeneration
- Coeliac disease
- Colonic polyps
- Congenital blindness/deafness
- Diabetes Mellitus Types 1 and 2 – where you have no known cardiovascular, hypertensive, vascular disease and no related kidney, eye or neuropathy complications
- Epilepsy – you have been seizure free for the past 12 months and do not require more than 1 anti-seizure medication
- Goitre, hypothyroidism, Hashimoto's disease, Graves' disease
- Gout
- Hiatus hernia/Gastro-oesophageal reflux disease, Peptic ulcer disease
- High Cholesterol (Hypercholesterolaemia)
- High Lipids (Hyperlipidaemia)
- Insulin resistance, impaired glucose tolerance

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- Incontinence
 - Meniere's disease, Tinnitus
 - Menopause
 - Migraines except where you have been hospitalised in the past 12 months
 - Nocturnal cramps
 - Osteoporosis – where there have been no fractures and you do not require more than 1 medication
 - Plantar fasciitis
 - Raynaud's Disease
 - Sleep apnoea
 - Stable High Blood Pressure (Hypertension)
 - Trigeminal neuralgia
 - Trigger finger
 - Routine screening tests where no underlying disease has been detected

Residents of Australia

If you are a resident of Australia regardless of age and would like cover for your existing medical condition, you must advise us that you require this cover and pay any additional amount we ask for, per applicant, before your Certificate of Insurance is issued.

Non residents of Australia

Non residents of Australia who have an existing medical condition (including pregnancy) may purchase an Australian Travel Plan however, there is no cover for any claim caused or exacerbated by an existing medical condition (including pregnancy).

This policy may not match your expectations

This policy may not match your expectations (for example, because an exclusion applies). You should therefore read this PDS and Policy Wording carefully. Please ask Sealink or us if you are unsure about any aspect of the policy.

Are you sure you have the right level of cover?

You need to make sure the limits of cover are appropriate for your needs. Otherwise you may be under insured and have to bear part of any loss that exceeds the limits yourself. Please refer to the applicable limits as set out in the Schedule of Benefits and the Policy Wording.

A claim may be refused

We may refuse to pay or reduce the amount we pay under a claim if you do not comply with the policy conditions, if you do not comply with your Duty of Disclosure or make a misrepresentation, or if you make a fraudulent claim.

Unattended luggage and personal effects

There is no cover under this policy for luggage and personal effects that are left unattended. Please refer to the definition of unattended in the Policy Wording and What is not Covered? under Section D1 "Luggage and Personal Effects".

Medical and ancillary costs

There is no cover for any medical, dental or ancillary costs incurred within Australia.

The cost of this insurance

What you have to pay

When calculating the cost of your policy, we take a range of factors into account:

- The length of your trip;
- Whether it is a Single or Family or Duo Policy;
- Your departure date; or
- Any additional amounts determined by us to cover an existing medical condition (including pregnancy).

The amount payable by you for the travel plan selected and any additional benefits you choose, will be shown on your Certificate of Insurance, including compulsory government charges (including Stamp Duty and GST where applicable).

This policy is only valid when you pay the amount payable and Sealink issues a Certificate of Insurance to you.

Service fees

We or Sealink may charge a fee for additional services provided to you after you have been issued with a Certificate of Insurance. This may include but is not limited to alterations and other changes you ask us to make to your policy. We or Sealink will notify you of any fee at the time you make a request for additional services.

Amendment of travel details

If you wish to change your personal details or travel dates after your Certificate of Insurance has been issued, please contact our Customer Service Centre on **1300 555 017**. We will either amend the policy over the telephone or in certain circumstances we may ask you to complete and submit to us a Policy Amendment Form which needs to be assessed and approved prior to any amendment to your policy. Also refer to section headed "When does the policy begin and end?".

Matters you need to know about

Cooling Off Period

If, having purchased the policy, you want to return it, you can do so within 14 days of receiving the Certificate of Insurance and obtain a full refund, provided no right or power has been exercised under it by you (e.g. no claim has been made) and your trip has not commenced. Sealink will arrange for a refund of the premium within 15 business days of you cancelling your policy. The Cooling Off Period does not apply to policy or trip extensions.

Confirming transactions

A Certificate of Insurance must be issued once you have completed your application form and you have paid the appropriate premium. If you want to confirm a transaction, for example whether the Certificate of Insurance has been issued, you may contact us in writing or by phone.

Updating this PDS

We will update the information in this PDS when necessary. A paper copy of any updated information is available to you at no cost by calling us. We will issue you with a new PDS or a supplementary PDS, where the update is to correct a misleading or deceptive statement or an omission which is materially adverse from the point of view of a reasonable person deciding whether to obtain this insurance.

Duty of Disclosure

Before you enter into, vary or extend an insurance contract, you have a duty of disclosure under the Insurance Contracts Act 1984. When we ask you questions that are relevant to our decision to insure you and on what terms, you must tell us anything that you know and that a reasonable person in the circumstances would include in answering the questions.

When amending or extending your contract of insurance, we will ask you specific questions about any change in your circumstances. You must tell us about any change to something you have previously told us, otherwise you will be taken to have told us that there is no change. You have this duty until we agree to insure, amend or extend the contract.

If you do not tell us anything you are required to tell us, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

Privacy

We collect your personal information, and in some cases your sensitive information in order to issue, arrange and manage your travel insurance or to provide you with related services. We will only collect personal and sensitive information from you or from those authorised by you.

We may disclose your personal and sensitive information to third parties involved in the above process, such as travel agents and consultants, travel insurance providers, insurers and reinsurers, claims handlers, investigators and cost containment providers, medical and health service providers, legal and other professional advisers, your and our agents and our related companies. Some of these third parties may be located in other countries such as the UK, Europe and USA.

Our Privacy Policy details how we collect, use, store and disclose your personal and sensitive information as well as how you can seek access to and correct your personal information or make a complaint. You may not access or correct personal information of others unless you have been authorised by them, or are authorised under law or they are your dependants.

By providing us your personal and sensitive information you consent to us collecting, using, storing and disclosing it in accordance with our Privacy Policy. If you don't provide all of the personal and sensitive information we've requested we may not be able to provide you with our services or products including being able to process your application for insurance.

You can view our full Privacy Policy at nib.com.au/docs/privacy-policy.

Resolving complaints and disputes

If you have any feedback about our service – positive or negative – we would like you to share it with us. You can either call us on 1300 555 017 or email us at travel-service@nib.com.au.

How we handle complaints

If you have a complaint arising out of this insurance or the financial services provided by the insurer, our representatives, affiliates, or service providers, please contact:

Customer Relations

PO Box A975
Sydney NSW 1235
Australia

Phone: 1300 025 121

Email: idr-care@nib.com.au

nib Travel Services will acknowledge your complaint within 5 business days and provide you with the contact details of the person handling your complaint. We will respond to your complaint within 15 business days. If more time is needed to collect necessary information or complete any further investigation required, nib Travel Services will agree with you a reasonable alternative timeframe.

