



You and your family are advised to keep this card for emergency needs. 請您和您的家人保存此卡，以便緊急時致電求助。

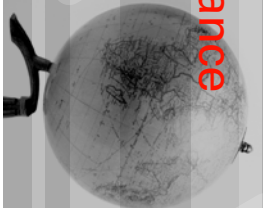
TravelSurance

The Policy

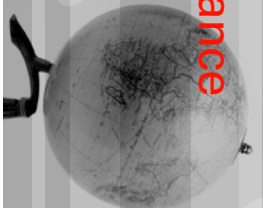
Please read this policy carefully



Emergency Assistance Service
緊急支援服務



Emergency Assistance Service
緊急支援服務



Emergency Assistance Service
緊急支援服務



Emergency Assistance Hotline
緊急支援熱線

(852) 2528 9333

Emergency assistance services:

緊急支援服務：

- Emergency ticketing
緊急訂票
- Legal advisory service
法律專業人員轉介
- Medical advisory service
醫療服務轉介
- Medical evacuation*
緊急醫療撤離服務*
- Medical repatriation after treatment*
治療後的醫療運送服務*
- Travel information
旅遊資料

* Applicable to TravelInsurance only 只適用於旅遊萬全保

Please mark your policy no. for reference:
請填寫保單號碼以作參考：

Issued by AXA General Insurance Hong Kong Limited 由安盛保險有限公司刊發

Emergency Assistance Hotline
緊急支援熱線

(852) 2528 9333

Emergency assistance services:

緊急支援服務：

- Emergency ticketing
緊急訂票
- Legal advisory service
法律專業人員轉介
- Medical advisory service
醫療服務轉介
- Medical evacuation*
緊急醫療撤離服務*
- Medical repatriation after treatment*
治療後的醫療運送服務*
- Travel information
旅遊資料

* Applicable to TravelInsurance only 只適用於旅遊萬全保

Please mark your policy no. for reference:
請填寫保單號碼以作參考：

Issued by AXA General Insurance Hong Kong Limited 由安盛保險有限公司刊發

Emergency Assistance Hotline
緊急支援熱線

(852) 2528 9333

Emergency assistance services:

緊急支援服務：

- Emergency ticketing
緊急訂票
- Legal advisory service
法律專業人員轉介
- Medical advisory service
醫療服務轉介
- Medical evacuation*
緊急醫療撤離服務*
- Medical repatriation after treatment*
治療後的醫療運送服務*
- Travel information
旅遊資料

* Applicable to TravelInsurance only 只適用於旅遊萬全保

Please mark your policy no. for reference:
請填寫保單號碼以作參考：

Issued by AXA General Insurance Hong Kong Limited 由安盛保險有限公司刊發

Your right to change your mind (applicable to MultiTrip TravelSurance only)

If you are not completely satisfied, or our plan's coverage overlaps with your other existing protection plans coverage or exceed your needs, then please return the policy to us within 30 days. We will cancel this plan and refund any premium you have paid. Otherwise, we will assume you have accepted this plan subject to its terms and conditions.

Your right to cancel the policy is based on the following conditions:

- Your request to cancel must be signed by you and received directly by any HSBC branch or by AXA General Insurance Hong Kong Limited within 30 days of receipt of your policy.
- No refund can be made if a claim has already been paid.

Should you have any queries or need further explanation, you may contact Insurance Service Hotline on (852) 2867 8678 (please note that tele-conversations may be recorded to ensure service quality) or write to us.

AXA General Insurance Hong Kong Limited

Mailing Address: P.O. Box No. 90918 Tsim Sha Tsui Post Office, Kowloon, Hong Kong
Office Address: 5/F, AXA Southside, 38 Wong Chuk Hang Road, Wong Chuk Hang, Hong Kong
Insurance Service Hotline: (852) 2867 8678



Personal Information Collection Statement

AXA General Insurance Hong Kong Limited (referred to hereinafter as the “**Company**”) recognises its responsibilities in relation to the collection, holding, processing, use and/or transfer of personal data under the Personal Data (Privacy) Ordinance (Cap. 486) (“**PDPO**”). Personal data will be collected only for lawful and relevant purposes and all practicable steps will be taken to ensure that personal data held by the Company is accurate. The Company will take all practicable steps to ensure security of the personal data and to avoid unauthorised or accidental access, erasure or other use.

Please note that if you do not provide us with your personal data, we may not be able to provide the information, products or services you need or process your request.

Purpose: From time to time it is necessary for the Company to collect your personal data (including credit information and claims history) which may be used, stored, processed, transferred, disclosed or shared by us for purposes (“**Purposes**”), including:

1. offering, providing and marketing to you the products/services of the Company, other companies of the AXA Group (“**our affiliates**”) or our business partners (see “**Use and provision of personal data in direct marketing**” below), and administering, maintaining, managing and operating such products/services;
2. processing and evaluating any applications or requests made by you for products/services offered by the Company and our affiliates;
3. providing subsequent services to you, including but not limited to administering the policies issued;
4. any purposes in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates, including investigation of claims;
5. detecting and preventing fraud (whether or not relating to the products/services provided by the Company and/or our affiliates);
6. evaluating your financial needs;
7. designing products/services for customers;
8. conducting market research for statistical or other purposes;
9. matching any data held which relates to you from time to time for any of the purposes listed herein;
10. making disclosure as required by any applicable law, rules, regulations, codes of practice or guidelines or to assist in law enforcement purposes, investigations by police or other government or regulatory authorities in Hong Kong or elsewhere;
11. conducting identity and/or credit checks and/or debt collection;
12. complying with the laws of any applicable jurisdiction;
13. carrying out other services in connection with the operation of the Company’s business; and
14. other purposes directly relating to any of the above.

Transfer of personal data: Personal data will be kept confidential but, subject to the provisions of any applicable law, may be provided to:

1. any of our affiliates, any person associated with the Company, any reinsurance company, claims investigation company, your broker, industry association or federation, fund management company or financial institution in Hong Kong or elsewhere and in this regard you consent to the transfer of your data outside of Hong Kong;
2. *The Hongkong and Shanghai Banking Corporation Limited (“**HSBC**”) for any of the Purposes and for the following additional bank related purposes: ensuring ongoing credit worthiness of customers, creating and maintaining credit and risk related models, providing the personal data to credit reference agencies for the purposes of conducting credit checks and other directly related purposes, determining the amount of indebtedness owed to or by customers and collection of amounts outstanding from customers and those providing security for customers’ obligations;
3. any person (including private investigators) in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates;
4. any agent, contractor or third party who provides administrative, technology or other services (including direct marketing services) to the Company and/or our affiliates in Hong Kong or elsewhere and who has a duty of confidentiality to the same;
5. credit reference agencies or, in the event of default, debt collection agencies;
6. any actual or proposed assignee, transferee, participant or sub-participant of our rights or business;
7. any government department or other appropriate governmental or regulatory authority in Hong Kong or elsewhere; and
8. the following persons who may collect and use the data only as reasonably necessary to carry out any of the purposes described in paragraphs nos. 2, 3, 4 and 5 of the Purposes specified above: insurance adjusters, agents and brokers, employers, health care professionals, hospitals, accountants, financial advisors, solicitors, organisations that consolidate claims and underwriting information for the insurance industry, fraud prevention organisations, other insurance companies (whether directly or through fraud prevention organisation or other persons named in this paragraph), the police and databases or registers (and their operators) used by the insurance industry to analyse and check data provided against existing data.

For our policy on using your personal data for marketing purposes, please see the section below “**Use and provision of personal data in direct marketing**”.

Transfer of your personal data will only be made for one or more of the Purposes specified above.

