

Diners Club Card Optional Travel Insurance

REFERENCE NUMBER: DCCO/26082011

Chartis House
10 Queens Road
Parktown Johannesburg
PO Box 31983 Braamfontein 2017
Tel: (011) 551-8000
Fax (011) 551-8293

This Policy is a contract made between Diners Club SA (Pty) Ltd and Chartis South Africa Limited, the Company. The Company agrees to provide insurance on the basis set out in this Policy provided the premium is paid when due and the Company agrees to accept it. Any endorsement to the Policy or the Schedule shall form part of the Policy.

Signed on behalf of the Company



Richard Lang
Profit Centre Manager
Vice President
Accident and Health South Africa

DINERS CLUB PHASE II COVER - SCHEDULE OF BENEFITS

The Policy Schedule and Policy Wording Must be read as one document.						
PHASE I - AUTOMATIC COVER (Age 3 months up to and including age 74 years)						
CARD TYPE	PERSONAL		AIR TRAVEL LODGED CARD		CORPORATE CARD	
BENEFIT	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL
SECTION 1 - MEDICAL & RELATED EXPENSES AND ASSISTANCE						
1A. Medical & Related Expenses and Assistance						
(i) Injury (Excess R2,000)	R80,000	R2,000,000	R80,000	R3,000,000	R80,000	R3,000,000
(ii) Illness (Excess R2,000)	Nil	R2,000,000	Nil	R3,000,000	Nil	R3,000,000
Burial, Cremation or Return of Mortal Remains *	Actual Expense		Actual Expense		Actual Expense	
Coffin Expenses *	R10,000	R10,000	R10,000	R10,000	R10,000	R10,000
Return of Travel Companion *	Actual Expense		Actual Expense		Actual Expense	
Return of Children *	Actual Expense		Actual Expense		Actual Expense	
Visit by a Family Member *	Actual Expense		Actual Expense		Actual Expense	
1B. Travel Guard *						
Premature Return in case of Death or imminent Death of a Relative or Business Associate *	Assistance Service		Assistance Service		Assistance Service	
Cash Assistance *	Assistance Service		Assistance Service		Assistance Service	
Consular Referral *	Assistance Service		Assistance Service		Assistance Service	
Emergency Travel and Accommodation Arrangements *	Assistance Service		Assistance Service		Assistance Service	
Legal Assistance Abroad *	Assistance Service		Assistance Service		Assistance Service	
24-hour Medical Emergency and Assistance Telephone Line *	Assistance Service		Assistance Service		Assistance Service	

PHASE I - AUTOMATIC COVER (Age 3 months up to and including age 74 years) - Continued						
CARD TYPE	PERSONAL		AIR TRAVEL LODGED CARD		CORPORATE CARD	
BENEFIT	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL
Transmission of Urgent Messages *	Assistance Service		Assistance Service		Assistance Service	
Replacement of Lost Travel Documents *	Assistance Service		Assistance Service		Assistance Service	
1C. Medical Evacuation, Repatriation or Transportation*	Actual Expense		Actual Expense		Actual Expense	
SECTION 2 – PERSONAL ACCIDENT (ACCIDENTAL DEATH AND/OR PERMANENT TOTAL DISABLEMENT)						
(i) In-flight/public conveyance*	R850,000	R1,000,000	R1,000,000	R1,500,000	R850,000	R1,500,000
(ii) 24 hour cover*	R250,000	R250,000	R500,000	R500,000	R250,000	R500,000
SECTION 11 – HIJACK, KIDNAP AND WRONGFUL DETENTION						
11A. Hijack - R750 per day (Excess 12 Hours) *	R7,500	R10,000	R7,500	R15,000	R7,500	R15,000
Any One Life Limit - Phase I	R2,000,000		R3,000,000		R3,000,000	
PREMIUM						
TO EXTEND COVER TO 180 DAYS	R350	R350	R350	R350	R350	R350

PHASE II (INCLUDE PHASE I) RECOMMENDED OPTIONAL COVER (Age 3 months up to and including 74 years)						
CARD TYPE	PERSONAL		AIR TRAVEL LODGED CARD		CORPORATE CARD	
BENEFIT	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL
SECTION 1 - MEDICAL & RELATED EXPENSES AND ASSISTANCE						
1A. Additional Medical and Related Expenses						
(i) Injury	Nil	R8,000,000	Nil	R20,000,000	Nil	R20,000,000
(ii) Illness	Nil	R8,000,000	Nil	R20,000,000	Nil	R20,000,000
(iii) Follow Up Treatment in the Republic of South Africa	Nil	R5,000	Nil	R5,000	Nil	R5,000
Emergency medical expenses due to terrorism	Nil	R2,500,000	Nil	R2,500,000	Nil	R2,500,000
Excess (for out-patient treatments R500) – Only applicable to (i) & (ii)	Waiver of Excess	Waiver of Excess	Waiver of Excess	Waiver of Excess	Waiver of Excess	Waiver of Excess
1B. Travel guard *						
Legal Assistance Abroad	Nil	R5,000	Nil	R5,000	Nil	R5,000
1E. Hospital Cash – hospital confinement for accident or illness (R750 / day)	Nil	R15,000	Nil	R15,000	Nil	R15,000
1D. Alternative Employee or Resumption of Assignment Expenses	Nil	R25,000	Nil	R25,000	Nil	R25,000
SECTION 2 – PERSONAL ACCIDENT (ACCIDENTAL DEATH AND/OR PERMANENT TOTAL DISABLEMENT)						
(i) In-flight / public conveyance	R1,000,000	R1,500,000	R1,000,000	R2,000,000	R1,000,000	R2,000,000
(ii) 24 hour cover	R500,000	R750,000	R500,000	R1,000,000	R500,000	R1,000,000
(iii) Terrorism extension	Nil	R750,000	Nil	R750,000	Nil	R750,000
	NOTE: Total Inflight / public conveyance benefit under (i) will be R2,500,000 for International Journeys. Total 24 hour cover benefit under (ii) will be R1,000,000 for International Journeys		NOTE: Total Inflight / public conveyance benefit under (i) will be R3,500,000 for International Journeys. Total 24 hour cover benefit under (ii) will be R1,500,000 for International Journeys		NOTE: Total Emergency Medical Expenses cover under (1A) will be R23,000,000 for Injury and Illness for International Journeys.	
SECTION 3 – CANCELLATION & CURTAILMENT						
Cancellation of Journey (R500 Excess)	R20,000	R20,000	R20,000	R25,000	R20,000	R25,000
Curtailement of Journey (R500 Excess)	R20,000	R20,000	R20,000	R25,000	R20,000	R25,000
SECTION 4 – BAGGAGE LOSS						
Maximum Sum Insured (R500 Excess)	R10,000	R15,000	R10,000	R20,000	R10,000	R20,000
Maximum Insured Value of any one item (Excess R500)	R2,000	R2,000	R2,000	R5,000	R2,000	R5,000
NOTE: Increased any one item limits in respect of cellular telephones, blackberries, palmtops, laptops, notebooks or similar personal computers is detailed in the policy wording						

PHASE II (INCLUDE PHASE I) RECOMMENDED OPTIONAL COVER (Age 3 months up to and including 74 years) - Continued						
CARD TYPE	PERSONAL		AIR TRAVEL LODGED CARD		CORPORATE CARD	
BENEFIT	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL
SECTION 5 – BAGGAGE DELAY						
Incurred expenses up to an amount of (12 hour Excess)	R2,000	R3,500	R2,000	R3,500	R2,000	R3,500
SECTION 6 – TRAVEL DELAY AND TRAVEL MISSED CONNECTION						
Travel Delay - Incurred expenses up to an amount of (12 Hour Excess)	R2,000	R2,500	R2,000	R2,500	R2,000	R2,500
Travel Missed Connection (6 Hour Excess)	Nil	R2,000	Nil	R5,000	Nil	R5,000
SECTION 7 – TICKET UPGRADE						
Essential upgrade of a conveyance ticket during an International Journey (6 hour excess)	Nil	R4,000	Nil	R5,000	Nil	R5,000
SECTION 8 – NATURAL DISASTER						
Cost of providing similar accommodation (48 hour excess)	Nil	R2,500	Nil	R2,500	Nil	R2,500
SECTION 9 – LOSS OF CASH / TRAVEL DOCUMENTS						
Loss of cash and cost of replacing or legal liability arising out of the unauthorised use of travel documents (R250 Excess)	R2,000	R3,000	R2,000	R3,000	R2,000	R3,000
SECTION 10 – PERSONAL LIABILITY						
Bodily Injury and Material Damage	R2,000,000	R2,000,000	R2,500,000	R2,500,000	R2,500,000	R2,500,000
SECTION 11 – HIJACK, KIDNAP AND WRONGFUL DETENTION						
11B. Kidnap And Wrongful Detention	Nil	R500,000	Nil	R500,000	Nil	R500,000
SECTION 12 – FREQUENT FLYER MILES, BASE FLYING MILES ON DINERS CLUB (SA) ACCREDITED AIRLINES ONLY						
Frequent Flyer Base Miles forfeited due to Cancellation or Curtailment	1,500 miles	30,000 miles	1,500 miles	30,000 miles	1,500 miles	30,000 miles
SECTION 13 - CATTERY & KENNELS						
Extra kennel or cattery fees incurred as a result of the unavoidable delay (Excess 24 hours) R125 p.d. up to 30 days	Nil	R3,750	Nil	R3,750	Nil	R3,750
SECTION 14 - GOLF COVER						
Loss, Theft or damage to Golf Equipment (Excess R1,000)	Nil	R10,000	Nil	R10,000	Nil	R10,000
Golf Equipment Hire	Nil	R2,000	Nil	R2,000	Nil	R2,000
Hole in one	Nil	R1,000	Nil	R1,000	Nil	R1,000
SECTION 15 – IDENTITY THEFT						
Legal Expenses	Nil	R5,000	Nil	R5,000	Nil	R5,000
Loss of Income	Nil	R5,000	Nil	R5,000	Nil	R5,000
Legal Obligations	Nil	R5,000	Nil	R5,000	Nil	R5,000
Miscellaneous Expenses	Nil	R5,000	Nil	R5,000	Nil	R5,000
SECTION 16 - MOTOR HIJACK EXTENSION						
16.1 Personal Accident	Nil	R5,000	Nil	R5,000	Nil	R5,000
16.2 Post Traumatic Stress Disorder Therapy	Nil	R2,500	Nil	R2,500	Nil	R2,500
SECTION 17 - RED24	Assistance Service		Assistance Service		Assistance Service	
SECTION 18 – ATM ASSAULT						
18. ATM Assault (R250 Excess)	Nil	R1000	Nil	R1000	Nil	R1000
Any One Life Limit- Phase II	R8,000,000		R20,000,000		R20,000,000	
Any One Life Limit- Phase I + Phase II	R10,000,000		R23,000,000		R23,000,000	
PREMIUM						
SINGLE TRIP OPTION	R 332	R 332	R 332	R 332	R 332	R 332
MANDATE OPTION	R 284	R 284	R 284	R 284	R 284	R 284
TO EXTEND COVER TO 180 DAYS	R 1,075	R 1,075	R 1,075	R 1,075	R 1,075	R 1,075

PHASE III - PRE-EXISTING MEDICAL CONDITIONS (Age 3 months up to and including 74 years)						
	PERSONAL		AIR TRAVEL LODGED CARD			CORPORATE CARD
BENEFIT	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL
Any medical condition for which an Insured Person has received treatment or advice or recommendation for treatment at any time prior to commencement of a journey. The member must be hospitalised as an in-patient, following medical advice, for more than 48 hours. This benefit does not apply to persons aged 75 and over.	Nil	R250,000	Nil	R250,000	Nil	R250,000
PREMIUM						
SINGLE TRIP OPTION	<i>Nil</i>	<i>R 1,226</i>	<i>Nil</i>	<i>R 1,226</i>	<i>Nil</i>	<i>R 1,226</i>
MANDATE OPTION	<i>Nil</i>	<i>R 1,160</i>	<i>Nil</i>	<i>R 1,160</i>	<i>Nil</i>	<i>R 1,160</i>
TOTAL PREMIUM TO EXTEND COVER TO 180 DAYS	<i>Nil</i>	<i>R 3,358</i>	<i>Nil</i>	<i>R 3,358</i>	<i>Nil</i>	<i>R 3,358</i>

SENIORS (75 YEARS AND OVER)						
CARD TYPE	PERSONAL		AIR TRAVEL LODGED CARD		CORPORATE CARD	
BENEFIT	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL
SECTION 1 - MEDICAL & RELATED EXPENSES AND ASSISTANCE						
1A. Medical & Related Expenses and Assistance						
(i) Injury & Illness	Nil	R5,000,000	Nil	R5,000,000	Nil	R5,000,000
(iii) Follow Up Treatment in the Republic of South Africa	Nil	R5,000	Nil	R5,000	Nil	R5,000
Emergency medical expenses due to terrorism	Nil	R2,500,000	Nil	R2,500,000	Nil	R2,500,000
Excess (for out-patient treatments R500) – Only applicable to (i)	Waiver of Excess		Waiver of Excess		Waiver of Excess	
1B. Travel guard *						
Legal Assistance Abroad	Nil	R5,000	Nil	R5,000	Nil	R5,000
1D. Alternative Employee or Resumption of Assignment Expenses	Nil	R25,000	Nil	Nil	Nil	R25,000
1E. Hospital Cash – Hospital confinement for accident or illness (daily benefit of R750 / day)	Nil	R15,000	Nil	R15,000	Nil	R10,000
* The Assistance Services under Phase 1 also extend to the Senior Package						
SECTION 2 – PERSONAL ACCIDENT (ACCIDENTAL DEATH AND/OR PERMANENT TOTAL DISABLEMENT)						
Accidental death and/or personal disablement	Nil	Nil	Nil	Nil	Nil	Nil
SECTION 3 – CANCELLATION & CURTAILMENT						
Cancellation of Journey (R500 Excess)	R15,000	R20,000	R15,000	R25,000	R15,000	R25,000
Curtailement of Journey (R500 Excess)	R15,000	R20,000	R15,000	R25,000	R15,000	R25,000
SECTION 4 – BAGGAGE LOSS						
Maximum Sum Insured(R500 Excess)	R10,000	R15,000	R10,000	R20,000	R10,000	R20,000
Maximum Insured Value of any one item (Excess R500)	R2,000	R2,000	R2,000	R5,000	R2,500	5000
<i>NOTE: Increased any one item limits in respect of cellular telephones, blackberries, palmtops, laptops, notebooks or similar personal computers is detailed in the policy wording</i>						
SECTION 5 – BAGGAGE DELAY						
Incurred expenses up to an amount of (12 hour Excess)	R2,000	R3,500	R2,000	R3,500	R2,000	R3,500