If you are not satisfied with the response to your complaint, you should contact the Lloyd's General Representative in Australia for consideration under their dispute resolution process. You can contact Lloyd's at:

Lloyd's Underwriters' General Representative in Australia

Level 9, 1 O'Connell St
Sydney NSW 2000

Phone: +61 2 8298 0783

Email: idraustralia@lloyds.com

Your dispute will be acknowledged within 5 working days of receipt, and Lloyd's will send a final response on behalf of the Underwriters within 15 business days.

If we are unable to resolve your complaint within 45 days of receiving your original complaint, or if you are still not satisfied with the outcome, you can choose to have your complaint independently reviewed by the Australian Financial Complaints Authority, or AFCA. AFCA provides fair and independent financial services complaint resolution that is free to consumers.

AFCA can be contacted at:

Website: afca.org.au

Email: info@afca.org.au

Telephone: 1800 931 678 (free call)

In writing to: Australian Financial Complaints Authority, GPO Box 3, Melbourne VIC 3001

Contacting nib's Customer Relations or AFCA

How to contact nib's Customer Relations

Phone	1300 025 121 (Monday to Friday from 9am to 5pm Sydney time, except on public holidays). Calls from mobiles, public telephones or hotel rooms may attract additional charges.
Email	idr-care@nib.com.au to make a complaint. travel-service@nib.com.au to give feedback or pay a compliment.
Post	Customer Relations, PO Box A975, Sydney NSW 1235 Australia

How to contact The Australian Financial Complaints Authority (AFCA)

Phone	1800 931 678 (Monday to Friday from 9am to 5pm, Melbourne time, except on public holidays).
Email	info@afca.org.au
Online	afca.org.au

The General Insurance Code Of Practice

The Insurance Council of Australia Limited has developed the General Insurance Code of Practice (the Code), which is a self-regulatory code for adoption by insurers. We proudly support the Code and embrace its objectives of raising the standards of practice and service in the insurance industry. You can obtain a copy of the Code from codeofpractice.com.au.

Policy Wording

Definitions

Applicable limit(s) means the sum insured specified in the Schedule of Benefits or Policy Wording for the travel plan selected as shown on the Certificate of Insurance.

Carrier(s) means the scheduled airline, vessel, train, or motor coach transport in which you are to travel to or from your intended destination.

Child or children means your child or children, stepchild or stepchildren, grandchild or grandchildren, nieces and nephews who are under 25 years of age at the time the Certificate of Insurance is to be issued and who are financially dependant on you.

Electronic equipment means any equipment that operates using batteries or electricity including ipods, MP3 players, satellite navigation units and electronic games.

Existing medical condition(s) means:

- (a) any chronic or ongoing (whether chronic or otherwise) medical or dental condition, illness or disease of which you were aware or should reasonably have been aware, and which is medically documented or under investigation prior to the issue of the Certificate of Insurance; or
- (b) any physical, Mental Illness or medical condition (including pregnancy), defect, illness or disease of which you were aware or should reasonably have been aware, and for which treatment, medication, preventative medication, advice, preventative advice or investigation have been received or prescribed by a medical or dental adviser in the 60 days prior to the issue of the Certificate of Insurance.

Note:

- Where any condition is the subject of an investigation, that condition falls within this definition, regardless of whether or not a diagnosis of the condition has been made.
- This definition applies to you, your travelling party, your relative(s), your business colleague, or any other person you have a relationship with whose state of health could impact on your travel plans.

Family or duo means you and your travel partner named in the Certificate of Insurance and accompanying child or children.

Financial default means the insolvency, bankruptcy, provisional liquidation, financial collapse, appointment of receivers or any other form of insolvency administration of any person, company, or organisation.

Home in Australia means your usual residential address in Australia or an Australian hospital if we repatriate you.

Illness means any disease or sickness affecting the body or mind. This includes a Mental Illness.

Injury means a bodily Injury that is caused solely and directly by external and visible means as a result of an accident and which does not result from an Illness.

Medical Practitioner means a medical professional registered and certified by the National and/or State Health Board either in Australia or in the country in which you are being treated whilst on your trip, and who is licensed to provide treatment, medication/prescriptions and medical opinions and reports – for example, doctors, physiotherapists and dentists. In the case of a Mental Illness, Medical Practitioner means a mental health professional registered and certified by the National and/or State Health Board either in Australia or in the country in which you are being treated whilst you are on your trip, and who is licensed to provide treatment, medication/prescriptions and medical opinions and reports – for example, psychologists, general practitioners and psychiatrists. A Medical Practitioner does not include a person who is related to you or a member of your travelling party.

Mental illness means any sickness, disorder or condition recognised or provided for in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders, where a clinical diagnosis has been made and Mental Health Treatment Plan has been prescribed by a Medical Practitioner.

Mental Health Treatment Plan means the evidence based assessment and medical treatment plan, referred to and required by Australian Medicare, which includes, the patient's diagnosed Mental Illness, their Mental Illness medical history and their mental state and medical needs following diagnosis, as well as details of any medications prescribed, the patient's actions to be undertaken to treat their Mental Illness and details of any medical referrals for the diagnosed Mental Illness.

Period of insurance means the period of cover specified in the Certificate of Insurance.

Personal computer means laptops, personal digital assistants including a blackberry and other hand-held wireless devices and notebooks.

Point of arrival means an airport, port, station or bus terminal to which your pre-paid scheduled public transport arrives.

Point of departure means an airport, port, station or bus terminal from which your pre-paid scheduled public transport departs.

Premium means the total amount payable for the insurance. It includes commission, stamp duty and GST if applicable.

Professional sporting activity means an activity for which you receive financial reward, or benefits from participating in that sporting activity, regardless of whether or not you are a professional sportsperson.

Relative(s) is limited to a relative of yours, or of a member of the travelling party, who is resident in Australia or New Zealand. It means a spouse, defacto partner, parent, parent in-law, daughter, son, daughter-in-law, son-in-law, brother, sister, brother-in-law, sister-in-law, grandchild, grandparent, stepparent, stepchildren, fiance or fiancée, or guardian.

Rental vehicle means any car, campervan, motorcycle or boat you rent from a licenced rental vehicle company and have a signed contract with that company.

Repatriate(d) or repatriation means travel arrangements made by us for your return to your home in Australia or where we consider to be the nearest suitable alternative.

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

Scheduled public transport means a public transport system that runs to a timetable.

Snow sports mean skiing, snow boarding and ski biking.

Single means a single person travelling alone or accompanying child or children.