Use and provision of personal data in direct marketing: The Company intends to:

1. use your name, contact details, products and services portfolio information, transaction pattern and behaviour, financial background and demographic data held by the Company from time to time for direct marketing;

2. conduct direct marketing (including but not limited to providing reward, loyalty or privileges programmes) in relation to the following classes of products and services that the Company, our affiliates, our co-branding partners and our business partners may offer:
 - a) insurance, banking, provident fund or scheme, financial services, securities and related products and services;
 - b) products and services on health, wellness and medical, food and beverage, sporting activities and membership, entertainment, spa and similar relaxation activities, travel and transportation, household, apparel, education, social networking, media and high-end consumer products;
3. the above products and services may be provided by the Company and/or:
 - a) any of our affiliates;
 - b) third party financial institutions;
 - c) the business partners or co-branding partners of the Company and/or affiliates providing the products and services set out in 2. above;
 - d) third party reward, loyalty or privileges programme providers supporting the Company or any of the above listed entities
4. in addition to marketing the above products and services, the Company also intends to provide the data described in 1. above to all or any of the persons described in 3. above for use by them in marketing those products and services, and the Company requires your written consent (which includes an indication of no objection) for that purpose;

Before using your personal data for the purposes and providing to the transferees set out above, the Company must obtain your written consent, and only after having obtained such written consent, may use and provide your personal data for any promotional or marketing purpose.

You may in future withdraw your consent to the use and provision of your personal data for direct marketing.

If you wish to withdraw your consent, please inform us in writing to the address in the section on **“Access and correction of personal data”**. The Company shall, without charge to you, ensure that you are not included in future direct marketing activities.

Access and correction of personal data: Under the PDPO, you have the right to ascertain whether the Company holds your personal data, to obtain a copy of the data, and to correct any data that is inaccurate. You may also request the Company to inform you of the type of personal data held by it.

Requests for access and correction or for information regarding policies and practices and kinds of data held by the Company should be addressed in writing to:

Data Privacy Officer
AXA General Insurance Hong Kong Limited
5/F, AXA Southside, 38 Wong Chuk Hang Road, Wong Chuk Hang, Hong Kong

A reasonable fee may be charged to offset the Company’s administrative and actual costs incurred in complying with your data access requests.

* This is applicable only if you are applying for a product and/or service of, or making a request to, the Company through HSBC as the Company’s distribution agent. Your personal data will not be provided to HSBC for any of the Purposes and the additional purposes and for direct marketing by HSBC set out in the paragraphs above if you do not apply for the product and/or service of, or make a request to, the Company through HSBC as the Company’s distribution agent.

Attach Policy Schedule

TravelSurance

CONTENTS	PAGE
PART 1	
Definitions _____	2
PART 2	
Coverage _____	3
PART 3	
General Exclusions – Applicable to all Sections _____	7
PART 4	
General Policy Conditions – Applicable to all Sections _____	8
PART 5	
Renewal (applicable to MultiTrip Policy only) _____	9
PART 6	
Additions (applicable to MultiTrip Policy only) _____	9
PART 7	
Termination _____	9
PART 8	
Automatic Extension _____	10
PART 9	
Extension of Period of Insurance (Applicable to Single Trip Policy only) _____	10

This Policy, the Policy Schedule, the application form and any memoranda thereon shall be considered one document (together "the Policy") and any word or expression to which a specific meaning has been attached in any of them shall bear such meaning throughout.

Whereas

The Applicant on behalf of the Insured Persons by an application form including a declaration, which shall be the basis of each relevant contract, has applied for insurance and AXA General Insurance Hong Kong Limited (hereinafter referred to as "the Company") has agreed to provide such insurance.

The Company agrees only on the basis of the terms and conditions contained in the Policy, and subject to payment of the relevant premium, to provide insurance cover to the Insured Persons.

Where the application form and declaration is in respect of more than one Insured Person, the Company further only agrees to provide the insurance on the basis that this Policy, notwithstanding any other provision, is deemed and accepted to constitute separate insurance in respect of each such Insured Person covered.

Geographical Limits

AREA 1 Brunei, Cambodia, mainland China, Guam, Indonesia, Japan, Korea, Macau Special Administrative Region (SAR), Malaysia, Myanmar (Burma), Philippines, Saipan, Singapore, Taiwan, Thailand, Tinian and Vietnam.

AREA 2 Worldwide

Age Limits

Insurance is subject to the following:

Adult: (a) For MultiTrip Policy: Person aged between 17 to 75 years inclusive. The Policy can be renewed up to the age of 85 years inclusive.

(b) For Single Trip Policy: Person aged between 17 to 85 years inclusive.

Child: Person aged between 6 months to 16 years inclusive.

Only child benefits as set out in this Policy will be payable to an insured Child.

A Child aged 11 or below must be accompanied by an Adult.

Standard premium for an adult Insured Person shall apply if the Child is not travelling with parents.

Part 1 Definitions

- "Accidental Bodily Injury" means bodily injury caused solely and directly by accidental, violent, external and visible means.
- "Curtailement" means abandonment by return to Place of Residence or Place of Business after arrival at the scheduled destination of the planned Trip as shown on the itinerary.
- "Child" means any dependent unmarried child, including any stepchild and legally adopted child of the Insured, who is aged between 6 months to 16 years (inclusive) at the inception of the Period of Insurance.
- "Chinese Medicine Practitioner" shall have the meaning assigned to it under the Chinese Medicine Ordinance of Hong Kong SAR who may describe his stream of practice in Chinese medicine as general practice, acupuncture or bone-setting in accordance with the format prescribed under that ordinance, but excluding a person who is the Insured Person himself/herself, or a relative of the Insured Person.
- "Common Carrier" means:-
 - any bus, coach, taxi, hotel car, ferry, hovercraft, hydrofoil, ship, train, tram, underground train or other public transportation provided and operated by a carrier duly licensed for the regular transportation of fare-paying passengers,
 - any fixed-wing aircraft or helicopter provided and operated by an airline or an air charter company which is duly licensed for the regular transportation of fare-paying passengers and operating only between established commercial airports or licensed commercial heliports,

(c) any regularly scheduled airport limousine operating on fixed routes and schedules.

- "COVID-19" means an infectious disease named by the World Health Organisation as "COVID-19" and caused by severe acute respiratory syndrome SARS-COV-2.
- "Designated Hospital" means any hospital in the Hospital List of the China Medical Card provided by the Company. The Company reserves the right to update the Hospital List at its own discretion without prior notice.
- "Eligible Family Members" means Partner or the legally married spouse of the Insured, and Children.
- "Hospital" means a legally constituted establishment operated pursuant to the laws of the country in which it is based, and meeting all of the following requirements in that it:
 - operates primarily for the reception and medical care and treatment of sick, ailing or injured persons on a resident in-patient basis;
 - admits resident in-patients only under the supervision of a Physician or Physicians one of whom is available for consultation at all times;
 - maintains organised facilities for medical diagnosis and treatment of such persons, and provides (where appropriate) facilities for major surgery within the confines of the establishment or in facilities controlled by or available to the establishment;
 - provides a full-time nursing service by and under the supervision of a staff of nurses;
 - maintains a legally licensed Physician in residence.