SENIORS (75 YEARS AND OVER) - Continued						
CARD TYPE	PERSONAL		AIR TRAVEL LODGED CARD		CORPORATE CARD	
BENEFIT	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL	LOCAL	INTERNATIONAL
SECTION 6 – TRAVEL DELAY AND TRAVEL MISSED CONNECTION						
Travel Delay - Incurred expenses up to an amount of (12 Hour Excess)	R2,000	R2,000	R2,000	R2,500	R2,000	R2,500
Travel Missed Connection (6 Hour Excess)	Nil	R2,000	Nil	R5,000	Nil	R5,000
SECTION 7 – TICKET UPGRADE						
Essential upgrade of a conveyance ticket during an International Journey (6 hour excess)	Nil	R4,000	Nil	R5,000	Nil	R5,000
SECTION 8 – NATURAL DISASTER						
Cost of providing similar accommodation (48 hour excess)	N/A	R2,500	Nil	R2,500	Nil	R2,500
SECTION 9 – LOSS OF CASH / TRAVEL DOCUMENTS						
Loss of cash and cost of replacing or legal liability arising out of the unauthorised use of travel documents (R250 Excess)	R2,000	R3,000	R2,000	R3,000	R2,000	R3,000
SECTION 10 – PERSONAL LIABILITY						
Bodily Injury and Material Damage	R2,000,000	R2,000,000	R2,500,000	R2,500,000	R2,500,000	R2,500,000
SECTION 11 – HIJACK, KIDNAP AND WRONGFUL DETENTION						
11A. Hijack - R750 per day (Excess 12 Hours) *	R7,500	R10,000	R7,500	R15,000	R7,500	R15,000
11B. Kidnap and Wrongful Detention	Nil	Nil	Nil	Nil	Nil	Nil
SECTION 12 – FREQUENT FLYER MILES, BASE FLYING MILES ON DINERS CLUB (SA) ACCREDITED AIRLINES ONLY						
Frequent Flyer Base Miles forfeited due to Cancellation or Curtailment	1,500 miles	30,000 miles	1,500 miles	30,000 miles	1,500 miles	30,000 miles
SECTION 13 - CATTERY & KENNELS						
Extra kennel or cattery fees incurred as a result of the unavoidable delay (Excess 24 hours) R125 p.d. up to 30 days	Nil	R3,750	Nil	R3,750	Nil	R3,750
SECTION 14 - GOLF COVER						
Loss, Theft or damage to Golf Equipment (Excess R1,000)	Nil	R10,000	Nil	R10,000	Nil	R10,000
Golf Equipment hire	Nil	R2,000	Nil	R2,000	Nil	R2,000
Hole in one	Nil	R1,000	Nil	R1,000	Nil	R1,000
SECTION 15 – IDENTITY THEFT						
Legal Expenses	Nil	R5,000	Nil	R5,000	Nil	R5,000
Lost Income	Nil	R5,000	Nil	R5,000	Nil	R5,000
Legal Obligations	Nil	R5,000	Nil	R5,000	Nil	R5,000
Miscellaneous Expenses	Nil	R5,000	Nil	R5,000	Nil	R5,000
SECTION 16 - MOTOR HIJACK EXTENSION						
16.1 Personal Accident	Nil	R5,000	Nil	R5,000	Nil	R5,000
16.2 Post Traumatic Stress Disorder Therapy	Nil	R2,500	Nil	R2,500	Nil	R2,500
SECTION 17 - RED24	Assistance Service		Assistance Service		Assistance Service	
SECTION 18 – ATM ASSAULT						
18. ATM Assault (R250 Excess)	Nil	R1000	Nil	R1000	Nil	R1000
Any One Life Limit- Seniors	R5,000,000		R5,000,000		R5,000,000	
PREMIUM						
SINGLE TRIP OPTION	R 701	R 701	R 701	R 701	R 701	R 701
MANDATE OPTION	R 598	R 598	R 598	R 598	R 598	R 598

MANDATE COVER:

This option has been designed for clients who travel regularly. With this option the Company will, with your permission, automatically bill you for travel insurance every time you charge a Public Conveyance ticket to a Diners Club SA (Pty) Ltd Card. On registration, the insured will be provided with the mandate travel insurance documents. Our sales and service travel contact centre will assist with travel insurance documentation should the insured require it for future trips.

IMPORTANT CONTACT DETAILS

24 hour Emergency Medical Assistance – Travel Guard

Phone: +44 1273 779 727 (UNITED KINGDOM)

Phone lines are open 24 hours a day, 7 days a week

All Medical assistance incidents should be logged with Travel Guard Immediately.

Claims

Chartis South Africa Limited

P.O Box 31983

Braamfontein 2017

SA Share Call Tel: 0860 104 146

Tel: +2711 525 3101

Fax: +2711 551 8290

Email: satravelclaims@chartisinsurance.com

The claims department is open Monday to Friday from 8:15am to 4:30pm (South African Time).

Sales & Services:

Tel: 0860 346 377 (Option 4)

Tel: +2711 525 3111

Fax: 0866 254 818

Email: diners.nactravel@za.aegisglobal.com

The Sales & Services department is open Monday to Thursday from 8am to 6pm, Fridays from 8am to 5pm and Saturdays from 8am to 1pm (South Africa Time), excluding South African public holidays.

POLICY TERMS AND CONDITIONS

PERIOD OF INSURANCE

This Policy will provide cover for Insured Journeys that commence after the inception date appearing on the Travel Policy receipt. Except for Cancellation insurance, cover will commence when the Insured Person leaves the Point of Departure and will automatically cease when he returns to the Point of Departure. Cancellation coverage will take effect one day after the issue date as stated on the Travel Policy receipt and once the required premium is received by us.

The maximum period for any Insured Person is restricted to 90 days on the following options: Phase I, II and III unless the Insured Person has requested to extend the cover to 180 days and paid the additional premium. Seniors cover will terminate after 90 days.

For Annual Frequent Flyer Plans, cover will terminate on the Insured Person's return to the Point of Departure and recommence on his next Insured Journey. The maximum period for any Insured Journey on an Annual Frequent Flyer Plan is restricted to 90 days.

This Policy does not apply to events that occur after the expiration date shown on the Policy receipt, or if the Insured Person returns to the Point of Departure from his Insured Journey before this date. This Policy cannot be cancelled once an Insured Journey has commenced or after the expiry date of the Insured Journey.

All cover is subject to the cost of a Public Conveyance ticket being charged to a Diners Club SA (Pty) Ltd Card and either Diners Club SA (Pty) Ltd or the Insured Person paying the required premium and is subject to all the Terms, Conditions, Endorsements, Terminations and Exclusions of the Policy including the Schedule of Benefits.

Cover for the Insured Person entering into the Republic of South Africa on an Inbound Journey is limited to the Insured Benefits applicable to automatic cover only and provided the Public Conveyance ticket is purchased on a Diners Club SA (Pty) Ltd Card.

In respect of Public Conveyance tickets purchased with Voyager Miles and BA Executive Club Miles, namely Frequent Flyer Base Miles earned against a Diners Club SA (Pty) Ltd Card the Automatic Cover is provided at no additional charge to the Insured Person.

PREMIUM PAYMENTS

Diners Club SA (Pty) Ltd is liable for the premium on the automatic cover and the Insured Person is liable for the premium on the optional cover. The premium is payable in advance and the Company shall not be liable for any claim arising under this Policy in respect of an Accident or Illness that occurs prior to receipt of the premium. The Company shall not be obliged to accept premium tendered to it or to any intermediary after such date, but may do so upon such terms as it in its sole discretion may determine. The Company reserves the right to ask for proof of payment of premium at any time. Such proof must be to the Company's satisfaction.

MAXIMUM AMOUNT PAYABLE

1. No Insured Person shall be entitled to recover a benefit exceeding 100% of the sum for an Insured Event as reflected in the Schedule of Benefits.
2. If two or more travel policies issued by the Company or any other member company of Chartis apply to the same claim, the maximum amount payable by Chartis under all such policies shall not exceed the limit of liability of whichever of such policies has the highest applicable limit of liability. Nothing contained herein shall be construed to increase the limit of liability of this Policy.
3. The maximum amount payable in the event of death or Permanent Total Disablement of a child will be 20% of the Benefit, or in respect of death that amount which is legislated at the Date of Loss, whichever is the lesser.
4. Limit any One Life:

PERSONAL CARD

Automatic Cover -	R2, 000,000
Optional Cover -	R8, 000,000
Combined -	R10, 000,000

CORPORATE AND AIR TRAVEL LODGED CARDS

Automatic Cover -	R3, 000,000
Optional Cover -	R20, 000,000
Combined -	R23, 000,000

SENIORS COVER

Optional Cover -	R5, 000,000
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5. Accumulation Limit: R23,000,000 any one Diners Club SA (Pty) Ltd card

CANCELLATION/TERMINATION

Cancellation

1. Provided that no claims have been initiated the Insured Person may cancel this Policy at any time by giving the Company written notice 15 days prior to his intended date of departure.
2. This Policy may be cancelled by the Company giving 15 days written notice if the Insured Person has been in breach of any of its Terms, Conditions, Endorsements, Terminations and Exclusions in accordance with the Short Term Insurance Act of 1998, and any other subsequent legislation that may be enacted, in which case the Company will refund a pro-rata premium for the unexpired policy period.
3. The Company may cancel this Policy by sending the Insured Person notice in writing to his last known address. If the premium is paid annually in advance and the Policy is cancelled other than at the anniversary date, the Company will refund a pro-rata premium provided that no claims have been initiated.

Termination

This Policy will terminate on the earliest of the following dates:

1. on the date the Master Policy is cancelled; or
2. the date of the Insured Person's return to the Point of Departure in the Republic of South Africa or Country of Residence; or
3. on arrival in the country of emigration; or
4. the date that the Insured Person reaches the maximum age for the cover selected; or
5. the expiry date appearing in the schedule unless there is an automatic extension as described under the general conditions applying to this Policy.

PLAN NAMES

The Policy Schedule refers to the persons insured under this Policy by reference to the "Phase Selected". The Plan names are as follows:

1. **Phase I - Automatic Cover**
2. **Phase II - Optional Cover**
3. **Phase III - Pre-Existing Optional Cover**
4. **Seniors Cover**

DEFINITIONS

In this Policy the following definitions apply:

24 Hour Cover means any time during the period of an Insured Journey other than when covered under Public Conveyance benefits.

Accident means a sudden unexpected and specific event which occurs at an identifiable time and place, resulting in Injury.

Accidental Loss means the Insured Person mislaying or misplacing their Baggage resulting in a loss of possession.

Accumulation Limit means the maximum liability of the Company in respect of any one Accident or number of Accidents arising from one source or cause during an Insured Journey.

Acquired Immune Deficiency Syndrome or AIDS shall have the meanings assigned to it by the World Health Organisation including Opportunistic Infection, Malignant Neoplasm, Human Immune Deficiency Virus (HIV), Encephalopathy (Dementia), HIV Wasting Syndrome or any disease or Illness in the presence of a sero-positive test for HIV.

Any One Life Limit means the maximum liability of the Company to any one Insured Person in respect of any one Accident or Illness or series of Accidents or Illnesses arising from one source or cause.

ATM means an Automatic Teller Machine or cash dispenser.

Beneficiary means the person or persons nominated by the Insured Person.

Business means your employment, trade, profession or occupation.

Business Associate means a partner, director or employee of the Insured Person.

Children means the Insured Person's dependant children who are not in full-time employment and who are between the ages of 3 months and 19 years (or under the age of 25 years provided they are in full-time education), unmarried, not pregnant, without children and primarily dependent on the Insured Person for maintenance and support.

Company means Chartis South Africa Limited.

Confinement means confinement to a Hospital as a resident in-patient for a period which is necessary for the diagnosis or treatment of any Injury or Illness.

Contact Sport means any sport in which physical contact between players is an accepted part of play.

Country of Residence means the country of which the Insured Person is a citizen or permanent resident.

Date of Loss means:

- a. for Illness, the first date of diagnosis or the date the Insured Person first became aware of the Illness – whichever occurs earlier;
- b. for Injury, the date of the Accident;
- c. for all other Sections, the date of the Insured Event.

Day means a period of 24 consecutive hours including the day of admission but excluding the day of discharge.

Effective Date of Coverage means:

- a. for cancellation, one day after the date on which optional cover is purchased;
- b. for all other sections of cover, the date of departure.

Electronic Equipment shall mean any computer equipment system or software or any product, equipment, system or machinery connected to or operated by means of a micro or data processor chip.

Excess means the first amount, or period, of each and every loss payable by the Insured Person.

Extended claim period means the 12 month period following the end of the period of insurance or such other time that we may agree in writing.

Follow Up Treatment in the Republic of South Africa means all Reasonable and Customary Charges incurred for Illness or Injury, resulting in hospitalisation, surgical or other diagnostic or remedial treatment given or prescribed by a qualified Medical Practitioner, dentist or optometrist. Follow Up treatment in the Republic of South Africa does not include those expenses the Company is prohibited by law from paying and will only be paid to the extent permissible under the Medical Schemes Act No. 131 of 1998 and any other subsequent legislation which is enacted.

Golf Equipment means golf clubs, golf bags, non-motorised trolleys and golf shoes.

Gainful Employment means the work or occupation of an Insured Person for legal financial gain. Remuneration for the employment is by means of a salary, wages or earnings.

Hazardous Pursuits means any activity which introduces or increases the possibility of a loss or which may influence the extent of a loss including but not limited to engaging in motor cycling (where the engine capacity exceeds 200cc or the cycle is under control of an unlicensed driver), steeple-chasing, polo or horseback riding, hunting, bungee jumping, abseiling, white water rafting, hiking (unless accompanied by a recognised guide or on a clearly marked route), mountaineering, scuba diving (unless accompanied by a qualified instructor and less than 50 meters deep), potholing, fighting (except in bona fide self defence), racing (other than on foot or under sail in inland waters), being a crew member on a ship or boat travelling from one country to another, speed or endurance racing or

practise thereof (other than athletics), or training for or engaging in contact sports where physical contact between players is an accepted part of play.

Holder means the Policyholder named in the Policy Schedule who is Diners Club SA (Pty) Ltd.

Hospital means a legally constituted establishment which operates pursuant to the laws of the country in which it is based and which meets the following requirements:

- a. it operates primarily for the reception, medical care and treatment of sick, ailing or injured persons on a resident in-patient basis;
- b. it admits resident in-patients only under the supervision of a Medical Practitioner;
- c. it maintains organised facilities for the medical diagnosis and treatment of such persons and provides (where appropriate) facilities for major surgery within the confines of the establishment or facilities controlled by the establishment;
- d. it provides a full-time nursing service by or under the supervision of a staff of nurses;
- e. it is not a day clinic, health hydro or nature clinic, a mental institution, an institution confined primarily to the treatment of psychiatric disease, the psychiatric department of a hospital, a place for the treatment of chemical dependency, an establishment or a special unit of a hospital used primarily as a place for treatment of drug addicts or alcoholics, a hospice, a frail care centre, a rest home or nursing, convalescent, rehabilitation, assisted living or extended care facility.