Travelling party means you and any travelling companion who has made arrangements to accompany you for at least 50% of the trip.

Trip(s) means the period of travel stated in the Certificate of Insurance. The period begins on the date of departure, as stated in the Certificate of Insurance, from your home in Australia and ends when you return to your home in Australia, or when the period of the trip set out in the Certificate of Insurance ends, whichever happens first.

Unattended means leaving your luggage either with a person you have not previously met, or, in a public place where it can be taken without your knowledge or at a distance from which you cannot prevent it from being taken.

We, our(s), us, refers to certain underwriters at Lloyd's, who deal with you through their agent, nib Travel Services (Australia) Pty Ltd ABN 81 115 932 173 AFSL 308461.

You, your, yours, yourself means the person or person named in the Certificate of Insurance and their accompanying child or children.

Your policy is a contract of insurance

Your policy is a contract of insurance between you and us. You pay us the premium, and in return we provide you with cover under the travel plan you have chosen.

Your contract consists of:

- these terms and conditions;
- the section in the Schedule of Benefits which relates to the travel plan you have chosen;
- your Certificate of Insurance, which will show the travel plan you have chosen;
- any additional options; and
- any written endorsements we give you. Together these documents make up your policy.

It is important that you read your policy carefully, and keep this booklet in a safe place for future reference. If you have any questions regarding your policy, please telephone our Customer Service Centre on **1300 555 017**.

You must co-operate with us

You must co-operate with us and give us all the information and assistance we need to deal with your claim. If you do not, we may not be able to settle your claim.

When does the policy begin and end?

Your policy will be valid for the period of insurance when you have paid the premium and you have been provided with a Certificate of Insurance. The period of insurance will start and end on the dates shown in your Certificate of Insurance or when you return to your home in Australia whichever happens first.

When does the cover under each benefit begin and end?

This policy contains a number of different benefits. Cover under those benefits may begin and end at different times. Each section of the policy sets out when the cover begins and ends.

Making changes to the period of insurance

The period of insurance cannot be changed without our consent. If you wish to defer or alter the period of insurance, we may ask you to submit a Policy Amendment Form. We will decide whether or not to agree to alter the period of insurance based on the information you give us, together with any additional information we ask for. If we agree to defer or alter that period of insurance you will be issued with a new Certificate of Insurance which will show the change of the period of insurance and any premium adjustment.

However, if the scheduled transport in which you are to travel is delayed, or your trip is delayed by an event that entitles you to make a claim under this policy, the period of insurance is automatically extended beyond the period of your original trip.

This extension lasts until you are capable of travelling to your final destination, including the journey there, or for a period of 6 months beyond the period of insurance, whichever happens first.

Cancellation

By you

Once the Certificate of Insurance has been issued you are not entitled to a refund of any part of the premium except as provided for in the section headed "Cooling Off Period". See the Cooling Off Period section for further details on page 2.

By us

We can cancel your insurance in any way permitted by law, including if you have:

- failed to comply with your Duty of Disclosure; or
- made a misrepresentation to us before the policy was entered in to; or
- failed to comply with a provision of a policy, including failure to pay the premium; or
- made a fraudulent claim under this policy or any other current policy; or
- failed to notify us of a specific act or omission as required by the policy.

If we cancel your policy, we will do so by giving you written notice. We will deduct from the premium an amount to cover the shortened period for which you have been insured by us, and refund to you what is left.

General Exclusions

These are the general exclusions which apply to all sections of this policy. You should read them, together with the cover and the specific exclusions referred to under each section of cover. There is no cover under any section of this policy for any claim arising directly or indirectly because of any of the following:

1. you travel:
 - (a) even though you know you are unfit to travel; or
 - (b) against medical advice; or
 - (c) when you know you will have to consult a medical practitioner; or
 - (d) for the purpose of obtaining medical advice or treatment.

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2. you maintain a course of treatment you were on at the time your trip commenced, except where this is covered under Section D1 "Luggage and Personal Effects".
 3. the death, illness or injury caused or exacerbated by, or consequential upon, an existing medical condition of you, a member of the travelling party or a non-travelling relative or business partner. This exclusion will not apply if you have been offered cover for the existing medical condition and have paid the additional premium requested, per applicant, before the Certificate of Insurance was issued.
 4. the death, illness or injury of you, a member of the travelling party or a non-travelling relative or business partner is caused or exacerbated by or consequential upon, any condition which has been the subject of a medical investigation within the period of 12 months prior to the issue of the Certificate of Insurance, in respect of which no diagnosis has been made.
 5. the birth of a child, whatever the proximate cause is. If you have been offered cover and have paid the additional premium requested per application, before your Certificate of Insurance was issued, we will cover pregnancy related illnesses of the mother, but not any expenses associated with or consequent upon the birth of a child).
 6. the death, illness or injury of a person who is not a member of your travelling party and is 80 years of age or over at the time the Certificate of Insurance is issued.
 7. a member of the travelling party decides to alter their plans or not to continue with the trip.
 8. A death, illness or injury where a metastatic condition and/or terminal prognosis was made, in relation to any medical condition, prior to the issue of the Certificate of Insurance.
 9. a member of the travelling party:
 - (a) deliberately injures themselves; or
 - (b) being under the influence of, or is addicted to, intoxicating liquor or a drug, except a drug taken in accordance with the advice of a registered Medical Practitioner; or
 - (c) suffers AIDS or an AIDS defining illness; or
 - (d) takes part in a riot or civil commotion; or
 - (e) acts maliciously; or
 - (f) hunts, plays polo, races (except on foot), mountaineers or rock climbs using support ropes, participates in basejumping, running with the bulls, takes part in a professional sporting activity, or pot holing; or
 - (g) travels in international waters in a private sail vessel or privately registered sail vessel; or
 - (h) participates in, or trains for, a professional sporting activity; or
 - (i) scuba dives unless you hold an open water diving licence or were diving under licensed instruction; or
 - (j) rides a motor cycle in excess of 100 cc (except as a pillion passenger) without a licence that is valid in your country of residence; or
 - (k) rides a 4 wheel motor cycle even as a pillion passenger; or
 10. a loss which is recoverable under some other scheme. For example, Medicare, a private health fund, national reciprocal health fund or scheme, workers' compensation scheme, travel compensation fund or accident compensation scheme.
 11. any consequential loss or loss of enjoyment.
 12. a loss caused by, arising directly or indirectly from or in any way connected with a criminal or dishonest act by you or by a person with whom you are in collusion.
 13. a loss caused by, arising directly or indirectly from or in any way connected with war, invasion, act of a foreign enemy, hostilities (whether war is declared or not), civil war, rebellion, revolution, military or usurped power or civil insurrection, except as provided for in event 4 under "What Are The Events That Will Be Covered Under Section A?"
 14. a loss caused by, arising directly or indirectly from or in any way connected with the use, existence or escape of nuclear weapons material, or ionising radiation from, or contamination by, radioactivity from any nuclear fuel, or nuclear waste from the combustion of nuclear fuel.
 15. a loss caused by, arising directly or indirectly from or in any way connected with any government intervention, prohibition, or regulation except as provided for in event 7 under "What Are The Events That Will Be Covered Under Section A?"
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16. a government authority seizing, withholding or destroying anything of yours or any prohibition by or regulation or intervention of any government or any government not allowing you to enter or to stay in that country.
 17. an act or threat of terrorism. This exclusion does not apply to Section D1 “Luggage or Personal Effects” or under Section B1 “Medical Evacuation And Repatriation” for the cost of repatriation to or within Australia, if the carrier requires you to be brought back with a medical escort.
 18. the cancellation or delay of travel arrangements due to mechanical breakdown of transportation or failure of the carrier to operate the service.
 19. you fail to take reasonable precautions to avoid a financial loss after a public warning of a strike, riot, civil commotion, or natural disaster.
 20. you operate a rental vehicle in violation of the rental agreement.
 21. the financial default of a travel agent, scheduled serviced airlines, hotel and resort operators, car and campervan hire companies, cruise lines, railway operators and theme park operators to the extent that your loss is covered by a scheme or fund (not a contract of insurance), or would be covered but for this insurance.
 22. the financial default of any person, company or organisation involved in your travel arrangements and that financial default occurred prior to the issue of the Certificate of Insurance.
 23. credit card conversion fees or any other bank charges.
 24. You’re not insured under any section of this Policy where the provision of cover or a liability to pay a benefit would expose us and/or our reinsurer(s) to any sanction, prohibition or restriction under United Nations resolutions or any sanctions, laws or regulations of Australia, the European Union, the United Kingdom or the United States.