"Hospital" shall not include the following:

- a mental institution; an institution confined primarily to the treatment of psychiatric disease including sub-normality; the psychiatric department of a hospital;
 - a place for the aged; a rest home; a place for drug addicts or alcoholics;
 - a health hydro or nature cure clinic; a nursing or convalescent home; a special unit of a hospital used primarily as a place for drug addicts or alcoholics, or as a nursing, a convalescent, rehabilitation, extended care facility or rest home.
- "Insured" means the person named as Insured on the application form and otherwise the Applicant in whose name the Policy is issued.
 - "Insured Person" means eligible persons for insurance cover who are named in the application form.
 - "Loss of Eye" means the total and irrecoverable loss of all sight of an eye or eyes rendering the Insured Person absolutely blind beyond remedy by surgical or other treatment.
 - "Loss of Limb" means loss by physical separation at or above the wrist or ankle joint, or total Loss of Use.
 - "Loss of Use" means total functional disablement.
 - "Maximum Duration of Trip" means a period of 180 days from the beginning of the Trip for Single Trip Policy; or a period of 60 days for each Trip under a MultiTrip Policy, as the case may be.
 - "Medical Practitioner"; "Physician"; "Doctor" means a practitioner of western medicine duly qualified and legally registered as such under the laws of the country in which the claim arises and where the treatment takes place but excluding a person who is the Insured Person himself/herself, or a relative of the Insured Person.
 - "Medical Treatment Expenses" means the actual expenses paid by the Insured Person to a Medical Practitioner, Physician, Doctor or Hospital for medical, surgical or nursing treatment including the costs of medical supplies, ambulance hire or professional home-nursing fees, but excluding the cost of dental care and treatment unless such treatment is for emergency and necessitated by accidental injuries to sound natural teeth.

18. "Pandemic" means pandemic as announced by the World Health Organisation.
19. "Partner" means someone with whom the Insured lives in a relationship equivalent to marriage, whether of the same or opposite gender.
20. "Period of Insurance" shall have the meaning as stated in the Policy Schedule subject to the Maximum Duration of Trip. Except for Section 9 of Part 2, the cover shall commence when the Insured Person leaves his / her Place of Residence or Place of Business, whichever is later, for the sole purpose of commencing the Trip and shall end
- at the time of direct return to his / her Place of Residence or Place of Business or
 - at the expiration of the Maximum Duration of Trip (for MultiTrip policy)
- whichever is earlier. In any event, insurance shall not commence more than 24 hours prior to scheduled departure time and shall cease 24 hours after scheduled return to the Hong Kong SAR.
21. "Permanent Total Disablement" means that after 12 calendar months of total continuous disability which has resulted from Accidental Bodily Injury and which has commenced within 30 days after the date of the accident, the Insured Person is completely unable to engage in any substantially gainful occupation or employment for the remainder of his/her life.
22. "Personal Money" means cash, cheques, travellers' cheques and money orders belonging to the Insured Person, excluding credit cards and stored value cards such as Octopus cards.
23. "Place of Business" is the place where the Insured Person normally works within the Hong Kong SAR.
24. "Place of Residence" is the place where the Insured Person normally lives within the Hong Kong SAR.
25. "Policy Schedule" is the schedule which is attached to and forms part of the Policy.
26. "Pre-existing Condition" means injury, sickness, disease or medical condition which existed before:
- (a) the Period of Insurance (for Single Trip Policy); or
 - (b) the beginning of each Trip (for MultiTrip Policy)
- in respect of an Insured Person and which presented signs or symptoms of which the Insured Person was aware or should have reasonably been aware.
27. "Private Car" means any four-wheeled pleasure type motor vehicle, excluding any vehicle licensed to transport fare-paying passengers or licensed to transport merchandise for sale or delivery.
28. "Sickness" means sickness or disease contracted and commencing during the Trip, and excludes any Pre-existing Condition.
29. "Travel Documents" means the following belonging to the Insured Person:
- (a) Documents of identity: Passport, visa and the like necessary and solely for immigration clearance of the Trip;
 - (b) Travel tickets: Rail pass or integrated public transportation pass with face value exceeding HK\$1,000 or equivalent, cruise (lasting 24 hours or longer) ticket or air ticket for the Trip.
30. "Trip" means subject to the Maximum Duration of Trip, a holiday or journey for leisure or business purposes in which the Insured Person leaves from his / her Place of Residence or Place of Business to travel outside the Hong Kong SAR and at the end of which the Insured Person returns to their Place of Residence or Place of Business.
31. "Travel Alert" is the alert issued by the Government of the Hong Kong SAR under the Outbound Travel Alert (OTA) System. There are 3 levels of Travel Alert: "Amber Alert", "Red Alert" and "Black Alert". Definition of the "Travel Alert" may be changed by the Company from time to time based on changes to the OTA System communicated by the Government of the Hong Kong SAR.

Part 2 Coverage

Section 1 – Personal Accident Benefits

A. Personal Accident

In the event of Accidental Bodily Injury being sustained by an Insured Person during a Trip which shall result in death or disablement, the following benefit will be paid:

(HK\$)	Area 1	Area 2
1. Death	600,000	1,000,000
2. Permanent Total Disablement	600,000	1,000,000
3. Death and Permanent Total Disablement for accidents in a Common Carrier as a fare-paying passenger or in a Private Car	1,200,000	2,000,000
4. Loss of two Eyes, two Limbs or one Eye and one Limb	600,000	1,000,000
5. Loss of one Eye or one Limb	300,000	500,000

Provisions

1. If the Insured Person is a Child at the time of accident, the maximum amount payable will be limited to 20% of the sum insured under this benefit.
2. If the Insured Person is aged 76 or above at the time of accident, the maximum amount payable will be limited to 30% of the sum insured under this benefit.
3. No benefit will be payable unless death or disablement occurs within twelve months of the date of Accidental Bodily Injury.
4. Benefits 1-5 are not cumulative and only one benefit will be payable for any one event.
5. If at the time of accident, an Insured Person has already had amputation or Loss of Use of a hand, arm, foot, leg or has lost the sight of one or both eyes, such loss shall not be included in assessing any benefit payable under this Policy.

B. Extension of Cover

Credit Card Protection

In the event of death of an Insured Person caused by an accident outside the Hong Kong SAR, the Company will pay up to HK\$5,000 per Insured Person for any outstanding balance payable under such Insured Person's credit cards for items and sundries charged to such card while outside the Hong Kong SAR during a Trip.

Provisions (applicable to Credit Card Protection only)

1. Benefit under this extension will not be paid if the Insured Person is entitled to this cover under any other insurance policy.
2. This cover will not apply to Insured Persons aged under 17 years.
3. No interest accrued or financial charges will be paid hereunder.

Section 2 – Medical and Other Expenses

A. Medical Expenses

The Company will pay up to HK\$600,000 (for Area 1 Policy) or HK\$1,000,000 (for Area 2 Policy) if the Insured Person suffers Accidental Bodily Injury or Sickness during a Trip requiring urgent treatment. In such circumstances, the Company will indemnify the Insured Person for:

1. Medical Treatment Expenses, additional accommodation and travelling expenses necessarily incurred outside the Hong Kong SAR within 12 months of the date of incident giving rise to the claim as a direct result of Accidental Bodily Injury sustained by or Sickness of the Insured Person occurring during the Trip.
2. Up to HK\$60,000 (out of the maximum HK\$600,000 (for Area 1 Policy) or HK\$1,000,000 (for Area 2 Policy)) for reasonable additional travel and accommodation expenses incurred by a family member or travelling companion when required on medical advice to remain or travel with an Insured Person who has been hospitalised or delayed the Trip due to their serious medical condition.

3. The necessary Medical Treatment Expenses including the Chinese Medicine Practitioner's fees reasonably incurred in the Hong Kong SAR by the Insured Person within 3 months after the Insured Person's return from the Trip, such expenses having resulted from an accident or Sickness abroad which occurred during the Trip.

The maximum amount that the Company will pay for the Chinese Medicine Practitioner fees in respect of any one Insured Person is HK\$1,000 subject to a maximum of HK\$100 per visit and one visit per day.

