



TravelWise Protection Plan 「旅遊智易保」

Travel Insurance Terms and Conditions 旅遊保險條文及條款

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TravelWise Protection Plan (Single-Trip Plan)

Travel Insurance Terms and Conditions

In consideration of the payment of premium and subject to the definitions, exclusions, limitations, provisions and terms contained herein, endorsed hereon, or attached hereto, AIG Insurance Hong Kong Limited (hereinafter called "the Company") agrees to provide insurance to the Insured Person(s) named in the Policy Schedule issued in relation to a Journey that commenced and occurred within the Period of Insurance subject to the terms and conditions of this Policy (hereinafter called "Insured Journey") and promises to pay indemnity for loss to the extent provided herein.

The Policy Schedule, Travel Insurance Terms and Conditions and endorsements (if any), shall constitute the entire contract of insurance (hereinafter called the "Policy").

This insurance is only valid for conventional leisure travel or business travel (limited to administrative duty) purpose only and shall not apply to persons undertaking expeditions, treks or similar journeys.

BENEFITS

SECTION 1 - EMERGENCY MEDICAL EXPENSES AND ASSISTANCE

1a. Medical Expenses

Under this Section, if the Insured Person sustains an Injury or Sickness during the insured Journey and as a result the Insured Person incurs medical expenses for treatment of the said Injury or Sickness prior to his/her return to Hong Kong, the Company shall reimburse the Insured Person up to the Maximum Benefit stated in the Schedule for that portion of the medical expenses which (i) are incurred by the Insured Person within three hundred and sixty-five (365) days from his/her first sustaining the said Injury or Sickness; and (ii) constitute Usual, Reasonable and Customary Medically Necessary Expenses.

- Follow-up Medical Expenses

In the event that the Insured Person, following his/her return to Hong Kong, requires follow-up medical treatment for the Injury or Sickness referred to above (i.e. in addition to the treatment for the Injury or Sickness received prior to the Insured Person's return), then the Company shall also reimburse the Insured Person up to but not exceeding HK\$50,000 for that portion of the follow-up medical expenses which (i) are incurred within three (3) months of the Insured Person's return to Hong Kong and (ii) constitute Usual, Reasonable and Customary Medically Necessary Expenses charged by a Qualified Medical Practitioner practising western medicine. This Follow-up Medical Expenses benefit shall also be extended to cover the Medically Necessary Expenses incurred for the same purpose paid to Chinese Medicine Practitioner subject to an aggregate limit of HK\$1,800 and a per visit and per day limit of HK\$150.

In no event, however, shall the total amount payable under this Section 1a. (Medical Expenses) exceed 100% of the Maximum Benefit as stated in the Schedule of Benefits.

1b. Emergency Medical Evacuation

When as a result of an Injury sustained or Sickness commencing while the Insured Person is traveling overseas during the insured Journey and if in the opinion of the Company or its authorized representative, it is judged medically appropriate to move the Insured Person to another location for medical treatment, or to return the Insured Person to Hong Kong his/her habitual residence, the Company or its authorized representative shall arrange for the evacuation utilizing the means best suited to do so, based on the medical severity of the Insured Person's condition. The Company shall pay directly to the medical provider the Covered Expenses for such evacuation.

Covered Expenses are expenses for services provided and/or arranged by the Company or its authorized representative for the transportation, medical services and medical supplies necessarily incurred as a result of an emergency medical evacuation of an Insured Person.

The means of evacuation arranged by the Company or its authorized representative 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 the Company or its authorized representative and will be based solely upon medical necessity.

The Insured Person or a person on his/her behalf must contact Travel Guard Assistance Hotline at (852) 3516 8699 for the arrangement.

1c. Repatriation of Remains

When, as a result of an Injury sustained or Sickness commencing while the Insured Person is traveling during the insured Journey, the Insured Person dies during the course of the insured Journey, the Company or its authorized representative shall make the necessary arrangements for the return of the Insured Person's remains to Hong Kong or his/her habitual residence or declared country of final destination. The Company shall pay the actual cost incurred for such repatriation.

In addition, the Company shall reimburse for expenses actually incurred at the place of death outside Hong Kong for the cost of a casket, the embalming and cremation process rendered by a mortician or undertaker.

The Insured Person or a person on his/her behalf must contact Travel Guard Assistance Hotline at (852) 3516 8699 for the arrangement.

1d. Overseas Hospital Cash

The Company will pay the Insured Person HK\$500 per one (1) day of overseas Hospital Confinement up to the Maximum Benefit as stated in the Schedule of Benefit in the event that the Insured Person is Confined in an overseas Hospital due to an Injury or Sickness sustained during the insured Journey.

In no event shall the total amount payable under this Section 1d. (Overseas Hospital Cash) exceed the Maximum Benefit as stated in the Schedule of Benefits.

1e. Compassionate Visit

The Company will reimburse up to the Maximum Benefit as stated in the Schedule of Benefits for the reasonable additional Accommodation and/or Travel Ticket necessarily incurred by one (1) adult Immediate Family Member to fly over or one (1) Traveling Companion of the Insured Person to fly over or stay behind, to be with and/or take care of the Insured Person, following the death, Serious Injury Or Serious Sickness of the Insured Person during the insured Journey. This coverage can only be utilized once during the insured Journey.

1f. Child Guard

The Company will reimburse up to the Maximum Benefit as stated in the Schedule of Benefits, the reasonable additional Accommodation and/or travel fare for one (1) Immediate Family Member or one (1) Traveling Companion to accompany the Insured Person's child(ren) aged under fifteen (15) back to Hong Kong in case the Insured Person is Confined in an overseas Hospital due to Serious Injury Or Serious Sickness and where no other Immediate Family Member is available to accompany the Insured Person's child(ren) at the time.

Exclusions Applicable to Section 1 - Emergency Medical Expenses & Assistance

No benefits will be provided:

- For surgery or medical treatment when in the opinion of the Qualified Medical Practitioner treating the Insured Person, the treatment can be reasonably delayed until the Insured Person returns to Hong Kong.
- If the purpose of the insured Journey is to obtain medical treatment or the insured Journey is undertaken against the Qualified Medical Practitioner's recommendation.
- For 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 insured Journey.
- For failure to obtain a written medical report from the Qualified Medical Practitioner.
- If the Insured Person refuses to follow the recommendation of a Qualified Medical Practitioner to return to Hong Kong or to continue the insured Journey whilst the Insured Person's physical condition at the time of recommendation is fit for travel.
- For any expenses for a service not approved and arranged by the Company or its authorized representative except that this exclusion shall be waived in the event the Insured Person or his/her Traveling Companion(s) cannot contact Travel Guard Assistance Hotline 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 the Company or its authorized representative would have provided under the same circumstances. (For Section 1b. Emergency Medical Evacuation only)
- For any expenses incurred for the transportation of the Insured Person's remains not approved and arranged by the Company or its authorized representative. (For Section 1c. Repatriation of Remains only).
- For the follow up treatment expenses incurred outside Hong Kong.
- For any additional cost of single or private room accommodation at a Hospital or charges in respect of special or private nursing, non-medical personal services such as radio, telephone (except for Section 1d. Overseas Hospital Cash) and the like; procurement or use of special braces, appliances or equipment.
- For any cosmetic surgery, refractive errors of eyes or hearing-aids, and prescriptions therefor except necessitated by accidental Injury occurring during the insured Journey.
- For the same loss under both Section 1e. (Compassionate Visit) and Section 1f. (Child Guard) arising from the same cause.

SECTION 2 - PERSONAL ACCIDENT

2a. Accident while in a Common Carrier

The benefit under this Section is payable to the Insured Person who suffers an Injury while riding as a fare paying passenger, and not as pilot, operator or crew member, in or on, or while boarding or alighting from any Common Carrier at the time of Injury during the insured Journey which, directly and independently of all other causes, results in any Event provided in the Benefit Table hereunder, but only to the extent and if such Injury results in such Event happening to the Insured Person within ninety (90) days after the date of the Accident.

This Section is extended to cover an Injury sustained by the Insured Person while riding on a carrier arranged by a travel agent or while the Insured Person is driving or riding in an automobile at the time of Injury during the insured Journey which, directly and independently of all other causes, results in any Event provided in the Benefit Table hereunder, but only to the extent and if such Injury results in such Event happening to the Insured Person within ninety (90) days after the date of the Accident.

2b. Other Accidents

The benefit under this Section is payable only with respect to Injury sustained by an Insured Person as a result of an Accident other than those Accidents referred to in Section 2a. (Accident while in a Common Carrier) during the insured Journey which, directly and independently of all other causes shall result in any Event as provided in the Benefit Table hereunder, but only to the extent and if such Injury results in the Event happening within ninety (90) days after the date of the Accident.

Benefit Table

EVENTS		
Accidental Death and Disablement		Percentage of Principal Sum
1. Death		100%
2. Permanent Total Disablement		100%
3. Permanent and incurable paralysis of all limbs		100%
4. Permanent total Loss of sight of one eye or both eyes		100%
5. Loss of or the Permanent total Loss of Use of one limb		100%
6. Loss of or the Permanent total Loss of Use of two limbs		100%
7. Loss of Speech and Loss of Hearing		100%
8. Permanent total Loss of Hearing in:		
(a) both ears		75%
(b) one ear		15%
Third Degree Burns		
Area	Damage as a Percentage of Total Surface Area	Percentage of Principal Sum
1. Head	Equal to or greater than 8% damage of total head surface area	100%
	Equal to or greater than 5 % but less than 8% damage of total head surface area	75%
	Equal to or greater than 2% but less than 5% damage of total head surface area	50%
2. Body (exclude head surface area)	Equal to or greater than 20% damage of total body surface area	100%
	Equal to or greater than 15% but less than 20% damage of total body surface area	75%
	Equal to or greater than 10% but less than 15% damage of total body surface area	50%

Compensation:

- If more than one (1) of the above Events are applicable, only the Event with the highest compensation (i.e. the highest Percentage of Principal Sum) will be payable under this Section and in any event shall not exceed the Maximum Benefit stated in the Schedule of Benefits.
- The insurance for any Insured Person under this Policy shall terminate upon the occurrence of any loss for which indemnity is payable under any one (1) of the above Events, but such termination shall be without prejudice to any claim originating out of the Accident causing such loss.
- When a limb or organ which had been partially disabled prior to an Injury covered under this Policy becomes totally disabled as a result of such Injury, the Percentage of Principal Sum payable shall be determined by the Company having regard to the extent of disablement caused by the Injury. No payment however shall be made in respect of the loss of a limb or organ which was permanently disabled prior to the Injury.
- If the Insured Person is under seventeen (17) years of age on the Effective Date, the Maximum Benefit payable will be HK\$250,000 subject to the Percentage of Principal Sum as stated in the above Benefit Table under Section 2 (Personal Accident).

This Section is extended to cover an Injury sustained by the Insured Person:

- While he/she is traveling directly from his/her place of residence or place of regular employment in Hong Kong to the immigration counter within three (3) hours before the scheduled departure time of the Common Carrier in which the Insured Person has arranged to travel for the purpose of commencement of his/her insured Journey.
- While he/she is traveling directly from the immigration counter in Hong Kong to his/her place of residence or place of regular employment within three (3) hours upon his/her arrival in Hong Kong after completion of his/her insured Journey.

Exposure

If by the reason of any covered Accident occurring during the insured Journey, the Insured Person is unavoidably exposed to the elements (including but not limited to prolonged and rigorous weather or environmental conditions) and as a direct and unavoidable result of such exposure sustains death, loss or disablement within twelve (12) months from the date of Accident, the Company will pay in accordance to the Events as stated in the Benefit Table.

Disappearance

If the Insured Person disappears as a result of the disappearance, sinking or wrecking of the Common Carrier caused by an Accident in which the Insured Person was traveling at the time of the Accident during the course of the insured Journey and remains missing after twelve (12) months from the date of the Accident, and the Company has reason to believe that the Insured Person has died in the Accident, the Company will pay the Personal Accident benefit, subject to receipt of a signed undertaking by the personal representative of the Insured Person's estate that any such payment shall be refunded to the Company if it is later discovered that the Insured Person did not die as a result of the Accident.

Exclusion Applicable to Section 2 - Personal Accident

- For the purpose of Section 2, in no event shall the Company be liable to pay for any loss caused by an Injury or otherwise which is a consequence of any kind of disease or Sickness.

SECTION 3 - LOSS OF INCOME BENEFIT

If the Insured Person sustains Injury during the insured Journey and upon returning to Hong Kong, the Insured Person is unable to return to work in his / her usual gainful occupation as recommended by a Qualified Medical Practitioner for at least 7 days, the Company will pay a weekly income benefit of HK\$1,250 for each full week that the Insured Person is unable to return to work not exceeding a maximum period of twenty-four (24) weeks and up to the Maximum Benefit as stated in the Schedule of Benefits.

Exclusion Applicable to Section 3 - Loss of Income Benefit

No benefits will be provided:

- When the Insured Person fails to submit official or legal documentation issued by his / her current employer to



2. prove his/her employment status.
 For failure to obtain a written medical report from the Qualified Medical Practitioner certifying that the Insured Person is unable to work in his/her gainful occupation.

SECTION 4 - JOURNEY CANCELLATION AND INTERRUPTION

4a. Journey Cancellation

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for loss of basic tour fee and/or Accommodation paid in advance by the Insured Person and for which the Insured Person is legally liable and which are not recoverable from any other source consequent upon the cancellation of the insured Journey necessitated by the occurrence of any of the following, within the period of ninety (90) days before the scheduled departure date of the insured Journey (except for sub-paragraphs (iii) and (iv) below):

- i. Death or Serious Injury Or Serious Sickness of the Insured Person, Insured Person's Immediate Family Member, Close Business Partner or Traveling Companion;
- ii. Witness summons, jury service or compulsory quarantine of the Insured Person;
- iii. Unexpected outbreak of strike by the employees of a Common Carrier for the planned insured Journey, epidemic, riot or civil commotion at the planned destination within the period of one (1) week before the departure date of the planned insured Journey;
- iv. Serious damage to the Insured Person's and/or Traveling Companion's Primary Residence in Hong Kong from fire, flood, earthquake or similar natural disasters within the period of one (1) week before the departure date of the planned insured Journey which requires the Insured Person's and/or Traveling Companion's presence in the premises on the departure date of the insured Journey.

This coverage under Section 4a (Journey Cancellation) cannot be utilized once the Insured Person has commenced the insured Journey.

4b. Journey Interruption

(1) Curtailment Expenses

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefit for the amount of basic tour fee and/or Accommodation forfeited and/or additional travel fare and/or Accommodation reasonably and necessarily incurred after the commencement of the insured Journey where the Insured Person has to terminate and cut short the insured Journey and return to Hong Kong as a result of the following reasons:

- i. Death, Serious Injury Or Serious Sickness or hijacking of the Insured Person or Close Business Partner who is a resident in Hong Kong;
- ii. Death, Serious Injury Or Serious Sickness of the Insured Person's Immediate Family Members or Traveling Companion;
- iii. Sudden occurrence of strike by the employees of a Common Carrier, unanticipated outbreak of riot or civil commotion, natural disasters, or epidemic at the planned destination which prevents the Insured Person from continuing with his/her scheduled insured Journey.

(2) Journey re-arrangement

The Company shall reimburse the Insured Person up to the Maximum Benefit stated in the Schedule of Benefits for additional and reasonable travel fare and/or Accommodation incurred after the commencement of the insured Journey as a direct result of sudden occurrence of strike by the employees of a Common Carrier, unanticipated outbreak of riot or civil commotion, inclement weather, natural disasters, or epidemic at the planned destination. Such reimbursement is only payable if the aforesaid expenses are incurred solely for the purpose of the continuation of the traveling to the original planned destination comprised in the insured Journey.

Curtailment Expenses payable under Section 4b.(1) in relation to the amount of basic tour fee and/or Accommodation forfeited will be calculated in proportion to the number of days remaining after the relevant interruption of the insured Journey. Actual expenses incurred in relation to additional travel fare and/or Accommodation for the insured Journey payable under both Section 4b.(1) (Curtailment Expenses) and 4b.(2) (Journey re-arrangement) will be reimbursed up to the Maximum Benefit as stated in the Schedule of Benefits.

(3) Compulsory Quarantine

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for the amount of pro-rated basic tour fee and/or Accommodation forfeited after the commencement of the insured Journey where the Insured Person is Compulsorily Quarantined due to suspected exposure to Pandemic Influenza infection. Compulsory Quarantine payable under Section 4b.(3) in relation to the amount of basic tour fee and/or Accommodation forfeited will be calculated in proportion to the number of quarantined days during the insured Journey. The maximum amount payable under Section 4b.(1) (Curtailment Expenses), Section 4b.(2) (Journey re-arrangement) and Section 4b.(3) (Compulsory Quarantine) shall not in aggregate exceed 100% of the Maximum Benefit for Section 4b. (Journey Interruption) as stated in the Schedule of Benefits. This coverage Section 4b. (Journey Interruption) is effective only if this insurance is purchased before the Insured Person becomes aware of any circumstances which can lead to the disruption or interruption of the insured Journey.

Exclusions Applicable to Section 4 - Journey Cancellation And Interruption

No benefits will be provided for any loss:

1. That is covered by any other existing insurance scheme, government program, or which will be paid or refunded by any Common Carrier, travel agent or any other provider of transportation and/or accommodation.
2. That is caused directly or indirectly by government regulations or control, bankruptcy, liquidation or default of travel agencies, tour operator and/or Common Carrier.
3. That arises from any circumstances leading to the cancellation and/or disruption of his/her insured Journey before the purchase of this travel insurance.
4. That directly or indirectly arises from the Insured Person's failure to notify the travel agent/ tour operator or provider of transportation or accommodation immediately if it is necessary to cancel or curtail the travel arrangement for the reasons set out in sub-paragraphs i. to iv. of Section 4a. (Journey Cancellation) or sub-paragraphs i. to iii. of Section 4b.(1). (Curtailment Expenses).
5. In respect of any loss claimed under Section 6a. (Travel Delay), Section 4b.(1) (Curtailment Expenses) and Section 4b.(2) (Journey re-arrangement) arising from the same cause.
6. If the Insured Person fails to produce to the Company with a written confirmation containing the information issued by the government or other relevant authorities regarding the Compulsory Quarantine, including but not limited to the quarantined period and the reason for such quarantine.

SECTION 5 - PERSONAL EFFECTS

5a. Baggage and Personal Effects

The Company will pay the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for loss of or damage to baggage, clothing and personal effects, worn, carried by the Insured Person by hand, in trunks, suitcases and like receptacles owned by the Insured Person occurring during the insured Journey. If any damaged article is proven to be beyond economical repair, a claim will be dealt as if the article had been lost. The Company shall not be liable for more than HK\$3,000 in respect of any one (1) article, pair or set of articles and may make payment or at its opinion reinstate or repair the article, pair, or set of articles subject to due allowance for wear and tear and depreciation in respect of any item more than one (1) year old from the date of purchase.

Exclusions Applicable to Section 5a - Baggage and Personal Effects

No benefits will be provided for:

1. The following classes of property: business goods or sample, foodstuffs, animals, motor vehicles (including accessories), motorcycles, bicycles, boats, motors, any other conveyances, household furniture, antiques, jewelry or accessories, mobile phone (including PDA phone and other accessories), money (including checks, traveler's checks, etc), plastic money (including the credit value of credit card, Octopus cards, etc), securities, tickets or documents.
2. Any loss or damage caused by wear and tear, gradual deterioration, moths, vermin, inherent vice or damage sustained due to any process initiated by the Insured Person to repair, clean or alter any property.
3. Any loss of or damage to hired or leased equipment.
4. Any loss of or damage to property resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, Terrorist Act or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate such property; or in respect of any property which is contraband or which is or has been illegally transported or traded.
5. Any loss or damage to property insured under any other insurance, or which could be reimbursed for by a Common Carrier, a hotel, and any service providers or otherwise.
6. Any loss of or damage to property which functions normally after it has been fixed or repaired by a third party.
7. With respect to any of the Insured Person's baggage which the Insured Person either intentionally sent by a

- different Common Carrier than the one in which the Insured Person was traveling, or with respect to any baggage, souvenir or other items which the Insured Person mailed or shipped separately.
8. Any loss of the Insured Person's baggage when it is left unattended in a public place or as a result of the Insured Person's failure to take due care and precautions for the safe guard and security of such property.
9. Any loss of data recorded on tapes, cards, diskettes or otherwise.
10. Breakage or damage to fragile articles.
11. Any loss or damage while in the custody of a hotel or Common Carrier, unless reported immediately upon discovery in writing to such hotel or Common Carrier within three (3) days and a Property Irregularity Report is obtained in the case of the event occurred in an airline.
12. Any loss not reported to the police within twenty-four (24) hours from occurrence of the incident and such police report is not obtained at the place of loss.
13. Loss by any mysterious disappearance.
14. Shortage due to error, omission, exchange or depreciation in value.
15. Receipts of the claimed items submitted which are not in the Insured Person's name.
16. Any loss claimed under Section 6b (Baggage Delay) and Section 10. (Golf Protection) arising from the same cause.

5b. Personal Money

The Company will reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for the loss of cash, bank notes, traveler's check and money order occurring during the insured Journey. This reimbursement is subject to the condition that the relevant loss must have been reported to the police at the place of the loss within twenty-four (24) hours from the occurrence of the incident and any such claim must be accompanied by written documentation and report from such police.

Exclusions Applicable to Section 5b - Personal Money

No benefits will be provided:

1. In respect of any form of the plastic money (including any credit card, Octopus cards, etc) or securities.
2. In respect of loss not reported to the police within twenty-four (24) hours from the occurrence of the incident and such police report is not obtained at the place of loss.
3. In respect of shortage due to error, omission, exchange or depreciation in value.
4. In respect of loss of traveler's checks where such loss is not immediately reported to the local branch or agent of the issuing authority.
5. For loss by any mysterious disappearance.
6. In respect of loss resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, Terrorist Act or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate such cash, bank notes, check or money; or in respect of any cash, bank notes, check or money which is (or represents the proceeds of) contraband or which is or has been illegally transported or traded (or represents the proceeds of such actions).

5c. Travel Documents

In the event that the Insured Person loses his/ her travel documents and/or travel tickets during the insured Journey as a direct result of robbery, burglary or theft, the Company will reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for: (i) the replacement cost of the travel documents and/or travel tickets; and/or (ii) reasonable additional cost of travel expenses and/or Accommodation necessarily incurred by an Insured Person for the sole purpose of making necessary travel arrangements for replacing the travel documents.