Section A – Cancellation and additional expenses

Am I covered under Section A?

Section A is divided into different benefits which apply depending on the travel plan you have chosen. This plan appears on your Certificate of Insurance.

Australian Travel Plan	Cover under all sections
Australian Cancellation And Additional Expenses Travel Plans	Cover under all sections

You must read Section A together with the General Exclusions, as these may affect your cover.

What are the events that will be covered under Section A?

We will cover you under Section A in respect of your planned trip if one of the following events occurs after the issue of the Certificate of Insurance:

1. you are unable to start or finish the trip because of the death, sudden serious illness or serious injury arising before or during the trip of:
 - (a) you; or
 - (b) a member of your travelling party; or
 - (c) a relative, who is a resident in Australia or New Zealand.

But before we will cover you, you must provide us with proof that:

- (a) the death has occurred or the illness or injury requires hospitalisation or confinement; or
- (b) you or a member of your travelling party are certified medically unfit to travel by a Medical Practitioner; or
- (c) in the case of a Mental Illness,
 - (i) a diagnosis has been made by a Medical Practitioner; and
 - (ii) the diagnosed individual has been assigned a Mental Health Treatment Plan; and
 - (iii) the Mental Illness prevents you from travelling.

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2. you are unable to start or finish the trip because of the death, sudden serious illness or serious injury arising before or during the trip of a business partner or co-worker. But before we will cover you, you must provide us with proof that the business partner or co-workers absence due to death, sudden serious illness or serious injury made the cancellation or ending of the trip necessary, and you have written confirmation of that fact from a senior representative or director of the business.
 3. a claim arising from an existing medical condition of a member of your travelling party or a non travelling relative or business partner if you have paid us, before your Certificate of Insurance was issued, any additional premium requested to cover you for the existing medical condition, or if the member of your travelling party who is suffering from the existing medical condition has taken out alternative insurance.
 4. your pre-paid scheduled public transport services or pre-paid tour have been cancelled or restricted because of severe weather, natural disaster, riot, strike or civil insurrection.
 5. your pre-paid accommodation has been destroyed or is uninhabitable due to severe weather or natural disaster and no alternative equivalent accommodation is available in the vicinity. You must have done everything reasonable to obtain alternative accommodation.
 6. a member of the travelling party is required to do jury service or has received a summons to give evidence in a criminal court of law.
 7. a member of the travelling party is confined in compulsory quarantine.
 8. you have been involved in, or your travel arrangements have been cancelled or delayed by, a motor vehicle, railway, air or marine accident or incident. You must have written confirmation of the accident or incident from an official body in the country where the accident or incident happened.
 9. your passport, travel documents or credit cards are lost or damaged.
 10. a member of your travelling party, who is a full time student, is required to sit supplementary examinations conducted by their educational institution.
 11. a member of your travelling party has been made redundant from full-time permanent employment in Australia.
 12. the cancellation of pre-arranged leave by your employer for a member of your travelling party who is a full-time permanent employee of the police, fire, ambulance or emergency services.
 13. you are unable to start the trip because your employer cancels your pre-arranged leave and you are in full-time permanent employment. Cover is only available if you purchased this travel insurance no later than 7 days of paying final monies for your prepaid travel arrangements and is limited to \$1,000 per adult, including any accompanying child or children.
 14. your normal place of residence or business premises in Australia has been destroyed or rendered insecure due to a natural disaster, fire or malicious damage.
 15. a wedding, conference, pre-paid concert, course, tuition or sporting event has been cancelled, and the sole purpose of the trip is to attend that wedding, conference, concert, course, tuition or sporting event.
 16. a member of your travelling party has been affected by any form of insolvency, administration or bankruptcy of their employer.
 17. a tour operator or wholesaler has cancelled a tour because there are not enough people to begin or complete the tour. Cover is limited to the pre-paid cost of the transport arrangements purchased solely to get to the departure point and returning from the finishing point of that tour, or rearrangement costs, whichever is the lesser.
 18. the financial default of scheduled service airlines, hotel and resort operators, car and campervan hire companies, cruise lines, railways operators and theme park operators excluding travel agents. Cover is limited to \$5,000 Single Policy or \$10,000 Family or Duo Policy on Australian Travel Plan. Cover not available on Australian Cancellation and Additional Expenses Travel Plans.

Section A1 – Cancellation or holiday deferment costs

When does the cover begin and end?

The cover under this benefit begins from the time the Certificate of Insurance is issued to you and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will pay the value of unused pre-paid travel arrangements, less any refunds you are entitled to, if you have to cancel these arrangements because of an event set out under “What are the events that will be covered under Section A?”, or the reasonable cost of rearranging your trip, provided that this cost is not greater than the cancellation fees or lost deposits which would have been incurred had the trip been cancelled.

We will also pay the value of pre-paid theme park and event tickets, golf green fees or tuition fees that cannot be used due to death, Illness or Injury, less any refunds you are entitled to, if you have to cancel these arrangements.

