.:Medi-Select Advantage®

Non-Medical Travel Insurance

Non-Medical Policy



This Policy provides Non-Medical Travel Insurance coverage. The following benefits are available for trips taken outside your province or territory of residence for personal leisure purposes and are not available for any business related travel.

The All-Inclusive Multi-Trip Annual Plan is formed by combining the Multi-Trip Non-Medical Annual Plan option with the Medi-Select Advantage Emergency Medical Travel Insurance Multi-Trip Annual Plan. The Medi-Select Advantage All-Inclusive Top Up Plan, which Advantage Emergency Medical Travel Insurance Multi-Irip Annual Plan. The Medi-Select Advantage All-Inclusive Top Up Plan, which covers the number of days in excess of the maximum trip duration allowed on an All-Inclusive Multi-Trip Annual Plan, is formed by combining the Single Trip Non-Medical Plan option with the Medi-Select Advantage Emergency Medical Travel Insurance Top Up. These policy options are only offered in conjunction with the Medi-Select Advantage Emergency Medical Travel Insurance Policy, and become valid if the All-Inclusive Multi-Trip Annual Plan or the All-Inclusive Top Up Plan was selected at the time of application, as indicated on your confirmation of insurance, and the appropriate premium has been paid.

The Single Trip Non-Medical Plan option is available for single trips and becomes valid when the Single Trip Non-Medical Plan was selected at the time of application, as indicated on your confirmation of insurance, and the appropriate premium has been paid.

IN THE EVENT YOU HAVE TO FILE A CLAIM YOU MUST CALL GLOBAL EXCEL ON THE DAY THE INSURED RISK OCCURS OR ON THE NEXT BUSINESS DAY:

From Canada and U.S., call 1-800-715-8833 / From anywhere, call collect +819-566-8839

Section I - Important Notice

- Throughout this policy, words in italics have a specific meaning and are defined in Section X Definitions.
- Please read this policy carefully before *you* travel.
- Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that *you* read and understand *your* policy before *you* travel, as *your* coverage may be subject to certain limitations and exclusions.
- Pre-existing medical condition exclusions may apply to medical conditions and/or symptoms that existed prior to *your* trip. Refer to *your* policy to determine how these exclusions may affect *your* coverage and how they relate to *your* departure date, date of purchase or effective date.
- · In the event of a sickness or injury, your prior medical history will be reviewed after a claim has been
- All amounts are in Canadian currency, unless indicated otherwise.
- If, while you are on a covered trip, you return to your province, territory of residence or Canada for any reason prior to your expected return date, you must contact your broker or sales agent to discuss how your coverage may be affected.
- This policy contains a provision removing or restricting the right of the insured to designate persons to whom or for whose benefit insurance money is to be payable.

Section II - Eligibility

- - a. Issued in Canada for travel arrangements booked through a supplier of travel services;
- For the Single Trip Non-Medical Insurance Plan option, purchased within 7 days of the initial deposit for your covered trip or, if purchasing insurance more than 7 days after the initial deposit for your covered trip, then insurance must be purchased prior to any cancellation penalties being applicable to you for the covered trip; and
- Purchased prior to the contracted date of departure from your province, territory of residence or Ca
- You must meet the following conditions to be eligible for this insurance:
 a. You must be a Canadian resident and be covered by the government health insurance plan (GHIP) of your Canadian province or territory of residence for the entire duration of your trip:
 - You must NOT be travelling against the advice of a physician or have been diagnosed with a terminal illness or metastatic cancer:
 - You must NOT have a kidney disease requiring dialysis; and
 - You must NOT have been prescribed or used home oxygen during the 12 months prior to your date
- 3. It is a condition precedent to the Insurer's liability under this policy that at the time of purchase
 - a. The applicant knows of no reason for him, an immediate family member, a travel companion, or a travel companion's immediate family member, to seek medical attention;
 - The applicant and his travel companion(s) must be deemed fit to undertake and complete the covered
- 4. You must complete and submit the Application prior to the effective date of insurance. You are subject to the eligibility criteria as outlined on the Application and in this Policy.
 - a. For the Single Trip Non-Medical Insurance Plan option, you must have applied for the Non-Medical Plan under the Single Trip Plan on the Application.
 - For the Multi-Trip Non-Medical Annual Insurance Plan option, you must have applied for the All-Inclusive Multi-Trip Annual Plan on the Application.
- If this insurance is purchased in any other manner than as stated in this Section, this policy shall be null and void and the Insurer's sole liability will be limited to the refund of the insurance premium paid.

Note: This plan is not available if you have purchased the 40-day Supplemental Multi-Trip Annual Plan for

Section III - Insurance Agreement

This Non-Medical Insurance Policy, the Application and the Policy Confirmation all form part of your insurance contract and must be read as a whole. The Insurer will pay eligible benefits specified in this Policy upon payment of the required premium, submission of a correct and complete Application and occurrence of an insured risk, subject to the terms, conditions, limitations, exclusions, definitions and other provisions of this Policy.

B. Coverage Offered

Plan Options: 1. Multi-Trip Non-Medical Annual Plan

- a. This policy combined with the Medi-Select Advantage Emergency Medical Travel Insurance Policy, forms the All-Inclusive Multi-Trip Annual Plan and provides coverage outside your province or territory of residence.
- Provides coverage between the effective date and the expiry date of your policy as indicated on your Confirmation of insurance for any number of trips outside your province or territory of residence up to the allowed trip duration that you selected at time of purchase.
- 2. Single Trip Non-Medical Plan
 - Provides coverage for a single trip outside your province or territory of residence or Canada.
 - b. May be purchased as a Top Up to the Multi-Trip Non-Medical Annual Plan to cover the additional value of your trip if it exceeds the amount offered under that plan.

 May be combined with the Medi-Select Advantage Emergency Medical Travel Insurance Single Trip
 - Daily Top Up Plan to form the All-Inclusive Top Up Plan which provides coverage for the number of days in excess of the maximum trip duration allowed under the option you have selected at time of initial purchase of the All-Inclusive Multi-Trip Annual Plan.