Provisions

1. Children are entitled to an aggregate (all insured Children inclusive) maximum benefit of HK\$600,000 (for Area 1 Policy) or HK\$1,000,000 (for Area 2 Policy) only.
2. If the Insured Person is aged 76 or above at the time of accident or Sickness, the maximum amount payable will be limited to 30% of the sum insured under this benefit.
3. No benefits will be paid:
 - (i) For treatment obtained in the Hong Kong SAR, except as provided for under item A3 of this Section.
 - (ii) For surgical and medical treatment which in the opinion of the Medical Practitioner treating the Insured Person can be reasonably delayed until the Insured Person's return to the Hong Kong SAR or arrival in the country of final destination in the case of travellers not returning to the Hong Kong SAR.
 - (iii) For the additional cost of a single or private room at a Hospital or charges in respect of special or private nursing; wheelchair, crutch or any other similar equipment.
 - (iv) For any cosmetic surgery, eyeglasses and refraction or hearing aids, and prescriptions thereof, except as necessitated by accidental injuries occurring during a Trip.
 - (v) For treatment relating to Pre-existing Condition.
 - (vi) For any claims relating to the Insured Person travelling to a country, specific area or event when the Security Bureau of The Government of the Hong Kong Special Administrative Region ("the Security Bureau") has advised against non-essential or all travel (i.e. Red Alert or Black Alert), unless the Security Bureau has provided exceptional permission for such travel. This exclusion does not apply if:
 1. The claim is a COVID-19 claim;
 2. You have started the Trip before the issuance of such travel advice; or
 3. The claim does not arise from an event same in nature as that is mentioned in the Red Alert or Black Alert or their supplementary information issued by the Security Bureau.
 - (vii) For any claims relating to the vaccine-preventable diseases if:
 1. You fail to obtain prior to the Trip any mandatorily required vaccines, inoculations or medications by the relevant government / regulatory authority of the country/region to which You are travelling; and/or
 2. You fail to obtain prior to the Trip any mandatorily required vaccines, inoculations or medication by the Government of Hong Kong.

B. Extension of Cover

Repatriation of Remains

In the event of death of an Insured Person, the Company will pay up to HK\$100,000 in respect of reasonable charges, for burial or cremation of the Insured Person outside the Hong Kong SAR in the locality where death occurs or the reasonable cost of transport of body or ashes to place of initial departure.

Funeral Expenses

The Company will pay the reasonable funeral expenses (other than the burial or cremation charges) outside the Hong Kong SAR in the locality of death of the Insured Person up to HK\$100,000 per Insured Person. Provided that the expenses shall be paid directly to the funeral home (or similar establishment) and only upon receipt of satisfactory supporting documentation.

Return of Children

In the event any of the Insured Person's dependent child(ren) aged 16 or below travelling with the Insured Person who is left unattended overseas by reason of the Insured Person's Accidental Bodily Injury or

Sickness resulting in hospital confinement, the Company will pay up to HK\$60,000 in respect of the reasonable additional accommodation and travelling expenses for returning the child(ren) back to Hong Kong SAR.

Exclusion

No benefit will be paid for:

1. Claims arising from Pre-existing Condition.
2. For any claims relating to the Insured Person travelling to a country, specific area or event when the Security Bureau of The Government of the Hong Kong Special Administrative Region ("the Security Bureau") has advised against non-essential or all travel (i.e. Red Alert or Black Alert), unless the Security Bureau has provided exceptional permission for such travel. This exclusion does not apply if:
 1. The claim is a COVID-19 claim;
 2. You have started the Trip before the issuance of such travel advice; or
 3. The claim does not arise from an event same in nature as that is mentioned in the Red Alert or Black Alert or their supplementary information issued by the Security Bureau.
3. For any claims relating to the vaccine-preventable diseases if:
 1. You fail to obtain prior to the Trip any mandatorily required vaccines, inoculations or medications by the relevant government / regulatory authority of the country/region to which You are travelling; and/or
 2. You fail to obtain prior to the Trip any mandatorily required vaccines, inoculations or medication by the Government of Hong Kong.

C. Emergency Medical Evacuation Expenses

If as a result of an Accidental Bodily Injury sustained or Sickness commencing during a Trip it is judged medically appropriate to move the Insured Person to another location for medical treatment, or to return the Insured Person to the Hong Kong SAR, Emergency Assistance Service will arrange for the evacuation utilising the means best suited to do so, based on the medical severity of the Insured Person's condition. The Company shall pay directly for the covered expenses for such evacuation, up to a maximum HK\$2,000,000 per Insured Person. Children are entitled to an aggregate maximum cover of HK\$2,000,000.

The means of evacuation arranged by Emergency Assistance Service may include air ambulance, surface ambulance, regular air transportation, railroad or any other appropriate means. All decisions as to the means of transportation and the final destination will be made by Emergency Assistance Service and will be based solely upon medical necessity.

Covered expenses are expenses for service provided and/or arranged by Emergency Assistance Service for the transportation, medical services and medical supplies incurred as a result of an emergency medical evacuation of an Insured Person.

Exclusions

1. Any expenses incurred for services provided by another party for which the Insured Person is not liable to pay, or any expenses already included in the cost of a scheduled Trip.
2. Any expenses for a service not approved and arranged by Emergency Assistance Service. This exclusion shall, at the Company's discretion be waived if the Insured Person or his/her travelling companions cannot notify Emergency Assistance Service during an emergency medical situation for reasons beyond their control. In any event, the Company reserves the right to reimburse the Insured Person only for those expenses incurred for service which Emergency Assistance Service would have provided under the same circumstances and up to the limit of HK\$2,000,000 for emergency medical evacuation expenses.
3. Evacuation expenses relating to Pre-existing Condition.
4. For any claims relating to the Insured Person travelling to a country, specific area or event when the Security Bureau of The Government of the Hong Kong Special Administrative Region ("the Security Bureau") has advised against non-essential or all travel (i.e. Red Alert or Black Alert), unless the Security Bureau has provided exceptional permission for such travel. This exclusion does not apply if:
 1. The claim is a COVID-19 claim;
 2. You have started the Trip before the issuance of such travel advice; or
 3. The claim does not arise from an event same in nature as that is mentioned in the Red Alert or Black Alert or their supplementary information issued by the Security Bureau.

5. For any claims relating to the vaccine-preventable diseases if:
 1. You fail to obtain prior to the Trip any mandatorily required vaccines, inoculations or medications by the relevant government / regulatory authority of the country/region to which You are travelling; and/or
 2. You fail to obtain prior to the Trip any mandatorily required vaccines, inoculations or medication by the Government of Hong Kong.

Section 3 – Hospital Cash Benefit

In the event that the Insured Person is admitted to a Hospital abroad as an in-patient due to Accidental Bodily Injury or Sickness sustained abroad during a Trip, the Company will pay a benefit of HK\$500 for every complete day whilst the Insured Person is hospitalised subject to a limit of HK\$6,000 for any one event.

Provisions

No benefit is payable for:

1. Hospitalisation relating to Pre-existing Condition.
2. For any claims relating to the Insured Person travelling to a country, specific area or event when the Security Bureau of The Government of the Hong Kong Special Administrative Region (“the Security Bureau”) has advised against non-essential or all travel (i.e. Red Alert or Black Alert), unless the Security Bureau has provided exceptional permission for such travel. This exclusion does not apply if:
 1. The claim is a COVID-19 claim;
 2. You have started the Trip before the issuance of such travel advice; or
 3. The claim does not arise from an event same in nature as that is mentioned in the Red Alert or Black Alert or their supplementary information issued by the Security Bureau.
3. For any claims relating to the vaccine-preventable diseases if:
 1. You fail to obtain prior to the Trip any mandatorily required vaccines, inoculations or medications by the relevant government / regulatory authority of the country/region to which You are travelling; and/or
 2. You fail to obtain prior to the Trip any mandatorily required vaccines, inoculations or medication by the Government of Hong Kong.