If cancellation is due to an Illness or Injury you must provide us with documentation from your Medical Practitioner to confirm you are unfit to commence or continue with your trip.

What is not covered?

1. We will not pay for the value of unused pre-paid transport costs where we have repatriated you a distance equivalent to, or greater than, the total distance remaining on your itinerary at the point of repatriation. Where the total distance of the repatriation is less than the unused travel arrangements we will calculate your entitlement on a pro-rata basis, taking into account the cost of your original ticket.
2. We will not pay for the value of any pre-paid snow sport arrangements.

What is the most we will pay?

The most we will pay under this benefit, is the amount set out in the section in the Schedule of Benefits which relates to the travel plan you have chosen, unless you are claiming for pre-paid theme park and event tickets, golf green fees or tuition fees that cannot be used because of an event set out under “What are the events that will be covered under Section A?” which are limited to \$500 Single Policy or \$1,000 Family or Duo Policy.

Section A2 – Emergency travel arrangements and accommodation expenses

When does the cover begin and end?

The cover under this benefit begins from the time you leave on your trip and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you for expenses you incur for reasonable additional travel, accommodation, meals and internet use and emergency telephone calls if you have to interrupt your trip after it has begun, because of an event set out under “What are the events that will be covered under Section A?”. If the interruption to your trip requires repatriation refer to Section B for details of cover.

You must not organise any additional travel or accommodation in excess of \$1,000 without prior consent from us.

What is not covered?

1. Any additional travel you undertake must be at the fare class that you originally chose, except where written approval is provided by us.
2. If you return to your home in Australia because of the interruption and you do not have a return ticket at the time of the event that causes a claim under this section, we will deduct from the amount we pay you the cost of an economy class airfare at the carrier’s regular published rates for the return journey.
3. We will not pay for any expenses you incur to resume your trip after you have returned to your home in Australia.
4. We will not pay for additional travel or accommodation expenses when you have made a claim under another section of this policy for cancelled accommodation expenses covering the same period of time or for additional transport covering an equivalent distance.
5. We will not pay for accommodation expenses for periods where you have not forfeited pre-paid accommodation arrangements.

What is the most we will pay?

The most we will pay under this benefit for the reasonable cost of additional meals is \$50 Single Policy or \$100 Family or Duo Policy for each 24 hour period up to a maximum of \$500 Single Policy or \$1,000 Family or Duo Policy or the applicable limit on the Australian Cancellation And Additional Expenses Travel Plans whichever is the lesser.

For additional travel, accommodation, emergency internet use and telephone calls the most we will pay you under this benefit is the amount set out in the section in the Schedule of Benefits which relates to the travel plan you have chosen.

Section A3 – Agents cancellation fees

When does the cover begin and end?

The cover under this benefit begins from the time the Certificate of Insurance is issued to you and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you for agent's cancellation fees when you have paid the agent the full amount for your trip and you have cancelled because of an event set out under "What are the events that will be covered under Section A?". If only a deposit has been paid at the time of cancellation, we will pay the agent's cancellation fees up to the maximum amount of the deposit.

What is not covered?

We will not pay more than the level of commission and or service fees normally earned by the agent, had the trip not been cancelled.

What is the most we will pay?

The most we will pay under this benefit is up to the applicable limit set out in the Schedule of Benefits.

Section A4 – Loss of reward points

When does the cover begin and end?

The cover under this benefit begins from the time the Certificate of Insurance is issued to you and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will pay for frequent flyer or similar flight reward points lost due to the cancellation of your airline ticket because of an event set out under "What are the events that will be covered under Section A?".

The amount we will pay is calculated as follows:

- (a) the cost of the equivalent class airline ticket, based on the best available advance purchase airfare for the same season of the following year, less your financial contribution towards the airline ticket;
- (b) multiplied by the total amount of points lost;
- (c) divided by the total amount of points redeemed to obtain the airline ticket.

What is not covered?

We will not provide cover if you can recover your frequent flyer or similar reward points, or their value, from any other source.

What is the most we will pay?

We will only pay up to \$10,000 Single Policy or \$20,000 Family or Duo Policy on the Australian Travel Plan or up to the applicable limit set out in the Schedule of Benefits on the Australian Cancellation and Additional Expenses Travel Plans whichever is the lesser.

Section B – Evacuation and repatriation

Am I covered under Section B?

Section B is divided into different benefits which apply depending on the travel plan you have chosen. This plan appears on your Certificate of Insurance.

Australian Travel Plan	Cover under all sections
Australian Cancellation and Additional Expenses Travel Plans	Section B2

You must read Section B together with the General Exclusions, as these may affect your cover.

Section B1 – Medical evacuation and repatriation when does the cover begin and end?

The cover under this benefit begins when you leave on your trip and ends when you are hospitalised in Australia, or returned to your home in Australia, or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you if you have to interrupt your trip after it has begun because you have suffered an Illness or Injury while you are on your trip, and in our opinion you need to be evacuated or repatriated. We will pay expenses which we believe are reasonable and necessary to bring you back to your home in Australia. The decision to evacuate or repatriate you is ours, and we will not pay for any evacuation or repatriation expenses unless it is medically justified and you have received our consent. We will either:

- return you to your home in Australia with a medical attendant; or
- pay for a return economy class airfare, reasonable accommodation and additional expenses for a friend or relative to fly to, remain with and escort you in place of a medical attendant; or
- return you to your home in Australia without an attendant.

What is not covered?

1. We will not cover you if you evacuate or repatriate when it is not deemed medically necessary or without our consent.
2. We will not pay for any expenses you incur to resume your trip after you have returned to your home in Australia.
3. For repatriation, we will not pay more than the cost of repatriation to your home in Australia.
4. There is no cover under this benefit because of an Illness or Injury, the signs and symptoms of which you first became aware of before you went on your trip.
5. Any additional costs for travel you undertake that is not at the fare class that you originally chose, unless undertaken with our consent.
6. If you do not have a return ticket at the time of the event that causes a claim under this section, we will deduct from the amount we pay you the cost of an economy class airfare at the carrier's regular published rates for the return journey.

What is the most we will pay?

The most we will pay under this benefit is the amount set out in the section in the Schedule of Benefits which relates to the travel plan you have chosen.

Section B2 – Non-medical evacuation and repatriation

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip and ends when you are returned to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you if you have to interrupt your trip after it has begun because of one of the events listed in "What are the events that will be covered under Section A?", while you are on your trip, and in our opinion you need to be evacuated or repatriated. We will pay expenses which we believe are reasonable and necessary to bring you back to your home in Australia. The decision to evacuate or repatriate you is ours, and we will not pay for any evacuation or repatriation expenses unless you have received our prior consent.

What is not covered?