This Policy provides the following insurance coverage:

Benefits	Multi-Trip Non-Medical Annual Plan	Single Trip Non-Medical Plan		
Travel Cancellation	\$2,500 per insured, per trip (to a maximum of \$5,000 per insured, per policy period and \$10,000 per family, per policy period)	Up to sum insured per policy period		
Travel Interruption	\$5,000 per insured, per trip (to a maximum of \$10,000 per insured, per policy period and \$20,000 per family, per policy period)	Up to sum insured per policy period		
Accidental Death and Dismemberment				
Flight Accident	\$150,000 per insured	\$150,000		
Common Carrier Accident	\$75,000 per insured	\$75,000		
24-Hour Accident	\$25,000 per insured	\$25,000		
Baggage and Personal Effects	\$1,000 per insured, per trip (to a maximum of \$2,000 per insured, per policy period and \$4,000 per fam- ily, per policy period)	\$1,000		
Baggage Delay	\$400 per insured, per trip (to a maximum of \$800 per insured, per policy period and \$1,600 per family, per policy period)	\$400		

C. Period of Coverage

Plan	Age	Trip Duration	
Multi-Trip Non-Medical	0-79	4, 9, 16, 30 or 60 consecutive days	As selected on the Application and as indicated on <i>your</i> Confirmation
Annual Plan	80+	4, 9 or 16 consecutive days	of Insurance for the All-Inclusive Multi-Trip Annual Plan
Single Trip Non-Medical Plan	All Ages	Up to 182 days (or any number of days allowed in <i>your</i> province or territory of residence)*	As selected on the Application and as indicated on <i>your</i> Confirmation of Insurance

Note: Coverage beyond the Maximum Trip Duration (to a limit of 365 days) is permitted providing you have been granted an extension on your GHIP coverage.

- a. Effective Date for Travel Cancellation Coverage begins on the later of the following:
 - the date you pay the premium (either at the time of initial deposit or prior to any cancellation penalties being applicable to *your covered trip*); or the date a policy number is issued.
- Effective Date for Travel Interruption, Accidental Death and Dismemberment and Travel Baggage and Personal Effects Coverage begins on your departure date from your province or territory of residence.
- Expiry Date for the Multi-Trip Non-Medical Annual Plan Coverage terminates on the earliest of the
 - the date you reach the maximum sum insured per policy period; or
 - the date you reach the maximum number of days allowed under the trip duration you selected at the time of purchase; or
 - iii. the date you return to your province or territory of residence; or
- iv. the expiry date as indicated on your Confirmation of Insurance.

 d. Expiry Date for the Single Trip Non-Medical Plan Coverage terminates on the earliest of the
 - the date you return to your province or territory of residence; or

 - ii. the expiry date as indicated on *your* Confirmation of Insurance; or iii. the date the Insured Risk occurs (if the trip is cancelled prior to the *contracted* date of departure).

The All-Inclusive Top Up Plan, formed by combining the Single Trip Non-Medical Plan with the Medi-Select Advantage Emergency Medical Travel Insurance Single Trip Daily Top Up Plan, can be used as a Top Up to the All-Inclusive Multi-Trip Annual Plan to cover the number of days in excess of the maximum trip duration allowed under the option you have selected at time of initial purchase of the All-Inclusive Multi-Trip Annual Plan. Note: If using the All-Inclusive Top Up Plan as a Top Up to cover the number of days in excess of the maximum trip duration allowed, only the Travel Interruption, Accidental Death and Dismemberment and Baggage and Personal Effects benefits will apply for the additional number of days.

The Single Trip Non-Medical Plan can be used as a Top Up to the All-Inclusive Multi-Trip Annual Plan to cover the additional value of *your* trip if it exceeds the amount offered under that plan. **Note**: If using the Single Trip Non-Medical Plan as a Top Up to cover the additional value of *your* trip, only the Travel Cancellation and Interruption benefit amounts will increase. The maximum *sum insured* for the Accidental Death and Dismemberment and Baggage and Personal Effects will remain as outlined in the Single Trip Non-Medical Plan benefit summary. Please refer to Section III - Insurance Agreement, B. Coverage Offered.

E. Payment of Premium

Coverage is valid upon payment of premium subject to the eligibility requirements. The premium must be paid on the date of purchase. Coverage will be null and void if the premium is not received, if a cheque is not honoured for any reason, if credit card charges are invalid or if no proof of *your* payment exists.

Premium paid is non-refundable. However, you have the right to cancel this policy within 10 days of receipt of the contract and receive a full refund. You must notify your broker or sales agent immediately if you wish to cancel your coverage and written confirmation must be received within 10 days of receipt.

Section IV - Travel Cancellation and Interruption

A. Coverage Offered

Benefits specified below are provided upon the occurrence of an insured risk.

Any of the following occurrences that prevent you from departing, travelling or returning on the dates of the covered trip is an insured risk.

Conditions

At the time you purchase your travel arrangements:

You must not know of nor be aware of any reason, circumstance, event, activity or medical condition affecting

you, an immediate family member, a travel companion, a travel companion's immediate family member or a business associate which may eventually prevent you from starting and/or completing your covered trip as booked.

Insured Risks

- 1. Sickness, injury, death or quarantine of you, a travel companion, an immediate family member, a travel companion's immediate family member or a caregiver.

 Death or emergency hospitalization of a business partner, a key employee or a close friend occurring within
- 10 days of the contracted departure date or during the covered trip

Section IV - Travel Cancellation and Interruption (continued)

- Death or emergency hospitalization of your host at trip destination.
- Complete cancellation of a cruise within 30 days of departure by the cruise line when the cruise ship is rendered inoperative as a result of a collision at sea, an onboard fire or the complete breakdown of the ship's engines (see paragraph B.5. under Benefits for Travel Cancellation). The cruise ship must weigh a minimum 10,000 tons and your ticket must be issued and paid in full at the time of cancellation.
- The relocation of your principal residence or that of a travel companion by reason of an unforeseen transfer initiated by the employer with whom you, your spouse, a travel companion or a travel companion's spouse are employed at the time of purchase of this insurance or the booking of the trip. This insured risk does not apply to cases of self-employment or temporary contract work.
- Involuntary loss of permanent employment without just cause by you, your spouse, a travel companion, a travel companion's spouse, your parent or legal guardian (if you are under 16 years of age) provided that, at the time you purchased this insurance or booked the trip, the imminent loss was not public knowledge, nor were the aforementioned persons aware that such loss of permanent employment was imminent.
 - This insured risk does not apply if employment began after this insurance was purchased or to cases of self employment, temporary contract work, temporary layoffs or if you were in the trial period for a new permanent employment.
- Your principal residence or that of a travel companion is rendered uninhabitable or your place of business or that of a travel companion is rendered inoperative. This insured risk does not cover losses caused by your
- 8. A new official travel notice issued by the Canadian Government after this insurance was purchased and after you booked your trip, warning Canadian residents not to travel to, or advising to leave, a specific region or country that is part of your covered trip.
- 9. A delay that causes you to miss or interrupt any part of your covered trip when, the private or rented vehicle which you are driving or in which you are a passenger, or a common carrier or a prepaid connecting flight aboard which you are a passenger, is delayed due to weather, a mechanical failure, an emergency road closure by the police or an accident, provided that the vehicle or the common carrier was scheduled to arrive at the contracted departure or return point at least two hours (or the required minimum arrival reporting time, whichever is the greater) in advance of the contracted time of departure or return.
- 10. You or a travel companion are the victim of a hijacking or a direct, violent attack during the covered trip. B. Benefits for Travel Cancellation
- You must report the cancellation of your covered trip immediately. See Section IV G. How to Report a

Travel Cancellation or Interruption for instructions.