Identity Theft means the unauthorized and/or illegal use of an Insured Persons personal information such as name or identity number to obtain a loan or open credit accounts.

Illness means any fortuitous sickness or disease contracted, commencing or first manifesting itself during an Insured Journey.

Inbound Journey means an Insured Journey commencing from the Point of Departure outside the territorial limits of the Republic of South Africa to the destination inside the territorial limits of the Republic of South Africa including the return journey to the Point of Departure.

Injury means physical trauma to an Insured Person caused by an Accident resulting, solely and independently of any other cause or any other physical defect or infirmity existing prior to the Accident, in an Insured Event within 24 months of the date of the Accident. Physical trauma caused by exposure to the elements of nature as a direct result of an Accident will be deemed to be an injury.

Insured Event means an event stated in the Schedule of Benefits.

Insured Journey means a Local Journey, an International Journey or an Inbound Journey.

Insured Person means any person whose public conveyance tickets have been charged to a valid Diners Club SA (Pty) Ltd card.

International Journey means an Insured Journey commencing from the Point of Departure to the destination, outside the territorial limits of the Republic of South Africa, including the return journey to the Point of Departure.

Local Journey means an Insured Journey to a Local Destination which commences at the time when the Insured Person departs from the Point of Departure to travel in a direct, timeous and uninterrupted manner to the Local Destination including the return journey to the Point of Departure, both of which are within the territorial limits of the Republic of South Africa.

Local Destination means a destination within the territorial limits of the Republic of South Africa that is more than 100 kilometres away from the Point of Departure.

Malignant Neoplasm shall include but not be limited to Kaposi's Sarcoma, central nervous system lymphoma and / or other malignancies now known or which will become known as immediate cause of death, an illness, or disability in the presence of AIDS.

Malaria is a vector-borne infectious disease characterized by recurrent attacks of fever, caused by prozotan parasites of the genus Plasmodium transmitted by female Anopheles mosquitoes in tropical and subtropical regions.

Manual Labour means physical, human labour involving the use of hands where the work may be considered hard or arduous, including skilled labourers who use or operate mechanical or non-mechanical machinery or equipment.

Master Policy means the internal reference for a specific product containing identical benefits and premium rates.

Medical Expenses means all Reasonable and Customary Charges for Illness or Injury on an International Journey, or Injury on a Local Journey, resulting in hospitalisation, surgical or other diagnostic or remedial treatment given or prescribed by a Medical Practitioner.

Medical Practitioner means a person registered with a current, legal licence to practise medicine, but excludes an Insured Person or a member of any Insured Person's immediate family.

Medical Treatment means a Medical Practitioner's medical advice, treatment, consultations and prescribed or repeat maintenance medication.

Motor Hijack the unlawful seizing or attempted unlawful seizing of a vehicle by any person using force or threat or violence where such violence is intended, used or made to overpower or subdue the Insured Person whilst driving or as a passenger in a Private Motor Vehicle or whilst such vehicle is stationary.

Opportunistic Infection shall include but not be limited to pneumocystis carini pneumonia, organism of chronic enteritis, virus and/or disseminated fungi infection.

Payment Card means an automatic teller machine (ATM) card, credit card, or debit card issued by a registered financial institution or qualified retail shop.

Permanent and Incurable Insanity means the Insured Person being diagnosed as permanently and incurably insane according to the usual and customary standards of the registered medical profession. The permanent and incurable insanity must have resulted directly from Injury.

Permanent and Incurable Paralysis means the complete and permanent loss of use of arms or legs, or one arm and one leg, through paralysis.

Permanent and Total Loss means the loss by physical severance or the permanent and total loss of use of a hand, foot, thumb, finger, toe, arm or a leg.

Permanent and Total Loss of Hearing means the total, irreversible loss of hearing of all sounds confirmed by medical evidence relying on audio-metric and sound-threshold tests.

Permanent and Total Loss of Sight means the total, irreversible loss of sight. Loss of sight will be deemed to have occurred if the degree of sight remaining after correction is 3/60 or less on the Snellen scale.

Permanent and Total Loss of Speech means the total and irrecoverable loss of the ability to speak. "Loss of the ability to speak" means the inability to make a comprehensible word or an understandable verbal language.

Permanent Total Disablement means total and absolute disablement which entirely prevents the Insured Person from engaging in or giving attention to his usual or any occupation for which he is qualified or has received specialised training and which will in all probability be lasting and continuous for his lifetime.

Personal Effects means spectacles, dentures, purses, wallets, cosmetics and other personal effects normally worn or carried on the person.

Point of Departure

- a. in respect of a Local Journey means the Insured Person's usual place of residence or from which an Insured Person leaves to travel in a direct, timeous and uninterrupted manner;
- b. in respect of an International Journey, the point where an Insured Person passes through passport control from within the Republic of South Africa; or
- c. in respect of an Inbound Journey, the point where an Insured Person passes through passport control in Country of Residence from which the Insured Person intends to travel to the Republic of South Africa in a timeous and uninterrupted manner.

Policy means this document embodying the contract of insurance and shall include any subsequent Terms, Conditions, Exclusions, Terminations and Endorsements.

Pre-Existing Medical Conditions means any condition giving rise to a claim for which, within the 12 consecutive months prior to the Effective Date of Coverage, the Insured Person:

- a. has consulted a Medical Practitioner or specialist; or
- b. has received Medical Treatment or advice; or
- c. the manifestation of symptoms would have caused a reasonable person to seek advice.

Private Motor Vehicle means any licensed passenger vehicle other than taxis, buses and any vehicle that is in excess of 2 tons.

Professional Player means an Insured Person who earns in excess of 50% of his income from playing sport or who participates in a sport that remunerates him as a means of livelihood.

Public Conveyance means any scheduled or chartered conveyance legally licensed to carry passengers for hire operating commercially in accordance with all locally applicable laws and regulations and in which the Insured Person is travelling only as a fare-paying passenger, including taxis and hired motor vehicles but excluding minibuses, non-standard motor vehicles and non-pressurised single engine piston aircraft.

Reasonable and Customary Charges means the charges which:

- a. are medically required for the treatment, supplies or medical service to treat an Insured Person's condition;
- b. do not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expenses are incurred, and
- c. do not exceed the charges for treatment that would have been made if no insurance existed.

Red24 means the Chartis affiliated assistance service provider, providing access to professional 24-hour security advice by an interactive website and email.

Related Expenses means additional accommodation and travelling expenses, excluding telephone costs, meals and beverages of necessity incurred by any one person, who on the advice of a Medical Practitioner appointed by the Company remains with or escorts the Insured Person until completion of his journey or until he resumes the Insured Journey or returns to the Point of Departure, whichever occurs first.

Relative means a Spouse, parent, parent-in-law, grandparent, step-parent, Children, grandchild, brother, brother-in-law, sister, sister-in-law, daughter-in-law, son-in-law, fiancée, fiancé, half-brother, half-sister, aunt, uncle, niece or nephew of the Insured Person.

Spouse means the husband, wife, partner in a same sex partnership or any de facto partner with whom the Insured Person has permanently and continuously lived in the same household in a relationship which is not casual or impermanent for a period longer than 6 consecutive months. Only one Spouse shall be eligible for cover.

Suit a civil proceeding seeking monetary damages as a result of Identity Theft or a criminal proceeding in which you are charged with illegal acts committed by any person other than you whilst using your identity.

Territorial Waters means within a 19 Kilometer radius of the coastline.

Terrorist Act means any actual or threatened use of force or violence directed at or causing damage, Injury, harm or disruption, or commission of an act dangerous to human life or property, against any individual, property or

government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator/s and victim/s shall not be considered Terrorist Acts. 'Terrorist Act' shall also include any act which is verified or recognised as an act of terrorism by the (relevant) government of the country where the act occurs.

Theft means wrongfully taking property from an Insured Person without their willful consent.

Traumatic Event means a violent criminal act or attempt where such violence is intended or made to overpower or subdue.

Travel Companion means the person intending to travel or travelling with the Insured Person and who is covered under the Diners Club SA (Pty) Ltd Card travel insurance.

Travel Guard means Travel Guard International Ltd, who provides emergency travel and pre-departure health information and the Travel Guard services as more fully detailed in the body of this Agreement.

Waiver Of Excess means that if the Insured Person has selected Phase II, the Excess of R2,000 applicable to any emergency medical assistance and expenses will be waived, if the Insured Person is hospitalised as an in-patient. An excess of R500 will apply for out-patient treatment.

War means war, whether declared or not, or any warlike activities (including use of military force) by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

GENERAL CONDITIONS

1. Age limits

1.1 This Policy covers any event which happens to an Insured Person who is:

- a. From the age of 3 months up to and including 74 years of age at the date of such event on the Phase I, II and III cover;
- b. From the age of 75 years of age on the Seniors Plan;

1.2 With respect to Insured Event 2 in the Personal Accident Table of Benefits, cover ceases on the Insured Person's 65th birthday unless he is gainfully employed.

1.3 This Policy does not extend to an Insured Person of the age of 70 years and older in the event of a claim as a result of any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto.

2. **Airlines** The Company will have no liability to pay any benefit in relation to any Insured Event for which the Insured Person may be able to seek compensation from an airline. If the Insured Person proves that he has taken all reasonable and necessary steps to claim from the airline, the Company will pay a pro-rata portion of the benefits. The Company's liability will be calculated by reducing the benefits by the amount for which the Company considers the airline to be liable.

3. **Automatic extension** If an event occurs after commencement of the Insured Journey giving rise to a legitimate claim under Section 1 and/or Section 3B, the Insured Journey shall automatically be extended. If an event occurs in terms of section 12A the cover shall be extended and shall continue in force for the duration of the seizure or control of the Public Conveyance or 12 consecutive months from the date of such seizure or control, whichever is the lesser period.

4. **Currency** All amounts are shown in South African Rand (ZAR). If expenses are incurred in a foreign currency the rate of exchange used will be the rate at the time of incurring the expense or suffering a loss.

5. **Endorsements** At the discretion of the Company, this Policy may be extended, amended or altered. Provided that application is made in writing to the Company prior to the expiry of the existing Policy and there are neither existing nor initiated claims on the existing Policy. This Policy may be extended, amended or altered at the discretion of the Company. The Company may choose to charge an additional premium.

6. **Information** By acceptance of this contract of insurance or the benefits under this Policy the Policyholder or Insured Person acknowledges that the sharing of claims and underwriting information by the Company is essential to enable the Company to underwrite policies, assess risks fairly, ensure compliance with all and necessary applicable legislation, regulations and business compliance requirements (including any overseas laws, regulations and compliance requirements binding on the Company) and to reduce the incidence of fraudulent claims, in the public interest and with a view to limiting premiums. The Policyholder and or Insured person, on his own behalf and on behalf of any person he represents herein, hereby waives any right to privacy in any insurance information provided by him or on his behalf in respect of any insurance policy or claim made or lodged by him and he consents to such information being disclosed to any other party (including any subsidiary or parent company of the Company as well as any government or regulatory authority) who has a direct interest in the information disclosed by the Policyholder / Insured Person / his agent. The Policyholder / Insured Person also acknowledges that the information provided by him may be verified against any other legitimate sources or databases and waives any rights of privacy and consent to the disclosure of any information relevant to any insurance policy or claim concerning him.

7. Liability

7.1. The Company shall not be liable or responsible for:

- a. the negligence, wrongful acts and/or omissions of any legal and/or health care professional or any other person or persons or legal entity that provide direct or indirect service to the Insured Person;
 - b. the failure of any agent or broker to explain adequately the terms, conditions, endorsements, terminations and exclusions of this Policy.
- 7.2. Should any discrepancies arise between this Policy and any literature received by the Insured Person, the Terms, Conditions, Endorsements, Terminations and Exclusions in this Policy will govern in all cases.
8. **Language** The official version of this Policy is in English. Words in the singular include the plural and vice versa and words in the masculine gender include the feminine gender.
 9. **Marketing** Should any discrepancies arise between this Policy and any literature received by the Insured Person, the Terms, Conditions, Endorsements, Terminations and Exclusions, this Policy will govern in all cases. Any Insured Person may inspect this Policy at any time by arrangement with the policyholder.
 10. **Misrepresentation** This Policy shall be voidable (at the discretion of the Company) in the event of misrepresentation, misdescription or non-disclosure by or on behalf of the Insured Person of any information material to this Policy.
 11. **Other financial products and services** The Company will accept no liability whatsoever for any of the insurance or other financial products or services which are sold in conjunction with this Policy that are provided or underwritten by any other insurance or assurance companies and/or assistance companies and/or financial providers.
 12. **Other insurance** Except for Section 2 - Personal Accident, if the Insured Person is able to claim under any other policies (including statutory insurance and/or medical aid and/or automatic credit card travel insurance) to be covered for the whole or any part of an Insured Event ("Other Claims"), the Company will only be liable to pay its pro rata portion of the claim submitted in terms of this Policy.
 - 12.1 If in the Company's discretion it decides to pay the claim in full, then it will not be obliged to make payment unless the Insured Person cedes to the Company all of their rights in respect of the Other Claims.
 - 12.2 If the Company has already paid benefits in terms of this Policy, all of the Insured Person's rights in respect of the Other Claims will be ceded automatically to the Company.
 - 12.3 A cession in terms of 12.1 or 12.2 above will allow the Company to do all things necessary to claim against the other insurer or company and institute legal proceedings against that other insurer or company if the Other Claim is not paid.
 - 12.4 Without limiting any provision of this Policy or any legal obligation, the Insured Person must cooperate fully with the Company in relation to the Other Claim or legal proceedings including:
 - a. not doing anything to prejudice or limit the Company's rights;
 - b. giving the Company whatever information and documents it may require;
 - c. signing any document or affidavit that the Company may request to enable it to exercise its rights.
 13. **Payment of benefits** This Policy is between the Company and the Insured Person only and all of its provisions and conditions are for the sole and exclusive benefit of those parties. Nothing in this Policy, express or implied, is intended to confer upon any other person any rights or remedies of any nature whatsoever under this Policy or any of its provisions. Without limitation, no third party shall have any rights under this Policy or any right to receive Policy benefits.
Receipt of Benefits paid as follows will be a valid discharge of the Company's liability under this Policy:
 - 13.1 For Emergency Medical and Related Expenses on an International Journey, the benefit will be paid to the provider of such Medical Expenses.
 - 13.2 This Policy cannot be ceded, assigned or in any way transferred to a third party. Benefits shall be payable only to the Insured Person or his legal representative.
 14. **Public Conveyance tickets** The Company has the right to utilise the Insured Person's Public Conveyance ticket to offset the Company's expenses.
 15. **Schedule of Benefits** The Schedule of Benefits referred to in this policy wording is the Schedule of Benefits used in the policy wording and in marketing material. The policy wording is to be read in conjunction with the Schedule of Benefits in the marketing material and vice versa.
 16. **South African Law** This Policy will be governed by the laws of the Republic of South Africa and its courts shall have exclusive jurisdiction to the exclusion of the courts of any other country.
 17. **Subrogation** The Company has the right to commence or take over legal proceedings in the Insured Person's name for the defence or settlement of any claim, or to sue or prosecute any other party to recover monies payable by them at law. The Insured Person must co-operate with the Company and do nothing to hinder the Company's rights.
 18. **Tax or imposts** The onus will always be on the Insured Person to ensure, correctly admit and pay any tax liability in consideration of any benefit being paid that may incur tax or imposts of any nature.