1. We will not cover you if you evacuate or repatriate without our consent.
2. We will not pay for any expenses you incur to resume your trip after you have returned to your home in Australia.
3. For repatriation, we will not pay more than the cost of repatriation to your home in Australia.
4. Any additional travel you undertake must be at the fare class that you originally chose unless you have our consent.
5. If you do not have a return ticket at the time of the event that causes a claim under this section, we will deduct from the amount we pay you the cost of an economy class airfare at the carrier's regular published rates for the return journey.

What is the most we will pay?

The most we will pay under this benefit is the amount set out in the section in the Schedule of Benefits which relates to the travel plan you have chosen.

Section C – Rental vehicle expenses

Am I covered under Section C?

Section C is divided into different benefits which apply depending on the travel plan you have chosen. This plan appears on your Certificate of Insurance.

Australian Travel Plan	Cover under all sections
Australian Cancellation and Additional Expenses Travel Plans	No Cover

You must read Section C together with the General Exclusions, as these may affect your cover.

Section C1 – Rental vehicle insurance excess

When does the cover begin and end?

The cover under this benefit begins from the time you leave on your trip and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you for the rental vehicle insurance excess, or the cost of repairing the vehicle, whichever is lower, if:

- you rent a vehicle from a rental company;
- it is damaged by accident, storm, fire or theft; and
- you are a nominated driver on the Rental Vehicle Agreement.

For this benefit to apply, the rental vehicle must have comprehensive motor vehicle insurance for the period of hire.

What is not covered?

This cover is not in place of rental vehicle insurance and only provides cover for the excess component up to the applicable limit.

What is the most we will pay?

The most we will pay under this benefit, is the amount set out in that section of the Schedule of Benefits which relates to the travel plan you have chosen.

Section C2 – Return of rental vehicle

No excess applies to claims under this benefit.

When does the cover begin and end?

The cover under this benefit begins from the time you leave on your trip and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will pay towards the cost of returning your rental vehicle to the nearest depot, including airport concession charges, if due to a claimable event covered by any section of this policy you are unable to do so during your trip.

What is the most we will pay?

The most we will pay under this benefit is the amount set out in the Schedule of Benefits which relates to the travel plan you have chosen.

Section D – Luggage and personal effects

Am I covered under Section D?

Section D is divided into different benefits which apply depending on the travel plan you have chosen. This plan appears on your Certificate of Insurance.

Australian Travel Plan	Cover under all sections
Australian Cancellation and Additional Expenses Travel Plans	No Cover

You must read Section D together with the General Exclusions, as these may affect your cover.

Section D1 – Luggage and personal effects

The cover under this benefit begins when you leave on your trip and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you for each of the following:

1. accidental loss, theft of, or damage to, your luggage or personal effects including things you buy during the trip, while they are accompanying you during your trip.
2. loss of, or damage to, dentures or dental prostheses during your trip.
3. the cost of medical consultation fees you incur to replace prescription medication which is accidentally lost, stolen or damaged, together with the cost of the medication itself.
4. theft of, or damage to, your luggage or personal effects while they are left in a locked motor vehicle or a motor home during daylight hours and there is forced entry into the vehicle. We will allow you one automatic reinstatement of the sum insured in the event of a claim.

What is not covered?

There is no cover under Section D1 for any of the following:

1. accidental loss or damage to or theft of:
 - (a) cash, bank or currency notes, cheques or negotiable instruments;
 - (b) fragile or brittle items (e.g. glass or china), except loss or damage caused by fire, or by accident to the transport carrying them;
 - (c) damage to computer screens at any time;
 - (d) luggage or personal effects that are being transported independently of you;
 - (e) property that you leave unattended or that occurs because you do not take reasonable care to protect it;
 - (f) luggage or personal effects for which you are entitled to compensation from the carrier;
 - (g) personal computer, communication, photographic, electronic equipment, jewellery or watches left unattended by you in a motor vehicle or a motor home for any length of time, even if they are locked in the motor vehicle or motor home;
 - (h) luggage or personal effects left unattended by you during non daylight hours in a motor vehicle or a motor home for any length of time;
 - (i) luggage or personal effects left unattended by you in a tent or caravan for any length of time;
 - (j) personal computer, communication, photographic, electronic equipment, jewellery or watches checked in as luggage;
 - (k) trade items, trade samples or your tools of trade or profession;
 - (l) gold or precious metals, precious unset or uncut gemstones;

- (m) watercraft of any type (excluding theft of surfboards or damage to surfboards whilst in transit);
 - (n) sporting equipment (excluding surfboards) whilst in use; or
 - (o) snow sports equipment.
2. wear and tear or depreciation of property or damage by the action of insects or vermin, mildew, rust or corrosion.
 3. mechanical or electrical breakdown, or malfunction repair costs.

What is the most we will pay?

The most we will pay under this benefit, is the amount set out in that section of the Schedule of Benefits which relates to the travel plan you have chosen. We will not pay more than the original price you paid for an item, even if the applicable limit set out in the Schedule of Benefits is higher.

We will choose between:

- repairing or replacing your items to a condition no better than their condition at the time of loss, damage or theft; or
- paying you their value in cash, taking into account an allowance for age, wear and tear. The way in which we depreciate is set out in the Depreciation Schedule under Section H “Claims” on page 22.

The limits in total, for a camera, video camera or personal computer, set of golf clubs, watches, jewellery and for any other item are set out in the Schedule of Benefits and depends on the travel plan you have chosen. A pair or related set of items – for example, a camera, lenses (attached or not), tripod and accessories or a chain and pendant – are only one item for this purpose.

Section E – Death Expenses

No excess applies to claims under this section.

Am I covered under Section E?

Section E is divided into different benefits which apply depending on the travel plan you have chosen. This plan appears on your Certificate of Insurance.

Australian Travel Plan	Cover under all sections
Australian Cancellation and Additional Expenses Travel Plans	No Cover

You must read Section E together with the General Exclusions, as these may affect your cover.

Section E1 – Accidental Death

When does the cover begin and end?

The cover under this benefit begins when you depart on your trip and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will pay your Estate, if you are 18 years of age or over and during your trip:

- you suffer an Injury which results in your death within 12 months of the Injury being sustained; or
- you disappear because your means of transport disappeared, sank or was wrecked, and your body has still not been found 12 months after your disappearance.

What is not covered?

There is no cover if your death is due to an Illness or your suicide.

What is the most we will pay?

The most we will pay will be \$10,000 Single Policy or \$20,000 Family or Duo Policy. If you select a Family or Duo Policy, the amount payable for each person named on the Certificate of Insurance will be limited to the applicable limit in the Single Policy, not exceeding the total limit of the Family or Duo Policy selected. Cover for each accompanying child or children is limited to a total amount of \$1,000.

Section E2 – Repatriation of remains

When does the cover begin and end?