Section 4 – Baggage and Personal Effects

The Company will indemnify each adult Insured Person up to HK\$20,000 and each insured Child up to HK\$5,000 for loss or damage to baggage owned by the Insured Person, taken, sent in advance or purchased on a Trip (including clothing and personal effects worn or carried on the person, in trunks, suitcases and receptacles), occurring during a Trip.

Provisions

1. No benefit will be paid unless
 - (a) The Insured Person takes reasonable and proper care for the safety of the baggage and personal effects, including examination of baggage when received.
 - (b) If the Insured Person is aware of any destruction, loss or damage, the Insured Person gives immediate notice:
 - (i) in the case of theft, loss or wilful damage by a third party, to the police; and
 - (ii) in the case of loss or damage in transit, to the carrier.
2. The Company will pay a maximum of HK\$3,000 per item, pair or set for each adult Insured Person and HK\$1,500 per item, pair or set for each insured Child.
3. No benefit will be payable for the first HK\$300 of each and every claim for each Insured Person.
4. The Company may, at its discretion, opt to replace or repair any item instead of paying cash benefit.
5. No benefit will be paid:
 - (a) for normal wear and tear, gradual deterioration, mechanical or electrical breakdown or derangement.
 - (b) for loss or damage arising from delay, confiscation, detention, requisition or destruction by customs or other officials or authorities.
 - (c) for loss or damage to money, plastic money (including credit cards, Octopus cards etc) and other instruments of payment, bonds, coupons, stamps, negotiable instruments, title deeds, manuscripts, securities, travel documents or documents of any kind.

- (d) for breakage of or damage to fragile articles, glass, record players, television apparatus, musical instruments, sewing machines, sculpture, household goods or equipment unless occasioned by accident to the conveyance in which the baggage is being carried.
- (e) for loss or damage to any business goods or samples.
- (f) for damage to or replacement of any electronic data or software.
- (g) in respect of loss or damage whilst in the custody of an airline or other carrier, unless reported immediately on discovery and in the case of an airline a baggage irregularity report is obtained.
- (h) in respect of losses not reported to the police within 24 hours upon discovery and unless a police report is obtained.
- (i) under this Section if payment has been made for the same loss under Section 5 – Delayed Baggage.

Section 5 – Delayed Baggage

The Company will pay up to HK\$2,000 for each Insured Person for emergency purchases of essential items or clothing purchased due to delay or misdirection of baggage during a Trip for at least 6 hours from time of arrival at destination abroad due to delay or misdirection in delivery.

Provisions

1. This benefit can only be utilised once during any one Trip.
2. No benefit will be payable :
 - (a) if the delay arises from detention or confiscation by customs or other officials or authorities.
 - (b) unless the delay is certified with a baggage irregularity report obtained from the airline or with a letter from the tour operator.
 - (c) unless documentation is produced by the Insured Person showing details of the expenditure.
 - (d) If the baggage is delayed after the Insured Person’s return to the Hong Kong SAR or arrival in the country of final destination.
 - (e) under this Section if payment has been made for the same loss under Section 4 - Baggage and Personal Effects.

Section 6 – Personal Money and Travel Documents

The Company will pay for accidental loss of Personal Money or Travel Documents taken on the Trip up to the limit specified below for each Insured Person.

Personal Money – up to HK\$3,000
 Travel Documents – up to HK\$5,000

Such loss must be reported to the police having jurisdiction at the place of loss, as soon as practicable, within 24 hours of the loss, or discovery of the loss. Any claim must be accompanied by written documentation from such police.

Provisions

No benefit will be payable for:

1. (a) Shortages due to error, omission, exchange or depreciation in value.
- (b) Loss of travellers’ cheques not immediately reported to the local branch or agent of issuing authority.
- (c) Personal Money belonging to any insured Child, except for that insured Child aged 12 to 16 who is not travelling with parents upon payment of adult premium where the Company’s liability shall be limited to HK\$1,500.
- (d) The first HK\$200 of each and every claim for each Insured Person.
2. In respect of tickets and passes, maximum liability of the Company shall be limited to reimbursement of actual replacement cost necessarily incurred by the Insured Person or proportionate share of the unused portion of the tickets / passes, whichever is the less.

Section 7 – Personal Liability

The Company will indemnify the Insured Person against legal liability to a third party up to a limit of HK\$2,000,000, arising during a Trip as a result of:

1. Accidental Bodily Injury to any third party person;
2. Accidental loss of or damage to property belonging to a third party.

Such indemnification shall include payments made in respect of:

- (a) Third parties legal costs and expenses recoverable from the Insured Person and
- (b) The Insured Person's legal costs and expenses incurred with the prior written consent of the Company.

Provisions

1. The Insured Person shall not admit liability or enter into any settlement without obtaining the written consent of the Company.
2. The Company shall not be liable for the first HK\$200 in respect of loss or damage to third party's property.
3. There will be no payment under this Section unless judgements are delivered in the first instance by or obtained from a court of competent jurisdiction within the relevant country.
4. No benefit will be paid for loss or damage arising directly or indirectly from, in respect of, or consequent upon:
 - (a) Employer's liability, contractual liability or liability of a member of an Insured Person's family.
 - (b) Liability incurred by the acts of animals belonging to or in the care, custody or control of the Insured Person.
 - (c) Any wilful, malicious or unlawful act.
 - (d) Pursuit of trade, business or profession.
 - (e) Property belonging to or held in trust, or in the care, custody or control of the Insured Person.
 - (f) Ownership or occupation of land or building (other than occupation only of any temporary residence).
 - (g) Liability arising out of the ownership, possession or use of vehicles, aircraft, or watercraft.
 - (h) Any criminal proceedings, fines, penalties or punitive damages.
 - (i) The influence of intoxicating liquor, racing, rallies or the use of firearms.
 - (j) Pollution unless due to sudden, unintended and unexpected occurrence.
 - (k) Asbestos, or any actual or alleged asbestos related injury or damage involving the use, presence, existence, detection, removal, elimination or avoidance of asbestos or exposure or potential exposure to asbestos.

Section 8 – Travel Delay

If, during a Trip, the departure of the Common Carrier in which the Insured Person has arranged to travel is delayed for at least 6 hours from the time specified in the travel itinerary supplied to the Insured Person, due to strike or industrial action, hijack, adverse weather conditions, natural disasters, airport closure, mechanical and/or electrical breakdown, structural defect of that aircraft, sea vessel or Common Carrier, the Company will pay HK\$250 for the first full 6 hours' delay and for each subsequent full 12 hours' delay (the delay being calculated from the departure time of the aircraft, sea vessel or Common Carrier specified in the itinerary) up to a maximum limit of HK\$2,500 per Insured Person.

Provisions

1. No benefits will be paid for delay:
 - (a) Arising from failure of the Insured Person to check in with the carriers (or their handling agents) according to the itinerary supplied to him/her.
 - (b) Arising from strike, industrial action or any circumstances leading to the delay already existing and known to the public at:
 - (i) the insurance application date (for Single Trip Policy)

(ii) date of booking the scheduled Trip (for Multi Trip Policy)

- (c) Arising from late arrival of the Insured Person at the airport, port or station after check-in time (except for the late arrival due to strike or industrial action).
2. No Benefit will be paid unless the Insured Person obtains written confirmation from the carriers (or their handling agents) of the number of hours of delay and the reason for such delay.