Exclusion Applicable to Section 5c - Travel Documents

No benefits will be provided:

1. If the loss is not reported to the police within twenty-four (24) hours from the occurrence of the incident and for which such police report is not obtained at the place of loss.
2. If the lost travel document and/or visa and/or travel tickets are not needed by the Insured Person to complete to the insured Journey.
3. For loss by any mysterious disappearance.
4. In respect of loss resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, Terrorist Act or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate any property; or in respect of any property which is (or represents the proceeds of) contraband or which is or has been illegally transported or traded (or represents the proceeds of such actions).
5. For both the temporary and permanent versions of the same travel document. In the event of such loss, an Insured Person may claim either one (1) version but not both.

SECTION 6 - DELAY COVERAGE

6a. Travel Delay

The Company shall pay HK\$300 for the first full five (5) hours of delay, then HK\$700 for each of the following full ten (10) hours of delay up to the Maximum Benefit as stated in the Schedule of Benefits in the event that the Common Carrier in which the Insured Person has arranged to travel is delayed for at least five (5) hours from the departure or arrival time specified in the itinerary provided to the Insured Person by the Common Carrier, where such delay is caused directly by inclement weather, natural disasters, equipment failure, hijack or strike by the employees of the Common Carrier during the insured Journey.

Departure or arrival delay will be calculated from the original scheduled departure or arrival time specified in the itinerary provided by the Common Carrier to the Insured Person until the actual departure or arrival time of a) the original Common Carrier or b) the first available alternative transportation offered by that Common Carrier management.

The Insured Person can only claim for either departure or arrival delay of the same delayed Common Carrier.

This coverage is effective only if this insurance is purchased before the announcement of any event or occurrence leading up to the relevant delay of the Common Carrier by the authorized representative/management of the Common Carrier.

Exclusions Applicable to Section 6a - Travel Delay

No benefits will be provided for:

1. Failure of the Insured Person to obtain written confirmation from the Common Carrier on the number of hours of and the reason for such delay.
2. Any loss arising from any event or occurrence leading up to the relevant delay which is announced before this insurance is purchased.
3. Any loss arising from late arrival of Insured Person at the airport or port (i.e. arrival at a time later than the time required for check-in or booking-in except for the late arrival due to strike by the employees of the Common Carrier).
4. Any loss arising from failure of Insured Person to get on-board the first available alternative transportation offered by the administration of the relevant Common Carrier.
5. Any consequential loss arising from the late arrival of a preceding Common Carrier that causes subsequent delays/misconnections of each Common Carrier in which the Insured Person has arranged to travel during the course of the insured Journey.
6. Any loss claimed under Section 4b.(2) (Journey Re-arrangement) arising from the same cause.

6b. Baggage Delay

The Company shall pay the Maximum Benefit as stated in the Schedule of Benefits in consequence of temporary deprivation of the Insured Person's baggage for over ten (10) hours from the time of arrival at the destination due to the misdirection in delivery of the baggage by a Common Carrier on or in which the Insured Person is traveling during the insured Journey. This benefit can only be utilized once during the insured Journey.

Exclusions Applicable to Section 6b - Baggage Delay

No benefits will be provided:

1. For the failure of the Insured Person to obtain written confirmation from the Common Carrier as to the number of hours and the reason for such delay.
2. With respect to any of the Insured Person's baggage which the Insured Person either intentionally sent by a different Common Carrier than the one in which the Insured Person was traveling, or with respect to any baggage, souvenir or other items which the Insured Person mailed or shipped separately.
3. For any loss claimed under Section 5a (Baggage and Personal Effects) and Section 10. (Golf Protection)



arising from the same cause.

SECTION 7 - PERSONAL LIABILITY

The Company shall indemnify the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for legal liability to a third party arising during the insured Journey as a result of:

1. death or accidental bodily Injury to a third party;
2. accidental loss of or damage to property of a third party.

However, the Insured Person must not make any offer or promise of payment or admit his/her fault to any other party, or become involved in any litigation without the Company's written approval.

Exclusions Applicable to Section 7 - Personal Liability

No benefits will be provided for:

1. Property of any person who is the Insured Person, Insured Person's Immediate Family Member or employer or deemed by law to be his/her employee.
2. Liability to any person who is the Insured Person's Immediate Family Member or employer or deemed by law to be his/her employee.
3. Property which belongs to the Insured Person or is in his/her care of custody or control.
4. Any liability assumed under contract.
5. Liability relating to the willful, malicious, or unlawful act on the part of the Insured Person.
6. Liability arising from the ownership, possession or use of vehicles, aircraft, watercraft, firearms or animals.
7. Liability arising from the undertaking of any trade, business or profession.
8. Liability arising from any criminal acts.

SECTION 8 - CREDIT CARD PROTECTION

In the event of a claim payable for the accidental death of the Insured Person under Section 2 (Personal Accident), the Company shall also reimburse the estate of the Insured Person for any outstanding balance charged to the Insured Person's credit card(s) for goods purchased by the Insured Person during the insured Journey up to the Maximum Benefit stated in the Schedule of Benefits.

Exclusions Applicable to Section 8 - Credit Card Protection

No benefits will be provided for any of the followings:

1. Interest accrued or financial charges on the outstanding expenses.
2. Where this cover is available under any other insurance policy.
3. An accidental death which is a consequence of any kind of disease or sickness.

SECTION 9 - LOSS OF HOME CONTENT

The Company shall reimburse the Insured Person up to the Maximum Benefit stated in the Schedule of Benefits for the loss or damage to household contents owned, used or worn by the Insured Person contained within his/her Primary Residence in Hong Kong as a direct result of burglary while the Insured Person is traveling on the insured Journey. Such loss must be reported to the police and supported by written documentation and report from the police.

The Company may make payment or at its opinion reinstate or repair subject to due allowance for wear and tear and depreciation in respect of articles more than one (1) year old.

Exclusions Applicable to Section 9 - Loss of Home Content

No benefits will be provided:

1. Arising out of burglary while the Insured Person's Primary Residence in Hong Kong or any part thereof is unoccupied for more than thirty (30) days from or prior to the departure date of the insured Journey.
2. For any loss/ damage of bonds, bills of exchange, cash, coins, cheques, promissory notes, postal or money orders, record or book or similar tokens, luncheon voucher or other coupons, stored value cards, credit cards, deeds, documents of title, manuscripts, medals, passports, stamps, share certificates, contact or corneal lenses, mobile / portable telephone, travel tickets, foodstuffs, animals and motor vehicles (including accessories), motorcycles, boats, motors, any other conveyances, loss of data recorded on tapes, cards, diskettes or otherwise.
3. For any loss not reported to the police within twenty-four (24) hours after the Insured Person returns back to Hong Kong after the insured Journey and a police report for such loss not having been obtained.
4. For shortage due to error, omission, exchange or depreciation in value.
5. For special equipment or apparatus used in connection with any profession, business or employment, or items which are insured under a separate insurance policy.
6. For malicious damage or vandalism by any person lawfully in the Primary Residence in Hong Kong.
7. For loss arising from the Insured Person not taking all reasonable efforts to take due care and precautions for the safeguarding and security of his/her home contents within his/her Primary Residence in Hong Kong to avoid or to minimize any claim and loss under this Policy.

SECTION 10 - GOLF PROTECTION (OPTIONAL BENEFIT)

This benefit is only applicable if specifically included and endorsed in the Policy Schedule.

10a. Golf Baggage

The Company will pay the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for theft of or damage to any Golf Baggage carried by the Insured Person during an insured Journey. If any damaged article of Golf Baggage is proven to be beyond economical repair, a claim will be dealt with as if such article was lost. The Company may make payment or at its opinion reinstate or repair such article subject to due allowance for wear and tear.

10b. Hire Golf Equipment

The Company will reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for the cost of hiring Golf Equipment if the Insured Person's Golf Equipment is lost, stolen or damaged during the insured Journey.

10c. Loss of Green Fees

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for the amount of any green fees or golf tuition fees or any fees for hiring any Golf Equipment in connection with such golf course or tuition, which was paid in advance by the Insured Person but not refundable or subsequently forfeited in the event the Insured Person not being able to take part in or use such golf course or tuition during the insured Journey due to the Serious Injury or Serious Sickness of the Insured Person.

The amount of reimbursement payable by the Company will be calculated in proportion to the number of days of such golf course or tuition not taken part or unused by the Insured Person.

Exclusions Applicable to Section 10 - Golf Protection

No benefits will be provided:

1. For accidental breakage or damage of the Golf Baggage or Golf Equipment while in use.
2. Any loss or damage caused by wear and tear, gradual deterioration, moths, vermin, inherent vice or damage sustained due to any process initiated by the Insured Person to repair, clean or alter any Golf Baggage or Golf Equipment.
3. Any loss of or damage to hired or leased Golf Baggage or Golf Equipment.
4. Any loss of or damage to property resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, Terrorist Act or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate such property; or in respect of any property which is contraband or which is or has been illegally transported or traded.
5. Any loss or damage to property insured under any other insurance, or which could be reimbursed for by a Common Carrier, a hotel, and any service providers or otherwise.
6. Any loss of or damage to Golf Baggage or Golf Equipment which functions normally after it has been fixed or repaired by a third party.
7. With respect to any of the Insured Person's baggage which the Insured Person either intentionally sent by a different Common Carrier than the one in which the Insured Person was traveling, or with respect to any baggage, souvenir or other items which the Insured Person mailed or shipped separately.
8. Any loss of the Insured Person's Golf Baggage or Golf Equipment when it is left unattended in a public place or as a result of the Insured Person's failure to take due care and precautions for the safe guard and security of such property.

9. Any loss or damage while in the custody of a hotel or Common Carrier, unless reported immediately on discovery in writing to such hotel or Common Carrier within three (3) days and a Property Irregularity Report is obtained in the case of the event occurred in an airline.
10. Any loss not reported to the police within twenty-four (24) hours from occurrence of the incident and such police report is not obtained at the place of loss.
11. For the same loss under Section 5a. (Baggage and Personal Effects) and Section 6b (Baggage Delay) arising from the same cause.
12. Loss by any mysterious disappearance.
13. Receipts submitted which are not in the Insured Person's name.

SECTION 11 - CRUISE VACATION (OPTIONAL BENEFIT)

This benefit is only applicable if specifically included and endorsed in the Policy Schedule.

11a. Additional Journey Cancellation and Interruption

The Maximum Benefit of the Journey Cancellation and Journey Interruption shall be increased by the Maximum Benefit of this benefit as stated under in the Schedule of Benefit

All Exclusions Applicable to Section 4 - Journey Cancellation And Interruption are applicable under this section.

11b. Cruise Cancellation And Interruption

The Company shall reimburse the Insured Person up to the Maximum Benefit stated in the Schedule of Benefits for forfeiture of payments made in relation to the cruise tour and /or additional and reasonable travel fare incurred by the Insured Person to go to the next scheduled destination of the cruise tour, if any, for the purpose of re-joining the cruise tour in the event that the Common Carrier in which the Insured Person has arranged to travel to board the cruise is delayed for at least eight (8) hours from the scheduled arrival time specified in the itinerary due to inclement weather, natural disasters, equipment failure, hijack or strike by the employees of the Common Carrier during the insured Journey which solely and directly caused the Insured Person being unable to board the cruise at the designated boarding port in consequence.

The forfeiture of payments payable under Section 11b. (Cruise Cancellation & Interruption) will be calculated in proportion to the number of days of absence on the cruise.

Exclusions Applicable to Section 11b - Cruise Cancellation And Interruption

No benefits will be provided:

1. In respect of any loss that is covered by any other existing insurance scheme, government program, or which will be paid or refunded by a cruise, hotel, airline, travel agent or any other provider of travel and/or accommodation.
2. If the Insured Person fails to obtain written confirmation from the Common Carrier on the number of hours of and the reason for such delay.
3. In respect of any loss arising from any event or occurrence leading up to the relevant delay which is announced before this insurance is purchased.
4. In respect of any loss arising from late arrival of Insured Person at the airport or port (i.e. arrival at a time later than the time required for check-in or booking-in except for the late arrival due to strike by the employees of the Common Carrier).
5. Arising from failure of Insured Person to get on-board the first available alternative transportation offered by the administration of the relevant Common Carrier.
6. In respect of any loss claimed under Section 4 (Journey Cancellation and Interruption) arising from the same cause.

11c. Excursion Tour Cancellation

The Company will pay the Insured Person up to the Maximum Benefit stated in the Schedule of Benefits for the forfeiture of payments made in relation to the excursion tour organized by the cruise management if the excursion tour is cancelled due to Injury or Sickness of the Insured Person or inclement weather at the planned destination.

Exclusions Applicable to Section 11c - Excursion Tour Cancellation

No benefits will be provided:

1. In respect of any loss that is covered by any other existing insurance scheme, government program, or which will be paid or refunded by a cruise, hotel, airline, travel agent or any other provider of travel and/or accommodation.

11d. Satellite Phone Fee

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for satellite phone call expenses incurred by the Insured Person whilst on board a cruise during the insured Journey, in the event that the Insured Person must return directly to Hong Kong following Injury or Sickness of the Insured Person or Traveling Companion which prevents the Insured Person from continuing the insured Journey.

Exclusions applicable to Section 11d. Satellite Phone Fee:

No benefits shall be provided for any loss:

1. For failure to furnish an official receipt issued by the satellite phone service provider as proof of satellite phone call expenses incurred by the Insured Person.
2. For failure to obtain and provide a written report from the Qualified Medical Practitioner certifying the Injury or Sickness suffered by the Insured Person or Traveling Companion whilst on board the cruise.
3. That is covered by any other existing insurance scheme, government program, or which will be paid or refunded by a cruise, hotel, Common Carrier, travel agent or any other provider of travel and/or accommodation.
4. That arises from any circumstances leading to the cancellation and/or disruption of his/her insured Journey before the purchase of this travel insurance.

SECTION 12 - SCUBA DIVING (OPTIONAL BENEFIT)

This benefit is only applicable if specifically included and endorsed in the Policy Schedule.

12a. Dive Tour

The Company will pay up to Maximum Benefits stated in the Schedule of Benefits in respect of proportionate loss of the Insured Person's irrecoverable dive tour costs paid or contracted to be paid prior to the insured Journey if the Insured Person is certified by a Qualified Medical Practitioner as being unfit to dive due to Sickness or Injury during the insured Journey

If the Sickness and Injury occurred during diving, the Insured Person shall be diving:

1. under the direction of an accredited diving instructor or dive guide and up to depths of 18 metres; or
2. within the maximum depths for which they are certified to dive by an accredited diving instructor.

Exclusions Applicable to 12a - Dive Tour:

No benefits shall be provided for any loss:

1. where a medical certificate has not been obtained from a Qualified Medical Practitioner confirming that cancellation or interruption of the dive tour is medically necessary.

12b. Equipment Hire

The Company will pay up to the Maximum Benefits stated in the Schedule of Benefits in respect of the costs of hiring Diving Equipment as a result of the accidental loss, theft of, damage to or temporary loss in transit for more than 12 hours of the Insured Person's Diving Equipment during the insured Journey.

Exclusions Applicable to 12b - Equipment Hire

No benefits shall be provided for any loss:

1. if the Insured Person does not exercise reasonable care and safety and supervision of their own property;
2. for loss, destruction, damage or theft of the Insured Person's Diving Equipment left unattended in a public place, or place where members of the general public have access;
3. if the Insured Person does not obtain a written police report within 24 hours of the discovery in the event of loss or theft of their Diving Equipment;
4. if the Insured Person's Diving Equipment is lost, damaged or delayed in transit and does not:
 - a. Notify the carrier (airline, shipping company etc) immediately and obtain a written carriers report (or Property Irregularity Report in case of an airline) or,
 - b. Follow up in writing within 7 days to obtain a written carriers report or Property Irregularity Report in case of an airline), if you are unable to obtain one immediately after the loss occurs.

GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS

THE COMPANY WILL NOT PAY UNDER ANY SECTION OF THIS POLICY FOR LOSS, INJURY, DAMAGE OR LIABILITY SUFFERED AND/OR SUSTAINED BY OR ARISING DIRECTLY OR INDIRECTLY AS A RESULT OF OR IN CONNECTION WITH ANY OF THE FOLLOWING:



- War, civil war, invasion, insurrection, revolution, use of military power or usurpation of government or military power;
- This Policy will not cover any loss, injury, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Cuba, Iran, Syria, Sudan, North Korea, or the Crimea region;
- This Policy will not cover any claim, loss, injury, damage or legal liability suffered or sustained by residents of Cuba, Iran, Syria, Sudan, North Korea, or the Crimea region;
- The Company shall not be deemed to provide cover and the Company shall not 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 the Company, its parent company or its ultimate controlling entity to any sanction, prohibition, or restriction under United Nations resolutions or the trade or economic sanctions, laws, or regulations of the European Union or the United States of America;
- Any illegal or unlawful act by the Insured Person or confiscation, detention, destruction by customs or other authorities;
- Any prohibition or regulations by any government (except where a government is subjecting an Insured Person to Compulsory Quarantine as covered under Section 4a(ii) and 4b(3)); any breach of government regulation or any failure by the Insured Person to take reasonable precautions to avoid a claim under this insurance following the warning of any intended strike by the employees of a Common Carrier, riot or civil commotion, inclement weather, natural disasters, or epidemic;
- Any Terrorist Act except for Section 1 (Emergency Medical Expenses and Assistance), Section 2 (Personal Accident), Section 3 (Loss of Income Benefit) and Section 8 (Credit Card Protection).
- The Insured Person is not taking all reasonable efforts to safeguard his/her property/money, to avoid injury or to minimize any claim under this insurance;
- Riding or driving in any kind of motor racing, competition, engaging in a professional capacity in any sport where an Insured Person would or could earn income or remuneration from engaging in such sport as a source of income;
- Any loss which has connection with the effects of alcohol or drugs other than those prescribed by a Qualified Medical Practitioner;
- Pregnancy or childbirth, and any Injury or Sickness associated with pregnancy or childbirth;
- Suicide or attempted suicide or intentional self-injury, or self-exposure to needless peril;
- Any Pre-Existing Condition, congenital and heredity condition;
- AIDS or any Injury or Sickness commencing in the presence of a sero positive test for HIV and related disease, sexually transmitted disease;
- Psychosis, sleep disturbance disorder, mental or nervous disorders;
- The Insured Person engaging in naval, military or airforce service or operations; armed force service; being as a crew member or an operator of any air carrier; testing of any kind of conveyance; engaging in any kind of labor work; engaging in offshore activities like commercial diving, oil rigging, mining or aerial photography; handling of explosives; performing as actor/actress; being a site worker, fisherman, cook or kitchen worker; tour guide or tour escort;
- Any medical treatment received during an insured Journey which was made for the purpose of receiving medical treatment or if the insured Journey was undertaken while the Insured Person was unfit to travel; or the Insured Person is traveling against the advice of a Qualified Medical Practitioner;
- Any loss and expenses that can be reimbursed or recovered from any other source except for Section 1d (Overseas Hospital Cash), Section 2 (Personal Accident), Section 3 (Loss of Income Benefit) and Section 6 (Delay Coverage);
- Any Insured Person who is a People's Republic of China passport holder and travels to/within People's Republic of China (except Hong Kong, Taiwan and Macau). However, this exclusion will be waived if the Insured Person mentioned in the aforesaid has an official document issued by the overseas Government other than People's Republic of China (except Hong Kong, Taiwan and Macau) as proof that he/she is a legal resident of the respective country but traveling with a People's Republic of China passport.

DEFINITIONS

"Accident" means an unforeseen and involuntary event which causes an Injury during an insured Journey.
"Accommodation" means room charge only.
"Acquired Immune Deficiency Syndrome" or **"AIDS"** shall have the meanings assigned to it by the World Health Organization including Opportunistic Infection, Malignant Neoplasm, Human Immune Deficiency Virus (HIV) Encephalopathy (Dementia), HIV Wasting Syndrome or any disease or sickness in the presence of a sero-positive test for HIV.
"Chinese Medicine Practitioner" shall mean any Chinese bonesetter, acupuncturist or Chinese medicine practitioner who is legally registered as a Chinese medicine practitioner under the Chinese Medicine Ordinance (Cap 549, Laws of Hong Kong), but excluding a Chinese Medicine Practitioner who is the Insured Person or an Immediate Family Member of the Insured Person.
"Close Business Partner" shall mean a close business partner of an Insured Person proved as such to the satisfaction of the Company on the basis of business registration or corporate registration documentation acceptable to the Company.
"Common Carrier" shall mean any bus, coach, taxi, ferry, hovercraft, hydrofoil, ship, train, tram or underground train provided and operated by a carrier duly licensed for the regular transportation of fare-paying passengers, and any fixed-wing aircraft provided and operated by an airline or an air charter company which is duly licensed for the regular transportation of fare-paying passengers and any helicopter provided and operated by an airline which is duly licensed for the regular transportation of fare-paying passengers and operating only between established commercial airports or licensed commercial heliports, and any regularly scheduled airport limousine operating on fixed routes and schedules.
"Compulsorily Quarantined" or **"Compulsory Quarantine"** means the Insured Person is ordered to be quarantined compulsorily by the government or other relevant authorities.
"Confinement" or **"Confined"** means the period the Insured Person is registered as an in-patient in a Hospital because of a medical necessity under the professional care of a Qualified Medical Practitioner and which the Hospital levies a charge for room and board for the treatment of an Injury or Sickness for such confinement.
"Diving Equipment" means self contained underwater breathing apparatus, buoyancy compensators, weight belt and weights, fins, masks, snorkels, knives, torches, and flares, surface markers, buoys and reels, wet and dry suits, pressure and depth gauges, compasses, and dive computers.
"Effective Date" means either 1) the issue date of the Policy or 2) the date the Journey Cancellation benefit becomes effective, whichever is later.
"Golf Baggage" means golf clubs and golf bags.
"Golf Equipment" means any golf club, golf bag or golf trolley (other than self-propelled caddie car).
"Hong Kong" means the Hong Kong Special Administrative Region or the HKSAR.
"Hospital" shall mean a hospital (other than an institution for the aged, chronically ill or convalescent rest or nursing home or a place for alcoholics or drug addicts, or for any similar purpose) operated pursuant to law for the care and treatment of sick or injured persons with organized facilities for diagnosis and surgery and having 24 hours nursing service and medical supervision.
"Immediate Family Member" means Insured Person's spouse, parent, parent-in-law, grandparent, son or daughter, brother or sister, grandchild, legal guardian.
"Injury" shall mean the bodily injury sustained in an Accident directly and independently of all other causes.
"Insured Person" shall mean the Insured Person(s) named in the Policy Schedule or subsequently endorsed herein.
"Journey" wherever used in this Policy shall mean the period of travel commencing from when the Insured Person leaves an immigration counter of Hong Kong for the purpose of commencement of his/ her journey until the Insured Person's arrival at any immigration counter of Hong Kong after the said journey or the expiry date of the Period of Insurance, whichever first occurs.
"Loss of" or **"Loss of Use"** shall mean the Permanent total functional disablement or complete and permanent physical severance of a hand at or above the wrists or of a foot at or ankle joints, and as used with reference to eyes, shall mean the entire and irrecoverable Loss of Sight.
"Loss of Hearing" shall mean Permanent irrecoverable loss of hearing where:
If a db - Hearing loss at 500 Hertz If b db - Hearing loss at 1,000 Hertz
If c db - Hearing loss at 2,000 Hertz If d db - Hearing loss at 4,000 Hertz
1/6 of (a+2b+2c+d) is above 80dB.
"Loss of Speech" shall mean the disability in articulating any three of the four sounds which contribute to the speech such as the Labial sounds, the Alveolopalatal sounds, the Palatal sounds and the Velar sounds or total loss of vocal cord or damage of speech center in the brain resulting in Aphasia.
"Macau" means the Macau Special Administrative Region or the Macau SAR.
"Malignant Neoplasm" shall include but not be limited to Kaposi's sarcoma, central nervous system lymphoma and/or other malignancies now known or which become known as immediate causes of death, an illness, or disability, in the

presence of Acquired Immune Deficiency Syndrome.