The cover under this benefit begins when you depart on your trip and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will pay for expenses for your burial or cremation within Australia or the transporting of your remains to a funeral home in Australia if you die during the trip.

What is the most we will pay?

The most we will pay under this benefit is \$5,000 Single Policy or \$10,000 Family or Duo Policy, including any accompanying child or children.

Section F – Personal liability

Am I covered under Section F?

Section F is divided into different benefits which apply depending on the travel plan you have chosen. This plan appears on your Certificate of Insurance.

Australian Travel Plan	Cover under all sections
Australian Cancellation and Additional Expenses Travel Plans	No Cover

You must read Section F together with the General Exclusions, as these may affect your cover.

Section F1 – Personal Liability

When does the cover begin and end?

The cover under this benefit begins when you leave on your trip and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will pay you for your legal liability to pay damages or compensation because your negligence during the trip causes:

- (a) Injury to a person who is not a member of your family or travelling party; or
- (b) loss or damage to property that is not owned by you or a member of your family or travelling party, or which is not in your or their custody or control.

We will also pay your legal costs in relation to that liability, but only if you get our consent before you take or are involved in any legal action.

What is not covered?

There is no cover for any liability:

- (a) arising out of your trade, business or profession; or
- (b) for Injury to an employee arising out of, or in the course of, their employment by you; or
- (c) arising out of your unlawful, wilful or malicious act; or
- (d) arising out of your ownership, possession or use (including as a passenger) of a mechanically propelled vehicle, or any aircraft or watercraft, or firearm; or
- (e) arising out of you passing on an illness to another person.

What is the most we will pay?

The most we will pay under this benefit is the amount set out in that section of the Schedule of Benefits which relates to the travel plan you have chosen. The applicable limit is a combined total for your liability and your costs.

Section G – Financial default

Am I covered under Section G?

Section G is divided into different benefits which apply depending on the travel plan you have chosen. This plan appears on your Certificate of Insurance.

Australian Travel Plan	Cover under all sections
Australian Cancellation and Additional Expenses Travel Plans	No Cover

You must read Section G together with the General Exclusions, as these may affect your cover.

When does the cover begin and end?

The cover under this benefit begins from the time of issue of the Certificate of Insurance and ends when you return to your home in Australia or when the period of insurance ends, whichever happens first.

What is covered?

We will cover you for the cost of rearranging your trip if it is cancelled due to the financial default of the scheduled serviced airlines, hotels, resort operators, car and campervan hire companies, cruise lines, railway operators and theme park operators.

We will also cover you for your travel agent's cancellation fees which you incur because of any of these financial defaults. Any financial default must have occurred after you took out your policy.

What is not covered?

There is no cover under this benefit for the financial default of your travel agent.

What is the most we will pay?

The most we will pay under this benefit is the amount set out in that section of the Schedule of Benefits which relates to the travel plan you have chosen.

Section H – Making a claim

You must do everything reasonable to prevent a loss from occurring or, when a loss has occurred, from making the loss worse.

In the event of a claim you must:

- (a) notify us promptly of a claim and complete a claim form;
 - (b) give us any documents, letters or notices relating to a claim or possible claim, medical certificates, itemised medical accounts, original receipts, rental agreements, repair quotes, ticket and luggage checks or information that we reasonably ask for. This will be at your expense;
 - (c) forward immediately any letters or documents you receive from anyone else relating to a potential claim;
 - (d) not make any promise or offer of payment, or admit fault to anyone, or become involved in any litigation in respect of an event that may result in a claim under this policy, without our consent;
 - (e) in the event of a claim caused by any medical condition, obtain evidence from the Medical Practitioner as soon as you are aware of signs or symptoms of the condition;
 - (f) in the event of a claim caused by any Mental Illness, obtain evidence from the Medical Practitioner as soon as you are aware of signs or symptoms of the condition and provide details of your Mental Health Treatment Plan as assigned by your Medical Practitioner;
 - (g) in cases of theft, damage or loss, report the matter to the police, transport provider, hotel or other authority within 24 hours and obtain a copy of that report; and
 - (h) report any loss or damage to your accompanying luggage in writing to the carrier within 3 days and send to us a property irregularity report, along with details of any settlement that they make in relation to the loss or damage.
- We may, at our expense, take proceedings in your name to recover compensation or enforce an indemnity against someone else in respect of a loss covered by this insurance in accordance with the law.

- We may refuse to pay a claim under this policy if you do not comply with any condition of this policy.
- We will not pay a claim if your claim is fraudulent.
- If anyone else is legally responsible for your Illness, Injury or death we may seek compensation from them to recover any costs we have paid or seek reimbursement from you if you receive any payment from any other source for these expenses.

Proof of loss

If you make a claim under your policy we will ask you for evidence of the circumstances which gave rise to the claim and proof that you have suffered a loss.

If you are claiming for loss of, or damage to any item we will ask you to provide:

- proof that you owned the item; and
- proof of its value and age.

Therefore you should keep all relevant receipts, accounts, valuations and police or medical reports.

We will not pay any claim when the only proof of ownership is:

- a photograph; or
- a photocopy of any documentation; or
- a statutory declaration; or
- a copy of the user's manual downloaded from the internet.

If you cannot provide the evidence or proof that we ask for we may not pay you.

Paying the claim

1. An excess may apply to a claim you make under this policy. The amount of the excess is shown on your Certificate of Insurance. Where applicable we will deduct the excess from any payment we make to you.
2. Claims will be paid to you or your personal representative in Australian dollars on the basis of the exchange rate that applied at the time of the event that gave rise to the claim. We will not pay more than your actual loss.
3. You must tell us if you are entitled to claim an input tax credit at the time of making the claim. If you do not provide us with this information we may deduct up to 1/11th of the amount otherwise payable in settlement of your claim.
4. If we agree to pay a claim under your policy, this policy covers GST inclusive costs (up to the relevant travel plan limit). However, we will reduce any claim payment by any input tax credit you are or would be entitled to for the repair or replacement of insured property or for other things covered by the policy.
5. At the time you make a claim you must tell us if your entitlement to an input tax credit which you have told us:
 - (a) is incorrect; or
 - (b) changes from what you have told us, when you extend or vary your policy.

Depreciation

The nominated depreciation rate will apply to each year of age up to a maximum of 80% of the original purchase price of that item.

Depreciation amounts	
10%	Camping, sporting and leisure equipment (not leisure clothing), and musical instruments.
15%	Clothing, footwear, personal effects, luggage, prescription glasses, sunglasses, costume jewellery and books.
20%	Personal and or laptop computers, communication, photographic or electronic equipment, ipods, mobile phones, CDs and DVDs.
50%	Toiletries including skin care, makeup, perfume, medication.

Items not listed above will also be subject to depreciation at our discretion.