CLAIMS CONDITIONS

1. **Compliance** The Insured Person must follow the Company's advice or instruction otherwise the Company may decline to pay the whole or any part of the claim.
2. **Notification** If the Insured Person wants the Company to pay for any benefit in excess of R5,000, Travel Guard must be contacted and their prior written agreement must be obtained. If not approved by Travel Guard, the Company's liability could be limited to R5,000 for any one Insured Event.
3. **Legal action** If the Company denies liability for any claim and the Insured Person does not institute legal action and serve summons on the Company (or initiate arbitration proceedings if the Company has agreed to submit to arbitration) within 12 months after such repudiation, all benefits of such claim shall be forfeited.
4. **Notice of claim and proof of loss**
 - 4.1 The Insured Person must give the Company notice in writing:
 - a. within 90 days of an Accident which may give rise to a claim under section 2 of this Policy. Any benefit related to death will only be payable if the Company receives written notification of the death within 30 days. The Company shall have the right to have a post mortem examination of the body conducted.
 - b. within 30 days of any other occurrence which may give rise to a claim under this Policy.
 - 4.2 The Insured Person must, at its own cost, provide whatever certificates, information and documented evidence ("Evidence") is required by the Company regarding the Insured Event.
5. **Recoveries** All recoveries net of the Company's actual recovery costs will be distributed firstly to the Company for all amounts paid and any remainder will be paid to the Insured Person.
6. **Fraudulent Claims** If the Insured Person, or anyone acting on his behalf use any fraudulent means or devices to obtain any benefit, then any amount payable in respect of such claim shall be forfeited.
7. **General**
 - 7.1 The Insured Person shall submit to medical examination at the expense of the Company as often as shall be required in connection with any claim. Any report generated as a result of such examination shall be the property of the Company and shall be deemed to be confidential information of the Company.
 - 7.2 Medical Treatment shall be sought and followed promptly on the occurrence of an Injury or Illness and the Company shall not be liable for that part of any claim which in the opinion of a Medical Practitioner arises from the unreasonable or wilful neglect or failure of any Insured Person to seek and remain under the care of a qualified Medical Practitioner.
 - 7.3 All claims arising from criminal incidents are to be supported and accompanied by a certified police report.
 - 7.4 The due observance and fulfilment of the Policy insofar as it relates to anything being done or complied with by the Insured Person, shall be a condition precedent to liability to make any payment under this Policy.
 - 7.5 The Company shall have the right to access any current or prior medical records of the Insured Person in order to finalise and/or proceed with the assessment of a claim and/or render medical assistance. By virtue of this clause, the Insured Person shall be deemed to have given the Company written consent to access any of the Insured Person's current or prior medical records.
 - 7.6 No amount payable in terms of this Policy shall bear any interest.

CLAIMS PROCEDURES

A completed claim form that has been signed by the Insured Person, copies of the airline ticket, the Policy Receipt or Schedule, and other items that may be necessary, are required on all claims together with the following documents for the different types of losses;

Emergency Medical Expenses

- a. All bills to be submitted with claims.
- b. If Illness is possibly pre-existing then the Insured Person is to supply his normal Medical Practitioner's report stating what treatment was received prior to the commencement of the Insured Journey, unless additional premium has been received to purchase Waiver of Pre-existing Conditions.
- c. Name of the Medical Practitioner as well as his address and telephone number.

Death, Permanent Total Disablement and Injury

- a. Medical Reports.
- b. Death Certificate indicating cause of death.
- c. Inquest and post mortem reports.
- d. Police Report if death is due to a motor accident. The police station and reference number if death is the subject of criminal investigation.
- e. Claim Notification Period for this Section will be 90 days.

Cancellation or Curtailment

- a. Relevant Medical certificates or death certificates in the case of death.
- b. Original air-tickets or Travel documents.
- c. Proof of deposits not recoverable.
- d. Police Reports in case of accidents or hijack.
- e. Proof of material loss.

Baggage Loss

- a. The Insured Person must obtain Passenger/Property irregularity report from the relevant carrier, in order to substantiate the claim.
- b. Police Report to be submitted if loss is due to Theft.
- c. Receipts of purchase to be submitted as proof of payment.

Baggage Delay

- a. The Insured Person must obtain Passenger/Property irregularity report from the relevant carrier, in order to substantiate the claim.
- b. Receipts for emergency clothing and toiletries purchased, to be submitted.

Travel Delay

- a. Letter from airline/s detailing reason for the delay.
- b. Receipts for essential expenses to be submitted.

Travel Missed Connection

- a. Written proof of delay from the transport provider must be submitted with any claim.
- b. Receipts for essential expenses to be submitted.

Natural Disaster

- a. The Insured person must give the Company a written statement from an appropriate public authority confirming the reason and nature of the disaster and how long it lasted and the Company's liability is subject to it receiving original receipts for the essential expenses incurred.

Motor Hijack

- a. Police Report and Case Number.

GENERAL EXCLUSIONS

The Company will not be liable to pay any Benefit or cover any loss, injury, damage or legal liability sustained directly or indirectly by or caused by or arising directly or indirectly from:

1. War, invasion, act of foreign enemy, hostilities, civil war, rebellion, revolution, insurrection or military or usurped power, labour disturbances, riot, strike or lock-out. However, the Insured Person will continue to be entitled to be covered for 7 calendar days from the start of the hostilities in case he is surprised by such events abroad and insofar as he does not actively participate in them; or
2. the intentional use of military force to intercept, prevent, or mitigate any known or suspected Terrorist Act (Not applicable for Section 1 and 2A); or
3. any Terrorist Act or bomb incident or threat thereof (Not applicable for Section 1 and 2A); or
4. the use, release or escape of nuclear materials that directly or indirectly results in ionising, radiation or contamination by radioactivity from any nuclear fuel or from nuclear weapons materials. For the purpose of this exclusion, only combustion shall include any self-sustaining process of nuclear fission; or
5. the dispersal or application of pathogenic or poisonous biological or chemical materials; or
6. being in service or on duty with or undergoing training with any military or police force, or militia or paramilitary organisation; or
7. engaging in occupational activities underground or requiring the use of explosives; or
8. wilful or deliberate exposure to danger (except in an attempt to save human life), intentional self inflicted injury, suicide or attempt thereof; or
9. deliberate violation of criminal law; or
10. travelling by air or acting as part of an aircraft crew, except where the Insured Person is travelling as a fare-paying passenger on an aircraft that belongs to an airline company duly registered for the transport of fare-paying passengers on regular and published scheduled routes; or
11. mental disorders including, but not limited to anxiety disorders, eating disorders, psychotic disorders, affective disorders, personality disorders, substance use disorders, somatoform disorders, dissociate disorders, psychosexual disorders, adjustment disorders, organic mental disorders, mental retardation and autism; or
12. pregnancy of or childbirth by the Insured Person (except for an unexpected medical complication or emergency occurring during the first 26 weeks of the pregnancy); or
13. sexually transmitted diseases and the conditions commonly known as AIDS or HIV and/or any related illness or condition including derivatives or variations thereof, howsoever, acquired or caused; or
14. chronic fatigue syndrome or myalgic encephalomyelitis (M.E.) (anticardiolipin antibody positivity) or the Illness commonly referred to as yuppie flu; or
15. non-adherence or travelling against medical advice or travelling when unfit to do so; or
16.
 - a) an Insured Person being under the influence of alcohol with more than the legal limit of alcohol in his blood or breath; or
 - b) an Insured Person being under the influence of drugs or narcotics unless such drugs or narcotics were administered by a Medical Practitioner or unless prescribed by and taken in accordance with the directions of a Medical Practitioner; or
 - c) an Accident occurring whilst an Insured Person was driving a motor vehicle with more than the legal limit of alcohol in his blood or breath; or

- d) alcohol abuse, alcoholism, substance abuse, solvent abuse, drug abuse or addictive conditions of any kind;
or
17. any Pre-existing Medical Condition unless Phase III (Pre-existing cover) has been purchased; or
 18. any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications, if the Insured Person has received medical advice or treatment (including medication) for hypertension 12 months prior to the commencement of the Insured Journey; or
 19. any condition known to the Insured Person prior to the Effective Date of Coverage, where the Insured Person:
 - a) is on the waiting list for Medical Treatment; or
 - b) is travelling for the purpose of obtaining Medical Treatment (even if this is not the sole reason for the Insured Journey); or
 - c) has received a terminal prognosis; or
 - d) has been recommended to continue or to commence any Medical Treatment or medication after the Effective Date of Coverage; or
 20. in respect of an Insured Person on reaching 70 years of age or older, any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto; or
 21. employment involving Manual Labour ; or
 22. undertaking employment on a permanent or contract basis which is not casual; or
 23. participating in any sport as a Professional Player; or school sports (unless an Endorsement has been issued and additional premium charged and authorised by the Company and paid by the Insured Person); or
 24. any Hazardous Pursuits unless the activity has been pre-authorised by us. Please see the Harzardous Pursuits section for further details; or
 25. consequential loss of any kind or financial loss and/or expense not otherwise specifically covered; or
 26. any claim arising from the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfil any part of their obligation to the Insured Person; or
 27. open ended tickets, if purchased for emigration purposes.

If the Company alleges that by reason of any of the above exclusions, loss or damage is not covered by this Policy, the burden of proving the contrary shall rest on the Insured Person.

General Exclusion 22 does not apply if Public Conveyance tickets are purchased with a Diners Club SA (Pty) Ltd Corporate Card.

HAZARDOUS PURSUITS (ONLY APPLICABLE TO PHASE I, II AND III COVER)

The Insured Person may not be covered when taking part in certain sports or activities. If the Insured Person intends on taking part in a sport or activity during an Insured Journey, please note that cover is included for the activities listed in the Appendix A, and subject to the limitations and exclusion listed below:

SPECIFIC HAZARDOUS PURSUITS LIMITATIONS AND EXCLUSIONS:

1. Section 1 Emergency Medical and Related Expenses limited to R500,000. Excess R500
2. Section 2 Personal Accident (Death or Disability) benefit is not applicable in the event of a claim as a result of an Insured Person engaging in Black slope or off-piste skiing/snowboarding
3. Professional Participation is excluded
4. Sprains, strains and physiotherapy claims are excluded if sustained whilst taking part in the activities listed in Appendix A.

If you have any questions or if you wish to take part in an activity not shown in the table above, please contact the Chartis Travel Call Centre on 0860 346 377 (Option 4 or e-mail diners.nactravel@za.aegisglobal.com before taking part in the activity. The Company may choose to charge an additional premium, cover will be provided at the discretion of the Company.

PLEASE NOTE THE SECTIONS LISTED BELOW ARE ONLY APPLICABLE IF LISTED IN THE APPLICABLE INSURED'S SCHEDULE OF BENEFITS FOR THE RELEVANT OPTION THAT THE INSURED PERSON IS COVERED FOR.

SECTION 1 - EMERGENCY MEDICAL AND RELATED EXPENSES AND ASSISTANCE

SECTION 1A - EMERGENCY MEDICAL EXPENSES

1. International Journey

If an Insured Person whilst travelling on an International Journey incurs Emergency Medical Expenses as a result of Illness or Injury, the Company will pay for those expenses.

2. Local Journey

If an Insured Person whilst travelling on a Local Journey incurs Medical Expenses as a result of Injury, the Company will pay the Insured Person for those expenses.

3. Follow Up Treatment In the Republic of South Africa

- a. If an Insured Person incurs Follow Up Treatment in the Republic of South Africa for an Illness or Injury that was first treated under Section 1A whilst on an International Journey, the Company will pay the Insured Person for those Medical Expenses which are incurred within 30 days of his return to the Point of Departure.
- b. If an Insured Person incurs Follow Up Treatment in the Republic of South Africa for Malaria within 30 days of his return to the Point of Departure and such infection is as a direct result of an International Journey, regardless of whether the illness was first diagnosed or treated under Section 1A whilst on an International Journey, the Company will pay the amount stated in the Schedule of Benefits.

SECTION 1A(3) - SPECIFIC CONDITIONS

Claims for Medical Expenses shall be reduced by an amount equal to the compensation received or receivable by or on behalf of the Insured Person from any other source.

SECTION 1A(3) - SPECIFIC EXCLUSION

Malaria, where such infection is not as a direct result of an International Journey.

Visit by a Family Member

If the Insured Person suffers Illness or Injury resulting in him being hospitalised for a period of more than 5 consecutive days, the Company will pay, subject to medical advice and the Company's written agreement, the reasonable expenses including additional accommodation and travelling expenses, telephone costs, meals and beverages of necessity incurred by one Relative to travel to, remain with, or accompany him back to his Point of Departure.

Return of Children

If the Insured Person's accompanying Children are left stranded at the time of him being confined to a Hospital or his repatriation or Death, the Company will amend their existing tickets or if not possible, arrange and pay the reasonable expense, for their transportation back to the Point of Departure, with a qualified escort if necessary, provided they are also insured under this Policy or a Travel Guard Policy.

Return of Travel Companion

In the event of the Insured Person being confined to a Hospital or his repatriation or death, We will amend his Travel Companion's existing tickets or if not possible, arrange and pay the reasonable expense, for their transportation back to the Point of Departure, with a qualified escort if necessary, provided they are also insured under this Policy or a Travel Guard Policy.

Return of Mortal Remains/Burial Expenses

If an Insured Person dies, the Company will pay the reasonable cost of returning his mortal remains to the Point of Departure, or the reasonable funeral and related costs if the body is buried or cremated at the place of death.

Coffin Expenses

If an Insured Person dies, the Company will pay for the coffin expenses when the mortal remains are returned to the Point of Departure.

SECTION 1B - TRAVEL GUARD

An Insured Person is entitled to the worldwide services of Travel Guard. In the event of a medical or other emergency, the Insured Person must call the Travel Guard number shown on the Policy Certificate which has been supplied to the Insured Person and which should be carried by all Insured Persons during an Insured Journey.