"Maximum Benefit" means the maximum benefit amount of each of the benefits covered under this Policy as stated in the Schedule of Benefits.

"Medically Necessary Expenses" means expenses incurred and paid by the Insured Person to a legally Qualified Medical Practitioner, physician, surgeon, nurse, hospital and/or ambulance service for medical, surgical, X-ray, hospital or nursing treatment including the cost of medical supplies and ambulance hire but excluding the cost of dental treatment unless such treatment is necessarily incurred to sound and natural teeth and is caused by Injury, and excluding any expenses incurred under Section 1b. (Emergency Medical Evacuation) and Section 1c. (Repatriation of Remains) of this Policy. All treatment must be prescribed by a Qualified Medical Practitioner in order for expenses to be reimbursed under this Policy. Provided that in the event an Insured Person becomes entitled to a refund of all or part of such expenses from any other source, the Company will only be liable for the excess of the amount recoverable from such other sources.

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

"Pandemic Influenza" means an epidemic of an influenza virus that spreads on a worldwide scale and infects a large proportion of human population to the extent that the World Health Organization has announced that the level of Epidemic and Pandemic Alert and Response is phase 5 or above.

"Percentage of Principal Sum" is the Percentage of Principal Sum as stated in the Benefit Table in Section 2 (Personal Accident) herein used to calculate the Maximum Benefits payable.

"Period of Insurance" means the Period of Insurance under the Policy Schedule attached to the Policy.

"Permanent" shall mean lasting twelve (12) consecutive months from the date of an Accident and at the expiry of the twelve (12) months period being beyond any hope of improvement.

"Permanent Total Disablement" shall mean disablement which commences ninety (90) days from the date of the Accident and which is Permanent and which entirely prevents an Insured Person from attending to any business or gainful occupation of any and every kind or if he/she has no business or occupation from attending to any duties, which would normally be carried out by him/her in his/her daily life.

"Policy" means this Policy and any other documents referred to in Clause 1 of the General Provision section.

"Policy Schedule" means the attachment to this Policy entitled "Policy Schedule" as maybe amended by the Company from time to time.

"Pre-existing Condition" means any condition for which the Insured Person, Immediate Family Member, Close Business Partner or Traveling Companion received from or were recommended by a Qualified Medical Practitioner prior to the Effective Date of this Policy for: a) any medical treatment; b) any diagnosis; c) any consultation; or d) any prescribed drugs leading to a claim under this Policy; or any Symptom which existed prior to the Effective Date leading to a claim under this Policy.

"Primary Residence" means the house or building permanently occupied by the Insured Person for the sole purpose of private dwelling.

"Principal Sum" means the Maximum Benefit.

"Qualified Medical Practitioner" shall mean any person legally authorized by the Government with jurisdiction in the geographical area of his or her practice to render medical or surgical service, but excluding a qualified medical practitioner who is the Insured Person or an Immediate Family Member of the Insured Person.

"Schedule of Benefits" means the Schedule of Benefits under the Policy Schedule attached to the Policy and may be amended by the Company from time to time.

"Serious Injury Or Serious Sickness" means an injury or sickness for which the Insured Person or Traveling Companion requires treatment and which is certified by a Qualified Medical Practitioner as being dangerous to life and as rendering the Insured Person unfit to travel or continue with his/her original insured Journey. When "Serious Injury Or Serious Sickness" is applied to the Insured Person's Immediate Family Member(s) or Close Business Partner, it shall mean injury or sickness for which the Insured Person's Immediate Family Member or Close Business Partner requires treatment and certified by a Qualified Medical Practitioner as being dangerous to life and which results in the Insured Person's discontinuation or cancellation of his/her original insured Journey.

"Sickness" means a sickness or disease which is contracted during the insured Journey directly and independently of any other cause and which commences during the insured Journey.

"Symptom" means a sign or an indication of disorder or disease experienced by an individual.

"Terrorist Act" shall mean 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. 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 also includes any act, which is verified or recognised by the (relevant) Government as an act of terrorism.

"Third Degree Burns" shall mean full thickness skin destruction due to burns.

"Traveling Companion" shall mean the person who is accompanying the Insured Person for the whole insured Journey.

"Travel Ticket" means an economy class travel ticket purchased for traveling on any Common Carrier.

"Usual, Reasonable And Customary" shall mean an expense which: (1) is charged for treatment, supplies or medical services medically necessary for caring of Insured Person(s) under the care, supervision, or order of a Qualified Medical Practitioner; (2) does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred, and (3) does not include charges that would not have been made if no insurance existed.

"War" shall mean 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

- At the time this insurance becomes effective, the Insured Person must be fit to travel and not be aware of any circumstances which could lead to cancellation or disruption of the insured Journey, otherwise any claim could be forfeited.
- No refund of premium is allowed once the Policy has been issued.
- This Policy may not be renewed or extended. However, if any circumstance exists during the insured Journey which is outside the Insured Person's control and the insured Journey is extended beyond the period of Insurance stated in the Policy Schedule, the Company will automatically extend the Period of Insurance for a maximum ten (10) consecutive days without charge for such an extended period as is reasonably necessary for completion of the Insured Person's insured Journey.
- During the Period of Insurance, if more than one Journey commenced, insured Journey shall mean and refer only to the Journey that commenced earliest.
- The insured Journey must be commenced from Hong Kong.
- If the Insured Person is covered under more than one (1) comprehensive voluntary travel insurance policies underwritten by the Company for the same trip, only the travel insurance policy with the greatest compensation will apply and benefits thereunder be payable.
- The Policy is only valid for conventional leisure travel or business travel (limited to administrative duty) purpose only and shall not apply to persons undertaking expeditions, treks or similar journeys.
- The maximum period of an insured Journey cannot exceed one hundred and eighty-two (182) days per Journey.
- Any non-disclosure or fraudulent misrepresentation in any particular material shall lead to the whole Policy being void from inception.

GENERAL PROVISIONS

1. ENTIRE CONTRACT

The Policy Schedule, Travel Insurance Terms and Conditions, and endorsements (if any) shall constitute the entire contract of insurance. No statement made by the applicant for insurance not included herein shall avoid the Policy or be used in any legal proceedings hereunder unless such statement is fraudulent. No agent has authority to change this insurance or to waive any of its provisions. No change in this insurance shall be valid unless approved by the Company and such approval is endorsed hereon.

2. ELIGIBILITY

Age limit: 70 or below.



Family Plan: a legal couple and all of their legitimate children aged under 17.

3. TIME OF NOTICE OF CLAIM

Written notice of loss on which a claim may be based must be given to the Company within thirty (30) days after the date of the incident causing such loss and in the event of accidental death, immediate notice thereof must be given to the Company.

4. FORMS FOR PROOF OF LOSS

The Company, upon receipt of such notice, will furnish to the claimant such forms as are usually furnished by it for filing proofs of loss. If such forms are not so furnished within fifteen (15) days after the receipt of such notice, the claimant shall be deemed to have complied with the requirements of this Policy as to proof of loss upon submitting within the time fixed in this Policy for filing proofs of loss, written proof covering the occurrence, character and extent of the loss for which a claim is made. All certificates, information and evidence required by the Company shall be furnished at the expense of the Insured Person/claimant or his legal personal representatives and shall be in such form and of such nature as the Company may prescribe.

5. TIME FOR FILING PROOF OF LOSS

Affirmative proof of loss must be furnished to the Company by the Insured Person at its said office in case of a claim for such loss within sixty (60) days after the termination of the period for which the Company is liable. If it shall be shown not to have been reasonably possible to give such notice within such time by the Insured Person, such proof is furnished as soon as reasonable possible and within one (1) year after the date of such loss.

6. SUFFICIENCY OF NOTICE

Such notice by or on behalf of the Insured Person given to the Company, with particulars sufficient to identify the Insured Person shall be deemed to be notice to the Company. Failure to give notice within the time provided in this Policy shall not invalidate any claim if it shall be shown not to have been reasonably possible to give such notice and that notice was given as soon as was reasonably possible.

7. IMMEDIATE PAYMENT OF INDEMNITIES

All indemnities provided in this Policy for loss other than that of time on account of disability will be paid immediately after receipt of due proof.

8. TO WHOM INDEMNITIES PAYABLE

Any indemnity paid for loss of life shall be payable to the Insured Person's estate. All other indemnities shall be payable to the Insured Person except for Emergency Medical Evacuation and Repatriation of Remains where relevant amounts will be paid directly to the provider of service in accordance with the terms of this Policy.

9. FRAUDULENT CLAIMS

If the claim be in any respect fraudulent or if any fraudulent means or devices be used by the Insured Person or anyone acting on the behalf to obtain any benefit under this Policy, all benefit in respect of such claims shall be forfeited.

10. RIGHT OF RECOVERY

In the event that authorization of payment and/or payment is made by the Company and/or its authorized representative for a claim which is not covered under this Policy or when the limit of liability of this insurance exceeds, the Company reserves the right to recover the said sum or excess from the Insured Person.

11. RIGHTS OF THIRD PARTIES

Nothing in this Policy is intended to confer a direct enforceable benefit on any party other than the Insured Person(s) and the Company, whether pursuant to the Contracts (Rights of Third Parties) Ordinance or otherwise. It is hereby noted and agreed, however, that the Company and the Insured Person(s) named in the Schedule alone have the right to amend this Policy by agreement or (if any such rights exist in the Policy) to cancel or terminate the Policy, without giving notice, or requiring the consent of any other person.

12. MEDICAL EXAMINATION AND TREATMENT

The Company at its own expense shall have the right and opportunity to conduct medical examination on the Insured Person when and as often as it may reasonably require during a pending claim under this Policy and to make an autopsy in the case of death where it is not forbidden by law. The Insured Person shall as soon as possible after the occurrence of any Injury or Sickness obtain and follow the advice of a duly Qualified Medical Practitioner and the Company shall not be liable for any consequences arising by reason of the Insured Person's failure to obtain or follow such advice and use such appliances or remedies as may be prescribed.

13. SUBROGATION

In the event of any payment under this Policy, the Company shall be subrogated to all the Insured Person's rights of recovery therefore against any person or organization and the Insured Person shall execute and deliver instruments and papers and do whatever else is necessary to secure such rights. The Insured Person shall take no action after the loss to prejudice such rights.

14. LEGAL ACTIONS

No action at law or in equity shall be brought to recover on this Policy prior to the expiration of sixty (60) days after written proof of loss has been furnished in accordance with the requirements of this Policy. No such action shall be brought after the expiration of three (3) years after the time written proof of loss is required to be furnished.

15. LIMITATIONS CONTROLLED BY STATUTE

If any time limitation of this insurance, with respect to giving notice of claim or furnishing proof of loss, is less than that permitted by the law of Hong Kong, such limitation is hereby extended to agree with the minimum period permitted by such law.

16. COMPLIANCE WITH POLICY PROVISIONS

No notice of assignment of interest under this Policy shall invalidate all claims hereunder.

17. POLICY INTERPRETATION

This Policy is subject to the laws of the Hong Kong and the parties hereto agree to submit to the jurisdiction of the courts of the Hong Kong.

18. ASSIGNMENT

No notice of assignment of interest under this Policy shall be binding upon the Company unless and until the original or a duplicate thereof is filed at the Home Office of AIG Insurance Hong Kong Limited, 7/F, One Island East, 18 Westlands Road, Island East, Hong Kong and the Company's consent to such assignment is endorsed. The Company does not assume any responsibility for the validity of an assignment. No provision of the charter, constitution or by-laws of the Company shall be used in defense of any claim arising under this Policy, unless such provision is incorporated in full in this Policy.

19. DATA PRIVACY

The Insured Person / Policyholder / Applicant agree(s) that:

- (a) the personal data collected during the application process or administration of this policy may be used by AIG HK for the purposes stated in its Data Privacy Policy, which include underwriting and administering the insurance policy being applied for (including obtaining reinsurance, underwriting renewals, data matching, claim processing, investigation, payment and subrogation).
- (b) AIG HK may use the Insured Person's/ Policyholder's/ Applicant's contact details (name, address, phone number and e-mail address) to contact him/her about other insurance products provided by the AIG group (assuming AIG HK has obtained the agreement of the Insured Person / Policyholder / Applicant to use such contact details for this purpose).
- (c) AIG HK may transfer the personal data to the following classes of persons (whether based in Hong Kong or overseas) for the purpose identified:
 - i) third parties providing services related to the administration of this policy, including reinsurers (per (a) above);
 - ii) financial institutions for the purpose of processing this policy and obtaining policy payments (per (a) above);
 - iii) in the event of a claim, loss adjusters, assessors, third party administrators, emergency providers, legal services providers, retailers, medical providers and travel carriers (per (a) above);
 - iv) for the purpose of conducting direct marketing activities (per (b) above), marketing companies authorized by the AIG group;
 - v) another member of the AIG group (for all of the purposes stated in (a) and (b)) in any country; or
 - vi) other parties referred to in AIG HK's Data Privacy Policy for the purposes stated therein.
- (d) The Insured Person / Policyholder / Applicant may gain access to, or request correction of his/her personal data (in both cases, subject to a reasonable fee), or change the option he/she previously elected in relation to the use of his/her contact details for direct marketing at any time, by writing to the Privacy Compliance Officer of AIG Insurance Hong Kong Limited at GPO Box 456 or cs.hk@aig.com. The same addresses may be used to contact AIG HK with any comments in relation to the services it provides. The full version of AIG HK's Data Privacy Policy can be found at www.aig.com.hk.

20. CLERICAL ERROR

Clerical errors by the Company shall not invalidate insurance otherwise valid nor continue insurance otherwise not valid.

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旅遊智易保 (單次旅程計劃)

旅遊保險條文及條款

當美亞保險香港有限公司(以下稱爲“本公司”)收妥保費後,即依據**保障列表**或批註內的定義、不保事項、限制、條款和條件,同意承保名列於**保障列表**內之**受保人**及根據本保單之條文及條款對在受保日期內所出發和發生的旅程(以下稱爲“受保旅程”)之損失作出賠償。
保障列表、旅遊保險條文及條款和批註(如有者)將構成完整的保險契約(以下稱爲“保單”)。
此保險只適用於常規的假期旅遊及文職商務旅遊,而不適用於探險跋涉或類似旅程。

保障範圍

第 1 項 - 緊急醫療費用及援助

1a. 醫療費用

在此項下,若**受保人**於受保**旅程**期間蒙受**損害**或**疾病**而引致在返回香港前治療的醫療費用,本公司將以不超過**保障權益表**所規定之**最高賠償額**賠償**受保人**有關醫療費用,該醫療費用必須是(i)由首次蒙受該**損害**或**疾病**起 365 日以內所引致的,及(ii) **實際、合理及慣常醫療必需費用**。

- 覆診費用

如**受保人**於返回香港後因以上的**損害**或**疾病**而需要覆診(意即繼續接受在**受保人**回港前有關**損害**或**疾病的治療**),本公司將賠償不超過 HK\$50,000 的覆診費用,但該覆診費用必須是(i)返回香港後 3 個月內引致的,及(ii)由執業西醫之**合格醫生**收取的**實際、合理及慣常醫療必需費用**。此覆診費用亦包括中醫診治,每日每症最高為 HK\$150,最高累積至 HK\$1,800。
在任何情況下,第 1a 項「醫療費用」的總賠償額不可超過**保障權益表**所規定**最高賠償額**。

1b. 緊急醫療運送

若**受保人**在受保**旅程**期間於海外蒙受**損害**或感染**疾病**,於本公司或其授權代表(表)的意見下,認為醫療上適合將**受保人**運送至其他地方接受治療,或運送回香港或日常居住地,而本公司或其授權代表亦會根據**受保人**當時的受傷程度或病情,安排最適當之醫療運送方式,本公司則會直接支付該醫療運送所需之有關保障費用。
保障費用是指由本公司或其授權代表因緊急運送**受保人**而提供或安排之醫療運送、服務及設備等費用。

所有醫療運送方式及最終目的地均由本公司或其授權代表決定及根據當時醫療情況安排,包括租用空中或陸上救護車、航空運輸、鐵路或其他適合的運送方式。
受保人或其代表必須致電 Travel Guard 國際支援熱線 (852) 3516 8699 作出有關安排。

1c. 運返費用

若**受保人**在受保**旅程**期間因蒙受**損害**或感染**疾病**而死亡,本公司或其授權代表將安排運返**受保人**之遺體返回香港或日常居住地。本公司將直接支付有關保障費用。
此外,本公司將賠償由當地殯儀承辦者提供及執行的棺材、防腐和火化事宜上的實際費用。
受保人或其代表必須致電 Travel Guard 國際支援熱線 (852) 3516 8699 作出有關安排。

1d. 海外住院現金津貼

若**受保人**於受保**旅程**期間,因蒙受**損害**或感染**疾病**需入住當地醫院為留院病人,本公司將按**受保人**留院之日數每日賠償 HK\$500 予**受保人**,但不可超過**保障權益表**所規定之**最高賠償額**為上限。
在任何情況下,第 1d 項「海外住院現金津貼」的總賠償額不可超過**保障權益表**所規定之**最高賠償額**。

1e. 緊急啟程

若**受保人**在受保**旅程**期間死亡、遭遇**嚴重損害**或**嚴重疾病**,需要一名已成年之直系親屬前往或一名**旅遊夥伴**停留當地陪伴及/或照顧**受保人**,本公司將根據**保障權益表**所載**最高賠償額**為限賠償其合理的額外**住宿**費用及/或**旅遊票**。此保障只可在同一**旅程**中索償一次。

1f. 子女護送

若**受保人**在受保**旅程**期間,因遭受**嚴重損害**或感染**嚴重疾病**需入住當地醫院,而其同行之 15 歲以下之小童沒有其他直系親屬陪伴,本公司將根據**保障權益表**所載**最高賠償額**為限賠償一名直系親屬或一名**旅遊夥伴**之合理額外的**住宿**及/或交通費用,以便陪伴該名小童返回香港。

適用於第 1 項 - 緊急醫療費用及援助的不保事項

以下情況不受保障:

- 根據**合格醫生**之意見,在合理的情況下該項手術或治療可延期至返回香港後進行。
- 受保人**旅遊之目的為醫治**疾病**或**受保人**違反**合格醫生**之勸告出外旅遊。
- 一切毋須由**受保人**支付及/或已包括於旅遊費用中的支出。
- 未能提供**合格醫生**之醫療報告。
- 受保人**拒絕依循**合格醫生**之建議返回香港繼續治療,或在身體狀況許可下,拒絕繼續其受保**旅程**。
- 任何不經由本公司或其授權代表同意及提供服務的費用,除非**受保人**或其**旅遊夥伴**在緊急及不能控制的情況下無法致電 Travel Guard 國際支援熱線,在此情形下,本公司只補償**受保人**在同一情況下本公司或其授權代表會提供的服務而衍生的費用(只適用於第 1b 項「緊急醫療運送」)。
- 未經由本公司或其授權代表允許及安排之遺體運返(只適用於第 1c 項「運返費用」)。
- 任何於受保**旅程**完結後於香港以外地方的覆診費用。
- 任何醫院內獨立或私人房間、特別或私家看護的額外費用;非醫療用的個人服務,包括收音機、電話(第 1 項「海外住院現金津貼除外)及類似的物品;採購或採用特別支架、儀器或裝置的額外費用。
- 任何整容手術、眼睛折射造成的誤差、助聽器及佩戴眼鏡的驗光單,但於受保**旅程**期間因意外蒙受**損害**所引致的除外。
- 基於同一原因於第 1e 項「緊急啟程」及第 1f 項「子女護送」同時提出的索償。

第 2 項 - 人身意外保障

2a. 乘搭交通工具之意外

若**受保人**在受保**旅程**期間,以付款乘客身份(不是機師、操作員或空中服務員)乘搭或上落**公共交通工具**期間發生**意外**,於事故發生當日起計 90 天內在直接及並無其他原因下引致以下之損害事項,本公司將依據**保障權益表**及其**保額百分率**賠償予**受保人**。

此部份提供額外保障予**受保人**在乘搭或上落由旅行社安排的交通工具、或駕駛或乘坐汽車期間發生之**意外**,於事故發生當日起計 90 天內在直接及並無其他原因下引致以下之損害事項,本公司將依據**保障權益表**及其**保額百分率**賠償予**受保人**。

2b. 其他意外

若**受保人**在受保**旅程**期間,因遭遇**意外**而蒙受**損害**,而非上述第 2a 項「乘搭交通工具之意外」,於事故發生當日起計 90 天內在直接及並無其他原因下引致以下的損害事項,本公司將依據**保障權益表**及其**保額百分率**賠償予**受保人**。

保障列表

損害事項	保額百分率
意外死亡及永久傷殘	
1. 死亡	100%
2. 永久完全殘廢	100%
3. 永久及無法痊癒之四肢癱瘓	100%
4. 一眼或雙眼永久完全失明	100%
5. 喪失任何一肢或任何一肢永久完全喪失功能	100%
6. 喪失任何雙肢或任何雙肢永久完全喪失功能	100%
7. 雙耳完全失聰及喪失言語能力	100%

8. 永久完全失聰		
(a) 雙耳		75%
(b) 單耳		15%
三級程度燒傷		
部位	受損佔有關部位總面積之百分比	保額百分率
1. 頭部	達頭部總面積之 8%或以上	100%
	達頭部總面積之 5%至 8%以下	75%
	達頭部總面積之 2%至 5%以下	50%
2. 身體 (頭部以外)	達其餘身體部份總面積之 20%或以上	100%
	達其餘身體部份總面積之 15%至 20%以下	75%
	達其餘身體部份總面積之 10%至 15%以下	50%

賠償:

- 於同一**損害**中,本公司只負責賠償以上任何一項之損害事項,若遭受多於一項損害事項,本公司則以**最高賠償額**(即最高保額百分率)的事項及以不超過列於**保障權益表**所載之**最高賠償額**為賠償依據。
- 倘本公司已賠償以上保障表其中一項的損害事項,**受保人**所有的保障會即時終止,但不會影響該**意外**所導致之**損害**賠償事宜。
- 倘**受保人**蒙受**損害**前局部手足或器官已喪失功能,而在**損害**後變成全部殘廢,本公司會決定**保額百分率**作為賠償該**損害**所引致的殘廢部份,而於受保**意外**發生前已永久喪失功能的部份則不獲賠償。
- 此保單生效日期時,**受保人**年齡為 17 歲以下,本公司會根據第 2 項「人身意外保障」之保障表的損害事項及其**保額百分率**作出賠償,最高賠償至 HK\$250,000。

此部份提供額外保障予**受保人**在以下期間蒙受的**損害**:

- 當**受保人**於原定**公共交通工具**出發前 3 小時內直接由日常香港住所或工作地點前往香港入境事務處的期間以開始其**旅程**;
- 受保**旅程**完畢,當**受保人**回香港後 3 小時內直接由香港入境事務處返回日常住所或工作地點的期間。

暴露 - 倘**受保人**在受保**旅程**期間發生**意外**,及在無法避免的情況下身處於自然環境中(包括但不限於長期及嚴酷的天氣或環境狀況),並於**意外**發生後 12 個月內直接因此無法避免的情況下引致死亡或傷殘,本公司將按照**保障權益表**賠償予**受保人**。

失蹤處理 - 倘**受保人**在**旅程**中所乘搭之**公共交通工具**發生**意外**而導致失蹤、墮毀或沉沒,**受保人**因而失蹤及於該**意外**事件發生後連續 12 個月內仍無法尋回,則本公司有理由相信**受保人**已因該次**意外**死亡,並作出**人身意外**保障的賠償。但**受保人**的遺產管理員必須先填妥及遞交保證書,同意日後如發現**受保人**並未因該次**意外**導致死亡,將退回此項賠償予本公司。

適用於第 2 項 - 人身意外保障的不保事項

- 於此第 2 項保障,本公司不負責一切由**疾病**或**病毒**引致的**損害**。

第 3 項 - 緊急人息援助

若**受保人**於受保**旅程**中蒙受**損害**及於返回香港後,根據**合格醫生**之建議下不能返回其慣常及可賺取收入的工作最少 7 天,本公司會按每滿 1 週之病假賠償 HK\$1,250,最高賠償為 24 週及以不超過**保障權益表**為上限。

適用於第 3 項 - 緊急人息援助的不保事項

以下情況不受保障:

- 受保人**未能出示由其僱主發出證明**受保人**受僱狀況的正式或合法證明文件。
- 未能出示由**合格醫生**發出證明**受保人**不能返回其慣常及可賺取收入的工作之醫療報告。

第 4 項 - 旅程阻礙保障

4a. 取消旅程

若**受保人**於原定受保**旅程**出發前 90 天內因下列原因(以下(ii)及(iv)除外)而需要取消受保**旅程**,本公司以不超過**保障權益表**內所規定之**最高賠償額**賠償**受保人**無法由其他途徑取回其已支付及法律上須負責支付之**旅費**及/或**住宿**費用:

- 受保人**、其**直系親屬**、**密切商業夥伴**或**旅遊夥伴**死亡、遭受**嚴重損害**或患上**嚴重疾病**;
- 受保人**收到傳票需出庭作證、當陪審員或需被隔離;
- 受保人**於原定受保**旅程**出發前 1 星期內,突然爆發**公共交通工具**機構員工罷工、目的地廣泛性爆發傳染病、暴動或民亂。
- 受保人**及/或其**旅遊夥伴**之**香港主要住所**於受保**旅程**出發前 1 星期內因火災、水淹、地震或類似的天然災害,導致嚴重損毀,需要**受保人**及/或其**旅遊夥伴**於出發當日留於該處。

若**受保人**已開始其受保**旅程**,此第 4a 項「取消旅程」保障便不再生效。

4b. 旅程中斷

(1) 提早結束旅程

若**受保人**在受保**旅程**期間,因下列原因必須結束及縮短受保**旅程**返回香港,本公司將以不超過**保障權益表**內所規定之**最高賠償額**,賠償**受保人**不能退回之未享用的**旅費**及/或**住宿**費用及/或額外合理及/或實際的交通及/或住宿費用:

- 受保人**或於香港居住的**密切商業夥伴**死亡、蒙受**嚴重損害**、患上**嚴重疾病**或遭遇劫掠;
- 受保人**的**直系親屬**或**旅遊夥伴**死亡、蒙受**嚴重損害**或患上**嚴重疾病**;
- 在未能預料情況下,目的地突然爆發**公共交通工具**機構員工罷工、暴動或民亂、天然災害或廣泛性爆發傳染病,以致**受保人**不能繼續原定的受保**旅程**。

(2) 更改旅程

若**受保人**於開始其受保**旅程**後因目的地突然爆發**公共交通工具**機構員工罷工、暴動或民亂、惡劣天氣、天然災害或廣泛性爆發傳染病,本公司將以不超過**保障權益表**內之**最高賠償額**賠償**受保人**因要繼續前往原本包括於受保**旅程**目的地而引致額外合理的交通及/或**住宿**費用。

第 4b(1)項「提早結束旅程」的保障是根據受保**旅程**中斷後,按比例賠償扣除**旅程**日數之未享用的**旅費**及/或**住宿**費用。受保**旅程**中第 4b(1)項「提早結束旅程」及第 4b(2)項「更改旅程」的額外交通及/或**住宿**實際費用的賠償不可超過**保障權益表**內所載的**最高賠償額**。

(3) 強制隔離保障

在受保**旅程**期間,若**受保人**因被懷疑患上大流行病而被強制隔離,本公司將以不超過**保障權益表**的最高賠償額,按比例賠償**受保人**不能退回之未享用的基本團費及/或**住宿**費用。
第 4b(3)項「強制隔離保障」是以受保**旅程**期間**受保人**被隔離日數按比例賠償未享用的基本團費及/或**住宿**費用。

此外,第 4b(1)項「提早結束旅程」、第 4b(2)項「更改旅程」及第 4b(3)項「強制隔離保障」的合共賠償額不可超過**保障權益表**第 4b 項「旅程中斷」所載的**最高賠償額**。第 4b 項「旅程中斷」的保障亦

只有在**受保人**未知道任何將會引致**旅程**中斷的事件前購買才會有效。

適用於第 4 項 - 旅程阻礙保障的不保事項

以下情況不受保障：

1. 受保於其他保險或政府計劃，或將會獲得酒店、**公共交通工具**、旅行社、其他航運機構或酒店的賠償或退款。
2. 直接或間接因政府之規例或監管，旅行社、導遊公司或**公共交通工具**機構的破產、結束或違約。
3. 在購買此保險前已意識到可能引致取消或中斷**旅程**的情況。
4. 直接或間接因**受保人**未能盡早通知旅行社、導遊公司、航運機構或旅館因第 4a 項「取消旅程」其中 i 至 iv 項的原因而要取消**旅程**或因第 4b(1)項「提早結束旅程」其中 i 至 iii 項的原因而要提早結束**旅程**。
5. 基於同一原因於第 6a 項「旅程延誤」、第 4b(1)項「提早結束旅程」及第 4b(2)項「更改旅程」同時提出的索償。
6. 受保人未能提供由政府或其他授權機構所簽發的有關強制隔離書面確認信，內容包括但不限於有關隔離的時期及隔離的原因。

第 5 項 - 個人財物保障

5a. 個人行李及物品

若**受保人**在受保**旅程**期間，屬於其個人之行李、衣服及個人物品有所遺失或損毀(包括穿戴或存放在行李箱內)，本公司以不超過**保障權益表**所規定之**最高賠償額**賠償予**受保人**。若修理費用超越損毀物品之價值時，本公司於處理該賠償申請時，會視該物品已遺失或被竊。賠償額為該物品之實際價值，但以每件、每對或每套的最高 HK\$3,000 為限額。若物品已使用超過一年(由購買日期起計)，本公司有權根據其損耗及折舊程度賠償其重估價值或維修此物品。

適用於第 5a 項 - 個人行李及物品的不保事項

以下情況不受保障：

1. 貨物或貨辦、食物、動物、汽車(包括配件)、電單車、單車、船隻、發動機、其他交通工具、傢俬、古董、珠寶手飾或配件、手提電話(包括電子手帳電話及配件)、現金(包括支票、旅遊支票等)、電子貨幣(包括信用卡或八達通等)、證券、票或文件。
2. 正常之磨損、消耗、蟲蛀、寄生蟲、固有毛病、或因維修、清潔、更改而導致的損失。
3. 租借物品之遺失或損毀；
4. 直接或間接因暴動、反叛、革命、內戰、篡權、恐怖行為或因政府意圖防止此等動亂所引起的損失；或由任何政府或公共機構基於任何海關或其他條例採取的行動而扣留、破壞、隔離或檢疫該財物；或走私財物或非法攜帶或交易的財物。
5. 受保於其他保險，或將會獲得公共交通工具機構、酒店及其他服務供應商的退款。
6. 已獲第三者機構提供維修服務，使操作回復正常的物品。
7. 任何**受保人**蓄意以不同交通工具寄運之行李或分開寄運或郵寄的行李、紀念品或其他物品。
8. 在公眾場所沒有**受保人**的看管下，或因**受保人**疏忽保管其財物而導致行李及個人物品的遺失、存錄於磁帶、記憶儲存咭、磁碟或其他的資料遺失。
9. 易碎物品的破裂或損毀。
11. 在酒店或**公共交通工具**機構保管下的損失，除非於3天內以書面通知該酒店或**公共交通工具**機構，如該機構為航空公司，需獲得其財物紊亂報告。
12. 遺失後24小時內未有向當地警方報案及未能提交當地警方之遺失報告。
13. 任何因神秘失蹤而導致的損失。
14. 因錯誤、遺漏、兌換率的浮動或貶值而出現的缺額。
15. 遞交之索償物件收據上的名字並非**受保人**的名字。
16. 基於同一原因於第 6b 項「行李延誤」或第 10 項「高爾夫球保障」同時提出的索償。

5b. 個人金錢

若**受保人**在受保**旅程**期間遺失的現金、銀行鈔票、旅行支票及匯票，本公司將賠償**受保人**實際所遺失的金額，但以不超過**保障權益表**所載之最高賠償為上限；**受保人**必須於遺失事件發生後 24 小時內向當地警方報案，並於索償時提交書面文件及警方之正本報告。

適用於第 5b 項 - 個人金錢的不保事項

以下情況不受保障：

1. 電子貨幣(包括任何信用卡或八達通等)或證券。
2. 遺失後24小時內未有向當地警方報案及未能提交當地警方之遺失報告。
3. 錯誤、遺漏、兌換率的浮動或貶值而出現的缺額。
4. 沒有立即向旅行支票的簽發銀行當地的分行或代理人報告旅行支票損失事宜。
5. 任何因神秘失蹤而導致的損失。
6. 直接或間接因暴動、反叛、革命、內戰、篡權、恐怖行為或因政府意圖防止此等動亂所引起的損失；或由任何政府或公共機構基於任何海關或其他條例採取的行動而扣留、破壞、隔離或檢疫的現金、銀行鈔票、旅行支票或匯票；或走私現金、銀行鈔票、旅行支票或匯票(或相關收益)或非法攜帶或交易的現金、銀行鈔票、旅行支票或匯票(因此行動引致的相關收益)。

5c. 旅遊證件

若**受保人**在受保**旅程**期間直接因被搶劫、爆竊或偷竊而遺失之旅遊證件及/或旅遊票，本公司將以**保障權益表**所載之最高賠償為上限賠償**受保人**(i)旅遊證件及/或旅遊票所需補領的費用；及/或(ii)因安排行程而必須衍生的額外合理的交通及/或住宿費用，而該費用僅作證件補領及**旅程**安排之用。

適用於第 5c 項 - 旅遊證件的不保事項

以下情況不受保障：

1. 遺失後24小時內未有向當地警方報案及未能提交當地警方之遺失報告。
2. 與是次受保**旅程**無關之證件及/或簽證及/或旅遊票。
3. 任何因神秘失蹤而導致的損失。
4. 直接或間接因暴動、反叛、革命、內戰、篡權、恐怖行為或因政府意圖防止此等動亂所引起的損失；基於海關條例而遭破壞或檢疫；政府充公之違禁品或非法攜帶或交易的物品。
5. 同時擁有臨時或永久屬同性質的旅遊證件，此情況下，**受保人**只能選擇索償其中一款。

第 6 項 - 延誤保障

6a. 旅程延誤

若**受保人**於受保**旅程**中，直接因惡劣天氣、天然災害、機械故障、劫竊或所乘之**公共交通工具**機構員工罷工，引致**受保人**所乘搭的**公共交通工具**比顯示於由**公共交通工具**機構提供的行程表內的出發或到達時間延誤至少 5 小時，首滿 5 小時的延誤，本公司會賠償 HK\$300，其後每滿十(10)小時的延誤賠償 HK\$700，但以**保障權益表**所規定之**最高賠償額**為上限。

出發或到達延誤是根據由**公共交通工具**機構提供給**受保人**的行程表上列明的原本航班出發或到達時間，直至 a) 原本**公共交通工具**或 b) 有關**公共交通工具**機構安排之首批接替的交通工具實際出發或到達的時間作出計算。

在同一**公共交通工具**的延誤下，**受保人**只可選擇索償出發或到達其中一項的延誤。此項保障須在有關**公共交通工具**機構或其授權代表公佈有關事件可引致**公共交通工具**延誤前購買才會有效。

適用於第 6a 項 - 旅程延誤的不保事項

以下情況不受保障：

1. 未能獲取**公共交通工具**機構書面證明延誤的時間及原因。
2. 於申請投保前已宣佈會引致延誤的事件。
3. **受保人**遲到機場或碼頭(即在最後登記時間結束後才到達，但因**公共交通工具**機構員工罷工

引致的遲到則除外)。

4. **受保人**最終未有登上有關**公共交通工具**機構所安排之首批接替交通工具。
5. 受保人於受保**旅程**中所乘搭之**公共交通工具**延遲到達而相繼引起各接駁**公共交通工具**之延誤或未能登上預定接駁**公共交通工具**而導致的損失。
6. 基於同一原因於第 4b(2)項「更改旅程」中同時提出的索償。

6b. 行李延誤

若**受保人**於受保**旅程**中因所乘搭的**公共交通工具**機構誤送行李以致**受保人**於抵達目的地十小時後仍未取得其行李，本公司將以**保障權益表**上載賠償**受保人**，此保障只可於同一**旅程**中索償一次。

適用於第 6b 項 - 行李延誤的不保事項

以下情況不受保障：

1. 未能獲取**公共交通工具**機構書面證明延誤時間及原因。
2. 任何**受保人**蓄意以不同交通工具寄運之行李或分開寄運或郵寄的行李、紀念品或其他物品。
3. 基於同一原因於第 5a 項「個人行李及物品」或第 10 項「高爾夫球保障」同時提出的索償。

第 7 項 - 個人責任

若**受保人**在受保**旅程**期間遇上下列情況而須負上法律須責任賠償予第三者，本公司會以不超過**保障權益表**所規定之**最高賠償額**作出賠償：

1. 誤傷第三者身體或引致其死亡；
 2. 誤損或遺失第三者之財物。
- 在未得到本公司書面同意前，**受保人**不可向他人承認過失、提出或允許付出任何賠償或有關承諾、或牽涉入任何訴訟中。

適用於第 7 項 - 個人責任的不保事項

以下情況不受保障：

1. 所有屬於**受保人**、其直系親屬、僱主或僱員的財產損失。
2. **受保人**對其直系親屬、僱主或僱員的責任。
3. 屬於**受保人**或由**受保人**看管的財產。
4. 在合約預期下應擔當的責任。
5. 因**受保人**故意、蓄意或非法活動所引起的責任。
6. 由於擁有或使用車輛、飛機、輪船、槍械或動物所引起的責任。
7. 因貿易、商業或專業有關所引致的責任。
8. 任何因非法行為引致的責任。

第 8 項 - 信用卡保障

如**受保人**因意外死亡及已獲得本**保單**第 2 項一人身意外保障之賠償，本公司亦會以不超過**保障權益表**所規定之最高賠償額，賠償**受保人**於受保**旅程**中以信用卡購買之物品而到期未繳之款項予**受保人**的合法遺產承繼人。

適用於第 8 項 - 信用卡保障的不保事項

以下情況不受保障：

1. 因過期未繳而需支付之利息或財政費用。
2. 已受其他保險的保障。
3. 一切由**疾病**或**病毒**引致的**意外**死亡。

第 9 項 - 家居物品保障

如**受保人**於受保**旅程**期間，其香港主要住所遭爆竊，本公司會以不超過**保障權益表**上所規定之**最高賠償額**，賠償**受保人**於該住所擁有、使用或穿戴(但因此遺失或損毀的家居用品。損失必需向警方報告及需持有由警方發出的書面文件或報告作證明。

若家居物品已使用超過一年(由購買日期起計)，本公司有權根據其損耗及折舊程度賠償其重估價值或維修此物品。

適用於第 9 項 - 家居物品保障的不保事項

以下情況不受保障：

1. **受保人**的**香港主要住所**於受保**旅程**開始前 30 天或以上並未有任何人居住而引致的爆竊。
2. 以下物品的遺失或損毀不受保障：債券、匯票、現金、貨幣、支票、本票、郵政匯票、記錄或帳簿或類似的證明、餐券或任何禮券、儲蓄卡、信用卡、契約、所有權證明文件、原稿、獎章、護照、郵票、股票、任何類型的隱形眼鏡、手提電話、旅遊票、食物、動物、汽車(包括配件)、電單車、船隻、發動機及其他交通工具、存錄於磁帶、記憶儲存咭、磁碟或其他的資料遺失。
3. **受保人**於受保**旅程**完結返回**香港**後 24 小時內未有向警方報案及未能提交警方之報告。
4. 因錯誤、遺漏、兌換率的浮動或貶值而出現的缺額。
5. 任何用於工作上、或具有專業或商業用途的儀器或設備，或已受其他保險的保障。
6. 由合法進入**香港主要住所**人士作出的惡意或蓄意破壞。
7. **受保人**未有為其**香港主要住所**作出合理的防衛及預防以減低對本**保單**的索償。

第 10 項 - 高爾夫球保障 (自選保障)

(如**保障列表**包括及附加此保障，此保障才適用。)

10a. 高爾夫球物品

若**受保人**在受保**旅程**期間，屬於其個人之**高爾夫球**物品被偷竊或損毀，本公司以不超過**保障權益表**所規定之**最高賠償額**賠償予**受保人**。若修理費用超越損毀物品之價值時，本公司於處理該賠償申請時，會視該物品已遺失。本公司有權根據損毀物品的損耗及折舊程度賠償其重估價值或維修該物品。

10b. 租用高爾夫球工具

若**受保人**的**高爾夫球**工具在受保**旅程**期間有所遺失、被竊或損毀，本公司以不超過**保障權益表**所規定之**最高賠償額**賠償予**受保人**有關租用**高爾夫球**工具之費用。

10c. 草坪費用

若**受保人**在受保**旅程**期間因**嚴重損害**或**嚴重疾病**而不能使用已租的**高爾夫球場**或不能參加**高爾夫球**課程，本公司將以不超過**保障權益表**的**最高賠償額**，賠償**受保人**有關此場地或課程的已預先支付而不能退回或未能享用的草坪費用或**高爾夫球場**課程費用或租用**高爾夫球**工具費用。本公司將以該**高爾夫球場**或課程日數按比例賠償未能享用的費用。

適用於第 10 項 - 高爾夫球保障的不保事項

以下情況不受保障：

1. 於**高爾夫球**物品或**高爾夫球**工具使用時而導致的意外破壞或損毀。
2. 正常之磨損、消耗、蟲蛀、寄生蟲、固有毛病、或因**受保人**自行維修、清潔、更改任何**高爾夫球**物品或**高爾夫球**工具而導致的損失。
3. 租借**高爾夫球**物品或**高爾夫球**工具之遺失或損毀；
4. 直接或間接因暴動、反叛、革命、內戰、篡權、恐怖行為或因政府意圖防止此等動亂所引起的損失；或由任何政府或公共機構基於任何海關或其他條例採取的行動而扣留、破壞、隔離或檢疫該財物；或走私財物或非法攜帶或交易的財物。
5. 已獲第三者或機構提供維修服務，使操作回復正常的**高爾夫球**物品或**高爾夫球**工具。
6. 與**受保人**不同交通工具寄運之行李或分開寄運的**高爾夫球**物品或**高爾夫球**工具。
7. 在公眾場所沒有**受保人**的看管下，或因**受保人**疏忽保管其財物而導致**高爾夫球**物品或**高爾夫球**工具的遺失。

8. 在酒店或公共交通工具機構保管下的損失，除非於 3 日內以書面通知該酒店或公共交通工具機構，如該機構為航空公司，需獲得其財物紊亂報告。
9. 遺失後 24 小時內未有向當地警方報失及未能提交當地警方之遺失報告。
10. 基於同一原因於第 5a 項「個人行李及物品」或第 6b 項「行李延誤」索償。
11. 任何神秘失蹤之損失。
12. 遞交之索償物件收據上的名字並非受保人的名字。

第 11 項 - 郵輪假期(自選保障)
(如保障列表包括及附加此保障，此保障才適用。)

11a. 額外旅程阻礙保障
旅程阻礙保障之最高賠償額會根據此保障在保障權益表的最高賠償額遞加。所有適用於第 4 項 - 旅程阻礙保障的不保事項都適用於此保障。

11b. 郵輪阻礙保障
若受保人於旅程中，直接因惡劣天氣、天然災害、機械故障、劫劫或公共交通工具機構員工罷工，引致受保人所安排用以接駁其郵輪旅程之公共交通工具比顯示於行程表內的到達時間延誤至少 8(8) 小時，以致受保人未能於指定之碼頭登岸，本公司將以不超過列於保障範圍所規定之最高賠償額賠償受保人不能退回之未享用的郵輪旅程費用及/或因要前往下一個原定安排之目的地以繼續郵輪行程(如有者)而引致額外合理的旅費。