Obtaining a claim form

Contact us to obtain a claim form. You can help us to speed up the processing of your claim by following the instructions on the claim form which will advise you of what documentation you need to provide to support your claim. The completed claim form should be sent to:

nib Travel Claims

PO Box 12090, Melbourne VIC 8006

Claims Enquiries: 1300 555 017 or (03) 8523 2777

Email: travel-claims@nib.com.au

Claims Service Standard

Our claims service standard is to settle your claims within 10 working days upon the receipt of a completed claim form and all necessary supporting information. If more information is required we will contact you within 10 working days.

However, before we cover you, you must:

- (a) within 24 hours of becoming aware of the loss, notify the police or the responsible officer in the aircraft, vessel, train, or motor coach you are travelling in, or in the hotel in which you are staying and give us their written report of the incident when you make the claim;
- (b) keep receipts for goods you buy separate from the goods themselves;
- (c) keep any relevant ticket and luggage check and give them to us;
- (d) provide us with evidence of the value and your ownership of the goods; and
- (e) if a carrier loses or damages your accompanying luggage, report it in writing to the carrier within 3 days and send us written confirmation of the report along with details of any settlement that they make in relation to the loss or damage.

Responsibility for this document

Certain underwriters at Lloyd's are responsible for the PDS and Policy Wording in this document, which were prepared on 14 January 2019.

Financial Services Guide

About Sealink

In this section you can find information about who Sealink is and the financial services we provide to you. It aims to help you make an informed decision about the services Sealink offers and how we're paid for those services. You can also find out about how we deal with any complaints and disputes.

Your insurance is underwritten by certain underwriters at Lloyd's (the insurer) – giving you the security of a policy issued by one of the world's largest specialist insurance markets.

Kangaroo Island Sealink Pty Ltd, ABN 69 007 122 367, AR 261366 (Sealink) is an authorised representative of nib Travel Services (Australia) Pty Ltd ABN 81 115 932 173, AFSL 308461 (nib). nib Travel Services is a wholly owned subsidiary of nib holdings limited, ABN 51 125 633 856 and is part of the nib Group of companies. Sealink is authorised by nib to distribute and issue travel insurance policies. Sealink may also provide you with general advice about the travel insurance product.

nib acts as the underwriting agent of the insurer under a binding authority from the insurer which means it can issue, vary, renew or cancel your insurance on their behalf. nib is authorised to provide general financial product advice and deal in general insurance products and also handles and settles any claims you make.

nib and our representatives act on behalf of the insurer and not on your behalf.

nib receives a percentage of the premiums you pay to the insurer for the services it provides. nib pays a percentage of its commission to Sealink for its role. nib may also receive a profit-based commission from the insurer, based on the profitability and performance of all insurances placed by nib, if the insurer makes an underwriting profit in any given year.

Representatives of Sealink are paid an annual salary and may be paid a bonus based on business performance. Sealink pays commission to entities which refer clients to them, which is calculated as a percentage of the premium paid. Sealink also works with affiliates who introduce or refer customers to Sealink. If you are referred to Sealink by an affiliate, the affiliate who referred you is paid a referral fee from the commission that Sealink receives from nib. The referral fee is calculated as a percentage of the gross premium when you buy a policy and is at no extra cost to you. Depending on certain eligibility criteria, an affiliate can receive additional benefits such as discounted travel insurance or marketing assistance from Sealink.

For more information on commissions or remuneration paid for financial services provided, contact nib either before you buy your insurance or within a reasonable time of receiving this Combined FSG and PDS.

Feedback, complaints and disputes

If you have any feedback about our service – positive or negative – we would like you to share it with us. You can either call us on 1300 555 017 or email us at travel-service@nib.com.au.

How we handle complaints

If you have a complaint arising out of this insurance or the financial services provided by the insurer, our representatives, affiliates, or service providers, please contact:

Customer Relations

PO Box A975

Sydney NSW 1235

Australia

Phone: 1300 025 121

Email: idr-care@nib.com.au

nib will acknowledge your complaint within 5 business days and provide you with the contact details of the person handling your complaint. We will respond to your complaint within 15 business days. If more time is needed to collect necessary information or complete any further investigation required, nib will agree with you a reasonable alternative timeframe.

If you are not satisfied with the response to your complaint, you should contact the Lloyd's General Representative in Australia for consideration under their dispute resolution process. You can contact Lloyd's at:

Lloyd's Underwriters' General Representative in Australia

Level 9, 1 O'Connell St
Sydney NSW 2000

Phone: +61 2 8298 0783

Email: idraustralia@lloyds.com

Your dispute will be acknowledged within 5 working days of receipt, and Lloyd's will send a final response on behalf of the Underwriters within 15 business days.

If we are unable to resolve your complaint within 45 days of receiving your original complaint, or if you are still not satisfied with the outcome, you can choose to have your complaint independently reviewed by the Australian Financial Complaints Authority, or AFCA. AFCA provides fair and independent financial services complaint resolution that is free to consumers.

AFCA can be contacted at:

Website: afca.org.au

Email: info@afca.org.au

Telephone: 1800 931 678 (free call)

In writing to: Australian Financial Complaints Authority, GPO Box 3, Melbourne VIC 3001

Other information about us

Your privacy

We take your privacy seriously and adhere to the Privacy Policy detailed on our website at nib.com.au/docs/privacy-policy.

Professional Indemnity Insurance

nib and its representatives (including Sealink) are covered under professional indemnity insurance arrangements that comply with the requirements of Chapter 7 of the Corporations Act. The insurance (subject to its terms and conditions) will continue to cover claims in relation to nib's representatives that no longer work for it (but who did at the time of the relevant conduct).

Where a financial service is provided to you by one of nib's and Sealink's partners, that partner is required to hold professional indemnity insurance arrangements for compensating clients for losses they suffer as a result of a breach of their obligations under the Corporations Act relating to the financial services provided by them.

nib Travel Services is responsible for this FSG which was prepared on 14 January 2019.

Customer Service

Phone: 1300 555 017 (within Australia)

Phone: +61 3 8523 2777 (outside of Australia)

Fax: 1300 657 117

Email: travel-service@nib.com.au

POLICY

SL30

CODE

Claims

Phone: 1300 555 017 (within Australia)

Phone: +61 3 8523 2777 (outside of Australia)

Fax: 1300 657 157

Email: travel-claims@nib.com.au

nib International Assistance

Phone: 1300 555 019 (within Australia)

Phone: +61 3 8523 2800 (outside of Australia)

Fax: (03) 8523 2815

Email: travel-assist@nib.com.au

Insurance underwritten by certain underwriters at Lloyd's, who deal with you through their agent nib Travel Services (Australia) Pty Ltd ABN 81 115 932 173 AFSL 308461.

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