When the insured risk occurs before departure, this Policy provides for payment of one of the following

- amounts specified below, up to the maximum described in B. Coverage Offered:

 1. The non-refundable portion of unused travel arrangements that you have paid for prior to your departure. This benefit applies to insured risks 1 to 9; or
- the penalty fee charged for the reinstatement of the unused travel points. This benefit applies to insured risks 1 to 9: or
- upgrade expenses for the extra cost of the next occupancy charge when any of the insured risks 1 to 9prevents a travel companion from departing on the covered trip and you elect to continue with the covered
- reasonable transportation costs for you to travel to the destination of your covered trip by the most direct route if you miss the contracted departure due to the occurrence of insured risk 1, 2, 7 or 9; or
- 5. a maximum of \$1,200 for prepaid accommodation and non-refundable prepaid airfare, not forming part of a fly-cruise package, booked and scheduled so that you may join the cruise ship that is part of your covered trip at its original point of embarkation, when the cruise departure is cancelled by the cruise line because the cruise ship (minimum weight 10,000 tons) has been rendered inoperative as a result of a collision at sea, an onboard fire or the complete breakdown of the ship's engines.
- Benefits for Travel Interruption

You must report the interruption of your covered trip immediately. See Section IV - G. How to Report a Travel Cancellation or Interruption for instructions.

When the insured risk occurs <u>after</u> departure, this Policy provides for payment of the following amounts

specified below, up to the maximum described in B. Coverage Offered

- 1. If you must return earlier or later than the contracted date of return due to the occurrence of insured risk
 - a. up to the cost of a one-way economy airfare to the contracted point of departure or the fee charged by the airline to change your contracted date of return as shown on your current and usable ticket, whichever is less: and
 - the non-refundable portion of unused land arrangements (if any) paid prior to your contracted date of departure.

Note: This benefit does not reimburse the unused portion of any travel ticket.

- 2. If you miss part of the covered trip due to the occurrence of insured risk 1, 2, 3, 8, 9 or 10:
 - reasonable and additional transportation costs for you to rejoin the tour or group by the most direct route; and b. the non-refundable portion of other unused land arrangements paid prior to your contracted date of departure.

en an applicable insured risk occurs, the *insured* is eligible for interruption benefits 1 or 2 at

- When an insured risk occurs, you will also be reimbursed for reasonable and necessary commercial lodging and meals, commercial automobile rental, essential telephone calls and taxi transportation, to a maximum of \$1,500, subject to a limit of \$150 per day, provided:
 - you miss part of a covered trip; or
 - b. your or an insured travel companion's return to the contracted point of departure is delayed beyond the contracted date of return; or
 - vou must return earlier than the contracted date of return.
 - To file a claim for such expenses, you must supply original receipts from commercial organizations.
- 4. In the event of your death, up to a maximum benefit of \$5,000 towards the actual cost incurred for preparation of remains, homeward transportation of the deceased insured person to their province or territory of residence; or cremation and/or burial at the place of death of the insured person. The cost of the casket or urn is not covered by this benefit.
- Benefits for Flight Itinerary Schedule Change

If an unexpected and unplanned change in the schedule (not a flight delay) of your confirmed, prepaid and ticketed flight reservations is announced, you will be reimbursed any additional expenses incurred for your re-scheduled flight(s) arising under the following conditions:

a. when a change by any of the *non-aligned air carriers* providing a portion of the air transportation for *your*

- covered trip requires you to re-schedule a flight to complete your covered trip; or when your original flight itinerary, not forming part of a fly-cruise package, is changed more than 72 hours
- prior to departure, and you incur additional expenses for new flight arrangements to join your cruise embarkation at the point of cruise departure.

This coverage applies to any flight that is part of your covered trip, from your contracted date and point of departure up to and including your contracted date of return to your original point of departure, subject to one Flight Itinerary Schedule Change per connecting point in the covered trip, to a maximum of \$1,200 per

2. Benefits

The Insurer will reimburse to you, for re-scheduled flights forming part of the covered trip, the lesser of the difference in cost (including usual and customary agency service fees, if normally applicable for similar reservation services) between *your* refundable and/or unusable ticket(s) and the cost of:

 a. the change fee for your new ticket, charged to you by the agency and/or air carrier(s) involved to bring
you to the next connecting point or the point of initial cruise embarkation as shown on your original ticket itinerary: or

- b. a one-way economy ticket by the most cost-effective route, charged to you by the agency and/or air carrier(s) involved to bring you to the next connecting point or to the point of initial cruise embarkation on your original ticket itinerary.
- Limitations and Restrictions
- Coverage Limited to Non-refundable Sums Failure to notify Global Excel may limit benefits payable to you. Only the sums that are non-refundable on the day the insured risk occurs shall be considered for the purpose of the claim.

 Condition Precedent to Liability – It is a condition precedent to the Insurer's liability under this policy that
- at the time of application and at the time of booking any trip:
- a. you know of no reason for you, an immediate family member, a travel companion, or a travel companion's immediate family member, to seek medical attention;
- you and your travel companion(s) must be deemed fit to undertake and complete the covered trip as
- Penalties Applicable to your Trip Prior to paying the deposit or the full amount of your covered trip, you must have in your possession, printed and documented evidence that clearly outlines the details of all the penalties that are applicable to the cancellation and/or interruption of your covered trip.

4. Flight Itinerary Schedule Change:

- At the time of booking, you and/or your supplier of travel services must be completely unaware of any pending announcement regarding a Flight Itinerary Schedule Change that is applicable to your covered
- You must make new flight arrangements within five business days of the Flight Itinerary Schedule Change announcement made to you or your supplier of travel services by the air carrier(s) involved to bring you to the next connecting point or to the point of initial cruise embarkation on your original ticket
- This coverage is applicable only to the schedules of air carriers that, on the date of booking the covered trip, are duly authorized by appropriate and governing air transportation authorities
- Local and standard minimum airline connecting time rules and procedures, as well as printed instructions for re-confirmation for the covered trip, must be respected and adhered to.
- Exclusions for Travel Cancellation and Interruption

Please refer to Section VII - Exclusions.