第 11b 項 - 「郵輪阻礙保障」是以受保人沒有在郵輪上之日數按比例賠償未享用的郵輪旅程費用。適用於第 11b 項 - 郵輪阻礙保障的不保事項

- 以下情況不受保障：
1. 受保於其他保險或政府計劃，或將會獲得郵輪、酒店、航空公司、旅行社、其他航運機構或旅館的退款。
 2. 未能獲取公共交通工具機構書面證明延誤的時間及原因。
 3. 於申請投保前已宣佈會引致延誤的事件。
 4. 受保人遲到機場或碼頭(即在最後登記時間才到達，但因公共交通工具機構員工罷工引致的遲到則除外)。
 5. 受保人最終未有登上有關公共交通工具機構所安排之首班取替航班。
 6. 為同一損失在第 4 項「旅程阻礙保障」中同時進行的索償。

11c. 取消岸上觀光行程

若受保人因蒙受損害或感染疾病或遇上惡劣天氣而需取消由郵輪公司安排之自費岸上觀光行程，本公司將以不超過列於保障範圍所規定之最高賠償額賠償受保人不能退回之未享用的有關費用。適用於第 11c 項 - 取消岸上觀光行程的不保事項

- 以下情況不受保障：
1. 受保於其他保險或政府計劃，或將會獲得郵輪、酒店、航空公司、旅行社、其他航運機構或旅館的退款。

11d. 衛星電話費用

於受保之郵輪旅程期間，如受保人或其旅遊夥伴因損害或疾病而導致受保人不能繼續其受保旅程及必須返回香港，本公司會以不超過列於保障範圍所規定之最高賠償額賠償受保人因此原因而需於郵輪上使用衛星電話的費用。

適用於第 11d 項 - 衛星電話費用的不保事項

- 以下情況不受保障：
1. 受保人未能提供證明由衛星電話服務供應商發出證明使用衛星電話費用的正式收據。
 2. 未能提供由郵輪上的合資格醫生發出的書面報告證明損害或疾病是於郵輪上發生及發生日期。
 3. 受保於其他保險或政府計劃，或將會獲得郵輪、酒店、公共交通工具、旅行社、其他航運機構或住宿供應商的賠償或退款。
 4. 在購買此保險前已意識到可能引致取消或中斷旅程的情況。

第 12 項 - 水肺潛水保障(自選保障)

(如保障列表包括及附加此保障，此保障才適用。)

12a. 潛水旅程

若受保人於受保旅程期間蒙受損害或感染疾病，經合資格醫生診斷後認為受保人身體情況不適合潛水，本公司將按比例賠償受保人不能退回已於受保旅程前已支付之潛水旅程費用，但不超過保障權益表所規定之最高賠償額為上限。

如在潛水期間蒙受損害或感染疾病：

1. 受保人必須在認可潛水教練或潛水指導員的指導下進行潛水及潛水深度最高 18 米；或
2. 已獲認可潛水教練簽發潛水證書的受保人必須在證書訂明的最高深度內潛水

適用於第 12a 項 - 潛水旅程的不保事項

- 以下情況不受保障：
1. 受保人未能提供由合資格醫生所簽發的醫療報告確定受保人在醫療上必須取消中斷潛水旅程。

12b. 租用設施費用

若受保人的潛水器材於受保旅程期間有所遺失、被竊、損毀或於運送期間暫時遺失超過 12 小時，本公司以不超過保障權益表所規定之最高賠償額賠償受保人有關租用潛水器材之費用。

適用於第 12b 項 - 租用設施費用的不保事項

- 以下情況不受保障：
1. 如受保人沒有合理地看管個人財物；
 2. 在公眾場所沒有受保人的看管下導致潛水器材遺失、破壞、損毀或被竊；
 3. 潛水器材遺失或被竊後 24 小時內未有向當地警方報失及未能提交當地警方之遺失報告；
 4. 如受保人之潛水器材有所遺失、被竊或運送途中延誤，而受保人：
 - a. 沒有立刻通知交通工具機構(航空公司、船公司等)及取得交通工具機構之書面報告(如該機構為航空公司，需獲得行李事故報告書)或
 - b. 未能立刻取得有關之報告並沒有於 7 日內以書面形式跟進索取交通工具機構書面報告或行李事故報告書(適用於航空公司)。

主要不保項目

本公司不會賠償任何保單內直接或間接因以下事項而引致的索償：

1. 戰爭、內戰、敵侵、叛亂、革命、通用軍事力量、篡奪政府或軍權；
2. 本保單不會負責已經計劃或實際在、前往或途經古巴、伊朗、敘利亞、蘇丹、北韓、或克里米亞地區的旅程直接或間接地所引致的任何損失、損害、受損或法律責任；
3. 本保單不會負責古巴、伊朗、敘利亞、蘇丹、北韓、或克里米亞地區居民所蒙受或遭受的任何索償、損失、損害或法律責任；
4. 凡本公司提供之受保條款、索償賠償或本公司提供之保障會導致本公司、其母公司或其最終控制實體受到任何聯合國決議的制裁、禁止或限制、歐盟或美國的貿易或經濟制裁、法律或規例，本公司不會被當作提供這些保障及本公司不會負責任何該些索償或提供任何有關之保障；
5. 受保人不法的行為，或遭海關或有關當局充公、扣留或破壞；
6. 任何政府的法案或禁令；受保人違反政府法案；或在預先警告會爆發公共交通工具職員罷工、暴動或民變、惡劣天氣、自然災害、或傳染病的情況下，受保人沒有作出合理的預防以防止索償的出現；
7. 任何恐怖行為，但第 1 項「緊急醫療費用及援助」、第 2 項「人身意外保障」、第 3 項「緊急人息援助」及第 8 項「信用卡保障」除外；

8. 受保人沒有合理地看管個人財物，避免損害或減低索償；
9. 以乘客或司機身份參與任何類型之賽車；比賽；職業運動或因參與該運動而可賺取收入或報酬；
10. 與服用酒精或藥物有關的損失，但由合資格醫生所處方之酒精或藥物除外；
11. 妊娠、分娩或與之有關的損害或疾病；
12. 自殺、企圖自殺或故意自我傷害；或自我暴露於不必要的危險中；
13. 任何受保前已存在之狀況；先天性或遺傳病；
14. 愛滋病或於人體免疫不全病毒血清測試呈陽性反應下出現之損害或疾病；性病；
15. 精神痛、睡眠、精神或神經失調；
16. 受保人從事或參與海陸空服務或行動；持械工作；以航空公司空勤人員身份搭乘飛機；測試交通工具；參與體力勞動性工作；參與離岸活動，如商業潛水；油田鑽探、採礦、空中攝影；爆炸品處理；演員；地盤工人、漁夫、廚師或廚房工人；導遊或領隊；
17. 受保人旅遊之目的為醫治疾病，或受保人在身體不適合旅遊的情況下旅遊或受保人違反合資格醫生勸告出外旅遊；
18. 已從其他方面獲得的賠償，但第 1d 項「海外住院現金津貼」、第 2 項「人身意外保障」、第 3 項「緊急人息援助」及第 6 項「延誤保障」則除外；
19. 任何持有中華人民共和國護照及以此護照往返中華人民共和國(香港、台灣及澳門除外)之受保人，但受保人同時擁有由其他國家政府(不包中華人民共和國，但香港、台灣及澳門則除外)所簽發的法定文件證明為該地合法居民，此不保事項則會被撤消。

定義

- 「意外」是指於受保旅程期間遇上不能預料及非自願的事件而引致損害。
- 「住宿」是指房租費用。
- 「後天免疫力缺乏綜合症」或「愛滋病」是參照世界衛生組織之定義為標準，指人體免疫不全病毒血清測試呈陽性反應下出現機會性感染、惡性腫瘤、人類免疫不全病毒感病變、人體免疫不全病毒之免疫反應低下或其他病症。
- 「中醫」是指任何跌打、針灸或中醫師根據中醫藥條例(香港法例第 549 章)合法註冊成為中醫，但是若果中醫為受保人本人或其直系親屬則除外。
- 「密切商業夥伴」是指受保人的密切商業夥伴，可提供商業登記或公司的註冊文件予本公司作為佐證。
- 「公共交通工具」是指由註冊的航運公司經營以接載付款乘客的巴士、旅遊巴士、的士、渡輪、氣墊船、水翼船、船、火車、電車或地下火車；及由註冊的航空公司或包機公司營運以接載付款乘客的飛機及直升機，來往於商業機場或直升機場之間；及有固定路線及班次的機場巴士。
- 「強制隔離」是指受保人被政府或有關授權機構指令隔離。
- 「留院」是指因醫療上的需要而在合資格醫生的建議下入住醫院，被接納為留院病人接受治療。住院期間是指醫院因提供治療而需要向受保人收取住房及膳食費用的期間。
- 「潛水器材」是指自攜式水下呼吸系統，浮力控制器，鉛帶，鉛，蛙鞋，面鏡，呼吸管，刀，手電筒，照明彈，潛水旗，浮標及捲軸，濕衣及乾衣，壓力及深度計，指南針及潛水電腦。
- 「生效日期」是指 1) 本保單的簽發日期或 2) 取消旅程保障開始生效之日期，以較遲者為準。
- 「高爾夫球物品」是指高爾夫球桿和高爾夫球袋。
- 「高爾夫球工具」是指高爾夫球桿、高爾夫球袋或高爾夫球車(機動式的高爾夫球車除外)。
- 「香港」是指香港特別行政區，英文簡稱 HKSAR。
- 「醫院」是指合法經營並為受傷及患病病人提供治療和照顧之醫院(不包括老人院、長期病患中心、靜養、護理、戒酒或戒毒等類似服務之醫療機構)，此外，須設有完善的診斷及外科手術設備和 24 小時專業護理及醫療服務。
- 「直系親屬」是指受保人的配偶、父母、配偶之父母、祖父母、子女、兄弟姊妹、孫、合法監護人。
- 「損害」是指受保人遭遇意外事故，在直接及別無其他原因之下引致之身體損害。
- 「受保人」是指受保人名字列於保障列表內或批註內之受保人士。
- 「旅程」是指該段旅遊期間由受保人離開香港入境事務處櫃檯開始，直至受保人於此段旅遊完結後到達香港入境事務處櫃檯為止，或受保日期的到期日，以較早者為準。
- 「喪失」或「喪失功能」是指永久完全失去功能或手腕或足踝以上之部位完全分離；若套用於眼睛，是指完全及無法恢復的視力。
- 「失聰」是指永久及無法恢復之聽力：
- | | |
|-------------------------|-------------------------|
| 如果 a 分貝 — 損失聽力至 500 赫 | 如果 b 分貝 — 損失聽力至 1,000 赫 |
| 如果 c 分貝 — 損失聽力至 2,000 赫 | 如果 d 分貝 — 損失聽力至 4,000 赫 |
- (a+b+2c+d) 的 1/6 高於 80 分貝。
- 「喪失語言能力」是指構成語言之口唇音、齒舌音、口蓋音、喉頭音等之四種語言機能中，有三種以上不能發出者，聲帶全部切除或因腦部言語中樞神經的損傷而患失語症。
- 「澳門」是指澳門特別行政區，英文簡稱 Macau SAR。
- 「惡性腫瘤」是指在後天免疫力缺乏症存在下出現包括但不限於卡波西肉瘤、中樞神經系統淋巴瘤或其他已知或未知之惡性病變，直接導致死亡、疾病或殘廢。
- 「最高賠償額」是指列於本保單的保障權益表內每項受保保障的賠償額。
- 「醫療必需費用」是指受保人須項支付予合資格醫生、醫生、外科醫生、護士、醫院及/或救傷車服務之費用，包括醫藥、手術、x 光檢查、醫院或護理治療包括醫療用品及租用救傷車的費用，但不包括牙科護理(除非因意外而損害健全及天然之牙齒所必須之診治費用)；亦不包括本保單內第 1b 項「緊急醫療運送」及第 1c 項「連返費用」兩項保障利益所需的任何費用。本保單僅負責賠償經由合資格醫生所處方或治療的費用。倘受保人可從其他來源取回全部或部份費用，本公司則根據保單條款負責賠償剩餘的費用。
- 「機會性感染」包括但不限於肺囊原蟲肺炎、慢性腸炎之生物體、過速性病毒或散佈性的真菌感染。
- 「大流行病」指有關流感流行病擴散規模遍及世界各地，並導致大部份人類感染，有關程度被世界衛生組織宣佈為大流行警或級別 5 級或以上。
- 「保額百分比」是指保單第 2 項「人身意外保障」中之保障表中的投保百分率，用以計算保障之最高賠償。
- 「受保日期」是指附加於此保單的保障列表上所列明之受保日期。
- 「永久」是指由意外事故發生之日起計損害情況持續至少 12 個月，並於此段時間終結時沒有好轉之跡象。
- 「永久完全殘廢」是指由意外事故發生之日起計至少 90 天，受保人因蒙受損害而永久及完全不能從事任何業務或有新酬的工作；若受保人沒有從事任何工作，則指完全不能進行一般日常生活活動。
- 「保單」是指本保單以及於本保單基本條款第一點提及的所有文件。
- 「保單列表」是指本保單其中一頁附名為“Policy Schedule”，本公司隨時有權對其作出更改。
- 「受保前已存在之狀況」是指受保人、其直系親屬或旅遊夥伴於保單生效日期前因任何疾病或狀況，曾接受合資格醫生之治療或建議(a) 藥物治療；或 (b) 確診；或 (c) 醫療意見；或 (d) 處方藥服，或於保單生效日期前已患有任何病徵而導致向本公司索償的情況。
- 「主要住所」是指受保人永久居住及只用作為私人寓所的房子或樓宇。
- 「保額」是指最高賠償額。
- 「合資格醫生」是指到當地政府承認並准許在其管轄範圍內提供醫療服務之人士，但不包括受保人本人或其直系親屬。
- 「保障權益表」是指在保障列表中所名為的「保障權益表」，本公司有權隨時對其作出更改。
- 「嚴重損害或嚴重疾病」若套用於受保人或旅遊夥伴，是指受保人或旅遊夥伴需要合資格醫生診治，及證明會有生命危險及不適合旅行或繼續原定受保之旅程；若套用於受保人的直系親屬或密切商業夥伴，是指其直系親屬或密切商業夥伴需要治療及經合資格醫生證明他們會有生命危險，以致受保人需要停止或取消原定受保之旅程。
- 「疾病」是指於受保旅程期間在直接及別無其他原因之下所開始罹患或感染之病症。

「**病徵**」是指個人人士於失調或**疾病**前經歷的症候及跡象。

「**恐怖行為**」是指所有確實發生或恐嚇使用武力或暴力手段造成損毀、傷害或混亂的行為，或此等行為對個人、財物或政府造成人命傷亡或財物損失，以達至經濟、部落、民族、種族或宗教上的利益，無論有否陳述其追求之目的。若盜竊或其他罪行主要是基於犯案者的個人利益出發，純粹只是犯罪者及犧牲者的關係，則不被視為恐怖行為。恐怖行為是必定要得到（有關）政府証實及承認才算是恐怖主義的行為。

「**三級程度燒傷**」是指全部皮膚層因燃燒而完全遭到破壞。

「**旅遊夥伴**」是指在整個受保旅程中與**受保人**同行的人士。

「**旅遊票**」是指用以乘坐任何**公共交通工具**的經濟客位票。

「**實際、合理及慣常**」是指(1)在**合格醫生**之照顧、監管或指示下為**受保人**提供必須的治療、醫療設施及服務的收費；(2)不超過同一地區內接受類似治療、醫療設施及服務費用之正常水平的收費；及(3)不包括在沒有保險的情況下便不會收取之費用。

「**戰爭**」是指戰爭（不論有否宣戰），或任何類似戰爭的行為，包括任何國家利用軍事力量達到經濟、地理、民族、政治、種族、宗教或其他目的。

一般條件

- 在此保險生效時，**受保人**身體狀況必須適合旅遊及未意識到任何可引致取消或擾亂受保旅程的狀況，否則會喪失索償的權利。
- 若此**保單**已經簽發，所有保費均不能退還。
- 此保險不能續保或延長，若**受保人**於受保旅程期間在不能控制的情況下，原列在**保障列表**內的**受保日期**需要延長，在合理及必需的情況下，本公司會免費延長**保單**的**受保日期**至最高10日，以便**受保人**可以完成受保旅程。
- 如超過一個旅程在受保日期內開始，只有最早開始的旅程才是受保旅程。
- 受保旅程必須由**香港出發**。
- 若**受保人**為同一旅程購買多於一份由本公司承保的自購綜合旅遊保險，本公司只會根據可獲較高賠償額的一份保單作出賠償。
- 此**保單**只適用於常規的假期旅遊及文職商務旅遊，而不適用於探險跋涉或類似旅程。
- 此旅遊保險計劃每次受保旅程的保障期最長為182日。
- 如**受保人**蓄意隱瞞或提供錯誤的重要資料，此**保單**將在**生效日期**起便失效。

基本條款

1. 完整的保險契約

保障列表、旅遊保險條款及條款和批註(如有者)將構成完整的保險契約。**受保人**未有在投保書上作出的任何陳述，除欺詐外，均不得作為廢除本契約或利用於合法的訴訟程序。任何營業員均無權更改或刪除本保險的任何條款，任何保險的更改需由本公司簽署同意並簽發批註後，方為有效。

2. 受保資格

年齡限制：**70歲或以下**。

家庭計劃：合法夫婦及其17歲以下小童。

3. 申請賠償通知的期限

任何賠償申請需於事故發生後30日內以書面通知本公司，倘若**受保人**因**意外**引致死亡，應立即以書面通知本公司。

4. 損害證明文件

本公司於接獲該書面通知後，會將申請賠償表格送交索償人，以作填寫損害證明之用。倘索償人於書面通知書發出後15日內仍未收到該申請賠償表格，索償人可將事故的發生、性質與損害程度於本**保單**內損害證明文件遞交之期限前提交本公司，本公司會將此書面證明視作已符合本**保單**條款之要求。本公司所需之任何證明文件，須依據本公司所定之形式及性質提交，而所需費用概由**受保人**或其合法代理人負責。

5. 證明文件遞送之期限

倘**受保人**要申請傷殘賠償，**受保人**需於發生**損害**後60日內將損害證明文件送達本公司；若**受保人**在合理情況下未能於此限內遞交證明文件，則須於合理時間內及事發日後1年內呈交。

6. 充足的通知期

申請賠償通知書可由**受保人**或其代表人送交本公司，並提供足夠資料以證明**受保人**之身份。倘有合理之理由不能於本**保單**之限內將通知書送交本公司，而已盡可能將通知書於限期後即送出，則不會被認為放棄申請賠償權利。

7. 賠償金支付時間

當本公司接獲所需的證明文件後，將根據本**保單**立即作出合理賠償。

8. 賠償金之支付

倘**受保人**死亡，賠償金將賠償予**受保人**的遺產承繼人，其他賠償則賠償予**受保人**本人，而緊急醫療運送及運送費用之賠償則根據本**保單**的條款直接支付有關之服務提供機構。

9. 欺騙索償

倘若**保單受保人**或其代表人在本**保單**的索償中存有任何欺詐成份，所有賠償均會作廢。

10. 追討權利

若本公司及/或其授權代表支付了不包括在此**保單**保障範圍內的索償，或超過此保險的賠償限額時，本公司會保留追討**受保人**之權利。

11. 第三者權利

除**受保人**及本公司以外，此**保單**未有賦予其它人士享有按《合約（第三者權利）條例》或以其它方式直接強制執行此**保單**條款的權益。惟特此說明及同意只有本公司及於保障列表上列明的**受保人**方可享有在無須給予其它人士通知或無須獲其它人士同意的情况下，可藉協議修改本**保單**或取消/終止此**保單**（如此**保單**載有此權利）的權利。

12. 身體檢查

於處理本**保單**的賠償申請時，本公司有權隨時要求**受保人**作身體檢查。倘**受保人**死亡，除法律不允許外，本公司有權要求解剖驗屍，而費用則由本公司負擔。**受保人**於遭遇**損害**發生或感染**疾病**後需聽從**合格醫生**的醫療建議，若**受保人**沒有依從正確的療法，本公司不會負上任何賠償責任。

13. 債權人之取代

若本公司已向**受保人**作出本**保單**的賠償，便可取代其爭取賠償的權利，向有關人士或機構追討，而**受保人**必須簽署及遞交法律文件和身份證件，或利用任何方法去保證此項的權利，對於損失此權利後，**受保人**不可採取任何行動。

14. 法律訴訟

依據本**保單**所規定之條款及期限內，將損害證明文件送交本公司後，60日內不得進行法律訴訟以求賠償。倘須訴訟應於本**保單**規定之損害證明文件送交本公司限期後3年內進行，否則不得再進行訴訟。

15. 國家之法律限制

倘本保險有關呈交損害通知書或證明文件之期限少於**香港**法例所允許之期限，則將依法例延長至所容許之最低限度的期限。

16. 保單條款之遵從

倘**受保人**有違反本**保單**內所載的任何條文，所有賠償申請均不會被接納。

17. 保單詮釋

本**保單**受**香港**法例之約束。本**保單**所涉及之人士均同意服從**香港**特別行政區法庭之裁決。

18. 轉讓

本**保單**的轉讓權益不會對本公司構成法律的約束力，除非此轉讓權益的正本或副本已保存於**美亞保險香港有限公司**位於**香港**港島東華蘭路18號港島東中心7樓的辦事處，及獲得本公司的確認。此外本公司不會對轉讓的有效性承擔責任。任何的憲章、條款或法規均不可以阻礙本**保單**的索償，除非有關條款已詳細列於本**保單**內。

19. 私隱條例

受保人 / 保單持有人 / 申請人謹此同意及確認：

- 美亞保險可按列於其私隱政策的用途使用於處理此保單申請或管理此保單所收集的個人資料，其用途包括核保及管理已申請的保單（包括獲取再保險、核保續保之保單、資料配對、處理索賠、調查、付款及行使代位權）；
- 美亞保險可使用**受保人** / 保單持有人 / 申請人的聯絡資料（姓名、地址、電話號碼及電郵地址）聯絡**受保人** / 保單持有人 / 申請人有關其它由**AIG**集團提供之保險產品(如**美亞保險**已獲**受保人** / 保單持有人 / 申請人同意可如此使用其聯絡資料)；
- 美亞保險亦可向以下類別的人士（不論在**香港**或海外）轉交該些個人資料，作上述列明之用途：
 - 提供有關本人/吾等保單管理服務的第三者（包括再保險公司）(如上(a)項所述)；
 - 財務機構，作處理此申請及收取保費（如上(a)項所述)；
 - 公證人、調查員、第三者管理人、緊急支援服務提供者、法律服務提供者、零售商、醫療提供者、及交通工具機構，以處理索償事宜（如上(a)項所述)；
 - AIG**集團授權的市場推廣公司，以作直銷之用(如上(b)項所述)；
 - 其它在任何國家之**AIG**集團之成員公司，作上述(a)及(b)項所有列明之用途；或
 - 其它於**美亞保險**私隱政策所列明的人士，作於私隱政策列明之用途。
- 受保人** / 保單持有人 / 申請人可隨時致函到**美亞保險香港有限公司**之私隱事務主任(地址：**香港**郵政總局信箱456號或電郵：cs.hk@aig.com) 查閱、或要求修改其個人資料（**美亞保險**可就查閱及修改要求收取合理費用），或更改有關其個人資料被使用作直銷用途的選擇。如對**美亞保險**提供的服務有任何意見，可按上述地址聯絡**美亞保險**。**美亞保險**私隱政策的全文載於www.aig.com.hk。

20. 筆誤

本公司的筆誤不會令生效的**保單**因而失效，或令失效的**保單**因而生效。

此旅遊保險條款及條款的版權為**美亞保險香港有限公司**所有。未經**美亞保險香港有限公司**同意不得複製全部或部分旅遊保險條款及條款之內容。

（此中文譯本乃供參考之用，如中文譯本與英文有異，一概以英文為準）



TravelWise Protection Plan (Annual Plan)

Travel Insurance Terms and Conditions

In consideration of the payment of premium and subject to the definitions, exclusions, limitations, provisions and terms contained herein, endorsed hereon, or attached hereto, AIG Insurance Hong Kong Limited (hereinafter called "the Company") agrees to provide insurance to the Insured Person(s) named in the Policy Schedule issued in relation to a Journey that commenced and occurred within the Period of Insurance subject to the terms and conditions of this Policy (hereinafter called "insured Journey") and promises to pay indemnity for loss to the extent provided herein.