Travel Guard has a worldwide team of doctors, medical professionals and insurance specialists who are available 24 hours a day for advice and assistance for medical emergencies that the Insured Person might encounter during an Insured Journey.

Travel Guard arranges access to the following services, subject to the Policy terms and conditions:

1. **Premature Return in case of Death or imminent death of a Relative or Business Associate** In the event of death or imminent death of an Insured Person's Relative or Business Associate, the Company will provide reasonable and practicable assistance in arranging for the conversion or amendment of his travel ticket to return to the Point of Departure as soon as possible.
2. **Cash Assistance** If as a result of Theft, loss, Illness or Injury the Insured Person requires funds to pay for travel or accommodation, Travel Guard will advise him or his representative on how to obtain additional funds. Travel Guard will charge an administration fee for this advice.
3. **Consular Referral** Wherever possible Travel Guard will provide an Insured Person with the details of the representative of the relevant consulate.

4. **Emergency Travel and Accommodation Arrangements** Wherever possible Travel Guard will provide an Insured Person all reasonable, possible and practicable assistance in arranging emergency alternative transportation and accommodation.
5. **Legal Assistance Abroad** If the Insured Person is imprisoned or threatened with imprisonment, the Company will assist him in finding a lawyer.
6. **24-hour Medical Emergency and Assistance Telephone Line** The Travel Guard medical personnel including paramedics, nurses and doctors are available 24 hours a day to provide medical advice and information. This is an advisory service, as a telephonic conversation does not constitute an accurate diagnosis.
7. **Replacement of Lost Travel Documents** Wherever possible Travel Guard will provide an Insured Person with all reasonable, possible and practical assistance in arranging emergency alternative travel documents.
8. **Transmission of Urgent Messages** Travel Guard will transmit urgent (personal) messages on behalf of or to an Insured Person in the event of travel delay, illness or injury.

SECTION 1B - SPECIFIC CONDITIONS

1. The Company shall have complete control over the legal proceedings.
2. The lawyer nominated by the Company must be qualified to practice in the court of the country where the event, giving rise to the claim, occurred or where the Insured Person is resident. The Insured Person, acting reasonably, does not have to accept the lawyer nominated by the Company. If the Insured Person does not agree with the Company regarding the suitability of the lawyer, the Company will ask the ruling body for lawyers in that country to nominate another lawyer. In the interim the Company may appoint a lawyer to protect the Insured Person's interests.
3. If an award or compensation is made and payment is received by the Insured Person or a lawyer instructed on his behalf, then all sums advanced or paid by the Company shall be refunded to the Company.
4. The Insured Person must notify the Company as soon as possible of any incident which may give rise to a claim but in any event not later than 48 hours after the incident.

SECTION 1B - SPECIFIC EXCLUSIONS

The Company will not pay for costs or expenses:

1. incurred without prior authorisation by Travel Guard; or
2. in respect of the pursuit of a claim against the Company, Travel Guard, a travel agent, tour operator or conveyance carrier; or
3. incurred as a result of actions between Insured Persons, or actions pursued in order to obtain satisfaction of a judgement or legally binding decision; or
4. in respect of claims caused by any member of the Insured Person's family or household.

SECTION 1C - MEDICAL EVACUATION, REPATRIATION OR TRANSPORT TO MEDICAL CENTRE EXPENSES

If an Insured Person suffers an illness or injury covered under Section 1A - Medical and Related Expenses that necessitates emergency transportation, the Company will:

1. transfer the Insured Person to another location to obtain necessary Medical Treatment; and/or
2. repatriate the Insured Person to his Point of Departure; and/or
3. pay for the cost of the required service including the necessary accompanying medical staff; and/or
4. pay for the cost of returning the Insured Person under Section 1D – Alternative Employee or Resumption Expenses.

SECTION 1C - SPECIFIC CONDITIONS

1. If the Insured Person wants the Company to pay for emergency transportation, Travel Guard must be contacted and their prior written agreement obtained. (This requirement does not include in-country emergency ambulance transfers from place of illness or injury to a Hospital, which will be paid for by the Company provided that such service was medically necessary or was authorised by a local authority such as the police or a medical officer.)
2. The Company will decide where and how to move the Insured Person depending on the medical advice received.
3. The Company will use the Insured Person's return ticket towards their costs if he is returned to his Point of Departure.

SECTION 1D - BUSINESS TRAVEL - ALTERNATIVE EMPLOYEE OR RESUMPTION OF ASSIGNMENT EXPENSES

The Company will reimburse the Insured Person for reasonable and necessary expenses for either:

1. **Alternative Employee** Send a substitute person to complete the original Business commitment of an Insured Person who is unable to do so due to his unexpected death, injury or illness, or who has to return early to his Point of Departure following the unexpected death or imminent death of a Relative or Business Associate; or
2. **Resumption of Assignment** Return the original Insured Person whom the Company has repatriated back to the Point of Departure following an event covered under Section 1A or Section 1C, within 90 days of such repatriation, to complete his original Business commitments.

SECTION 1D - SPECIFIC CONDITIONS

The Company will only pay for either (1) Alternative Employee or, (2) Resumption of Assignment.

SECTION 1D - SPECIFIC EXCLUSION

The Company will not pay for any expenses necessarily incurred as part of the original travel budget. The Company reserves the right to use the original ticket as part of full payment.

SECTION 1E - HOSPITAL CASH BENEFIT (CONFINEMENT)

The Company will pay for Confinement as a result of Injury or Illness whilst on an International Journey. The Company will pay for each complete Day of Confinement.

SECTION 1 - SPECIFIC CONDITIONS

1. If the Insured Person wants the Company to pay for any medical expenses in excess of R2, 000, Travel Guard must be contacted and their prior written agreement must be obtained. If not approved by Travel Guard, the Company's liability will be limited to R2, 000 for any one Insured Event.
2. Medical Expenses as a result of emergency dental treatment are limited to dentistry received within 30 days of the Accident.
3. Medical and Related Expenses shall only be paid until such time as a Medical Practitioner appointed by the Company decides that an Insured Person is capable of being repatriated. If the Insured Person is capable of being repatriated and elects not to return to the Point of Departure, all expenses incurred in respect of the occurrence will be for the Insured Person's own account.

SECTION 1 - SPECIFIC EXCLUSIONS

The Company will not pay for any medical expenses:

1. incurred for continuing treatment, including any medication commenced prior to the commencement date of the Insured Journey, which the Insured Person has been advised to continue whilst on an Insured Journey; or
2. incurred within the Republic of South Africa notwithstanding that such expenses may arise from an Injury or Illness suffered by him during the period of an Insured Journey; or
3. incurred due to investigatory treatment that is not specified by a Medical Practitioner as immediately necessary; or
4. for fillings or crowns of precious metal; or
5. for any procedures relating to dental or oral hygiene; or
6. for specialist Medical Treatment without referral from a Medical Practitioner; or
7. relating to contraceptive devices, prosthetic devices, medical appliances or artificial aids; or
8. for preventative treatment, including but not limited to any vaccination and/or immunisation; or
9. in excess of R1,000 for either physiotherapy or chiropractic treatment, unless confined to a Hospital; or
10. as a result of any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto, for persons over the age of 70 years.

PRE-EXISTING MEDICAL CONDITIONS – (ONLY APPLICABLE IF THE RELEVANT OPTION HAS BEEN PURCHASED)

Medical Expenses cover in respect of a Pre-Existing condition shall be limited to Medical Expenses resulting from Illness occurring whilst on an International Journey due to a Pre-Existing condition up to the limit stated in the Schedule of Benefits.

SPECIFIC CONDITIONS

1. Any costs associated with treatment the Insured Person currently receives or that the Insured Person's medical advisors are aware will or may arise during the International Journey as a result of such Insured Person's current state of health.
2. The Insured Person must be hospitalised as an in-patient for more than 48 hours up to the limits as specified in the Schedule of Benefits.

SPECIFIC EXCLUSIONS

1. The Company will not pay for any medical expenses as a result of any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto, for persons over the age of 70 years.
2. The Company will not pay for any cardiac or cardio vascular or vascular or cerebro vascular illness or conditions or sequelae thereof or complications, if the Insured Person has received medical advice or treatment (including medication) for hypertension 12 months prior to the commencement of the Insured Journey.
3. We shall not provide the cover for Pre-Existing Medical condition should a Medical Practitioner have advised the Insured Person not to travel due to medical reasons.

4. The Company will not pay for any condition known to the Insured Person prior to the Effective Date of Coverage, where the Insured Person:
- is on the waiting list for Medical Treatment; or
 - is travelling for the purpose of obtaining Medical Treatment (even if this is not the sole reason for the Insured Journey); or
 - has received a terminal prognosis; or
 - has been recommended to continue or to commence any Medical Treatment or medication after the Effective Date of Coverage.

SECTION 2 - PERSONAL ACCIDENT

SECTION 2A - DEATH AND DISABILITY

If an Insured Person sustains an Injury resulting in an Insured Event described in the Table of Benefits below, the Company will pay the Insured Person or his legal representative the compensation as stated in the Schedule of Benefits.

If an Insured Person disappears and after 24 consecutive calendar months it is reasonable for the Company to believe that he may have died due to an Injury, the Company will pay the benefit subject to receipt of a signed undertaking by his beneficiary that such compensation shall be refunded if it is later demonstrated that he did not die as a result of an Injury. This written undertaking will be required at the point where this benefit becomes payable.

Public Conveyance Cover

Cover applies if an Insured Person sustains Injury any time during the period of an Insured Journey while riding in or upon, boarding or alighting from any Public Conveyance being used as a means of land, air or water transportation.

24 Hour Cover

Cover applies any time during the period of an Insured Journey other than when covered under the Public Conveyance benefit.

TABLE OF BENEFITS

INSURED EVENT	COMPENSATION EXPRESSED AS A PERCENTAGE OF THE SUM INSURED
1. Death	
a. As a result of an Accident	100%
b. Disappearance	100%
c. Death as a direct result of exposure to the elements of nature as a direct result of an Accident	100%
2. Permanent Total Disablement	
a. As a result of an Accident	100%
b. Permanent Total Disablement as a direct result of exposure to the elements of nature as a direct result of an Accident	100%
3. Permanent Disability	
3.1 Permanent and Total Loss of:	
a. Both hands or both feet	100%
b. One hand and one foot	100%
c. Either hand or foot and sight of one eye	100%
d. One hand or one foot	50%
3.2 Permanent and Total Loss of Sight in:	
a. Both eyes	100%
b. One eye	50%
3.3 Permanent and Total Loss of Hearing in:	
a. Both ears	100%
b. One ear	50%
3.4 Permanent and Total Loss of Speech	100%
3.5 Permanent and Incurable Insanity	100%
3.6 Permanent and Incurable Paralysis	100%
3.7 Permanent and Total Loss of four fingers and thumb of either hand	70%
3.8 Permanent and Total Loss of four fingers of either hand	40%
3.9 Permanent and Total Loss of thumb of either hand:	
a. Both joints	30%
b. One joint	15%
3.10 Permanent and Total Loss of a finger of either hand:	
a. Three joints	10%
b. Two joints	7.5%
c. One joint	5%
3.11 Permanent and Total Loss of toes of either foot:	
a. All in one foot	15%
b. Great – both joints	5%

c. Great – one joint	3%
d. Other than great – each toe	1%
3.12 Fracture of leg or patella with established non-union	10%
3.13 Shortening of leg by at least 5cm	7.5%
3.14 Permanent disability not otherwise provided for under items 3.1 – 3.13 inclusive	A percentage of the sum insured up to a maximum of 15%

SECTION 2 - SPECIFIC CONDITIONS

1. The Company will not pay for any benefit in respect of:
 - a. Permanent Total Disablement except on submission of satisfactory proof to the Company that the disablement will in all probability continue for the remainder of an Insured Person's life;
 - b. more than 100% of the sum insured when more than one Injury arises from the same Accident;
 - c. more than one category for more than 100% of the sum insured. The benefit payable will be the highest in the appropriate category.
2. If the Insured Person sustains Permanent Total Disablement and the claim in relation to that disability is admitted and accepted, the benefit will be paid and all cover under this Section 2A in respect of such Insured Person shall cease.
3. The diagnosis and determination of Permanent Total Disablement or any Permanent Disability must be made and documented by a Medical Practitioner and must be continuous and permanent for at least 24 consecutive months from the onset of the disablement. However:
 - a. for Permanent and Total Loss of Speech, the loss of the ability to speak must be continuous and permanent for at least 12 consecutive months and medical evidence must confirm Permanent and Total Loss of Speech and all psychiatric related causes must be excluded; and
 - b. for Permanent and Incurable Paralysis, the loss of use must be continuous and permanent for at least 12 consecutive months from the onset of the paralysis.
4. If the Insured Person's existing ailment, infirmity or other abnormal physical or mental condition is aggravated by an Accident, the Benefit amount will be determined by the degree of the deterioration of the existing ailment after the Accident and the Benefit will be paid accordingly. The degree of ailment, infirmity or other abnormal physical or mental condition before the Accident will be determined by medical evidence.
5. If the consequences of an Accident are aggravated owing to an Insured Person's existing ailment, infirmity or other abnormal physical or mental condition, determination of the benefit will be based on the consequences the Accident would have had, had such defects not existed. The foregoing shall not apply, however, if such circumstances are a consequence of an earlier Accident to the Insured Person, for which benefit has been or will be paid under this Policy.
6. If an Insured Person dies of natural causes prior to the final disablement assessment relating to an Insured Event, the Company will pay what reasonably would have had to be paid for such Permanent Disability in accordance with Specific Condition 1(b) above.
7. In the event of death of Children, the benefit payable will be subject to the amount legislated by law at the time of the death.
8. Children are excluded from any benefit for occupational disability under Permanent Total Disablement.

SECTION 2 - SPECIFIC EXCLUSION

The Company will not be liable to pay any benefit under this section in respect of any Insured Person for any Insured Event caused by or arising directly or indirectly from any type of Illness, or bacterial infection, except that this exclusion shall not apply to medically acquired infections or blood poisoning, including pyogenic infections, which may result from an accidental cut or wound.

SECTION 3 - CANCELLATION OR CURTAILMENT

SECTION 3A - CANCELLATION

The Company will reimburse the non-refundable unused portion of travel or accommodation costs paid by the Insured Person following necessary cancellation of the Insured Journey prior to departure due to:

1. The Insured Person's unexpected death, Illness or Injury or the unexpected death, Illness or Injury of his Spouse, Business Associate, Children, the person with whom he had intended to stay abroad, a Relative or Travel Companion as deemed necessary by a Medical Practitioner.
2. Non availability of the person that is in charge of the Insured Person's minor or disabled Children due to such person's unexpected death, Illness or Injury within 30 days prior to the date of the Insured Journey.
3. Cancellation or diversion of scheduled public transport services, including by reason of strikes or other industrial action, unless there was media warning 24 hours before the date the particular Insured Journey was booked that such events were likely to occur; or
4. Serious or considerable accidental material damage to immovable property owned by the Insured Person caused within 30 days of the intended date of departure. The cause of such damage must be unintentional, not

as a direct result of any action of the Insured Person and require him to cancel the Insured Journey for the safeguarding of his interests.