- How to Report a Travel Cancellation or Interruption
- You must substantiate your claim by providing all required documents. Failure to do so may result in non-payment of your claim. The Insurer is not responsible for charges levied in relation to any such documents. Note that incomplete documentation will be returned to you for completion.

 The physician recommending cancellation, interruption or delay of the covered trip must be your personal
- physician or a physician actively and personally attending to your care.

 You must call the Global Excel Cancellation Desk and your supplier of travel services on the day the insured
- risk occurs or on the next business day to advise them of your cancellation or interruption. Failure to do so may limit the benefits payable to you. Only the non-refundable prepaid amounts that apply on the day the insured risk occurs shall be considered for the purpose of your claim
- When you contact the Global Excel Cancellation Desk by telephone, be prepared to provide the following information:
- a. your name;
- b.
- your policy number; the insurance plan you purchased;
- your contracted dates of travel for the covered trip; d.
- the reason why you are cancelling or interrupting your covered trip;
- the telephone, fax number and/or email address where you can be contacted immediately
- Once you have reported the cancellation or interruption of your covered trip (as described in 3 and 4 above), you must submit the documents listed below to Global Excel at the address indicated below. Please make sure you complete the following steps.

- You must submit the following documents:
 a. A claim form (available by contacting Global Excel) fully completed and signed by you as well as your regular attending *physician* or the *physician* actively attending to *your* care who is recommending that *you* do not travel on the dates of *your covered trip*.

 Original invoice receipts for transportation, meals and accommodation and transfer vouchers.

 - Original airline tickets. If any part of the airline ticket is refundable (taxes or penalty) please proceed first
 - with the refund and send us a copy of the airline ticket and proof of refund.

 Original receipts as proof of payment for *your covered trip* showing date(s), amount(s) paid, *supplier of travel services* fees and penalties and the method of payment for *your* insurance. This is required for all the deposits and final payments *you* made to *your supplier of travel services*.

For Travel Cancellation

- For a claim under insured risk 1, 2 or 3 due to death or hospitalization, a claim form (available by contacting Global Excel), a death certificate, hospital records and an explanation of your relationship to the person in question and why this event caused you to cancel your covered trip.

 For a claim under insured risks 4 to 9, proof of the insured risk's occurrence, as follows:
- a. for insured risk 4, the applicable letters from the cruise line;
- b. for insured risk 5 or 6, a letter from the employer confirming the relocation or termination of employment;
- for insured risk 7, the applicable reports from the proper authorities;
- d.
- for insured risk 8, a proof of the official travel warning; for insured risk 9, the original airline ticket(s) and/or an original cancellation invoice, the transfer vouchers, a police report detailing such circumstances, or in the case of a mechanical failure, an applicable letter from the rental agency confirming such failure or a commercial invoice detailing the necessary repairs to the vehicle.

For Travel Interruption

- 8. For a claim under insured risks 1, 2, 3, 7, 8, 9 or 10:
 - a. The original: airline tickets, transfer vouchers, accommodation and other travel documents prepaid for vour covered trip.
 - An explanation of the events that caused you to interrupt your covered trip under the insured risk
 - Complete details and dates of the event and an explanation of *your* relationship to the person in question where a person other than yourself is involved.
 - d. For out-of-pocket expenses: original receipts for the covered expenses incurred and an explanation of the expenses For hospitalization, death or repatriation: a copy of the hospital records, death certificate, receipts from airlines, funeral homes and other expenses covered under the insured risk.
- Global Excel may ask you or your attending physician to provide additional evidence to support your claim. The existence of a pre-existing medical condition may be established using the medical records held by the claimant's attending physician(s) or any hospital(s) for the purpose of determining the validity of a claim. In this event, you will be responsible for any fees required to substantiate your claim. required to undergo examination by one or more of our physicians. In this event, Global Excel will cover any
- 10. For a claim under Flight Itinerary Schedule Change You must provide proof of refund for the original tickets (a copy of the ticket refund notice or ticket exchange notice) or a letter from the agency if ticket(s) have not yet been issued or were sent for refund to the bank settlement plan, tour operator or wholesaler.

Please send all documents for your claim to:

Global Excel Management Inc., 73 Queen Street Sherbrooke, Quebec J1M 0C9 TELEPHONE: 1-800-715-8833 (toll free) **OR** +819-566-8839 (collect) during business hours (ET).

Section V - Accidental Death and Dismemberment

- Coverage Offered
- 1. Flight Accident
 - Death or dismemberment as a result of injury sustained during the covered trip while you are:
 - travelling as a passenger, not as pilot or crew member, aboard an aircraft, up to a sum insured of \$150,000: or
 - travelling as a passenger, not as pilot or crew member, aboard an aircraft operated by the Canadian Armed Forces or its British or American counterparts, up to a sum insured of \$150,000.
- 2. Common Carrier Accident
 - Death or dismemberment as a result of injury sustained during the covered trip while you are:
 - a. on airport premises immediately prior to boarding or after alighting from an aircraft, up to a sum insured of \$75,000;
- b. travelling as a passenger in an airport limousine, bus or other ground vehicle provided or arranged for by the airline or airport authority for the purpose of boarding or alighting from an aircraft, up to a sum insured of \$75,000; or
- travelling to or from the airport in connection with a flight that is part of your covered trip as a fare-paying passenger (not as pilot, driver or crew member) aboard a common carrier which is involved in an accident, up to a sum insured of \$75,000.

3. 24-Hour Accident

Death or dismemberment as a result of *injury* sustained during the *covered trip* while *you* are in any situation other than those listed in Flight *Accident* and *Common Carrier Accident* above (and not otherwise excluded from coverage under this policy), up to a sum insured of \$25,000.

Section V - Accidental Death and Dismemberment (continued)

- 4. Exposure and Disappearance due to Accident
 - If you are unavoidably exposed to the elements due to an accident resulting in the disappearance, sinking or damage of a common carrier aboard which you are a passenger and if, as a result of such exposure, you sustain a loss for which benefits would otherwise be payable, such loss will be covered by this policy.
 - If you disappear due to an accident resulting in the disappearance, sinking or damaging of a common carrier aboard which you are a passenger and if your body is not found within 52 weeks of such accident, the Insurer shall presume that you sustained loss of life as a result of injury covered by this Policy, subject to there being no evidence to the contrary.
- R. Benefits

The greatest of the following benefits is payable for all losses resulting within 100 days from the date of a single accident described in A. Coverage Offered above and as a direct result thereof:

1. 100% of the sum insured if one single accident results in the loss of life, dismemberment of two limbs or loss

- of sight in both eyes
- Note: The benefit for dismemberment of two limbs or loss of sight in two eyes is payable only if such dismemberment results directly from a single accident.