The Policy Schedule, Travel Insurance Terms and Conditions and endorsements (if any), shall constitute the entire contract of insurance (hereinafter called the "Policy").

This insurance is only valid for conventional leisure travel or business travel (limited to administrative duty) purpose only and shall not apply to persons undertaking expeditions, treks or similar journeys.

BENEFITS

SECTION 1 - EMERGENCY MEDICAL EXPENSES AND ASSISTANCE

1a. Medical Expenses

Under this Section, if the Insured Person sustains an Injury or Sickness during the insured Journey and as a result the Insured Person incurs medical expenses for treatment of the said Injury or Sickness prior to his/her return to Hong Kong, the Company shall reimburse the Insured Person up to the Maximum Benefit stated in the Schedule for that portion of the medical expenses which (i) are incurred by the Insured Person within three hundred and sixty-five (365) days from his/her first sustaining the said Injury or Sickness; and (ii) constitute Usual, Reasonable and Customary Medically Necessary Expenses.

- Follow-up Medical Expenses

In the event that the Insured Person, following his/her return to Hong Kong, requires follow-up medical treatment for the Injury or Sickness referred to above (i.e. in addition to the treatment for the Injury or Sickness received prior to the Insured Person's return), then the Company shall also reimburse the Insured Person up to but not exceeding HK\$50,000 for that portion of the follow-up medical expenses which i) are incurred within three (3) months of the Insured Person's return to Hong Kong and ii) constitute Usual, Reasonable and Customary Medically Necessary Expenses charged by a Qualified Medical Practitioner practising western medicine. This Follow-up Medical Expenses benefit shall also be extended to cover the Medically Necessary Expenses incurred for the same purpose paid to Chinese Medicine Practitioner subject to an aggregate limit of HK\$1,800 and a per visit and per day limit of HK\$150. In no event, however, shall the total amount payable under this Section 1a. (Medical Expenses) exceed 100% of the Maximum Benefit as stated in the Schedule of Benefits.

1b. Emergency Medical Evacuation

When as a result of an Injury sustained or Sickness commencing while the Insured Person is traveling overseas during the insured Journey and if in the opinion of the Company or its authorized representative, it is judged medically appropriate to move the Insured Person to another location for medical treatment, or to return the Insured Person to Hong Kong or his/her habitual residence, the Company or its authorized representative shall arrange for the evacuation utilizing the means best suited to do so, based on the medical severity of the Insured Person's condition. The Company shall pay directly to the medical provider the Covered Expenses for such evacuation.

Covered Expenses are expenses for services provided and/or arranged by the Company or its authorized representative for the transportation, medical services and medical supplies necessarily incurred as a result of an emergency medical evacuation of an Insured Person.

The means of evacuation arranged by the Company or its authorized representative 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 the Company or its authorized representative and will be based solely upon medical necessity.

The Insured Person or a person on his/her behalf must contact Travel Guard Assistance Hotline at (852) 3516 8699 for the arrangement.

1c. Repatriation of Remains

When, as a result of an Injury sustained or Sickness commencing while the Insured Person is traveling during the insured Journey, the Insured Person dies during the course of the insured Journey, the Company or its authorized representative shall make the necessary arrangements for the return of the Insured Person's remains to Hong Kong or his/her habitual residence. The Company shall pay the actual cost incurred for such repatriation.

In addition, the Company shall reimburse for expenses actually incurred at the place of death outside Hong Kong for the cost of a casket, the embalming and cremation process rendered by a mortician or undertaker.

The Insured Person or a person on his/her behalf must contact Travel Guard Assistance Hotline at (852) 3516 8699 for the arrangement.

1d. Overseas Hospital Cash

The Company will pay the Insured Person HK\$500 per one (1) day of overseas Hospital Confinement up to the Maximum Benefit as stated in the Schedule of Benefits in the event that the Insured Person is Confined in an overseas Hospital due to an Injury or Sickness sustained during the insured Journey.

In no event shall the total amount payable under this Section 1d. (Overseas Hospital Cash) exceed the Maximum Benefit as stated in the Schedule of Benefits.

1e. Compassionate Visit

The Company will reimburse up to the Maximum Benefit as stated in the Schedule of Benefits for the reasonable additional Accommodation and/or Travel Ticket necessarily incurred by one (1) adult Immediate Family Member to fly over or one (1) Traveling Companion of the Insured Person to fly over or stay behind, to be with and/or take care of the Insured Person, following the death, Serious Injury Or Serious Sickness of the Insured Person during the insured Journey. This coverage can only be utilized once during the insured Journey.

1f. Child Guard

The Company will reimburse up to the Maximum Benefit as stated in the Schedule of Benefits, the reasonable additional Accommodation and/or travel fare for one (1) Immediate Family Member or one (1) Traveling Companion to accompany the Insured Person's child(ren) aged under fifteen (15) back to Hong Kong in case the Insured Person is Confined in an overseas Hospital due to Serious Injury Or Serious Sickness and where no other Immediate Family Member is available to accompany the Insured Person's child(ren) at the time.

Exclusions Applicable to Section 1 - Emergency Medical Expenses & Assistance

No benefits will be provided:

- For surgery or medical treatment when in the opinion of the Qualified Medical Practitioner treating the Insured Person, the treatment can be reasonably delayed until the Insured Person returns to Hong Kong.
- If the purpose of the insured Journey is to obtain medical treatment or the insured Journey is undertaken against the Qualified Medical Practitioner's recommendation.
- For 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 insured Journey.
- For failure to obtain a written medical report from the Qualified Medical Practitioner.
- If the Insured Person refuses to follow the recommendation of a Qualified Medical Practitioner to return to Hong Kong or to continue the insured Journey whilst the Insured Person's physical condition at the time of recommendation is fit for travel.
- For any expenses for a service not approved and arranged by the Company or its authorized representative except that this exclusion shall be waived in the event the Insured Person or his/her Traveling Companion(s) cannot contact Travel Guard Assistance Hotline 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 the Company or its authorized representative would have provided under the same circumstances. (For Section 1b. Emergency Medical Evacuation only)
- For any expenses incurred for the transportation of the Insured Person's remains not approved and arranged by the Company or its authorized representative. (For Section 1c. Repatriation of Remains only).
- For the follow up treatment expenses incurred outside Hong Kong.
- For any additional cost of single or private room accommodation at a Hospital or charges in respect of special or private nursing, non-medical personal services such as radio, telephone (except for Section 1d. Overseas Hospital Cash) and the like; procurement or use of special braces, appliances or equipment.
- For any cosmetic surgery, refractive errors of eyes or hearing-aids, and prescriptions therefor except necessitated by accidental Injury occurring during the insured Journey.
- For the same loss under both Section 1e. (Compassionate Visit) and Section 1f. (Child Guard) arising from the same cause.

SECTION 2 - PERSONAL ACCIDENT

2a. Accident while in a Common Carrier

The benefit under this Section is payable to the Insured Person who suffers an Injury while riding as a fare paying passenger, and not as pilot, operator or crew member, in or on, or while boarding or alighting from any Common Carrier at the time of Injury during the insured Journey which, directly and independently of all other causes, results in any Event provided in the Benefit Table hereunder, but only to the extent and if such Injury results in such Event happening to the Insured Person within ninety (90) days after the date of the Accident.

This Section is extended to cover an Injury sustained by the Insured Person while riding on a carrier arranged by a travel agent or while the Insured Person is driving or riding in an automobile at the time of Injury during the insured Journey which, directly and independently of all other causes, results in any Event provided in the Benefit Table hereunder, but only to the extent and if such Injury results in such Event happening to the Insured Person within ninety (90) days after the date of the Accident.

2b. Other Accidents

The benefit under this Section is payable only with respect to Injury sustained by an Insured Person as a result of an Accident other than those Accidents referred to in Section 2a. (Accident while in a Common Carrier) during the insured Journey which, directly and independently of all other causes shall result in any Event as provided in the Benefit Table hereunder, but only to the extent and if such Injury results in the Event happening within ninety (90) days after the date of the Accident.

Benefit Table

EVENTS		
Accidental Death and Disablement		Percentage of Principal Sum
1. Death		100%
2. Permanent Total Disablement		100%
3. Permanent and incurable paralysis of all limbs		100%
4. Permanent total Loss of sight of one eye or both eyes		100%
5. Loss of or the Permanent total Loss of Use of one limb		100%
6. Loss of or the Permanent total Loss of Use of two limbs		100%
7. Loss of Speech and Loss of Hearing		100%
8. Permanent total Loss of Hearing in:		
(a) both ears		75%
(b) one ear		15%
Third Degree Burns		
Area	Damage as a Percentage of Total Surface Area	Percentage of Principal Sum
1. Head	Equal to or greater than 8% damage of total head surface area	100%
	Equal to or greater than 5 % but less than 8% damage of total head surface area	75%
	Equal to or greater than 2% but less than 5% damage of total head surface area	50%
2. Body (exclude head surface area)	Equal to or greater than 20% damage of total body surface area	100%
	Equal to or greater than 15% but less than 20% damage of total body surface area	75%
	Equal to or greater than 10% but less than 15% damage of total body surface area	50%

Compensation

- If more than one (1) of the above Events are applicable, only the Event with the highest compensation (i.e. the highest Percentage of Principal Sum) will be payable under this Section and in any event shall not exceed the Maximum Benefit stated in the Schedule of Benefits.
- The insurance for any Insured Person under this Policy shall terminate upon the occurrence of any loss for which indemnity is payable under any one (1) of the above Events, but such termination shall be without prejudice to any claim originating out of the Accident causing such loss.
- When a limb or organ which had been partially disabled prior to an Injury covered under this Policy becomes totally disabled as a result of such Injury, the Percentage of Principal Sum payable shall be determined by the Company having regard to the extent of disablement caused by the Injury. No payment however shall be made in respect of the loss of a limb or organ which was permanently disabled prior to the Injury.
- If the Insured Person is under seventeen (17) years of age on the Effective Date, the Maximum Benefit payable will be HK\$250,000 subject to the Percentage of Principal Sum as stated in the above Benefit Table under Section 2 (Personal Accident).

This Section is extended to cover an Injury sustained by the Insured Person:

- While he/she is traveling directly from his/her place of residence or place of regular employment in Hong Kong to the immigration counter within three (3) hours before the scheduled departure time of the Common Carrier in which the Insured Person has arranged to travel for the purpose of commencement of his/her insured Journey.
- While he/she is traveling directly from the immigration counter in Hong Kong to his/her place of residence or place of regular employment within three (3) hours upon his/her arrival in Hong Kong after completion of his/her insured Journey.

Exposure

If by the reason of any covered Accident occurring during the insured Journey, the Insured Person is unavoidably exposed to the elements (including but not limited to prolonged and rigorous weather or environmental conditions) and as a direct and unavoidable result of such exposure sustains death, loss or disablement within twelve (12) months from the date of Accident, the Company will pay in accordance to the Events as stated in the Benefit Table.

Disappearance

If the Insured Person disappears as a result of the disappearance, sinking or wrecking of the Common Carrier caused by an Accident in which the Insured Person was traveling at the time of the Accident during the course of the insured Journey and remains missing after twelve (12) months from the date of the Accident, and the Company has reason to believe that the Insured Person has died in the Accident, the Company will pay the Personal Accident benefit, subject to receipt of a signed undertaking by the personal representative of the Insured Person's estate that any such payment shall be refunded to the Company if it is later discovered that the Insured Person did not die as a result of the Accident.

Exclusion Applicable to Section 2 - Personal Accident

- For the purpose of Section 2, in no event shall the Company be liable to pay for any loss caused by an Injury or otherwise which is a consequence of any kind of disease or Sickness.

SECTION 3 - LOSS OF INCOME BENEFIT

If the Insured Person sustains Injury during the insured Journey and upon returning to Hong Kong, the Insured Person is unable to return to work in his / her usual gainful occupation as recommended by a Qualified Medical Practitioner for at least 7 days, the Company will pay a weekly income benefit of HK\$1,250 for each full week that the Insured Person is unable to return to work not exceeding a maximum period of twenty-four (24) weeks and up to the Maximum Benefit as stated in the Schedule of Benefits.

Exclusion Applicable to Section 3 - Loss of Income Benefit

No benefits will be provided:

- When the Insured Person fails to submit official or legal documentation issued by his / her current employer to



2. prove his/her employment status.
For failure to obtain a written medical report from the Qualified Medical Practitioner certifying that the Insured Person is unable to work in his/her gainful occupation.

SECTION 4 - JOURNEY CANCELLATION AND INTERRUPTION

4a. Journey Cancellation

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for loss of basic tour fee and/or Accommodation paid in advance by the Insured Person and for which the Insured Person is legally liable and which are not recoverable from any other source consequent upon the cancellation of the insured Journey necessitated by the occurrence of any of the following, within the period of ninety (90) days before the scheduled departure date of the insured Journey (except for sub-paragraphs (iii) and (iv) below):

- Death or Serious Injury Or Serious Sickness of the Insured Person, Insured Person's Immediate Family Member, Close Business Partner or Traveling Companion;
- Witness summons, jury service or compulsory quarantine of the Insured Person;
- Unexpected outbreak of strike by the employees of a Common Carrier for the planned insured Journey, epidemic, riot or civil commotion at the planned destination within the period of one (1) week before the departure date of the planned insured Journey;
- Serious damage to the Insured Person's and/or Traveling Companion's Primary Residence in Hong Kong from fire, flood, earthquake or similar natural disasters within the period of one (1) week before the departure date of the planned insured Journey which requires the Insured Person's and/or Traveling Companion's presence in the premises on the departure date of the insured Journey.

This coverage under Section 4a (Journey Cancellation) cannot be utilized once the Insured Person has commenced the insured Journey.

4b. Journey Interruption

(1) Curtailment Expenses

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefit for the amount of basic tour fee and/or Accommodation forfeited and/or additional travel fare and/or Accommodation reasonably and necessarily incurred after the commencement of the insured Journey where the Insured Person has to terminate and cut short the insured Journey and return to Hong Kong as a result of the following reasons:

- Death, Serious Injury Or Serious Sickness or hijacking of the Insured Person or Close Business Partner who is a resident in Hong Kong;
- Death, Serious Injury Or Serious Sickness of the Insured Person's Immediate Family Members or Traveling Companion;
- Sudden occurrence of strike by the employees of a Common Carrier, unanticipated outbreak of riot or civil commotion, natural disasters, or epidemic at the planned destination which prevents the Insured Person from continuing with his/her scheduled insured Journey.

(2) Journey re-arrangement

The Company shall reimburse the Insured Person up to the Maximum Benefit stated in the Schedule of Benefits for additional and reasonable travel fare and/or Accommodation incurred after the commencement of the insured Journey as a direct result of sudden occurrence of strike by the employees of a Common Carrier, unanticipated outbreak of riot or civil commotion, inclement weather, natural disasters, or epidemic at the planned destination. Such reimbursement is only payable if the aforesaid expenses are incurred solely for the purpose of the continuation of the traveling to the original planned destination comprised in the insured Journey.

Curtailment Expenses payable under Section 4b.(1) in relation to the amount of basic tour fee and/or Accommodation forfeited will be calculated in proportion to the number of days remaining after the relevant interruption of the insured Journey. Actual expenses incurred in relation to additional travel fare and/or Accommodation for the insured Journey payable under both Section 4b.(1) (Curtailment Expenses) and 4b.(2) (Journey re-arrangement) will be reimbursed up to the Maximum Benefit as stated in the Schedule of Benefits.

(3) Compulsory Quarantine

The Company shall reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for the amount of pro-rated basic tour fee and/or Accommodation forfeited after the commencement of the insured Journey where the Insured Person is Compulsorily Quarantined due to suspected exposure to Pandemic Influenza infection. Compulsory Quarantine payable under Section 4b.(3) in relation to the amount of basic tour fee and/or Accommodation forfeited will be calculated in proportion to the number of quarantined days during the insured Journey. The maximum amount payable under Section 4b.(1) (Curtailment Expenses), Section 4b.(2) (Journey re-arrangement) and Section 4b.(3) (Compulsory Quarantine) shall not in aggregate exceed 100% of the Maximum Benefit for Section 4b. (Journey Interruption) as stated in the Schedule of Benefits. This coverage Section 4b. (Journey Interruption) is effective only if the insured Journey is arranged before the Insured Person becomes aware of any circumstances which can lead to the disruption or interruption of the insured Journey.

Exclusions Applicable to Section 4 - Journey Cancellation And Interruption

No benefits will be provided for any loss:

- That is covered by any other existing insurance scheme, government program, or which will be paid or refunded by any Common Carrier, travel agent or any other provider of transportation and/or accommodation.
- That is caused directly or indirectly by government regulations or control, bankruptcy, liquidation or default of travel agencies, tour operator and/or Common Carrier.
- That arises from any circumstances leading to the cancellation and/or disruption of his/her insured Journey before the purchase of this travel insurance.
- That directly or indirectly arises from the Insured Person's failure to notify the travel agent/ tour operator or provider of transportation or accommodation immediately if it is necessary to cancel or curtail the travel arrangement for the reasons set out in sub-paragraphs i. to iv. of Section 4a. (Journey Cancellation) or sub-paragraphs i. to iii. of Section 4b.(1). (Curtailment Expenses).
- In respect of any loss claimed under Section 6a. (Travel Delay), Section 4b.(1) (Curtailment Expenses) and Section 4b.(2) (Journey re-arrangement) arising from the same cause.
- If the Insured Person fails to produce to the Company with a written confirmation containing the information issued by the government or other relevant authorities regarding the Compulsory Quarantine, including but not limited to the quarantined period and the reason for such quarantine.

SECTION 5 - PERSONAL EFFECTS

5a. Baggage and Personal Effects

The Company will pay the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for loss of or damage to baggage, clothing and personal effects, worn, carried by the Insured Person by hand, in trunks, suitcases and like receptacles owned by the Insured Person occurring during the insured Journey. If any damaged article is proven to be beyond economical repair, a claim will be dealt as if the article had been lost. The Company shall not be liable for more than HK\$3,000 in respect of any one (1) article, pair or set of articles and may make payment or at its option reinstate or repair the article, pair, or set of articles subject to due allowance for wear and tear and depreciation in respect of any item more than one (1) year old from the date of purchase.

Exclusions Applicable to Section 5a - Baggage and Personal Effects

No benefits will be provided for:

- The following classes of property: business goods or sample, foodstuffs, animals, motor vehicles (including accessories), motorcycles, bicycles, boats, motors, any other conveyances, household furniture, antiques, jewelry or accessories, mobile phone (including PDA phone and other accessories), money (including checks, traveler's checks, etc), plastic money (including the credit value of credit card, Octopus cards, etc), securities, tickets or documents.
- Any loss or damage caused by wear and tear, gradual deterioration, moths, vermin, inherent vice or damage sustained due to any process initiated by the Insured Person to repair, clean or alter any property.
- Any loss of or damage to hired or leased equipment.
- Any loss of or damage to property resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, Terrorist Act or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate such property; or in respect of any property which is contraband or which is or has been illegally transported or traded.
- Any loss or damage to property insured under any other insurance, or which could be reimbursed for by a Common Carrier, a hotel, and any service providers or otherwise.
- Any loss of or damage to property which functions normally after it has been fixed or repaired by a third party.

- With respect to any of the Insured Person's baggage which the Insured Person either intentionally sent by a different Common Carrier than the one in which the Insured Person was traveling, or with respect to any baggage, souvenir or other items which the Insured Person mailed or shipped separately.
- Any loss of the Insured Person's baggage when it is left unattended in a public place or as a result of the Insured Person's failure to take due care and precautions for the safe guard and security of such property.
- Any loss of data recorded on tapes, cards, diskettes or otherwise.
- Breakage or damage to fragile articles.
- Any loss or damage while in the custody of a hotel or Common Carrier, unless reported immediately on discovery in writing to such hotel or Common Carrier within three (3) days and a Property Irregularity Report is obtained in the case of the event occurred in an airline.
- Any loss not reported to the police within twenty-four (24) hours from occurrence of the incident and such police report is not obtained at the place of loss.
- Loss by any mysterious disappearance.
- Shortage due to error, omission, exchange or depreciation in value.
- Receipts of the claimed items submitted which are not in the Insured Person's name.
- Any loss claimed under Section 6b (Baggage Delay) arising from the same cause.

5b. Personal Money

The Company will reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for the loss of cash, bank notes, traveler's check and money order occurring during the insured Journey. This reimbursement is subject to the condition that the relevant loss must have been reported to the police at the place of the loss within twenty-four (24) hours from the occurrence of the incident and any such claim must be accompanied by written documentation and report from such police.

Exclusions Applicable to Section 5b - Personal Money

No benefits will be provided:

- In respect of any form of the plastic money (including any credit card, Octopus cards, etc) or securities.
- In respect of loss not reported to the police within twenty-four (24) hours from the occurrence of the incident and such police report is not obtained at the place of loss.
- In respect of shortage due to error, omission, exchange or depreciation in value.
- In respect of loss of traveler's checks where such loss is not immediately reported to the local branch or agent of the issuing authority.
- For loss by any mysterious disappearance.
- In respect of loss resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, Terrorist Act or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate such cash, bank notes, check or money; or in respect of any cash, bank notes, check or money which is (or represents the proceeds of) contraband or which is or has been illegally transported or traded (or represents the proceeds of such actions).