5. Theft or complete immobilisation of the Insured Person's Private Motor Vehicle at the moment of departure or during the trip towards the destination due to a traffic accident, fire or as a result of a hijacking.
6. Delay in reaching the place of embarkation for any Public Conveyance operating on land, air or water as a result of immobilisation of more than one hour due to a traffic accident or circumstances beyond one's control ("Act of God") during the trip towards the place of embarkation.
7. A Traumatic Event occurring within 30 days of the date of departure to the Insured Person, his Spouse, Children or the person abroad with whom he intended to stay, a Relative or Business Associate where medical advice has been sought and he has been advised not to travel.
8. Loss or Theft of travel documents (travel tickets, passports and visas).

SECTION 3B - CURTAILMENT

The Company will reimburse the Insured Person the non-refundable unused portion of travel or accommodation costs or additional accommodation and/or travel expenses (excluding telephone costs, meals and beverages) paid by the Insured Person following necessary Curtailment (shortening and/or alteration) of the Insured Journey due to:

1. His unexpected death, illness or injury or the unexpected death, illness or injury of his Spouse, Business Associate, Children, the person with whom he had intended to stay abroad, a Relative or Travel Companion as deemed necessary by a Medical Practitioner.
2. Cancellation or diversion of scheduled public transport services, including by reason of strikes or other industrial action, unless there was media warning 24 hours before the date the particular Insured Journey was booked that such events were likely to occur.
3. Loss or Theft of travel documents (travel tickets, passports and visas).

SECTION 3B - SPECIFIC CONDITION

It is a condition that should the Insured Person need to return to the Point of Departure for any reason, Travel Guard must be contacted beforehand to make the travel arrangements.

SECTION 3 - SPECIFIC DEFINITION

Retrenchment means the termination of an employee's services where the specific job no longer exists as a consequence of a variety of possible factors including advances in technology, permanent changes in operation processes or markets, closure of an operation or is an exercise whereby management decides to reduce the number of employees due to a downturn of the economy or poor financial performance but excluding: -

- a. Where the Insured Persons are the owners or co-owners of the business exercising the Retrenchment programme or where the Insured Person/s are a director of the company where it is found that the directors were instrumental in the demise of the company; or
- b. Due to illness or injury; or
- c. Resignation from normal occupation or voluntary Retrenchment; or
- d. Where the Government nationalises or takes over the business; or
- e. Prior knowledge that Retrenchment would happen when the Policy was purchased.

SECTION 3 - SPECIFIC EXCLUSIONS

The Company will not pay for any expenses arising directly or indirectly out of:

1. financial circumstances or insolvency; or
2. the Insured Person not being in possession of the required or valid or correct travel documents or visas; or
3. carrier caused delays where the cost of the expenses are recoverable from the carrier; or
4. any Business or employment commitment or financial or contractual obligation of the Insured Person or any other person on whom the Insured Journey depends; or
5. any change of plans or disinclination on the part of the Insured Person or any other person to travel on an Insured Journey; or
6. the inability of any tour operator or wholesaler to complete arrangements for any tour due to a deficiency in the required number of persons to commence any tour or travel; or
7. defective or bad condition of the Private Motor Vehicle planned to be used for the Insured Journey; or
8. Unemployment or change of employment, other than Retrenchment; or
9. lock-out or prohibitive regulation by the court of any country; or
10. adverse weather conditions including cyclones, tornadoes, floods, typhoons, blizzards or other natural disasters.

SECTION 4 - BAGGAGE LOSS

Property The Company will pay for the accidental loss of, Theft or damage to the Insured Person's accompanying baggage, Personal Effects, portable business equipment (including cellular telephones, blackberries, palmtops, laptops, notebooks or similar personal computers) that occurred during the Insured Journey.

Sum Insured

Except as provided for under Section 5 - Baggage Delay and as provided below in respect of cellular telephones, blackberries, palmtops, laptops, notebooks or similar personal computers, the maximum amount the Company will pay for any one item, set or pair of items, is the amount stated in the Schedule of Benefits.

The maximum amount the Company will pay, where Baggage Cover applies in terms of the Schedule of Benefits, shall not apply to cellular telephones, blackberries, palmtops, laptops, notebooks or similar personal computers but In respect of these items, the following limits shall instead apply:

- a. Cellular phones - R2,000
- b. Blackberries - R3,000
- c. Palmtops - R3,000
- d. Laptops note books or similar personal computers - R5,000

SECTION 4 - SPECIFIC CONDITIONS

1. It is a condition of payment that loss or damage attributable to Theft, vandalism or loss or damage by carriers be reported to the local police or appropriate authority as soon as possible after discovery of the loss and that a written acknowledgement of the report is obtained.
2. A camera and/or video camera, its lenses and accessories shall be regarded as one item.
3. A cellular telephone, blackberry, palmtop, notebook, laptop, or similar personal computer, and any fittings or accessories including discs/storage mechanisms/carry cases, shall be deemed to be a single item.
4. In respect of jewellery claims original or certified copies of valuation certificates issued prior to the commencement of the Insured Journey are required. This condition is applicable to all jewellery including gifts and inherited items.
5. Contact lenses, prescription spectacles or sunglasses are limited to a maximum of R1,000 per pair over and above any applicable Excess.
6. Reasonable measures to save and recover baggage must have been taken by any Insured Person.
7. The Insured Person shall, in respect of property, Personal Effects, which may become the subject of a claim:
 - a. exercise all reasonable care for the safety, security and supervision thereof at all times and must not leave property unattended in a public place or in any unlocked vehicle, room or building;
 - b. endeavour to minimise any loss;
 - c. not abandon any damaged property.
8. The basis of settlement for items purchased within the 12 months prior to the Insured Journey or whilst on the Insured Journey will be the replacement value of items determined at the Company's discretion. The Company may choose to replace, repair or pay for the loss in cash. All items must be supported by proof of purchase.
9. To account for wear and tear the Company will pay a maximum of 75% of the replacement value for items purchased more than 12 months prior to the Insured Journey, decreasing thereafter at 10% per year from date of purchase.

SECTION 4 - SPECIFIC EXCLUSIONS

The Company will not be liable for:

1. damage or loss arising from electrical or mechanical breakdown of any item; or
2. damage to or replacement of any electronic data or software; or
3. scratching or breakage of fragile or brittle items. This exclusion does not apply to photographic or video equipment, binoculars, spectacles or contact lenses; or
4. damage or loss arising from normal wear and tear, decay, a defective feature of the object itself, destruction by moth or vermin, mould or fungus, insects, rodents, any process of cleaning, ironing, pressing, repairing, restoring or alteration. However, loss as a result of leaking liquid enclosed in the baggage is included; or
5. baggage, Personal Effects, business property, travel documents or money shipped under any freight agreement, unaccompanied baggage or items sent by postal or courier services or given to someone else other than a Travel Companion; or
6. loss, destruction or damage arising from confiscation or detention by customs or other officials or authorities or shortages due to errors, omissions or depreciation value; or
7. loss, destruction or damage directly occasioned by pressure waves caused by aircraft or any other aerial devices travelling at sonic or supersonic speeds; or
8. loss, destruction or damage caused by atmospheric or climatic conditions or any other gradually deteriorating cause; or
9. loss of or damage to bonds, stamps, negotiable instruments, deeds, securities or any kind of bullion; or
10. cellular telephones, blackberries, palmtops, laptops, notebooks or similar personal computers or any electronic equipment:
 - a. where Theft or attempted Theft occurs while such equipment is unattended other than when securely locked inside a building or securely locked out of sight inside a motor vehicle.
 - b. whilst carried on any conveyance unless carried by an Insured Person as personal cabin luggage.
 - c. where an Insured person is unable to provide reasonable proof of ownership or value (for example original receipts).

However, exclusion 10(a) shall not apply in circumstances where the Insured Person leaves such property temporarily unattended whilst on any Public Conveyance and takes all reasonable precaution to safeguard the property and has no option other than to leave the property temporarily unattended; or

11. contractual obligations in relation to a cellular phone purchase; or
12. any goods intended for sale or trade; or
13. household furniture and household appliances, non-portable property, electronic equipment not specifically covered above unless acquired during the Insured Journey for personal use in the Insured Person's Country of Residence. The Insured Person will be required to attach receipts for such items in the event of a claim.
14. Loss of sports equipment and tools and/or damage of sports equipment and tools whilst in use.

SECTION 5 - BAGGAGE DELAY

The Company will reimburse the Insured Person for reasonable essential expenses incurred, and for such amount incurred above the Excess, for the emergency replacement of essential items if his baggage is delayed, misdirected or temporarily misplaced by a carrier.

SECTION 5 - SPECIFIC CONDITIONS

1. Written proof of delay from the transport provider must be submitted with any claim and the Company's liability is subject to it receiving original receipts for the essential expenses incurred.
2. The baggage delay must exceed the Excess.
3. Confiscation or requisition by customs or other government authority cannot form the basis of a claim for loss or expenses.
4. Claims in respect of essential clothing or requisites purchased as a result of delayed baggage will only be considered if items have been purchased within 4 days after the actual arrival time at the intended destination.
5. If baggage appears to be delayed or lost at the destination airport, the Insured Person must formally notify the relevant carrier airline immediately.

SECTION 6 - TRAVEL DELAY AND TRAVEL MISSED CONNECTION

SECTION 6A - TRAVEL DELAY

The Company will reimburse the Insured Person for reasonable essential expenses incurred in respect of hotel accommodation, restaurant meals or refreshments if not provided or compensated by the carrier or any third party, following unforeseen travel delay resulting from:

1. Accidental Loss or Theft of travel documents (travel tickets, passports and visas).
2. An accident or mechanical/electrical breakdown involving the transport in which he arranged to travel or was travelling for the purpose of reaching the Point of Departure and/or departure point from which he had intended commencing an onward journey.
3. Delay of a scheduled departure of a Public Conveyance due to:
 - a. industrial dispute, strike or action; or
 - b. adverse weather conditions including cyclones, tornados, floods, typhoons, blizzards, or natural disasters in the country to or through which he is travelling; or
 - c. mechanical/electrical breakdown; or
 - d. public transport services failure.

SECTION 6A - SPECIFIC CONDITION

The travel delay must exceed the Excess.

SECTION 6A - SPECIFIC EXCLUSIONS

The Company will not pay for expenses incurred:

1. where comparable alternative onward transportation has been made available to the Insured Person within the Excess after the scheduled departure time of a booked flight or within the Excess after an actual flight arrival (in the case of a connecting flight); or
2. where the Insured Person fails to check in according to the itinerary supplied, unless such failure was due to a strike or industrial action; or
3. where the delay is due to industrial dispute, strike or action which existed or for which advance notice had been given on or before the date on which the Insured Journey commenced; or
4. where the delay is due to the withdrawal from service temporarily or permanently of any Public Conveyance on the orders or recommendation of any Port Authority or the Civil Aviation Authority or any similar body in any country in which advance notice had been given on or before the date on which the Insured Journey commenced; or
5. for carrier caused delays where the cost of expenses is recoverable from the carrier.

SECTION 6B - TRAVEL MISSED CONNECTION

The Company will reimburse the Insured Person for reasonable essential expenses incurred if he misses an onward travel connection at the transfer point during an International Journey due to the late arrival of his incoming confirmed connecting scheduled conveyance and no onward transportation is available to him within 6 consecutive hours of his arrival or any circumstances beyond his control. The Company will indemnify the Insured Person for reasonable essential expenses incurred in respect of hotel accommodation, restaurant meals or refreshments if not provided or compensated by the carrier or any third party.

SECTION 6B - SPECIFIC EXCLUSIONS

The Company shall not be liable:

1. for any loss arising from failure of the Insured Person to check in according to the itinerary supplied to him, and he must obtain written confirmation from the common carrier or their handling agents of the number of hours delayed and the reasons for the delay.
2. for any loss that is covered by any other existing insurance scheme, government programme or which will be paid or refunded by a hotel, airline, travel agent or any other provider of travel or accommodation.
3. where the delay is due to industrial dispute, strike or action which existed, or for which advance notice had been given, on or before the date on which the Insured Journey commenced.

SECTION 6 - SPECIFIC CONDITION

Written proof of delay from the transport provider must be submitted with any claim and the Company's liability is subject to it receiving original receipts for the essential expenses incurred.

SECTION 7 - TICKET UPGRADE

The Company will reimburse the Insured Person for the essential upgrade of a conveyance ticket during an international journey due to:

1. the delay of his confirmed scheduled conveyance and if no onward transportation is available to him within 6 consecutive hours of the scheduled departure time; or
2. the Insured Person not being admitted to a confirmed scheduled conveyance due to overbooking and if no other means of transport is made available to him within 6 hours after the scheduled time of departure of the scheduled conveyance; or
3. the Insured Person missing an onward travel connection at the transfer point during an International Journey due to the late arrival of his incoming confirmed connecting scheduled conveyance and no onward transportation is available to him within 6 consecutive hours of his arrival.

SECTION 7 - SPECIFIC CONDITION

Written proof of delay from the transport provider must be submitted with any claim and the Company's liability is subject to it receiving original receipts for the expenses incurred.

SECTION 7 - SPECIFIC EXCLUSIONS

The Company shall not be liable:

1. for any loss arising from failure of the Insured Person to check in according to the itinerary supplied to him, and he must obtain written confirmation from the common carrier or their handling agents of the number of hours delayed and the reasons for the delay.
2. for any loss that is covered by any other existing insurance scheme, government programme or which will be paid or refunded by a hotel, airline, travel agent or any other provider of travel or accommodation.
3. where the delay is due to industrial dispute, strike or action which existed, or for which advance notice had been given, on or before the date on which the Insured Journey commenced.

SECTION 8 - NATURAL DISASTER

The Company will reimburse the Insured Person for the cost of providing other similar accommodation if his booked accommodation cannot be lived in because of a fire, flood, earthquake or storm and/or the additional costs for changing his means of public transport used.

SECTION 8 - SPECIFIC CONDITIONS

1. the Insured person must give the Company a written statement from an appropriate public authority confirming the reason and nature of the disaster and how long it lasted and the Company's liability is subject to it receiving original receipts for the essential expenses incurred.
2. any event that results in a claim under this section must not have been known about before the Insured Person left from his Point of Departure.