 2. 50% of the sum insured for dismemberment of one limb or loss of sight in one eye.

Section VI - Baggage and Personal Effects

Loss of, or damage to, the baggage and personal effects you own and use by reason of theft, burglary, fire or transportation hazards during the covered trip, to a maximum sum insured of \$1,000 (\$400 for Baggage Delay) per trip. The Insurer will reimburse eligible expenses only in excess of those reimbursable under any other source.

B. Benefits

The Insurer reserves the right to repair or replace damaged or lost property with other property of like quality and value and shall not be liable beyond the actual cash value of such property at the time of loss or damage. When, after a reasonable period of time, property lost by the common carrier is not found, any claim will be assessed and paid

- Personal Effects The actual cash value or \$500, whichever is less, in respect of any one item or set of items. Jewellery, cameras (including camera equipment), or sports equipment are respectively considered a single item
- **Document Replacement -** Reimbursement of the cost of replacing one or more of the following documents, to a maximum of **\$200**, in the event of loss or theft: passport, driver's licence, birth certificate or *travel visa*.
- Baggage Delay Up to \$400 to purchase necessary toiletries in the event that your checked baggage is delayed by the common carrier for more than 12 hours while en route and before returning to your contracted point of departure. To file a claim, you must supply proof of delay of checked baggage from the commoncarrier and original purchase receipts.
- Limitations and Restrictions

Total Benefits Limited to the Actual Expenses

The total benefits paid to *you* from all sources cannot exceed the actual expense which *you* have incurred. D. Exclusions for Baggage and Personal Effects

Please refer to Section VII - Exclusions.

- How to File a Claim
- Important In the event of loss due to theft, burglary, robbery or malicious mischief, you must notify and obtain supporting documentary evidence from the police immediately upon discovery. Failure to report the loss to the police shall invalidate any claim under this insurance for such loss.
- You must substantiate your claim by providing all required documents. Failure to do so may result in nonpayment of your claim. The Insurer is not responsible for charges levied in relation to any such documents. Note that incomplete documentation will be returned to you for completion.

- Note: "Loss" in reference to dismemberment means the actual, complete severance at or above the wrist or ankle joint. Loss of sight means the complete and irrecoverable loss of eyesight, which loss cannot be substantially corrected or remedied through simple treatment or corrective lenses.
- Limitations and Restrictions
- Coverage Limited to Greatest Loss Should more than one covered loss be sustained as the direct result of a single accident, only the largest of the benefits is payable.

 2. Coverage Limited to Sum Insured - The total benefits payable for one or more accidents occurring during
- the same covered trip shall not exceed the sum insured.

 3. Excess Coverage If the total amount of all accident insurance coverage that you purchase from the Insurer
- with respect to the same covered trip exceeds \$150,000 in the aggregate, then any such excess is void and the Insurer's only liability with respect to such excess will be to refund the premiums relating to such excess insurance coverage.

 Exclusions for Accidental Death and Dismemberment

ease refer to Section VII - Exclusions.

How to File a Clain

For a claim under Accidental Death and Dismemberment Insurance, you must contact Global Excel for forms and instructions.

- 3. To file a claim, you must:
 - a. take all reasonable steps to protect, save and/or recover the property:
 - notify Global Excel of the loss within 24 hours;
 - promptly notify and obtain supporting documentary evidence from the transportation authorities in whose custody the insured property was at the time of loss or promptly notify the hotel manager, tour guide or police; and
- provide adequ ate proof of loss, ownership and actual cash value within 90 days from the date of loss. Failure to comply with these conditions shall invalidate any claim under this insurance for such loss. **You must submit:**

- You must submit the completed claim form (available by contacting Global Excel).

 A copy of the insurance policy with the policy/confirmation number (if applicable) identified prominently.
- 6.
 - For loss: a. a report by the police and either the hotel manager, tour guide or transportation authorities in whose
 - custody the insured property was at the time of loss; adequate proof of loss, ownership and itemized value along with a detailed statement within 90 days from
 - the date of loss (failure to supply such information shall invalidate *your* claim); a Property Irregularity Report when luggage is lost or damaged while in the custody of the airline or common carrier:
 - adequate proof of home insurance coverage and/or amount of deductible (if applicable).

- 7. For Baggage Delay:
 a. original itemized receipts for expenses actually incurred;
 - b. a copy of the baggage claim ticket;c. a copy of *your* airline ticket;

 - d. a copy of the airline report confirming the delay of your checked baggage including the reason and the duration of the delay;
 - e. a copy of the delivery receipt for your checked baggage.

Please send all documents for your claim to:

Global Excel Management Inc.

73 Queen Street

Sherbrooke, Quebec

J1M 0C9

TELEPHONE: 1-800-715-8833 (toll free) OR +819-566-8839 (collect) during business hours (ET).

GlobalExcel:

Section VII - Exclusions

Benefits	Applicable Exclusions
Travel Cancellation and Interruption	1 to 21
Accidental Death and Dismemberment	3 to 6, 8, 9, 19, 21, 22, 23
Baggage and Personal Effects	3 to 6, 24 to 31

This insurance does not cover losses or expenses caused directly or indirectly, in whole or in part, by:

- a. Any sickness, injury or medical condition (other than a minor ailment) that was not stable at any time during the 90 days prior to the date of purchase of your travel arrangements.
 - b. A heart condition, if any heart condition was not stable at any time during the 90 days prior to the date of purchase of your travel arrangements. c. A lung condition if, at any time during the 90 days prior to the date of purchase of your travel
 - arrangements: i. any lung condition, was not stable; or
 ii. you have been treated with home oxygen or taken oral steroids (e.g., prednisone) for any lung condition.

This exclusion applies to you and the following persons who are age 60 or over: an immediate family member, a travel companion, a travel companion's immediate family member or a business associate.

- Any injury, sickness or medical condition which, prior to the date of purchase of your travel arrangements:

 a. was such as to render medical consultation or hospitalization expected;
- b. which has been shown, by prior medical history, as probable or certain to occur.
- Expenses for which no charge would normally be made in the absence of insurance.
- Committing or attempting to commit an illegal act or criminal act.
- Your participation in and/or voluntary exposure to any risk from: war or act of war, whether declared or undeclared, invasion or act of foreign enemy, declared or undeclared hostilities; civil war, riot, rebellion; revolution or insurrection; act of military power; or any service in the armed forces.
- Labour disruptions or strikes (legal or illegal).