Section 9 – Loss of Deposit or Cancellation

For the purpose of this Section, the Period of Insurance shall become effective and commence upon the approval of the application form (for Single Trip policy) or from the beginning of the period of insurance as specified in the Policy Schedule (for Multi Trip policy). On cancellation of a scheduled Trip before commencement of it, the Company will indemnify up to HK\$50,000 for each Insured Person in respect of losses of tour or travel or accommodation deposits or payments made with respect to the Insured Person's Trip, which are irrecoverable from the tour operator, Common Carrier or provider of accommodation.

Provisions

1. Benefits will be paid under this Section only for cancellation losses arising from:
 - (a) death, serious bodily injury or serious illness of the Insured Person, a travelling companion, Insured Person's spouse, partner, parent, parent-in-law, grandparent, child, sister, brother, fiancé, fiancée or close business associate resident in the Hong Kong SAR;
 - (b) witness summons, jury service or compulsory quarantine of the Insured Person;
 - (c) unexpected outbreak of riot or civil commotion (notwithstanding General Exclusions 1(a)), strike, terrorism (except General Exclusions 5), natural disasters or adverse weather conditions at the planned destination arising out of circumstances beyond the control of the Insured Person;
 - (d) serious damage of the Insured Person's principal residence from fire, flood, or similar natural disaster (typhoon, earthquake, etc.) within one week from the departure date which requires the Insured Person's presence on the premises on the departure date;
 - (e) the issuance of Black Alert (except for the reason of Pandemic) for the planned destination (notwithstanding General Exclusion 1(a)).
2. No benefit will be paid for:
 - (a) Loss arising from Black Alert, medical conditions or circumstances in existence prior to the insurance application date (for Single Trip Policy), or the date of booking the scheduled Trip (for Multi Trip Policy).
 - (b) The first HK\$200 of each and every claim in respect of each Insured Person.
 - (c) Loss arising directly or indirectly from Government regulation or ordinance, delay or amendment of the booked itinerary or failure in provision of any part of the booked holiday (including error, omission or default) by the provider of any service forming part of the booked holiday as well as of the agent or tour operator through whom the holiday is booked.
 - (d) Loss arising directly or indirectly from disinclination to travel or financial circumstances of any Insured Person.
 - (e) Loss resulting from any unlawful act or criminal procedure of any person on whom the travel plans depend.
 - (f) Loss arising directly or indirectly from failure to notify travel agent/tour operator or a provider of transport or accommodation immediately it is found necessary to cancel the travel arrangement.
 - (g) Loss that is covered by any other existing insurance scheme, government programme or loss which will be paid or refunded by a hotel, Common Carrier, travel agent or any other provider of travel and/or accommodation.
 - (h) Any loss arising directly or indirectly from the fact that the Insured Person cannot travel or chooses not to travel because the Security Bureau of The Government of Hong Kong Special Administrative Region has advised against non-essential or all travel (Red Alert or Black Alert) due to Pandemic before the Trip.

Section 10 – Curtailment of Trip

The Company will pay up to HK\$50,000 for each Insured Person in respect of unused irrecoverable prepaid transport cost or accommodation charges included in the contracted holiday or Trip and additional hotel and repatriation costs to the Hong Kong SAR incurred due to necessary and unavoidable curtailment of a Trip as a direct result of:

- (a) the death, serious bodily injury or serious illness of the Insured Person, a travelling companion, Insured Person's spouse, partner, parent, parent-in-law, grand-parent, child, brother, sister, fiancé, fiancée or close business associate resident in the Hong Kong SAR;
- (b) unexpected outbreak of riot or civil commotion (notwithstanding General Exclusions 1(a)), strike, terrorism (except General Exclusions 5), natural disasters, adverse weather conditions or hijack occurring at the planned destination arising out of circumstances beyond the control of the Insured Person;
- (c) the issuance of Black Alert for the destination (notwithstanding General Exclusion 1(a)) during the Trip.

Further, in the event of any necessary and unavoidable curtailment of a Trip or the Insured Person is unavoidably delayed in the course of a scheduled Trip as stipulated prior to departure due to issuance of a Black Alert for the destination, a cash allowance of HK\$1,000 will be payable to each Insured Person. This cash allowance amount will be payable under the benefit of Curtailment of Trip and shall count towards the overall HK\$50,000 limit under this section.

Provisions

1. Benefits will only be paid under this Section when any event giving rise to a claim did not exist at the time of the insurance application date (for Single Trip Policy) or the date of booking the scheduled Trip (for Multi Trip Policy).
2. No benefits will be paid:
 - (a) For claims arising from Black Alert, medical conditions or circumstances in existence prior to the insurance application date (for Single Trip Policy) or the date of booking the scheduled Trip (for Multi Trip Policy).
 - (b) If the person whose condition gives rise to any claim was receiving in-patient treatment in a hospital, or had received a terminal prognosis at the insurance application date (for Single Trip Policy) or the date of booking the scheduled Trip (for Multi Trip Policy).
 - (c) For the first HK\$200 of each and every claim (except as under the cash allowance) in respect of each Insured Person.

Section 11 – Golfing 'Hole in One'

If the adult Insured Person achieves a 'Hole in One' whilst playing golf at any recognised golf course in the world outside the Hong Kong SAR, the Company will pay HK\$2,000 for each event, subject to a maximum of HK\$3,000 for any Period of Insurance.

Provisions

Benefits will be paid under this Section on submission of signed/ countersigned score card recording the event.

Section 12 – China Medical Card (This section is optional and operative if it is stated in the Application Form/Policy Schedule and endorsed thereon, provided that the Insured Person effects cover under a valid Multi Trip Travel Insurance Policy)

In the event that the Insured Person suffers Accidental Bodily Injury or Sickness during the Trip whilst travelling in mainland China and is admitted to the Designated Hospital as an in-patient, the Company will provide a hospital admission deposit guarantee to the Designated Hospital.

Provisions

1. In the event of the loss or damage of the China Medical Card, the Insured Person shall report to the Company within 48 hours with a confirmation in writing as soon as possible. The replacement cost of each card of HK\$50 will be charged to the Insured's designated account as specified in the Application Form/Policy Schedule.
2. Hospital in-patient admission procedures for the China Medical Card at Designated Hospitals:
 - (a) Approach the admission reception of the Designated Hospital.
 - (b) Present the China Medical Card together with the relevant identification document, e.g. China Entry Visa or Hong Kong identity card or passport, to the admission reception.

- (c) Be admitted as an in-patient immediately provided that both the China Medical Card and the relevant identification document are valid. The Company will provide hospital admission deposit guarantee to the Designated Hospital.

In case of any problem arising during the admission, please call Emergency Assistance Hotline (852)2528 9333 for assistance. Such service is provided by a third party service provider ("the Assistance Company") which is an independent contractor and is not an agent of the Company. The Company shall make no representation, warranty or undertaking as to the availability of the Assistance Company's services and shall not be liable to the Insured Person or any other person in any respect of any loss, damage, expense, suit, action or legal proceeding suffered or incurred by any of them, whether directly or indirectly, arising from or in connection with the services provided or advice given by the Assistance Company or its agents, or the availability of such services.

3. No benefit will be paid for:

- (a) Any Pre-existing Condition.
- (b) When the Insured Person is residing in or travelling to mainland China for the purpose of obtaining medical treatment and/or recuperation.
- (c) When the Insured Person is residing in or travelling to mainland China contrary to the advice of a Medical Practitioner.