SECTION 8 - SPECIFIC EXCLUSIONS

The Company shall not be liable for:

1. any expense the Insured Person can recover from any tour operator, airline, hotel or other service provider.
2. any expenses the Insured person would normally have to pay during the period.

3. any claim directly resulting from the Insured Person travelling against the advice of the appropriate national or local authority.

SECTION 9 - LOSS OF CASH / TRAVEL DOCUMENTS

1. **Travel documents/credit card/travellers cheques** The Company will pay the Insured Person's non-recoverable cost of replacing his travel documents (travel tickets, passports and visas), credit cards or traveller's cheques following loss, damage or Theft by any person other than his Relative or Travel Companion.
2. **Money** The Company will pay for the Insured Person's loss of cash, bank or currency notes, cheques, postal or money orders or other negotiable instruments as a result of Theft during an Insured Journey. In respect of money secured for the purpose of the Insured Journey, cover shall commence at the time of collection from the bank or 72 hours prior to the start of the Insured Journey, whichever occurs first, and shall continue for 72 hours after termination of the Insured Journey or until deposited at the bank, whichever occurs first.
3. **Fraud** We will pay the Insured Person's legal liability for payment arising out of the unauthorised use of the Insured Person's Travel documents, credit cards or Insured travellers cheques following Theft during an Insured Journey by any person other than the Insured Person's Relative or Insured Person's Travel Companion, up to the amount stated in the Schedule of Benefits.

SECTION 9 - SPECIFIC CONDITIONS

1. Loss or Theft must be reported to the appropriate authorities and a copy of the report submitted in support of any claim.
2. Cash and travel documents must be carried on the Insured Person or lodged in a safety deposit on the date of loss.
3. Any loss of credit cards, travellers cheques or Travel documents must be reported within 24 hours to the issuing authority and the appropriate cancellation measures taken. The onus will be on the Insured Person to prove that We were not prejudiced in any way by late reporting.
4. The Insured Person shall in respect of Travel documents, money and credit cards, which may become the subject of a claim under this Policy:
 - a. Exercise all reasonable care for the safety, security and supervision thereof at all times and must not leave property unattended in a public place or in any unlocked vehicle, room or building;
 - b. Endeavour to minimise any loss;
 - c. Not abandon any damaged property.

SECTION 10 - PERSONAL LIABILITY

The Company will pay all damages, compensation and legal expenses for which the Insured Person becomes legally liable as a result of his actions causing:

1. Injury, including resultant death, of another person;
2. loss of or damage to property.

SECTION 10 - SPECIFIC CONDITIONS

1. It is a condition of payment that the Insured Person not admit fault or liability to any other person without the Company's prior written consent.
2. No offer, promise, payment or indemnity may be made by the Insured Person without the Company's prior written consent.
3. The Insured Person must give the Company written notice with full particulars of an event that may give rise to a claim within 30 days of the conclusion of an Insured Journey.
4. Every letter, writ, summons and process must be forwarded to the Company as soon as possible.
5. The Company is entitled to take over the defence and settlement of claim in the name of the Insured Person for the Company's benefit. The Company shall have full discretion in the conduct of any proceedings and settlement of the claim.
6. The Company may at any time pay the Insured Person the amount for which a claim can be settled less any damages already paid. The Company will then be under no further liability other than for costs and expenses incurred prior to making such payment.
7. No indemnity will be provided for legal liability arising from Injury or loss as a result of any wilful or malicious act of the Insured Person.

SECTION 10 - SPECIFIC EXCLUSIONS

The Company will not pay damages, compensation or legal expenses in respect of any liability directly or indirectly arising out of or in connection with:

1. Injury to the Insured Person or to any member of his family ordinarily residing with him; or
2. Injury to the Insured Person or his employees arising out of or in the course of employment; or
3. loss of or damage to property owned by or in control of the Insured Person or any member of his family ordinarily residing with him; or

4. the ownership, possession or use by or on behalf of the Insured Person of any caravan, mechanically propelled vehicle (other than golf carts and motorised wheelchairs), aircraft or other aerial device, hovercraft (other than hand-propelled or sailing craft in territorial waters) or animals; or
5. loss of or damage to property or Injury arising out of the Insured Person's profession, business or trade, or out of professional advice given by him; or
6. any contract unless such liability would have arisen in the absence of that contract; or
7. judgements which are not in the first instance either delivered by or obtained from a court of competent jurisdiction within the Republic of South Africa or the country in which the event occurred giving rise to the Insured Person's liability; or
8. any claim for fines, penalties, punitive, exemplary, aggravated or vindictive damages.

SECTION 11 - HIJACK, KIDNAP AND WRONGFUL DETENTION

SECTION 11A - HIJACK - PUBLIC CONVEYANCE

The Company will pay the benefit in the event of the unlawful seizure or wrongful exercise of control of a Public Conveyance (including the crew thereof) in which the Insured Person is travelling.

SECTION 11B - KIDNAP AND WRONGFUL DETENTION

The Company will indemnify the Insured Person for Covered Losses should any of the following insured events happen to him during the Insured Journey within the Territorial Limits:

1. Kidnapping or alleged Kidnapping of an Insured Person; or
2. Wrongful Detention.

COVERED LOSSES

The Company will indemnify the Insured Person for the following covered losses:

1. Reasonable fees and expenses of Clayton Consultants incurred as a direct result of and in relation to an insured event covered under this section.
2. Any reasonable and necessary expenses incurred and paid by the Insured Person solely and directly as a result of an insured event covered under this section, including but not limited to:
 - a. The amount paid by the Insured Person as reward to an Informant for information relevant to such insured event;
 - b. Reasonable costs of Insured Journey and accommodations as follows:
 - (i) costs incurred by the Insured Person while attempting to negotiate an incident covered under such insured event;
 - (ii) travel costs of a Victim to join their immediate family upon their release, and the travel costs of an employee to replace the Victim;
 - c. Rest and rehabilitation expenses, including travel and lodging of the Victim and the Victim's Spouse and/or Children;
 - d. Reasonable and necessary fees and expenses of a qualified interpreter assisting the Insured Person as a result of and during such an insured event;
 - e. The Insured Person's salary for the duration of the kidnapping, which shall mean the amount of remuneration previously paid by the employer at an annual rate including but not limited to bonuses, commissions, cost of living adjustments or foreign tax reimbursements the Insured Person would normally receive, contributions to pension and benefit programmes (at the level in effect on the date of Kidnapping) which the employer continues to pay, on behalf of the Insured Person for the duration of the Kidnapping. The salary will be paid until the earliest of the following:
 - (i) up to 30 days after the release of the Insured Person, if the Insured Person has not yet returned to work; or
 - (ii) discovery of the death of the Insured Person; or
 - (iii) 120 days after the Company receives the last credible evidence that the Insured Person is still alive; or
 - (iv) 60 months after the date of the Kidnapping.

The amount of remuneration, paid by the employer at an annual rate, of an individual newly hired to conduct the specific duties of an Insured Person while he is absent due to a Kidnapping for as long as the Insured Person's own salary is covered.

Territorial Limits

This cover applies to incidents anywhere in the world except for:

- a. Angola, Brazil, Colombia, Mexico, Nigeria, Philippines, Somalia and Venezuela; and
- b. any other country where the British Foreign and Commonwealth Office has issued a travel warning; and
- c. any other country in which the United Nations Armed Forces are present and active.

SECTION 11B - SPECIFIC EXCLUSIONS

The Company will not be liable for loss caused by or resulting either directly or indirectly from or involving:

1. The fraudulent, dishonest or criminal acts of the Insured Person or any person authorised by the Insured Person to have custody of ransom monies. This exclusion will not apply to the payment of ransom monies by the Insured Person in a situation where local authorities have declared such payment illegal.
2. Monies or property surrendered away from the Insured Person's premises in any face-to-face encounter involving the use or threat of force or violence unless surrendered by a person in possession of such monies at the time of such surrender for the sole purpose of conveying it to pay a demand for ransom monies previously communicated to the Insured Person.
3. Monies or property surrendered on the Insured Person's premises unless brought to the premises after receipt of a demand for ransom monies for the purpose of paying that demand.
4. Actual loss of or damage to property of any description, including intellectual property, as a result of an insured event. This exclusion does not apply to in-transit/delivery loss of ransom monies as described under Covered Losses 2.
5. Any loss from Kidnap if the Insured Person is permanently residing or is staying for more than 90 consecutive days in the country where the event occurs.
6. Any violation of the laws of the host country by the Insured Person or failure to maintain and possess duly authorised and required documents and visas.
7. Failure of the Insured Person to evacuate from the host country within 10 days after the issuance of an advisory or travel to country/ies after an advisory has been issued.
8. The Insured Person taking part in the operations of any governmental organisation, official law enforcement or military force.

SECTION 11B - SPECIFIC CONDITIONS

1. **Confidentiality** The Insured Person/s will use all reasonable efforts not to disclose the existence of the cover provided by this section or any other insurance policy.
2. **Limits of Liability** For each Covered Loss the maximum limit and aggregate limit of the Company's liability will not exceed the sum insured/s stated in the Schedule of Benefits and schedule by reason of any one event, except where stated to the contrary. All Covered Losses will be deemed to have been incurred during the policy period in which the event occurred.
3. **Due Diligence** The Insured Person/s will use due diligence and do and concur in doing all things reasonably practicable to avoid or diminish any loss/es insured under this section.
4. **Other Insurance** The insurance provided under this section will be in excess over any other valid and collectable bond or insurance.
5. **Statement of Loss** The Insured Person will file a detailed, sworn statement of loss with the Company as soon as possible after the Insured Event.
6. **Non-employee Directors** In the event that the Insured Person is a non-employee director and is insured under any other similar policy or policies issued by the Company (or by any other member or affiliated insurance company of Chartis) and a loss involving that director is reported under this Section 8B and under one or more such other policies, then the Company's aggregate liability (including that of any of the Company's other member company/ies) for each loss will not be cumulative and will not exceed the highest limits of liability applicable to each loss under any one of the policies.
7. **Non-assignment** This section may not be assigned or transferred.
8. **Assistance and Co-operation** The Insured Person/s will co-operate with the Company in all matters relating to this insurance. This may include attending hearings and trials, securing and giving evidence, obtaining the attendance of witnesses, assisting in achieving settlements, and in conducting litigation, arbitration or other proceedings.
9. **Inspection and Audit** The Company may examine and audit the Insured Person's Business documents relating to the subject matter of this insurance until three years after this policy has expired or has been cancelled. Any premium due for exposures, which exists but was not reported, will be determined by the Company's audit.
10. **Recoveries** In the event of any payment under this section, all recoveries, net of the Company's actual recovery costs, will be distributed firstly to the Company for all amounts paid by the Company under this Section 8B and any remainder will be paid to the Insured Person.
11. **Action Against company** No suit, action or proceeding for recovery of any loss under this Section 8B will be sustainable in any court of law, equity or other tribunal unless all requirements of this section are complied with and it is commenced within 12 consecutive months after the Insured Person has filed a statement of loss with the Company.
12. **Changes** Notice to any of the Company's representatives or knowledge possessed by any representative or by any person will not create a waiver or a change in any part of this section or stop the Company from asserting any right under the terms of this section, nor will the terms of this section be waived or changed unless agreed to in writing by the Company.

13. **Notices** Except as indicated to the contrary, all notices, applications, demands or requests provided for in this section will be in writing and will be given to or made upon either party at its address shown in the policy.

SECTION 12 - FREQUENT FLYER MILES

FREQUENT FLYER BASE MILES

We will reimburse the Insured Person for Frequent Flyer Base Miles that are forfeited or lost in case of either Cancellation or Curtailment of an Insured Journey and which will be credited to the Insured Person's Frequent Flyer account ensuring that the Miles earned on accredited airlines are not lost as stated in the Schedule of Benefits.

DEFINITION

Frequent Flyer Base Miles means miles that are earned by using Voyager World Class Partners and BA Executive Club Partners (Airlines, Hotels, Car Rental Companies, Retailers, Financial Services and Telecommunication Service Providers) and these contribute towards award redemption, not tier status.

SECTION 13 - CATTERY AND KENNELS

The Company will reimburse the Insured Person for extra kennel or cattery fees incurred as a result of the unavoidable delay of more than 24 hours at the end of his International Journey due to circumstances beyond his control.

SECTION 13 - SPECIFIC CONDITIONS

1. The travel delay must exceed the Excess.
2. Written proof of delay from the transport provider must be submitted with any claim and the Company's liability is subject to it receiving original receipts for the expenses incurred.

SECTION 14 - GOLF COVER

SECTION 14A - EQUIPMENT

The Company will pay for the accidental loss of, Theft or damage to an Insured Person's Golf Equipment incurred above the Excess up to the amount shown in the Table of Benefits.

SPECIFIC CONDITIONS

1. The basis of settlement for Golf Equipment purchased within the 12 months prior to the Insured Journey or whilst on the Insured Journey will be the replacement value of items determined at the Company's discretion. The Company may choose to replace, repair or pay for the loss in cash.
2. To account for wear and tear the Company will pay a maximum of 75% of the replacement value for Golf Equipment purchased more than 12 months prior to the Insured Journey, decreasing thereafter at 10% per year from date of purchase.

SPECIFIC EXCLUSIONS

The Company will not be liable for loss caused by or resulting either directly or indirectly from or involving:

1. Any claim for Golf equipment if you already have a more specific insurance covering this.
2. Any loss or Theft which you do not report to the police within 24 hours of discovering it and which you do not get a written acknowledgement for.
3. If your golf equipment is delayed or held by any customs or other officials legally taking your golf equipment.
4. Any item, pair or set where you are unable to provide reasonable proof of ownership or value (for example original receipts).
5. Golf Equipment left unattended in a public place.
6. Any loss, Theft or damage to golf equipment carried on a vehicle roof rack.
7. Loss, Theft or damage to Golf Equipment during a journey unless you report this to the Company and get a property irregularity report at the time of the loss.
8. Loss or Theft of Golf Equipment while not in control of the Insured Person or while in the control of any person other than an airline or carrier.
9. Any claim involving damage to your own Golf Equipment where you do not bring the damaged equipment back to the Point of Departure so that the Company can inspect it.
10. Damage or loss arising from normal wear and tear, decay, a defective feature of the object itself, destruction by moth or vermin, mould or fungus, insects, rodents, any process of cleaning, ironing, pressing, repairing, restoring or alteration. However, loss as a result of leaking liquid enclosed in the baggage is included; or
11. Unaccompanied baggage or items sent by postal or courier services or given to someone else other than a Travel Companion.
12. Loss, destruction or damage arising from confiscation or detention by customs or other officials or authorities or shortages due to errors, omissions or depreciation value; or

13. Loss, destruction or damage directly occasioned by pressure waves caused by aircraft or any other aerial devices travelling at sonic or supersonic speeds.
14. Loss, destruction or damage caused by atmospheric or climatic conditions or any other gradually deteriorating cause; or
15. Where Theft or attempted Theft occurs while such Golf Equipment is unattended other than when securely locked inside a building or securely locked out of sight inside a motor vehicle.