 Sickness, injury or medical condition if you, a travel companion or an immediate family member of you or your travel companion are awaiting or undergoing any surgery, medical test(s) examination(s), monitoring or consultation prior to the date of purchase of your travel arrangements:
 - a. for an existing medical condition, other than a regular medical check-up. (In the eventuality of a claim, the dates of the last and next medical check-up must be provided.);
 - for a new or changed medical condition which may eventually cause you, a travel companion or an immediate family member of you or your travel companion to seek medical attention.
- Medication, drugs or toxic substance abuse or overdose (whether or not you are sane); alcohol abuse, alcoholism or an accident while being impaired by drugs or alcohol or having an alcohol concentration that
- exceeds 80 milligrams in 100 milliliters of blood.

 Suicide (including any attempt thereat) or self-inflicted *injury* whether or not *you* are sane.
- 10. A disorder, disease, condition or symptom that is emotional, psychological or mental in nature unless you are hospitalized on the date of occurrence for the event that caused a trip cancellation.

- 11. Treatment or surgery during a trip when the trip is undertaken for the purpose of securing or with the intent of receiving medical or hospital services, whether or not such trip is taken on the advice of a physician or surgeon.
- 12. A trip undertaken for the purpose of visiting a sick or injured person when the covered trip is cancelled, interrupted or delayed due to such person's medical condition or death therefrom.
- 13. Routine pre-natal care
- 14. High risk pregnancy. A high risk pregnancy means a pregnancy where any medical condition or risk factor puts the mother, the developing fetus, or both, at a higher than normal risk of developing medical complications during or after the pregnancy and birth.
- 15. Any child born during your trip.
- 16. Pregnancy, childbirth or complications of either, occurring in the 9 weeks before or after the expected date of delivery.
- 17. A return earlier or later than the contracted date of return, unless recommended by the attending physician. 18. A return delayed more than 10 days beyond the contracted date of return, unless you, an immediate family member or a travel companion were hospitalized for at least 48 consecutive hours within the 10-day period.
- 19. Any sickness, injury or medical condition you suffer or contract, or any loss you incur in a specific country, region or area for which the Government of Canada, including Foreign Affairs, Trade and Development Canada, has issued a travel advisory or formal notice, before your departure date, advising travellers to avoid non-essential travel or to avoid all travel to that specific country, region or area. If the travel advisory or formal notice is issued after your departure date, your coverage under this policy in that specific country, region or area will be limited to a period of 10 days from the date the travel advisory or formal notice was
- issued, or to a period that is reasonably necessary for you to safely evacuate the country, region or area.

 20. Any cause or event which might reasonably have been expected to necessitate the immediate return of the
- 21. Flight accident (unless you are travelling as a fare-paying passenger on a commercial airline).
- 22. Participation in:
- a. any sports as a professional athlete (person who engages in an activity as one's main paid occupation);
- b. any competitive motorized sporting events, racing or speed contests.

 23. *Injury* sustained while making a parachute jump for any purpose other than to save *your* life.
- 24. Property illegally acquired, kept, stored or transported.
- 25. The purchase or replacement cost (prescribed or not) loss or damage to hearing devices, eyeglasses, sunglasses, contact lenses or prosthetic teeth, limbs or devices and resulting prescription therefrom.

 26. Loss or damage resulting from moths, vermin, deterioration or wear and tear.
- 27. Loss or damage caused by any imprudent action or omission by the insured person.
- 28. Loss or damage by theft from an unattended vehicle unless it was locked and there was visible evidence of forced entry.
- 29. Belongings insured under another insurance policy.
- Jewellery, cameras, camera equipment and sports equipment while held by a common carrier.
 Money and currency (including any form thereof), credit cards, securities, tickets, documents, items pertaining to business, paintings, statuary, china, breakage of fragile articles, glass objects, or art objects.

Section VIII - General Provisions

- **Subrogation** If you suffer a loss covered under this policy, the Insurer is granted the right from you to take action to enforce all your rights, powers, privileges and remedies upon making payment or accepting the claim to the extent of the incurred losses, against any person, legal person or entity which caused such loss. Additionally, if No Fault benefits or other collateral sources of payment of expenses are available to you, regardless of fault, the Insurer is granted the right to make a demand for, and recover those benefits. If the Insurer institutes an action, the Insurer may do so at its own expense, in your name, and you will attend at the place of loss to assist in the action. If you institute a demand or action for a covered loss you shall immediately notify the Insurer so that the Insurer may safeguard its rights. You shall take no action after a loss that will impair the rights of the Insurer set forth in this paragraph and shall do such things as are necessary to secure the Insurer's rights.
- Other Insurance This insurance is a second payor plan. For any loss or damage insured by, or for any claim payable under any other liability, group or individual basic or extended health insurance plan, or contracts including any private or provincial or territorial auto insurance plan providing *hospital*, medical, or therapeutic coverage, or any other insurance in force concurrently herewith, amounts payable hereunder are limited to those covered benefits incurred outside *your* Canadian province or territory of residence that are in excess of the amounts for which *you* are insured under such other coverage. All coordination with
- employee related plans follows Canadian Life and Health Insurance Association Inc. guidelines. In no case will the Insurer seek to recover against employment related plans if the lifetime maximum for all in-country and out-of-country benefits is \$50,000 or less
- Misrepresentation and Non-disclosure The completed and signed Application and Medical Ques is essential to the appraisal of the risk by the Insurer and is the basis of and forms part of *your* contract. Any erroneous responses thereon constitute material misrepresentation or concealment relating to an essential component of the contract, that renders your insurance void. Consequently and following a loss, no claim shall be payable by the Insurer and you shall be solely responsible for all expenses relating to your claim, including repatriation costs. The entire coverage under this policy shall be void if the Insurer determines, whether before or after loss, you have concealed, misrepresented or failed to disclose any material fact or circumstance concerning this policy or *your* interest therein, or if *you* refuse to disclose information or permit the use of such information, pertaining to any of the *insured persons* under this contract of insurance.
- Arbitration Notwithstanding any clause in the present policy, the parties hereto undertake to submit to an arbitration procedure, to the exclusion of the courts, any present or future dispute relating to a claim. The arbitration proceedings shall be governed by arbitration laws in force in the Canadian province or territory of residence of the *insured*. The parties agree that any action will be referred to arbitration.