Part 3 General Exclusions – Applicable To all Sections

The insurance under this Policy does not cover:

1. Claims arising directly or indirectly as a result of:
 - (a) Riot, civil commotion, war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or the act or order of any government or public or local authority.
 - (b) Ionising radiation or contamination by radioactivity from any nuclear fuel or from nuclear waste from any process of nuclear fission, or from any nuclear weapons materials.
 - (c) Suicide or attempted suicide, wilfully self-inflicted injury, childbirth, pregnancy, miscarriage, insanity, alcoholism or the use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a registered Medical Practitioner but not for the treatment of drug addiction), self-exposure to needless perils (except in an attempt to save human life), venereal disease, AIDS or AIDS related complex.
 - (d) Engaging in:
 - (i) racing other than on foot;
 - (ii) deep water diving (that is diving to a depth of greater than 40 metres);
 - (iii) motor rallies and competitions;
 - (iv) professional sports or activities in return for income or remuneration;
 - (v) aviation other than as a fare-paying passenger in a licensed aircraft operated by a recognised airline or air charter company which is duly licensed by the relevant authorities for the regular transportation of fare-paying passengers.
2. Claims arising from incidents not notified in writing to the Company within 30 days of the expiry of such Trip.
3. Claims arising from illegal acts of an Insured Person or an Insured Person's executors or administrators, legal heirs or personal representatives.
4. Claims in respect of any property otherwise insured.
5. Any act of nuclear, chemical, biological terrorism ("NCB terrorism") regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

For the purpose of this clause:

An act of "NCB terrorism" shall mean an act, including but not limited to the use or the threat thereof, of any nuclear weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous Chemical agent and or Biological agent during the period of this insurance by any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or

government(s), committed for political, religious, ideological or similar purpose including the intention to influence any government and/or to put the public, or any section of the public, in fear.

“Chemical” agent shall mean any compound which, when suitably disseminated, produces incapacitating, damaging or lethal effects on people, animals, plants or material property.

“Biological” agent shall mean any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesised toxins) which cause illness and/or death in humans, animals or plants.

This clause also excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to any act of NCB terrorism.

If the Company alleges that by reason of this clause, any loss, damage, cost or expense is not covered by this Policy, the burden of proving the contrary shall be upon the Insured Person.

In the event any portion of this clause is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

6. Sanction Limitation and Exclusion Clause

No insurer shall be deemed to provide cover and no insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

Part 4 General Policy Conditions – Applicable to all Sections

1. Consideration

This Policy is issued in consideration of the statements and declarations contained in the application form and the Policy Schedule and the Insured's payment of premium due.

2. Other Source of Recovery

If the Insured Person is entitled to payment under any other insurance policy or other source in circumstances where he would be entitled to claim under this Policy (except as provided by Section 1A - Personal Accident, Section 3 - Hospital Cash Benefit, Section 8 - Travel Delay and Section 11 - Golfing 'Hole in One' under Part 2), the Company will only be liable for amounts not recoverable from such other insurance policy or other source.

3. Duplicate Application

An Insured Person shall not be covered under more than one TravelSurance policy underwritten by the Company for the same Trip. In the event that an Insured Person is covered by more than one policy issued by the Company, benefit will be based on the policy which provides the greatest amount of benefit.

4. Entire Contract: Changes

The entire contract between the parties will be constituted by this Policy, the TravelSurance application form, the Policy Schedule and any endorsements and amendments, if any. No change in this Policy will be valid unless approved by the Company and evidenced by endorsement or amendment.

5. Reasonable Care

The Insured Person must exercise reasonable care to prevent accidents, injury, illness, disease, loss or damage.

6. Mis-statement or Fraud

If the Insured makes any false statement in the application form or concerning any claim, the Company shall have the right to repudiate liability under the Policy.

7. Mis-statement of Age

If the age of any Insured Person has been misstated all amounts payable under this Policy shall be such as the premium paid would have purchased at the correct age. In the event the age of the Insured Person has been misstated, and if according to the correct age of the Insured Person, the coverage provided by the Policy would not have become effective, or would have ceased prior to the acceptance of such premium or premiums then the liability of the Company during the period the Insured Person is not eligible for the coverage shall not attach.

8. Hijack

Notwithstanding anything contained in General Exclusion 1(a), in respect of hijack cover, where applicable, this Policy shall include accidents arising from the hijacking of any vessel, vehicle or aircraft upon which the Insured Person is travelling as a bona fide passenger.

9. Notice of Claim

Written notice of claim must be given to the Company immediately and in any event within 30 days of the completion of the relevant Trip.

Failure to give notice in the time prescribed shall not invalidate a claim if it can be shown to the Company's satisfaction that notice had been provided as soon as was reasonably practicable, and in any event within 60 days of the completion of the relevant Trip.

Any notice given to the Company by or on behalf of the claimant must identify the Insured Person in order to be deemed notice.

10. Claim Forms

The Company, upon receiving a notice of claim, will provide the claimant with the form it requires for filing proof of claim.

Medical reports and all proofs of loss required by the Company shall be provided at the expense of the claimant and shall be in such form and of such nature as the Company may prescribe.

11. Proof of Claim

Written proof in support of a claim must be provided to the Company within 30 days from the receipt of the claim form provided by the Company as above. Failure to provide such proof within the time required shall not invalidate any claim if it was not reasonably possible to give proof within such time, provided such proof is furnished as soon as is reasonably possible, and in no event later than 180 days from the time such proof is otherwise required.

All claims must be submitted with comprehensive supporting information and documentary evidence as the Company may require, including but not limited to:

(a) In the case of Personal Accident Benefits:

Hospital and physicians reports giving details of the nature of the loss and extent and period of disability, police reports where relevant and in the event of death a copy of the death certificate and the relevant coroner's report.

(b) In the case of Medical and Other Expenses, Hospital Cash Benefit, Loss of Deposit or Cancellation and Curtailment of Trip:

All receipts, tickets coupons, contracts or agreements relevant to the claim and if the claim be in respect of medical treatments, a full physician's report stipulating (a) the diagnosis of the condition treated, (b) the date the disability commenced in the physician's opinion and (c) the physician's summary of the course of treatment including medicines prescribed and services rendered.

(c) In the case of Baggage and Personal Effects, Delayed Baggage, Personal Money and Travel Documents:

All details including receipts as to date of purchase, price, model and type of items lost or damaged, receipt of any emergency purchases of essential items during the Trip, a copy of immediate notification to carrier and his/her acknowledgement when loss or damage has occurred in transit and certified copy of immediate police report when loss or damage has occurred in other circumstances. Reports to these authorities must be made within 24 hours of the occurrence.

(d) In the case of Travel Delay:

Documentation satisfactory to the Company that the cause of delay was officially recognised together with a clear statement of its nature.

(e) In the case of Personal Liability:

All correspondence, summons or writ must be submitted to the Company immediately upon receipt, unanswered.

(f) In the case of Golfing 'Hole in One':

The signed/countersigned score card recording the event issued by the golf club.

12. Physical Examination

The Company shall have the right and opportunity at its own expense to examine the Insured Person when and so often as it may reasonably require pending the outcome of a claim under this Policy.

In the event of the death of the Insured Person, the Company shall be entitled to have a post-mortem examination carried out at its own expense, except when such examination is prohibited by law.

13. Payment of Benefit

(i) Benefits payable under this Policy shall be paid to the Insured Person if such Insured Person is named as a "Partner" or "Friend/Relative" on the application form and otherwise to the Insured, unless the Insured Person/Insured (as applicable) directs the Company otherwise in writing in a manner as accepted by the Company.

(ii) In the absence of any such written direction, any benefits unpaid at the time of death of the person indicated under paragraph (i) above shall be paid to the estate of such person.

(iii) Any receipt given to the Company by the person indicated under paragraph (i) above shall be deemed a final and complete discharge of all liability of the Company.