SECTION 14B - GOLF EQUIPMENT HIRE

The Company will pay up to the maximum amount shown in the Table of Benefits for for the cost of hiring other Golf Equipment if:

1. the Golf Equipment that you own is lost or delayed during your trip for over 12 hours; or
2. the Golf Equipment that you own is lost, stolen or damaged during the course of your trip.

SPECIFIC EXCLUSIONS

1. Any loss or Theft which you do not report to the police within 24 hours of discovering it and which you do not get a written acknowledgement for.
2. Theft, loss or damage to Golf Equipment during a journey unless you report this to the Company and get a property irregularity report at the time of the loss.

SECTION 14C - HOLE IN ONE

The Company will pay the amount stated in the Schedule of Benefits to cover customary bar expenses as a result of, and immediately subsequent to, an Insured Person achieving a hole in one during an official amateur round of golf played in accordance with the rules of golf whilst on an International Journey.

SPECIFIC EXCLUSIONS

Any claim for an Insured person under 18 years

SECTION 14C - SPECIFIC CONDITIONS

1. Provide the Company with a written statement from a Golf Club Official confirming the competition name and date.
2. Provide the Company with a copy of your score card countersigned by your opponent and by a Club official.

SECTION 15 - IDENTITY THEFT

In the event of Identity Theft which takes place on an International Journey we will pay up to the amounts stated in the Schedule of Benefits for:

1. Reasonable legal expenses incurred by an Insured Person as a direct result of Identity Theft in:
 - a. defending any Suit brought against and Insured person by a creditor or collection agency or someone acting on their behalf;
 - b. removing any civil or criminal judgment wrongfully entered against an Insured Person; and
 - c. challenging the accuracy or completeness of any information in a consumer credit report, provided this information is inaccurate and falsely provided to the credit agency or financial institution.
2. Income lost by an Insured Person due solely to time taken from an Insured Person's Business, other than if an Insured Person is self employed, but not including compensation for whole or partial unpaid workdays, but not for vacation days or sick days provided that these unpaid workdays are taken whilst on an International Journey or within 3 months of return to the Point of Departure.
3. An Insured Persons actual loss for the legal obligation to pay a creditor if, as part of your Identity Theft, any Payment Cards, bank accounts, and other credit accounts were opened in your name without your authorization.
4. The following miscellaneous expenses.
 - a. costs incurred for re-filing applications for loans or other credit or debit accounts that are rejected solely because the lender received incorrect information;
 - b. costs for notarizing documents related to Identity Theft, long distance telephone calls, and certified mail reasonably incurred as a result of efforts to report an Identity Theft or to correct financial and credit records that have been altered;
 - c. costs incurred to contest the accuracy or completeness of any credit history information;
 - d. costs incurred by an Insured Person for a maximum of 4 (four) credit reports from an entity approved by us. The credit reports shall be requested during the Insured Journey or within 3 months of return to the Point of Departure. The first credit report may not be requested until after the discovery of the Identity Theft.

SECTION 15 - SPECIFIC EXCLUSIONS

The Company will not be liable for loss caused by or resulting either directly or indirectly from or involving:

1. Any dishonest, criminal, malicious or fraudulent acts committed by an Insured Person or a Relative, or that an Insured Person or a Relative had knowledge of or planned, or if an Insured Person withholds information or conceals material facts related to an Identity Theft.
2. Losses that result from Business pursuits.
3. Fraudulent Payment Card charges and bank transfer charges if they are not related to Identity Theft.
4. Identity Theft that occurred or commenced whilst an Insured Person is not on an International Journey.
5. The reimbursement of fees for stolen Payment Cards if an Insured Person has not complied with all terms and conditions under which the cards were issued.
6. Monetary losses other than the out-of-pocket expenses related to resolving the identity Theft as contemplated by this policy including fraudulent Payment Card charges.

SECTION 15 - SPECIFIC CONDITIONS

1. An Insured Person is responsible for paying the Excess shown on the schedule for each and every claim.
2. The account must have been opened in an Insured Persons name without the authorization of the Insured Person.
3. The Insured Person must notify relevant law enforcement agencies and file a police report within 24-hours of discovering the Identity Theft.
4. Any false charge or withdrawal must be verified by the Insured Person's financial institution. Cover for false charges is limited to the amount for which an Insured Person is held liable by the financial institution subject to the maximum amount shown in the Schedule of Benefits.
5. We shall be permitted to inspect relevant books and financial records.
6. You will cooperate with us and help us to enforce any legal rights an Insured Person or the Company may have in relation to Identity Theft including attendance at depositions, hearings and trials, and giving evidence as necessary to resolve the Identity Theft.
7. An Insured Person must:
 - a. Notify relevant bank(s), Payment Card company(s), financial institution(s) and other accounts of the Identity Theft within 24 hours of discovering the Identity Theft;
 - b. If an Insured Person makes a claim for lost wages, proof of unpaid days off must be provided by the employer and you must have this information notarized and provide proof that it was necessary to take time away from work;
 - c. Send us copies of any demands, notices, summonses, complaints, or legal papers received in connection with a covered loss; and
 - d. Take all reasonable and prudent action to prevent further identity damage.

SECTION 16 - MOTOR HIJACK EXTENSION

SECTION 16A - PERSONAL ACCIDENT

The Period of Insurance for Section 2 is extended to 8 hours before the scheduled departure time of a Public Conveyance and 8 hours after the scheduled time of arrival back in the Republic of South Africa specifically for Motor Hijack and up to the Motor Hijack limits stated in the Schedule of Benefits in respect of an International Journey.

SECTION 16B - POST TRAUMATIC STRESS DISORDER THERAPY

The Company will pay the amount in the Schedule of Benefits for therapy to treat Post Traumatic Stress Disorder which was caused solely by a Motor Hijack which occurred 8 hours before the scheduled departure time of a Public Conveyance and 8 hours after the scheduled time of arrival back in the Republic of South Africa in respect of an International Journey.

SECTION 17 - RED24

Red24 provides the following security assistance to an Insured Person:

1. Access to the red24 website, www.red24.co.za/chartis. (on a 24/7 basis)
2. Access to Daily news
3. Weekly editorial
4. Global report (monthly)
5. 24/7 email access to the Customer Services, Security and Analyst teams
6. Personalised reports before or during travel

SECTION 18 – ATM ASSUALT

The Company will pay for the amount shown on the Schedule of Benefits If during the Period of Insurance the Insured Person withdraws money from any ATM anywhere in the world using their Payment Card and The Insured Person is robbed of such money within 15 minutes of such withdrawal or if the Insured Person is forced through threat of violence by an unknown person to draw money from an ATM, the Company will reimburse you up to the amount shown on the Schedule of Benefits.

SECTION 18 - SPECIFIC EXCLUSIONS

The Company will not be liable for loss caused by or resulting either directly or indirectly from or involving:

1. Any claim less than R250.
2. Money drawn and intended for use in the Insured Person's Business.

ADDENDUM A – Sport Activities Covered

Cover is subject to the hazardous Pursuits limitations and exclusions

Description	Specific Limitations and Exclusions
Golf	-
Tennis	-
Fishing	Within Territorial Waters only. Excludes Commercial fishing
Swimming	Within demarcated swimming areas only
Snow Skiing	Within demarcated skiing areas only
Snowboarding	Within demarcated skiing areas only
Snorkeling	-
Jogging	Excludes endurance events (any race longer than 25 kilometers)
Safari Tours	Excludes hunting and/or use of firearms
Badminton	-
Baseball	-
Softball	-
Basketball	-
Cricket	-
Handball	-
Netball	-
Squash	-
Volleyball	-
Curling	-
Water Polo	-
Cycling	Excludes endurance events (any race longer than 200 kilometers)
Fencing	-
Ballet	-
Dancing	-
Hiking/Trekking	Within demarcated areas only. Must be supervised by a licensed guide
Archery	-
Speed Boats	Within demarcated areas and/or within Territorial Waters only. Excludes jet boats
Canoeing	Within demarcated areas and/or within Territorial Waters only
Banana Boating	Within demarcated areas and/or within Territorial Waters only
Kayaking	Within demarcated areas and/or within Territorial Waters only
Rowing	Within demarcated areas and/or within Territorial Waters only
Sailing	Within demarcated areas and/or within Territorial Waters only
Scuba Diving	Supervised by a licensed dive master/instructor. Excludes depths greater than 50m.
Wind Surfing	Within demarcated areas and/or within Territorial Waters only
Skateboarding	-
Rollerblading	-
In line Skating	-
Field Athletics	-
Weightlifting	-

ADDENDUM B- Sport Activities Not Covered

Description
Hunting
War games
Manual Labour (one can purchase business cover)
Boxing and Kick Boxing
Motor sport and motor cycling
Heli skiing
Tobogganing
Bob sledding

Statutory Notice to short-term insurance policyholders
 (You may be required to sign a copy of this document)
 Important – Please read carefully

Disclosure and other legal requirements

This notice does not form part of the Insurance Contract nor any other document

As a short-term insurance policyholder, or prospective policyholder, you have the right to the following information:

1 Your Intermediary/Financial Service Provider (FSP)

i	Name	Standard Bank Insurance Brokers (Pty) Limited (The Company)		
	FSP Licence Number	224		
	Physical address	4 Ellis Street Constantia Kloof 1709	Postal address	PO Box 32028 Braamfontein 2017
	Telephone number	0860 012 301	Facsimile number	011 858-7200

ii Legal status and interests in Insurer

- (a) The Company is a proprietary company 100% owned by the Standard Bank Financial Services Holdings (Pty) Limited.
- (b) The Company has an association with Standard Insurance Limited, which is a Standard Bank Group Company.
- (c) The Company has an association with Liberty Active Limited, a wholly owned subsidiary of Liberty Group.
- (d) The Company has no shareholding in any Insurer.

iii The Company has been in existence since 1978 and provides services to both the long and short-term insurance broking industry.

iv The Company is in possession of the required written mandates to act on behalf of the Insurer.

v Broker commission and handling fees are paid by the insurer to the intermediary: -

- 20 % Commission
- R5 Administration fee

vi Procedures regarding the lodging of claims are detailed in the claims process below.

vii The Company is in possession of the required written mandates to act on behalf of the Insurer.

viii The Compliance Officer is Milton Kotze

Contact Details of the Compliance Officer: Email address Milton.Kotze@standardbank.co.za
 Telephone Number (011) 636 4026

ix Complaints

A copy of the Complaints handling process is available. You are welcome to contact our Customer Relations Centre on 0860 101 101 or visit our Internet Site www.standardbank.co.za

2 The Product Supplier (Insurer) with whom your policy is placed:

i	Name	Chartis South Africa Limited		
	Physical address	10 Queens Road Parktown, 2193	Postal address	PO Box 31983 Braamfontein 2017
	Telephone number	011 551 8000	Facsimile number	011 551 8653
	Compliance department telephone number	011 551 8000	Facsimile number	011 877 1326
ii	Type of policy	Travel Insurance		
iii	Claims process	<p>a) All medical expenses and liability claims must immediately be notified to us via telephone number +27 11 525 3101. Other claims must be notified to us in writing or telephonically within 30 days of loss occurring.</p> <p>b) For further details regarding the claims process, please refer to your policy wording.</p>		

3 Other matters of importance

- I** You must be informed of any material changes to the information referred to in paragraphs 1 - 2.
- ii** If the information in paragraphs 1 – 2 was given orally, it must be confirmed in writing within 30 days.
- iii** If any complaint to the Intermediary/Financial Service Provider (FSP) or Insurer is not resolved to your satisfaction, you may submit the complaint to the Registrar of short-term insurance or the FAIS Ombud as stated below.
- iv** A polygraph or any lie detector test is not obligatory in the event of a claim and the failure thereof may not be the sole reason for repudiating a claim.
- V** The Insurer and not the Intermediary/Financial Service Provider (FSP) must give reasons for repudiating your claim.
- Vi** Your Insurer may not cancel your insurance merely by informing your Intermediary/Financial Service Provider (FSP). There is an obligation to make sure the notice has been sent to you.
- Vii** You are entitled to a copy of the policy free of charge

4 Warning

- I** Do **not** sign any blank or partially completed application forms.
- ii** Complete all forms in ink.
- iii** Keep all documents handed to you.
- iv** Make notes of what is said to you.
- V** Don't be pressurised to buy the product.
- Vi** You need to be satisfied with the accuracy of any transaction submitted by your Intermediary/Financial Service Provider (FSP) on your behalf.
- Vii** Misrepresentation, non-disclosure or incorrect information supplied by you may impact on any claims arising from your contract of insurance.

5 Useful information

The policy wording and the policy schedule must be read as one document. If you need advice on any aspect of your policy, first amounts payable, claims procedures or your responsibility to pay premiums, please contact your Intermediary/Financial Service Provider (FSP) or nearest Insurer's office. A copy of the policy wording can be viewed at or obtained from the Diners Club (PTY) LTD Head Office, or www.dinersclub.co.za or Chartis. The postal and physical address of the Insurer's head office is detailed in this document along with details of your Intermediary/Financial Service Provider (FSP).

Particulars of the short-term insurance Ombudsman	Particulars of the Registrar of short-Term Insurance	Particulars of The FAIS Ombud
<p>Postal Address: PO Box 32334 Braamfontein 2017</p> <p>Telephone number: 011 726 8900 Facsimile number: 011 726 5501</p> <p>The Ombudsman is available to advise you in the event of claims problems which are not satisfactorily resolved by the Intermediary/FSP and Insurer.</p>	<p>Postal Address: Financial Services Board PO Box 35655 Menlo Park, 0102</p> <p>Telephone number: 012 428 8000 Facsimile number: 012 347 0221</p> <p>If any complaint to the Intermediary/FSP or Insurer is not resolved to your satisfaction, You may submit the Complaint to the Registrar of Short-term Insurance.</p>	<p>Name of the Ombud: Ms Noluntu Bam Physical Address: Eastwood Office Park Celtis House, Ground Floor Lynnwood Ridge 0081</p> <p>Postal Address: PO Box 74571 Lynnwood Ridge 0040</p> <p>Telephone number: 012 470 9080/99 Facsimile number: 012 348 3447 Share call number: 0860 3247 66</p> <p>If your Intermediary/FSP was unable to resolve a Complaint about a financial product purchased, varied, replaced or terminated after 30 September 2004, you may submit the complaint to the FAIS Ombud</p>

24 HOUR EMERGENCY MEDICAL ASSISTANCE HELPLINE: +44 1273 779727 (UNITED KINGDOM)