Section VIII - General Provisions (continued)

- Applicable Law This contract of insurance is governed by the laws of your Canadian province or territory of residence. Any legal proceeding by you, your heirs or assigns shall be brought in the courts of the Canadian province or territory of residence of the *insured*.

 Limitation Period – Every action or proceeding against an insurer for the recovery of insurance money
- payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (British Columbia, Alberta and Manitoba). Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Limitations Act (Ontario), or other applicable legislation.
- Sanctions The Insurer is a member of the RSA Group whose principal insurance company in the United Kingdom is required to comply with economic, financial and trade sanctions imposed by the European Union and the United Kingdom and the parties acknowledge that the Insurer intends to adhere to the same standard. The Insurer shall not provide any coverage or be liable to provide any indemnity or payment or other benefit under this policy which would breach economic, financial or trade sanctions ("Sanctions") imposed under the laws of Canada; or would breach Sanctions imposed by the European Union or the United Kingdom if provided under an insurance contract issued by an insurer in the United Kingdom
- 8. Important Notice About Your Personal Information Royal & Sun Alliance Insurance Company of Canada ("we", "us") collect, use and disclose, personal information (including to and from your agent or broker, our affiliates and/or subsidiaries, referring organizations and/or third party providers/suppliers) for insurance purposes, such as administering insurance, investigating and processing claims and providing assistance services.
 - Typically, we collect personal information from individuals who apply for insurance, and from policyholders, insureds and claimants. In some cases we also collect personal information from and exchange personal information with family, friends or travelling companions when a policyholder, insured or claimant is unable, for medical or other reasons, to communicate directly with us. We also collect and disclose information for the insurance purposes from, to and with, third parties such as, but not necessarily limited to, health care practitioners and facilities in Canada and abroad, government and private health insurers and family members and friends of policyholders, insureds or claimants. In some instances we may additionally maintain or communicate or transfer information to health care and other service providers located outside of Canada, particularly in those jurisdictions to which an *insured* may travel. As a result, personal information may be accessible to authorities in accordance with the law of these other jurisdictions. For more information about our privacy practices or for a copy of our privacy policy, visit www.rsatravelinsurance.com.

Section IX - Statutory Conditions

- 1. The Contract The application, this policy, any document attached to this policy when issued, and any amendment to the contract agreed on in writing after this policy is issued, constitute the entire contract, and
- no agent has authority to change the contract or waive any of its provisions.

 Waiver The insurer shall be deemed not to have waived any condition of this contract, either in whole or in part, unless the waiver is clearly expressed in writing signed by the insurer.
- Copy of Application The insurer shall, upon request, furnish to the insured or to a claimant under the contract a copy of the application.
- Material Facts No statement made by the insured or a person insured at the time of application for this contract shall be used in defence of a claim under or to avoid this contract unless it is contained in the application or any other written statements or answers furnished as evidence of insurability
- Notice And Proof Of Claim
 - The insured or a person insured, or a beneficiary entitled to make a claim, or the agent of any of them, shall
 - a) Give written notice of claim to the insurer
 - By delivery thereof, or by sending it by registered mail to the head office or chief agency of the insurer in the Province, or
 - By delivery thereof to an authorized agent of the insurer in the Province,
 - not later than 30 days after the date a claim arises under the contract on account of an accident, sickness or disability;
 - Within 90 days from the date a claim arises under the contract on account of an accident, sickness or disability, furnish to the insurer such proof as is reasonably possible in the circumstances of the happening of the *accident* or the commencement of the *sickness* or disability and the loss occasioned thereby, the right of the claimant to receive payment, his or her age, and the age of the beneficiary if relevant; and

- c) If so required by the insurer, furnish a satisfactory certificate as to the cause or nature of the accident, sickness or disability for which claim may be made under the contract and as to the duration of such disability.
- 2) Failure to give notice of claim or furnish proof of claim within the time required by this condition does not invalidate the claim if
 - The notice or proof is given or furnished as soon as reasonably possible, and in no event later than one year after the date of the accident or the date a claim arises under the contract on account of sickness or disability, and it is shown that it was not reasonably possible to give the notice or furnish the proof in the time required by this condition, or
 - In the case of the death of the person insured, if a declaration of presumption of death is necessary, the notice or proof is given or furnished no later than one year after the date a court makes the declaration
- Insurer To Furnish Forms For Proof Of Claim The insurer shall furnish forms for proof of claim within 6. fifteen days after receiving notice of claim, but where the claimant has not received the forms within that time the claimant may submit his or her proof of claim in the form of a written statement of the cause or nature of the accident, sickness or disability giving rise to the claim and of the extent of the loss.
- Rights Of Examination As a condition precedent to recovery of insurance money under this contract,
 a) The claimant shall afford to the insurer an opportunity to examine the person of the person insured
 - when and so often as it reasonably requires while the claim hereunder is pending, and
 - In the case of death of the person insured, the insurer may require an autopsy subject to any law of the applicable jurisdiction relating to autopsies.
- When Money Payable All money payable under the contract shall be paid by the insurer within 60 days after it has received proof of claim.

Section X - Definitions

Throughout this policy, defined words are written in italics.

Accident means a fortuitous, sudden, unforeseen and unintentional event exclusively attributable to an external cause resulting in bodily injury.

Actual Cash Value means the estimated value at the time of loss.

Aircraft means a fixed wing multi-engine transport aircraft with an authorized take-off weight greater than 35,000 lbs. (15,900 kg) operated between licensed airports by a scheduled or charter airline of Canadian or foreign registry holding a valid National Transportation Agency License, Regular Specific Point or Charter Air Carrier License or its foreign equivalent, insofar as the aircraft is being used at the time as a conveyance in the capacity authorized by the airline's Scheduled Regular Specific Point or Charter Air Carrier License.

Caregiver means a person you have entrusted with the care of your child(ren) on a permanent, full-time basis and whose services cannot reasonably be replaced.

Child(ren) means an unmarried child of the insured or his spouse who is, at the date of purchase, dependent on you for support and is:

- Under 21 years of age;
- A full time student who is under 26 years of age;
- c. Of any age with a permanent physical impairment or a permanent mental deficiency.
 Common Carrier means a conveyance (bus, taxi, train, boat, airplane or other vehicle) which is licensed,

intended and used to transport paying passengers.

Contracted, in reference to a destination, a date or the time and place of arrival or departure, means that which

is indicated in the travel documents for the *covered trip*.