5c. Travel Documents

In the event that the Insured Person loses his/ her travel documents and/or travel tickets during the insured Journey as a direct result of robbery, burglary or theft, the Company will reimburse the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for: (i) the replacement cost of the travel documents and/or travel tickets; and/or (ii) reasonable additional cost of travel expenses and/or Accommodation necessarily incurred by an Insured Person for the sole purpose of making necessary travel arrangements for replacing the travel documents.

Exclusion Applicable to Section 5c - Travel Documents

No benefits will be provided:

- If the loss is not reported to the police within twenty-four (24) hours from the occurrence of the incident and for which such police report is not obtained at the place of loss.
- If the lost travel document and/or visa and/or travel tickets are not needed by the Insured Person to complete to the insured Journey.
- For loss by any mysterious disappearance.
- In respect of loss resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, Terrorist Act or action taken by Governmental Authorities in hindering, combating or defending against such an occurrence; or from action taken by any Government or Public Authority pursuant to any customs or other regulations to secure, destroy, quarantine or confiscate any property; or in respect of any property which is (or represents the proceeds of) contraband or which is or has been illegally transported or traded (or represents the proceeds of such actions).
- For both the temporary and permanent versions of the same travel document. In the event of such loss, an Insured Person may claim either one (1) version but not both.

SECTION 6 - DELAY COVERAGE

6a. Travel Delay

The Company shall pay HK\$300 for the first full five (5) hours of delay, then HK\$700 for each of the following full ten (10) hours of delay up to the Maximum Benefit as stated in the Schedule of Benefits in the event that the Common Carrier in which the Insured Person has arranged to travel is delayed for at least five (5) hours from the departure or arrival time specified in the itinerary provided to the Insured Person by the Common Carrier, where such delay is caused directly by inclement weather, natural disasters, equipment failure, hijack or strike by the employees of the Common Carrier during the insured Journey.

Departure or arrival delay will be calculated from the original scheduled departure or arrival time specified in the itinerary provided by the Common Carrier to the Insured Person until the actual departure or arrival time of a) the original Common Carrier or b) the first available alternative transportation offered by that Common Carrier management.

The Insured Person can only claim for either departure or arrival delay of the same delayed Common Carrier.

This coverage is effective only if this insurance is purchased before the announcement of any event or occurrence leading up to the relevant delay of the Common Carrier by the authorized representative/management of the Common Carrier.

Exclusions Applicable to Section 6a - Travel Delay

No benefits will be provided for:

- Failure of the Insured Person to obtain written confirmation from the Common Carrier on the number of hours of and the reason for such delay.
- Any loss arising from any event or occurrence leading up to the relevant delay which is announced before the insured Journey is arranged.
- Any loss arising from late arrival of Insured Person at the airport or port (i.e. arrival at a time later than the time required for check-in or booking-in except for the late arrival due to strike by the employees of the Common Carrier).
- Any loss arising from failure of Insured Person to get on-board the first available alternative transportation offered by the administration of the relevant Common Carrier.
- Any consequential loss arising from the late arrival of a preceding Common Carrier that causes subsequent delays/misconnections of each Common Carrier in which the Insured Person has arranged to travel during the course of the insured Journey.
- Any loss claimed under Section 4b.(2) (Journey Re-arrangement) arising from the same cause.

6b. Baggage Delay

The Company shall pay the Maximum Benefit as stated in the Schedule of Benefits in consequence of temporary deprivation of the Insured Person's baggage for over ten (10) hours from the time of arrival at the destination due to the misdirection in delivery of the baggage by a Common Carrier on or in which the Insured Person is traveling during the insured Journey. This benefit can only be utilized once during the insured Journey.

Exclusions Applicable to Section 6b - Baggage Delay

No benefits will be provided:

- For the failure of the Insured Person to obtain written confirmation from the Common Carrier on the number of hours and the reason for such delay.
- With respect to any of the Insured Person's baggage which the Insured Person either intentionally sent by a different Common Carrier than the one in which the Insured Person was traveling, or with respect to any baggage, souvenir or other items which the Insured Person mailed or shipped separately.



3. For any loss claimed under Section 5a (Baggage and Personal Effects) arising from the same cause.

SECTION 7 - PERSONAL LIABILITY

The Company shall indemnify the Insured Person up to the Maximum Benefit as stated in the Schedule of Benefits for legal liability to a third party arising during the insured Journey as a result of:

1. death or accidental bodily injury to a third party;
 2. accidental loss of or damage to property of a third party.
- However, the Insured Person must not make any offer or promise of payment or admit his/her fault to any other party, or become involved in any litigation without the Company's written approval.

Exclusions Applicable to Section 7 - Personal Liability

No benefits will be provided for:

1. Property of any person who is the Insured Person, Insured Person's Immediate Family Member or employer or deemed by law to be his/her employee.
2. Liability to any person who is the Insured Person's Immediate Family Member or employer or deemed by law to be his/her employee.
3. Property which belongs to the Insured Person or is in his/her care of custody or control.
4. Any liability assumed under contract.
5. Liability relating to the willful, malicious, or unlawful act on the part of the Insured Person.
6. Liability arising from the ownership, possession or use of vehicles, aircraft, watercraft, firearms or animals.
7. Liability arising from the undertaking of any trade, business or profession.
8. Liability arising from any criminal acts.

SECTION 8 - CREDIT CARD PROTECTION

In the event of a claim payable for the accidental death of the Insured Person under Section 2 (Personal Accident), the Company shall also reimburse the estate of the Insured Person for any outstanding balance charged to the Insured Person's credit card(s) for goods purchased by the Insured Person during the insured Journey up to the Maximum Benefit stated in the Schedule of Benefits.

Exclusions Applicable to Section 8 - Credit Card Protection

No benefits will be provided for any of the followings:

1. Interest accrued or financial charges on the outstanding expenses.
2. Where this cover is available under any other insurance policy.
3. An accidental death which is a consequence of any kind of disease or sickness.

SECTION 9 - LOSS OF HOME CONTENT

The Company shall reimburse the Insured Person up to the Maximum Benefit stated in the Schedule of Benefits for the loss or damage to household contents owned, used or worn by the Insured Person contained within his/her Primary Residence in Hong Kong as a direct result of burglary while the Insured Person is traveling on the insured Journey. Such loss must be reported to the police and supported by written documentation and report from the police.

The Company may make payment or at its option reinstate or repair subject to due allowance for wear and tear and depreciation in respect of articles more than one (1) year old.

Exclusions Applicable to Section 9 - Loss of Home Content

No benefits will be provided:

1. Arising out of burglary while the Insured Person's Primary Residence in Hong Kong or any part thereof is unoccupied for more than thirty (30) days from or prior to the departure date of the insured Journey.
2. For any loss/ damage of bonds, bills of exchange, cash, coins, cheques, promissory notes, postal or money orders, record or book or similar tokens, luncheon voucher or other coupons, stored value cards, credit cards, deeds, documents of title, manuscripts, medals, passports, stamps, share certificates, contact or corneal lenses, mobile / portable telephone, travel tickets, foodstuffs, animals and motor vehicles (including accessories), motorcycles, boats, motors, any other conveyances, loss of data recorded on tapes, cards, diskettes or otherwise.
3. For any loss not reported to the police within twenty-four (24) hours after the Insured Person returns back to Hong Kong after the insured Journey and a police report for such loss not having been obtained.
4. For shortage due to error, omission, exchange or depreciation in value.
5. For special equipment or apparatus used in connection with any profession, business or employment, or items which are insured under a separate insurance policy.
6. For malicious damage or vandalism by any person lawfully in the Primary Residence in Hong Kong.
7. For loss arising from the Insured Person not taking all reasonable efforts to take due care and precautions for the safeguarding and security of his/her home contents within his/her Primary Residence in Hong Kong to avoid or to minimize any claim and loss under this Policy.

GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS

THE COMPANY WILL NOT PAY UNDER ANY SECTION OF THIS POLICY FOR LOSS, INJURY, DAMAGE OR LIABILITY SUFFERED AND/OR SUSTAINED BY OR ARISING DIRECTLY OR INDIRECTLY AS A RESULT OF OR IN CONNECTION WITH ANY OF THE FOLLOWING:

1. War, civil war, invasion, insurrection, revolution, use of military power or usurpation of government or military power;
2. This Policy will not cover any loss, injury, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Cuba, Iran, Syria, Sudan, North Korea, or the Crimea region
3. This Policy will not cover any claim, loss, injury, damage or legal liability suffered or sustained by residents of Cuba, Iran, Syria, Sudan, North Korea, or the Crimea region.
4. The Company shall not be deemed to provide cover and the Company shall not 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 the Company, its parent company or its ultimate controlling entity to any sanction, prohibition, or restriction under United Nations resolutions or the trade or economic sanctions, laws, or regulations of the European Union or the United States of America
5. Any illegal or unlawful act by the Insured Person or confiscation, detention, destruction by customs or other authorities;
6. Any prohibition or regulations by any government (except where a government is subjecting an Insured Person to Compulsory Quarantine as covered under Section 4a(ii) and 4b(3)); any breach of government regulation or any failure by the Insured Person to take reasonable precautions to avoid a claim under this insurance following the warning of any intended strike by the employees of a Common Carrier, riot or civil commotion, inclement weather, natural disasters, or epidemic;
7. Any Terrorist Act except for Section 1 (Emergency Medical Expenses and Assistance), Section 2 (Personal Accident), Section 3 (Loss of Income Benefit) and Section 8 (Credit Card Protection).
8. The Insured Person is not taking all reasonable efforts to safeguard his/her property/money, to avoid injury or to minimize any claim under this insurance;
9. Riding or driving in any kind of motor racing, competition, engaging in a professional capacity in any sport where an Insured Person would or could earn income or remuneration from engaging in such sport as a source of income;
10. Any loss which has connection with the effects of alcohol or drugs other than those prescribed by a Qualified Medical Practitioner;
11. Pregnancy or childbirth, and any Injury or Sickness associated with pregnancy or childbirth;
12. Suicide or attempted suicide or intentional self-injury, or self-exposure to needless peril;
13. Any Pre-Existing Condition, congenital and heredity condition;
14. AIDS or any Injury or Sickness commencing in the presence of a sero positive test for HIV and related disease, sexually transmitted disease;
15. Psychosis, sleep disturbance disorder, mental or nervous disorders;
16. The Insured Person engaging in naval, military or airforce service or operations; armed force service; being as a crew member of an operator of any air carrier; testing of any kind of conveyance; engaging in any kind of labor work; engaging in offshore activities like commercial diving, oil rigging, mining or aerial photography; handling of explosives; performing as actor/actress; being a site worker, fisherman, cook or kitchen worker; tour guide or tour escort;

17. Any medical treatment received during an insured Journey which was made for the purpose of receiving medical treatment or if the insured Journey was undertaken while the Insured Person was unfit to travel; or the Insured Person is traveling against the advice of a Qualified Medical Practitioner;
18. Any loss and expenses that can be reimbursed or recovered from any other source except for Section 1d (Overseas Hospital Cash), Section 2 (Personal Accident), Section 3 (Loss of Income Benefit) and Section 6 (Delay Coverage);

DEFINITIONS

"**Accident**" means an unforeseen and involuntary event which causes an Injury during an insured Journey.

"**Accommodation**" means room charge only.

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

"**Chinese Medicine Practitioner**" shall mean any Chinese bonesetter, acupuncturist or Chinese medicine practitioner who is legally registered as a Chinese medicine practitioner under the Chinese Medicine Ordinance (Cap 549, Laws of Hong Kong), but excluding a Chinese Medicine Practitioner who is the Insured Person or an Immediate Family Member of the Insured Person.

"**Close Business Partner**" shall mean a close business partner of an Insured Person proved as such to the satisfaction of the Company on the basis of business registration or corporate registration documentation acceptable to the Company.

"**Common Carrier**" shall mean any bus, coach, taxi, ferry, hovercraft, hydrofoil, ship, train, tram or underground train provided and operated by a carrier duly licensed for the regular transportation of fare-paying passengers, and any fixed-wing aircraft provided and operated by an airline or an air charter company which is duly licensed for the regular transportation of fare-paying passengers and any helicopter provided and operated by an airline which is duly licensed for the regular transportation of fare-paying passengers and operating only between established commercial airports or licensed commercial heliports, and any regularly scheduled airport limousine operating on fixed routes and schedules.

"**Compulsorily Quarantined**" or "**Compulsory Quarantine**" means the Insured Person is ordered to be quarantined compulsorily by the government or other relevant authorities.

"**Confinement**" or "**Confined**" means the period the Insured Person is registered as an in-patient in a Hospital because of a medical necessity under the professional care of a Qualified Medical Practitioner and which the Hospital levies a charge for room and board for the treatment of an Injury or Sickness for such confinement.

"**Effective Date**" means either 1) the commencement date of the Policy or 2) the date the Journey Cancellation benefit becomes effective, whichever is later.

"**Hong Kong**" means the Hong Kong Special Administrative Region or the HKSAR.

"**Hospital**" shall mean a hospital (other than an institution for the aged, chronically ill or convalescent rest or nursing home or a place for alcoholics or drug addicts, or for any similar purpose) operated pursuant to law for the care and treatment of sick or injured persons with organized facilities for diagnosis and surgery and having 24 hours nursing service and medical supervision.

"**Immediate Family Member**" means Insured Person's spouse, parent, parent-in-law, grandparent, son or daughter, brother or sister, grandchild, legal guardian.

"**Injury**" shall mean the bodily injury sustained in an Accident directly and independently of all other causes.

"**Insured Person**" shall mean the Insured Person(s) named in the Policy Schedule or subsequently endorsed herein.

"**Journey**" wherever used in this Policy shall mean each period of travel commencing from the Insured Person leaves the Hong Kong immigration counter on the departure date for the purpose of commencement of his/her insured Journey and until the expiration of ninety (90) days period beginning from the date that such journey commences or the Insured Person's arrival at any immigration counter for returning to Hong Kong after the insured Journey, whichever is first occurs.

"**Loss of**" or "**Loss of Use**" shall mean the Permanent total functional disablement or complete and permanent physical severance of a hand at or above the wrists or of a foot at or ankle joints, and as used with reference to eyes, shall mean the entire and irrecoverable Loss of Sight.

"**Loss of Hearing**" shall mean Permanent irrecoverable loss of hearing where:

If a db - Hearing loss at 500 Hertz If b db - Hearing loss at 1,000 Hertz

If c db - Hearing loss at 2,000 Hertz If d db - Hearing loss at 4,000 Hertz

1/6 of (a+2b+2c+d) is above 80dB.

"**Loss of Speech**" shall mean the disability in articulating any three of the four sounds which contribute to the speech such as the Labial sounds, the Alveololabial sounds, the Palatal sounds and the Velar sounds or total loss of vocal cord or damage of speech center in the brain resulting in Aphasia.

"**Macau**" means the Macau Special Administrative Region or the Macau SAR.

"**Malignant Neoplasm**" shall include but not be limited to Kaposi's sarcoma, central nervous system lymphoma and/or other malignancies now known or which become known as immediate causes of death, an illness, or disability, in the presence of Acquired Immune Deficiency Syndrome.

"**Maximum Benefit**" means the maximum benefit amount of each of the benefits covered under this Policy as stated in the Schedule of Benefits.

"**Medically Necessary Expenses**" means expenses incurred and paid by the Insured Person to a legally Qualified Medical Practitioner, physician, surgeon, nurse, hospital and/or ambulance service for medical, surgical, X-ray, hospital or nursing treatment including the cost of medical supplies and ambulance hire but excluding the cost of dental treatment unless such treatment is necessarily incurred to sound and natural teeth and is caused by Injury, and excluding any expenses incurred under Section 1b. (Emergency Medical Evacuation) and Section 1c. (Repatriation of Remains) of this Policy. All treatment must be prescribed by a Qualified Medical Practitioner in order for expenses to be reimbursed under this Policy. Provided that in the event an Insured Person becomes entitled to a refund of all or part of such expenses from any other source, the Company will only be liable for the excess of the amount recoverable from such other sources.

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

"**Pandemic Influenza**" means an epidemic of an influenza virus that spreads on a worldwide scale and infects a large proportion of human population to the extent that the World Health Organization has announced that the level of Epidemic and Pandemic Alert and Response is phase 5 or above.

"**Percentage of Principal Sum**" is the Percentage of Principal Sum as stated in the Benefit Table in Section 2 (Personal Accident) herein used to calculate the Maximum Benefits payable.

"**Period of Insurance**" means the Period of Insurance under the Policy Schedule attached to the Policy.

"**Permanent**" shall mean lasting twelve (12) consecutive months from the date of an Accident and at the expiry of the twelve (12) months period being beyond any hope of improvement.

"**Permanent Total Disablement**" shall mean disablement which commences ninety (90) days from the date of the Accident and which is Permanent and which entirely prevents an Insured Person from attending to any business or gainful occupation of any and every kind or if he/she has no business or occupation from attending to any duties, which would normally be carried out by him/her in his/her daily life.

"**Policy**" means this Policy and any other documents referred to in Clause 1 of the General Provision section.

"**Policy Schedule**" means the attachment to this Policy entitled "Policy Schedule" as maybe amended by the Company from time to time.

"**Pre-existing Condition**" means any condition for which the Insured Person, Immediate Family Member, Close Business Partner or Traveling Companion received from or were recommended by a Qualified Medical Practitioner prior to the Effective Date of this Policy for: a) any medical treatment; b) any diagnosis; c) any consultation; or d) any prescribed drugs leading to a claim under this Policy; or any Symptom which existed prior to the Effective Date leading to a claim under this Policy.

"**Primary Residence**" means the house or building permanently occupied by the Insured Person for the sole purpose of private dwelling.

"**Principal Sum**" means the Maximum Benefit.

"**Qualified Medical Practitioner**" shall mean any person legally authorized by the Government with jurisdiction in the geographical area of his or her practice to render medical or surgical service, but excluding a qualified medical practitioner who is the Insured Person or an Immediate Family Member of the Insured Person.

"**Schedule of Benefits**" means the Schedule of Benefits under the Policy Schedule attached to the Policy and may be amended by the Company from time to time.

"**Serious Injury Or Serious Sickness**" means an injury or sickness for which the Insured Person or Traveling Companion requires treatment and which is certified by a Qualified Medical Practitioner as being dangerous to life and



as rendering the Insured Person unfit to travel or continue with his/her original insured Journey. When "Serious Injury Or Serious Sickness" is applied to the Insured Person's Immediate Family Member(s) or Close Business Partner, it shall mean injury or sickness for which the Insured Person's Immediate Family Member or Close Business Partner requires treatment and certified by a Qualified Medical Practitioner as being dangerous to life and which results in the Insured Person's discontinuation or cancellation of his/her original insured Journey.

"Sickness" means a sickness or disease which is contracted during the insured Journey directly and independently of any other cause and which commences during the insured Journey.

"Symptom" means a sign or an indication of disorder or disease experienced by an individual.

"Terrorist Act" shall mean 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. 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 also includes any act, which is verified or recognised by the (relevant) Government as an act of terrorism.

"Third Degree Burns" shall mean full thickness skin destruction due to burns.

"Traveling Companion" shall mean the person who is accompanying the Insured Person for the whole insured Journey.

"Travel Ticket" means an economy class travel ticket purchased for traveling on any Common Carrier.

"Usual, Reasonable And Customary" shall mean an expense which: (1) is charged for treatment, supplies or medical services medically necessary for caring of Insured Person(s) under the care, supervision, or order of a Qualified Medical Practitioner; (2) does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred; and (3) does not include charges that would not have been made if no insurance existed.

"War" shall mean 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

- All Insured Persons covered under this Policy shall be legal Hong Kong residents
- At the time this insurance becomes effective, the Insured Person must be fit to travel and not be aware of any circumstances which could lead to cancellation or disruption of the insured Journey, otherwise any claim could be forfeited.
- No refund of premium is allowed once the Policy has been issued.
- The insured Journey must be commenced from Hong Kong.
- If the destination is Asia in the Policy Schedule, the insured Journey is applicable to Australia, Brunei, Cambodia, China, India, Indonesia, Japan, Korea, Laos, Macau, Malaysia, Myanmar, New Zealand, Philippines, Singapore, Taiwan, Thailand, Vietnam only.
- If the Insured Person is covered under more than one (1) comprehensive voluntary travel insurance policies underwritten by the Company for the same trip, only the travel insurance policy with the greatest compensation will apply and benefits thereunder be payable.
- The Policy is only valid for conventional leisure travel or business travel (limited to administrative duty) purpose only and shall not apply to persons undertaking expeditions, treks or similar Journeys.
- The maximum period of an insured Journey cannot exceed ninety (90) days per Journey.
- Any non-disclosure or fraudulent misrepresentation in any particular material shall lead to the whole Policy being void from inception.

GENERAL PROVISIONS

1. ENTIRE CONTRACT

The Policy Schedule, Travel Insurance Terms and Conditions, and endorsements (if any) shall constitute the entire contract of insurance. No statement made by the applicant for insurance not included herein shall avoid the Policy or be used in any legal proceedings hereunder unless such statement is fraudulent. No agent has authority to change this insurance or to waive any of its provisions. No change in this insurance shall be valid unless approved by the Company and such approval is endorsed hereon.

2. ELIGIBILITY

For Individual Plan: age limit is from 17 to 70 years old (both years inclusive).

For Family Plan: any legally married couple aged 17 to 70 with their legitimate child(ren) who are under the age of seventeen (17) on the commencement date of this Policy.

3. RENEWAL CONDITIONS

This Policy may be renewed for further consecutive periods by the payment of premium on the commencement date of the renewal at the Company's premium rate in force at the time of renewal, subject to the Company's right to decline renewal of this Policy on any anniversary date of the Policy upon giving thirty (30) days prior written notice mailed or delivered to the Insured Person's last known address of the Company's intention not to renew the Policy, or to condition its renewal upon reduction of limits, increase in premium, elimination of coverage, or any combination thereof. The Company's acceptance of premium coupled with its renewal confirmation shall constitute its consent to renewal. Unless renewed as herein provided, this Policy shall terminate, at the expiration of the period for which premium has been paid. The Company reserves its right to change, from time to time, the table of rates applicable to premiums thereafter becoming due under this form of Policy.

4. GRACE PERIOD

A grace period of thirty-one (31) days will be granted for the payment of each premium falling due after the first premium, and unless outstanding premium is paid within the grace period and unless the Policy has not otherwise been cancelled earlier in accordance with the provisions of this Policy, the Policy shall be deemed cancelled as from the due date for the payment of the outstanding premium. No grace period shall be granted for the payment of the first premium and failure to effect payment thereof as required by the Company shall render this Policy void from inception.

5. CANCELLATION

The Company may cancel this Policy at any time by written notice delivered to the Insured Person or mailed to his/her last known address as shown by the Company's records stating when such cancellation shall be or shall have been deemed effective. In the event of such cancellation, the Company will return promptly the pro-rata unearned portion of any premium actually paid by the Insured Person. Such cancellation shall be without prejudice to any claim originating prior thereto. The Company will not allow any refund of premium once this Policy becomes effective.