14. Subrogation

The Company has the right to proceed at its own expense in the name of the Insured Person against third parties who may be responsible for an occurrence giving rise to a claim under this Policy.

15. Legal Action

No action shall be brought to recover on this Policy prior to the expiration of 60 days after written proof of claim has been filed in accordance with the requirements of this Policy, nor shall such action be brought at all unless commenced within 180 days from the expiration of 30 days within which proof of claim is required.

16. Jurisdiction and Governing Law

This Policy is subject to the exclusive jurisdiction of the Hong Kong SAR and is to be construed according to the laws of the Hong Kong SAR (Section 7 Personal Liability of Part 2 excepted).

17. Arbitration

All differences arising out of this Policy shall be referred to the decision of an arbitrator to be appointed in writing by both parties or if they cannot agree upon a single arbitrator, to the decision of two arbitrators of whom one shall be appointed in writing by each of the parties within two calendar months after having been required to do so in writing by the other party and in case of disagreement between the arbitrators, the difference shall be referred to the decision of an umpire who shall be appointed in writing by the arbitrators before entering on the reference and an award by arbitration shall be a condition precedent to any right of action or suit upon this Policy as regards any dispute regarding the amount of the Company's liability under this Policy.

18. Currency

Premiums and benefits payable under this Policy shall be in the currency of the Hong Kong SAR.

19. Interest

No payment due under this Policy shall carry interest.

20. Prohibition on Trust or Assignment

This Policy is not assignable and the Insured warrants that the Policy is not subject to a trust and will not be made subject to a lien or charge and that the Policy will be kept in the Insured's possession throughout the currency of the Policy.

21. Place of Departure

This insurance is only valid for a Trip originating from the Hong Kong SAR.

22. Contracts (Rights of Third Parties) Ordinance

Any person or entity who is not a party to this Policy shall have no rights under the Contracts (Rights of Third Parties) Ordinance (Cap 623 of the Laws of Hong Kong) to enforce any terms of this Policy.

Part 5

Renewal (applicable to MultiTrip Policy only)

This Policy will be automatically renewed annually provided that the Company have debited the renewal premium from the Insured's HSBC account as specified in the Application Form/Policy Schedule, unless written notice of termination had been received by the Company before the renewal date.

The Company agrees that no adjustment in premium shall be made on this Policy alone. The Company reserves the right to amend premiums in respect of like categories, such as by Geographical Limit for all MultiTrip Policies issued, or based on such other categorisation as determined by the Company.

Part 6

Additions (applicable to MultiTrip Policy only)

1. If the Policy Schedule was issued in the name of the Insured alone, he/she may include his/her Eligible Family Members by submitting a written application to the Company, specifying the name, sex and age of the person to be insured.

Subject to approval by the Company, insurance for such Eligible Family Members will commence on the first day of the month following the date when the request was received.

The relevant premium for such Eligible Family Members will be charged to the Insured's nominated account.

2. If the Insured and his/her Children are covered hereunder, any children who subsequently become Eligible Family Members in relation to the Insured shall automatically become Insured Persons at no additional premium charge on the date they become Eligible Family Members as defined in item 7 of Part 1.

Part 7

Termination

1. Single Trip Policy

Upon the issuance of any Travel Alert for the planned destination, the Insured can give notice in writing to the Company to terminate the Policy before commencement of the scheduled Trip. Provided that no claim has been paid, the Insured shall be entitled to full refund of premium. Under any other circumstances, no refund of premium is allowed once the application form has been accepted.

If the premium is not paid, the Policy shall be deemed to have been void from the inception of the Period of Insurance specified in the Policy Schedule.

2. MultiTrip Policy

A. Section 1 to 11 of Part 2

(1) If the Insured gives notice in writing to the Company to terminate this Policy, or to terminate insurance with respect to any Eligible Family Members, such termination shall become effective upon the actual receipt of the notice by the Company. Provided that no claim has been made or arisen during the Period of Insurance, the Insured shall be entitled to a partial refund of premium according to the short period premium table below:

Covered period (not exceeding)	Premium to be refunded
4 months	50%
5 months	40%
6 months	30%
8 months	20%
Over 8 months	0%

(2) If the Company gives seven days' notice of termination by registered letter to the Insured at his/her last known address, such termination shall be effective on the seventh day after such notice has been issued. Refund of premium, if any, shall be calculated on a pro-rata basis.

(3) This Policy shall terminate upon the death of the Insured. Any Eligible Family Members shall cease to be an Insured Person upon his/her death or upon his/her ceasing to be an Eligible Family Member.

(4) This Policy shall terminate forthwith upon the renewal date next following the Insured's 85th birthday.

(5) Insurance in respect of an insured Child shall terminate forthwith upon the renewal date next following his/her 17th birthday or marriage or otherwise ceasing to be a dependent of the Insured, whichever date is the earliest.

- (6) Insurance in respect of an insured spouse or partner shall terminate forthwith upon the renewal date next following his/her 85th birthday.
- (7) If the annual premium is not paid, this Policy shall be deemed to have been void from the inception of the Period of Insurance specified in the Policy Schedule.
- (8) After payment of the annual premium due, in the event of non-payment of any renewal premiums, insurance shall terminate on the renewal date.
- (9) In the event that premium is paid for any period beyond the termination date of this Policy, or beyond the termination date of cover in respect of Eligible Family Members, the amount overpaid shall be refunded to the Insured.

B. Section 12 of Part 2

- (1) If the Insured gives notice in writing to the Company to terminate the cover of any China Medical Card(s) under the Policy, such termination shall become effective upon the actual receipt of the notice by the Company. The said China Medical Card(s) shall then be returned immediately to the Company and no refund of premium will be made once the insurance is effected.
- (2) If the Company gives seven days' notice of termination of the cover of China Medical Card by registered letter to the Insured at his/her last known address, such termination shall be effective on the seventh day after such notice has been issued. The said China Medical Card(s) shall then be returned immediately to the Company and refund of premium, if any, shall be calculated on a pro-rata basis.

- (3) If the Policy is terminated as a result of the events (1) or (3) under Section 2A of Part 7, the cover of China Medical Card(s) shall be terminated forthwith. The said China Medical Card(s) shall then be returned immediately to the Company and no refund of premium will be made once the insurance is effected.

**Part 8
Automatic Extension**

This insurance will be automatically extended for a maximum period of 10 days without charge in the event that the Insured Persons are unavoidably delayed in the course of their scheduled Trip as stipulated prior to departure.

**Part 9
Extension of Period of Insurance (Applicable to Single Trip Policy only)**

Upon the request by the Insured Person, the Period of Insurance may be extended subject to the following:

- (a) the customer copy of the original approved application form is presented to and endorsed by the Company;
- (b) the Policy has not expired at the time the request is made;
- (c) after the extension, the Period of Insurance does not exceed 180 days;
- (d) payment of additional premium (subject to the minimum premium requirement) as prescribed by the Company.

Levy collected by the Insurance Authority has been imposed on this policy at the applicable rate. For further information, please visit www.axa.com.hk/ia-levy or contact AXA at (852) 2867 8678.

Important Notes:

The above policy is underwritten by **AXA General Insurance Hong Kong Limited ("AXA")**, which is authorised and regulated by the Insurance Authority of the Hong Kong SAR. AXA will be responsible for providing your insurance coverage and handling claims under your policy. The Hongkong and Shanghai Banking Corporation Limited is registered in accordance with the Insurance Ordinance (Cap. 41 of the Laws of Hong Kong) as an insurance agent of AXA for distribution of general insurance products in the Hong Kong SAR.

In the event of any inconsistency between the English version and the Chinese version, the English version shall prevail.