Covered Trip means the travel arrangements which *you* have *contracted* and paid for prior to *your* departure from your province or territory of residence and for which an insurance premium has been paid in full to cover the total non-refundable amount of your travel arrangements, when you have selected and paid for the Medi-Select Advantage All-Inclusive Multi-Trip Annual Plan or the Single Trip Non-Medical Plan at the time of application. Day means 24 consecutive hours.

Emergency means that you require immediate medical treatment for the relief of acute pain or suffering resulting from an unexpected and unforeseen sickness or injury occurring while on a covered trip and that such medical treatment cannot be delayed until your return to your province or territory of residence

Flight Itinerary Schedule Change means:

- The re-scheduled departure of an air carrier causing you to miss your next connecting flight with another air
- carrier when both air carriers are part of *your covered trip*;

 The earlier departure of an air carrier causing the ticket *you* purchased to be unusable for the prior connecting flight with another air carrier when both air carriers are part of *your covered trip*; or
- When your flight itinerary, not forming part of a fly-cruise package, is changed more than 72 hours prior to departure, and you must incur additional expenses for new flight arrangements to meet your original cruise embarkation

A Flight Itinerary Schedule Change does not mean a change resulting from a labour dispute, strike or flight delay. Global Excel means the company appointed by the Insurer to provide medical assistance and claims services.

Hospital means an institution which is designated as a hospital by law; which is continuously staffed by one or more *physicians* at all times; which continuously provides nursing services by graduate registered nurses; which is primarily engaged in providing diagnostic services and medical and surgical treatment of a *sickness* or *injury* in the acute phase, or active treatment of chronic conditions; which has facilities for diagnosis, major surgery and in-patient care. The term hospital does not include convalescent, nursing, rest or skilled nursing facilities, whether separate from or part of a regular general hospital, nor a facility operated exclusively for the treatment of persons who are mentally ill, aged, or drug or alcohol abusers.

Hospitalized or Hospitalization means an insured occupies a hospital bed for more than 24 hours for medical

treatment and admission was recommended by a physician when medically necessary.

Immediate Family Member means your mother, father, sibling, child, spouse, grandparent, grandchild, aunt, uncle, niece, nephew, mother-in-law, father-in-law, daughter-in-law, son-in-law, sister-in-law and brother-in-law. Injury means an unexpected and unforeseen harm to the body caused by an accident, occurring while on a covered trip and requiring immediate emergency treatment.

Insured, Insured Person, You, Your and Yourself means any eligible person who is named on the Confirmation of Insurance.

Medical Treatment means any reasonable procedure which is medical, therapeutic or diagnostic in nature, which is *medically necessary* and which is prescribed by a *physician*. Medical treatment includes *hospitalization*, basic investigative testing, surgery, prescription medication (including prescribed as needed) or other treatment directly related to the sickness, injury or symptom.

Medically Necessary, in reference to a given service or supply, means such service or supply:

- Is appropriate and consistent with the diagnosis according to accepted community standards of medical practice:
- Is not experimental or investigative in nature; Cannot be omitted without adversely affecting *your* condition or quality of medical care;
- d. Cannot be delayed until *your* return to *your* province, territory of residence or Canada.

 Metastatic Cancer means a cancer that has spread from its original site to one or more other area(s) of the

Minor Ailment means any sickness or injury which does not require the use of medication for a period of greater

than 15 days, more than one follow-up visit to a physician, hospitalization, surgical intervention, or referral to a specialist, and which ends at least 30 consecutive days prior to the departure date of each trip. However, a chronic condition or any complication of a chronic condition is not considered a minor ailment.

Non-Aligned Air Carriers means two different connecting air carriers that are part of the covered trip when no

fare agreement exists between these air carriers for this portion of the air transportation.

Physician means a medical practitioner whose legal and professional standing within his jurisdiction is

equivalent to that of a doctor of medicine (M.D.) licensed in Canada, who is duly licensed in the jurisdiction in which he practices, who prescribes drugs and/or performs surgery and who gives medical care within the scope of his licensed authority. A physician must be a person other than *yourself* or an *immediate family member*.

Sickness means a disease or disorder of the body which results in loss while this coverage is in effect. The

sickness must be sufficiently serious to prompt a reasonably prudent person to consult a physician for the purpose of medical treatment.

Spouse means the person to whom you are legally married or with whom you have been residing for at least the last 12 months.

Stable means any medical condition (other than a minor ailment) for which all the following statements are true:

- There has been no new diagnosis, treatment or prescribed medication; b.
- There has been no change in treatment or change in medication, including the amount of medication to be taken, how often it is taken, the type of medication or change in treatment frequency or type. Exceptions: the routine adjustment of Coumadin, Warfarin, insulin or oral medication to control diabetes (as long as they are not newly prescribed or stopped) and a change from a brand name medication to a generic
- brand medication (provided that the dosage is not modified);
 There has been no new symptoms, more frequent symptoms or more severe symptoms;
- There have been no test results showing deterioration;
 There has been no hospitalization or referral to a specialist (made or recommended) and you are not e. awaiting results of further investigations for that medical condition.

 Sum Insured means the maximum sum payable that applies to a given insurance coverage.

Supplier of Travel Services means a travel agent, a tour operator, a travel wholesaler, an airline, a cruise line, a provider of ground transportation, a provider of travel accommodations who is legally authorized and licensed to sell travel services to the general public.

Terminal Illness means that you have a medical condition that is cause for a physician to estimate that you

have less than 6 months to live or for which palliative care has been received.

Travel Companion means a person who is sharing travel arrangements with you from your point of departure

on the covered trip, including accommodation and transportation, and who has paid such accommodation or transportation in advance of departure. A maximum of three persons will be considered your travel companions. Travel Visa means the visa required for your entrance to a foreign country (not an immigration, employment or student visa).

Treated means that you have been hospitalized, have been prescribed medication (including prescribed as needed), have taken or are currently taking medication, or have undergone a medical or surgical procedure. Vehicle means any automobile, station wagon, mini-van, sports utility vehicle (for on road use), motorcycle, boat, pick-up truck or a mobile home, camper truck or trailer home under 36 feet in length, used exclusively for the transportation of passengers other than for hire, in which you are a passenger or driver during your covered trip.

Section XI – Identification of Insurer

Medi-Select Advantage® Non-Medical Travel Insurance is underwritten by Royal & Sun Alliance Insurance Company of Canada

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- In the event of an occurrence likely to result in a claim under this insurance, immediate notice should be given to Global Excel.

 THIS POLICY CONTAINS CLAUSES WHICH MAY LIMIT THE AMOUNT PAYABLE.