6. POLICY TERMINATION

This Policy shall terminate:

- When premium is outstanding and remains unpaid after the time for payment prescribed in clause 4 "Grace Period" of this Section; or
- In the circumstances mentioned under "Compensation - clause 2" of Personal Accident under Section 2 of this Policy; or
- Upon expiry of this Policy; or
- On the next anniversary date when the Insured Person no longer fulfills the eligibility as stated under Clause 2 of this Section.

7. MISSTATEMENT OF 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 coverage shall be limited to the refund, upon written request, of all premiums paid for the period not covered by the Policy.

8. STATUS CHANGE

The Insured Person must take full responsibility to inform the Company forthwith of any change in respect of the information provided in the application for this Policy, otherwise the Company reserves the right to refuse or invalidate all claims under this Policy.

9. TIME OF NOTICE OF CLAIM

Written notice of loss on which a claim may be based must be given to the Company within thirty (30) days after the date of the incident causing such loss and in the event of accidental death, immediate notice thereof must be given to the Company.

10. FORMS FOR PROOF OF LOSS

The Company, upon receipt of such notice, will furnish to the claimant such forms as are usually furnished by it for filing proofs of loss. If such forms are not so furnished within fifteen (15) days after the receipt of such notice, the claimant shall be deemed to have complied with the requirements of this Policy as to proof of loss upon submitting within the time fixed in this Policy for filing proofs of loss, written proof covering the occurrence, character and extent of the loss for which a claim is made. All certificates, information and evidence required by the Company shall be furnished at the expense of the Insured Person/claimant or his legal personal representatives and shall be in such form and of such nature as the Company may prescribe.

11. TIME FOR FILING PROOF OF LOSS

Affirmative proof of loss must be furnished to the Company by the Insured Person at its said office in case of a claim for such loss within sixty (60) days after the termination of the period for which the Company is liable. If it shall be shown not to have been reasonably possible to give such notice within such time by the Insured Person, such proof is furnished as soon as reasonable possible and within one (1) year after the date of such loss.

12. SUFFICIENCY OF NOTICE

Such notice by or on behalf of the Insured Person given to the Company, with particulars sufficient to identify the Insured Person shall be deemed to be notice to the Company. Failure to give notice within the time provided in this Policy shall not invalidate any claim if it shall be shown not to have been reasonably possible to give such notice and that notice was given as soon as was reasonably possible.

13. IMMEDIATE PAYMENT OF INDEMNITIES

All indemnities provided in this Policy for loss other than that of time on account of disability will be paid immediately after receipt of due proof.

14. TO WHOM INDEMNITIES PAYABLE

Any indemnity paid for loss of life shall be payable to the Insured Person's estate. All other indemnities shall be payable to the Insured Person except for Emergency Medical Evacuation and Repatriation of Remains where relevant amounts will be paid directly to the provider of service in accordance with the terms of this Policy.

15. FRAUDULENT CLAIMS

If the claim be in any respect fraudulent or if any fraudulent means or devices be used by the Insured Person or anyone acting on the behalf to obtain any benefit under this Policy, all benefit in respect of such claims shall be forfeited.

16. RIGHT OF RECOVERY

In the event that authorization of payment and/or payment is made by the Company and/or its authorized representative for a claim which is not covered under this Policy or when the limit of liability of this insurance exceeds, the Company reserves the right to recover the said sum or excess from the Insured Person.

17. RIGHTS OF THIRD PARTIES

Nothing in this Policy is intended to confer a direct enforceable benefit on any party other than the Insured Person(s) and the Company, whether pursuant to the Contracts (Rights of Third Parties) Ordinance or otherwise. It is hereby noted and agreed, however, that the Company and the Policyholder named in the Schedule alone have the right to amend this Policy by agreement or (if any such rights exist in the Policy) to cancel or terminate the Policy, without giving notice, or requiring the consent of any other person.

18. MEDICAL EXAMINATION AND TREATMENT

The Company at its own expense shall have the right and opportunity to conduct medical examination on the Insured Person when and as often as it may reasonably require during a pending claim under this Policy and to make an autopsy in the case of death where it is not forbidden by law. The Insured Person shall as soon as possible after the occurrence of any Injury or Sickness obtain and follow the advice of a duly Qualified Medical Practitioner and the Company shall not be liable for any consequences arising by reason of the Insured Person's failure to obtain or follow such advice and use such appliances or remedies as may be prescribed.

19. SUBROGATION

In the event of any payment under this Policy, the Company shall be subrogated to all the Insured Person's rights of recovery therefore against any person or organization and the Insured Person shall execute and deliver instruments and papers and do whatever else is necessary to secure such rights. The Insured Person shall take no action after the loss to prejudice such rights.

20. LEGAL ACTIONS

No action at law or in equity shall be brought to recover on this Policy prior to the expiration of sixty (60) days after written proof of loss has been furnished in accordance with the requirements of this Policy. No such action shall be brought after the expiration of three (3) years after the time written proof of loss is required to be furnished.

21. LIMITATIONS CONTROLLED BY STATUTE

If any time limitation of this insurance, with respect to giving notice of claim or furnishing proof of loss, is less than that permitted by the law of Hong Kong, such limitation is hereby extended to agree with the minimum period permitted by such law.

22. COMPLIANCE WITH POLICY PROVISIONS

Failure to comply with any of the provisions contained in this Policy shall invalidate all claims hereunder.

23. POLICY INTERPRETATION

This Policy is subject to the laws of the Hong Kong and the parties hereto agree to submit to the jurisdiction of the courts of the Hong Kong.

24. ASSIGNMENT

No notice of assignment of interest under this Policy shall be binding upon the Company unless and until the original or a duplicate thereof is filed at the Home Office of AIG Insurance Hong Kong Limited, 7/F, One Island East, 18 Westlands Road, Island East, Hong Kong and the Company's consent to such assignment is endorsed. The Company does not assume any responsibility for the validity of an assignment. No provision of the charter, constitution or by-laws of the Company shall be used in defense of any claim arising under this Policy, unless such provision is incorporated in full in this Policy.

25. DATA PRIVACY

The Insured Person / Policyholder / Applicant agree(s) that:

- The personal data collected during the application process or administration of this policy may be used by AIG HK for the purposes stated in its Data Privacy Policy, which include underwriting and administering the insurance policy being applied for (including obtaining reinsurance, underwriting renewals, data matching, claim processing, investigation, payment and subrogation).
- AIG HK may use the Insured Person's / Policyholder's / Applicant's contact details (name, address, phone number and e-mail address) to contact him/her about other insurance products provided by the AIG group (assuming AIG HK has obtained the agreement of the Insured Person / Policyholder / Applicant to use such contact details for this purpose).
- AIG HK may transfer the personal data to the following classes of persons (whether based in Hong Kong or overseas) for the purpose identified:
 - third parties providing services related to the administration of this policy, including reinsurers (per (a) above);
 - financial institutions for the purpose of processing this policy and obtaining policy payments (per (a) above);
 - in the event of a claim, loss adjusters, assessors, third party administrators, emergency providers, legal services providers, retailers, medical providers and travel carriers (per (a) above);
 - for the purpose of conducting direct marketing activities (per (b) above), marketing companies authorized by the AIG group;
 - another member of the AIG group (for all of the purposes stated in (a) and (b)) in any country; or
 - other parties referred to in AIG HK's Data Privacy Policy for the purposes stated therein.
- The Insured Person / Policyholder / Applicant may gain access to, or request correction of his/her personal data (in both cases, subject to a reasonable fee), or change the option he/she previously elected in relation to the use of his/her contact details for direct marketing at any time, by writing to the Privacy Compliance Officer of AIG Insurance Hong Kong Limited at GPO Box 456 or cs.hk@aig.com. The same addresses may be used to contact AIG HK with any comments in relation to the services it provides. The full version of AIG HK's Data Privacy Policy can be found at www.aig.com.hk.

26. CLERICAL ERROR

Clerical errors by the Company shall not invalidate insurance otherwise valid nor continue insurance otherwise not valid.

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旅遊智易保 (全年計劃)

旅遊保險條文及條款

當美亞保險香港有限公司(以下稱爲“本公司”)收妥保費後,即依據**保障列表**或批註內的定義、不保事項、限制、條款和條件,同意承保名列於**保障列表**內之**受保人**及根據本保單之條文及條款對在受保日期內所出發和發生的旅程(以下稱爲“受保旅程”)之損失作出賠償。
保障列表、旅遊保險條文及條款和批註(如有者)將構成完整的保險契約(以下稱爲“保單”)。
此保險只適用於常規的假期旅遊及文職商務旅遊,而不適用於探險跋涉或類似旅程。

保障範圍 第1項 - 緊急醫療費用及援助

1a. 醫療費用

在此項下,若**受保人**於受保旅程期間蒙受**損害**或**疾病**而引致在返回香港前治療的醫療費用,本公司將以不超過**保障權益表**所規定之**最高賠償額**賠償**受保人**有關醫療費用,該醫療費用必須是(i)由首次蒙受該**損害**或**疾病**起365日以內所引致的,及(ii) **實際、合理及慣常醫療必需費用**。

- 覆診費用
如**受保人**於返回香港後因以上的**損害**或**疾病**而需要覆診(意即繼續接受在**受保人**回港前有關**損害**或**疾病的治療**),本公司將賠償不超過HK\$50,000的覆診費用,但該覆診費用必須是(i)返回香港後3個月內引致的,及(ii)由執業西醫之**合格醫生**收取的**實際、合理及慣常醫療必需費用**。此覆診費用亦包括中醫診治,每日每症最高為HK\$150,最高累積至HK\$1,800。
在任何情況下,第1a項「醫療費用」的總賠償額不可超過**保障權益表**所規定**最高賠償額**。

1b. 緊急醫療運送

若**受保人**在受保旅程期間於海外蒙受**損害**或**感染疾病**,於本公司或其授權代表(表)的意見下,認為醫療上適合將**受保人**運送至其他地方接受治療,或運送回香港或日常居住地,而本公司或其授權代表亦會根據**受保人**當時的受傷程度或病情,安排最適當之醫療運送方式,本公司則會直接支付該醫療運送所需之有關保障費用。
保障費用是指由本公司或其授權代表因緊急運送**受保人**而提供或安排之醫療運送、服務及設備等費用。

所有醫療運送方式及最終目的地均由本公司或其授權代表決定及根據當時醫療情況安排,包括租用空中或陸上救護車、航空運輸、鐵路或其他適合的運送方式。
受保人或其代表必須致電 Travel Guard 國際支援熱線 (852) 3516 8699 作出有關安排。

1c. 運返費用

若**受保人**在受保旅程期間因蒙受**損害**或**感染疾病**而死亡,本公司或其授權代表將安排運返**受保人**之遺體返回香港或日常居住地。本公司將直接支付有關保障費用。
此外,本公司將賠償由當地殯儀承辦者提供及執行的棺材、防腐和火化事宜上的實際費用。
受保人或其代表必須致電 Travel Guard 國際支援熱線 (852) 3516 8699 作出有關安排。

1d. 海外住院現金津貼

若**受保人**於受保旅程期間,因蒙受**損害**或**感染疾病**需入住當地醫院為留院病人,本公司將按**受保人**留院之日數每日賠償HK\$500予**受保人**,但不可超過**保障權益表**所規定之**最高賠償額**為上限。
在任何情況下,第1d項「海外住院現金津貼」的總賠償額不可超過**保障權益表**所規定之**最高賠償額**。

1e. 緊急啟程

若**受保人**在受保旅程期間死亡、遭遇**嚴重損害**或**嚴重疾病**,需要一名已成年的**直系親屬**前往或一名**旅遊夥伴**停留該地陪伴及/或照顧**受保人**,本公司將根據**保障權益表**所載**最高賠償額**為限賠償其合理的額外**住宿**費用及/或**旅遊票**。此保障只可在同一旅程中索償一次。

1f. 子女護送

若**受保人**在受保旅程期間,因遭受**嚴重損害**或**感染嚴重疾病**需入住當地醫院,而其同行之15歲以下之小童沒有其他**直系親屬**陪伴,本公司將根據**保障權益表**所載**最高賠償額**為限賠償一名**直系親屬**或一名**旅遊夥伴**之合理額外的**住宿**及/或交通費用,以便陪伴該名小童返回香港。

適用於第1項 - 緊急醫療費用及援助的不保事項

以下情況不受保障:

- 根據**合格醫生**之意見,在合理的情況下該項手術或治療可延期至返回香港後進行。
- 受保人**旅遊之目的為醫治**疾病**或**受保人**違反**合格醫生**之勸告出外旅遊。
- 一切毋須由**受保人**支付及/或已包括於旅遊費用中的支出。
- 未能提供**合格醫生**之醫療報告。
- 受保人**拒絕依循**合格醫生**之建議返回香港繼續治療,或在身體狀況許可下,拒絕繼續其受保旅程。
- 任何不經由本公司或其授權代表同意及提供服務的費用,除非**受保人**或其**旅遊夥伴**在緊急及不能控制的情況下無法致電 Travel Guard 國際支援熱線,在此情形下,本公司只補償**受保人**在同一情況下本公司或其授權代表會提供的服務而衍生的費用(只適用於第1b項「緊急醫療運送」)。
- 未經由本公司或其授權代表允許及安排之遺體運返(只適用於第1c項「運返費用」)。
- 任何於受保旅程完結後於香港以外地方的覆診費用。
- 任何醫院內獨立或私人房間、特別或私家看護的額外費用;非醫療用的個人服務,包括收音機、電話(第1項「海外住院現金津貼除外)及類似的物品;採購或採用特別支架、儀器或裝置的額外費用。
- 任何整容手術、眼睛折射造成的誤差、助聽器及佩戴眼鏡的驗光單,但於受保旅程期間因**意外蒙受損害**所引致的除外。
- 基於同一原因於第1e項「緊急啟程」及第1f項「子女護送」同時提出的索償。

第2項 - 人身意外保障

2a. 乘搭交通工具之意外

若**受保人**在受保旅程期間,以付款乘客身份(不是機師、操作員或空中服務員)乘搭或上落**公共交通工具**期間發生**意外**,於事故發生當日起計90天內在直接及並無其他原因下引致以下之損害事項,本公司將依**保障權益表**及其**保額百分率**賠償予**受保人**。

此部份提供額外保障予**受保人**在乘搭或上落由旅行社安排的交通工具、或駕駛或乘坐汽車期間發生之**意外**,於事故發生當日起計90天內在直接及並無其他原因下引致以下之損害事項,本公司將依**保障權益表**及其**保額百分率**賠償予**受保人**。

2b. 其他意外

若**受保人**在受保旅程期間,因遭遇**意外**而蒙受**損害**,而非上述第2a項「乘搭交通工具之意外」,於事故發生當日起計90天內在直接及並無其他原因下引致以下的損害事項,本公司將依**保障權益表**及其**保額百分率**賠償予**受保人**。

保障表

損害事項	保額百分率
意外死亡及永久傷殘	
1. 死亡	100%
2. 永久完全殘廢	100%
3. 永久及無法痊癒之四肢癱瘓	100%
4. 一眼或雙眼永久完全失明	100%
5. 喪失任何一肢或任何一肢永久完全喪失功能	100%
6. 喪失任何雙肢或任何雙肢永久完全喪失功能	100%
7. 雙耳完全失聰及喪失言語能力	100%

8. 永久完全失聰		
(a) 雙耳		75%
(b) 單耳		15%
三級程度傷傷		
部位	受損佔有關部位總面積之百分比	保額百分率
1. 頭部	達頭部總面積之 8%或以上	100%
	達頭部總面積之 5%至 8%以下	75%
	達頭部總面積之 2%至 5%以下	50%
2. 身體 (頭部以外)	達其餘身體部份總面積之 20%或以上	100%
	達其餘身體部份總面積之 15%至 20%以下	75%
	達其餘身體部份總面積之 10%至 15%以下	50%

賠償:

- 於同一**損害**中,本公司只負責賠償以上任何一項之損害事項,若遭受多於一項損害事項,本公司則以**最高賠償額**(即最高保額百分率)的事項及以不超過列於**保障權益表**所載之**最高賠償額**為賠償依據。
- 倘本公司已賠償以上保障表中一項的損害事項,**受保人**所有的保障會即時終止,但不會影響該**意外**所導致的**損害**賠償事宜。
- 倘**受保人**蒙受**損害**前局部手足或器官已喪失功能,而在**損害**後變成全部殘廢,本公司會決定**保額百分率**作為賠償該**損害**所引致的殘廢部份,而於受保**意外**發生前已永久喪失功能的部份則不獲賠償。
- 此保單生效日期時,**受保人**年齡為17歲以下,本公司會根據第2項「人身意外保障」之保障表的損害事項及其**保額百分率**作出賠償,最高賠償至HK\$250,000。

此部份提供額外保障予**受保人**在以下期間蒙受的**損害**:

- 當**受保人**於原定**公共交通工具**出發前3小時內直接由日常香港住所或工作地點前往香港入境事務處的期間以開始其旅程;
- 受保**旅程**完畢,當**受保人**回香港後3小時內直接由香港入境事務處返回日常住所或工作地點的期間。

暴露、倘**受保人**在受保旅程期間發生**意外**,及在無法避免的情況下身處於自然環境中(包括但不限於長期及嚴酷的天氣或環境狀況),並於**意外**發生後12個月內直接因此無法避免的情況下引致死亡或傷殘,本公司將按照保障表賠償予**受保人**。

失蹤處理、倘**受保人**在旅程中所乘搭之**公共交通工具**發生**意外**而導致失蹤、墮毀或沉沒,**受保人**因而失蹤及於該次**意外**事件發生後連續12個月內仍無法尋回,則本公司有理由相信**受保人**已因該次**意外**死亡,並作出**人身意外**保障的賠償。但**受保人**的遺產管理者必須先填妥及遞交保證書,同意日後如發現**受保人**並未因該次**意外**導致死亡,將退回此項賠償予本公司。

適用於第2項 - 人身意外保障的不保事項

- 於此第2項保障,本公司不負責一切由**疾病**或**病毒**引致的**損害**。

第3項 - 緊急人息援助

若**受保人**於受保旅程中蒙受**損害**及於返回香港後,根據**合格醫生**之建議下不能返回其慣常及可賺取收入的工作最少7天,本公司會按每滿1週之病假賠償HK\$1,250,最高賠償為24週及以不超過**保障權益表**為上限。

適用於第3項 - 緊急人息援助的不保事項

以下情況不受保障:

- 受保人**未能出示由其僱主發出證明**受保人**受僱狀況的正式或合法證明文件。
- 未能出示由**合格醫生**發出證明**受保人**不能返回其慣常及可賺取收入的工作之醫療報告。

第4項 - 旅程阻礙保障

4a. 取消旅程

若**受保人**於原定受保**旅程**出發前90天內因下列原因(以下(ii)及(iv)除外)而需要取消受保**旅程**,本公司以不超過**保障權益表**內所規定之**最高賠償額**賠償**受保人**無法由其他途徑取回其已支付及法律上須負責支付之**旅費**及/或**住宿**費用:

- 受保人**、其**直系親屬**、**密切商業夥伴**或**旅遊夥伴**死亡、遭受**嚴重損害**或患上**嚴重疾病**;
- 受保人**收到傳票需出庭作證、當陪審員或需被隔離;
- 受保人**於原定受保**旅程**出發前1星期內,突然爆發**公共交通工具**機務員工罷工、目的地廣泛性爆發傳染病、暴動或民亂。
- 受保人**及/或其**旅遊夥伴**之**香港主要住所**於受保**旅程**出發前1星期內因火災、水淹、地震或類似的天然災害,導致嚴重損毀,需要**受保人**及/或其**旅遊夥伴**於出發當日留於該處。

若**受保人**已開始其受保**旅程**,此第4a項「取消旅程」保障便不再生效。

4b. 旅程中斷

(1) 提早結束旅程

若**受保人**在受保**旅程**期間,因下列原因必須結束及縮短受保**旅程**返回香港,本公司將以不超過**保障權益表**內所規定的**最高賠償額**,賠償**受保人**不能退回之未享用的**旅費**及/或**住宿**費用及/或額外合理及/或實際的交通及/或**住宿**費用:

- 受保人**或於香港居住的**密切商業夥伴**死亡、蒙受**嚴重損害**、患上**嚴重疾病**或遭遇劫賊;
- 受保人**的**直系親屬**或**旅遊夥伴**死亡、蒙受**嚴重損害**或患上**嚴重疾病**;
- 在未能預料情況下,目的地突然爆發**公共交通工具**機務員工罷工、暴動或民亂、天然災害或廣泛性爆發傳染病,以致**受保人**不能繼續原定的受保**旅程**。

(2) 更改旅程

若**受保人**於開始其受保**旅程**後因目的地突然爆發**公共交通工具**機務員工罷工、暴動或民亂、惡劣天氣、天然災害或廣泛性爆發傳染病,本公司將以不超過**保障權益表**內之**最高賠償額**賠償**受保人**因要繼續前往原本包括於受保**旅程**目的地而引致額外合理的交通及/或**住宿**費用。

第4b(1)項「提早結束旅程」的保障是根據受保**旅程**中斷後,按比例賠償剩餘**旅程**日數之未享用的**旅費**及/或**住宿**費用。受保**旅程**中第4b(1)項「提早結束旅程」及第4b(2)項「更改旅程」的額外交通及/或**住宿**費用的賠償不可超過**保障權益表**內所載的**最高賠償額**。

(3) 強制隔離保障

在受保**旅程**期間,若**受保人**因被懷疑患上大流行病而被強制隔離,本公司將以不超過**保障權益表**的最高賠償額,按比例賠償**受保人**不能退回之未享用的基本團費及/或**住宿**費用。
第4b(3)項「強制隔離保障」是以受保**旅程**期間**受保人**被隔離日數按比例賠償未享用的基本團費及/或**住宿**費用。

此外,第4b(1)項「提早結束旅程」、第4b(2)項「更改旅程」及第4b(3)項「強制隔離保障」的合共賠償額不可超過**保障權益表**第4b項「旅程中斷」所載的**最高賠償額**。第4b項「旅程中斷」的保障亦

只有在**受保人**未知道任何將會引起**旅程**中斷的事件前安排受保旅程才會有效。

適用於第 4 項 - 旅程阻礙保障的不保事項

以下情況不受保障：

- 受保於其他保險或政府計劃，或將會獲得酒店、**公共交通工具**、旅行社、其他航運機構或酒店的賠償或退款。
- 直接或間接因政府之規例或監管，旅行社、導遊公司或**公共交通工具**機構的破產、結束或違約。
- 在購買此保險前已意識到可能引起取消或中斷**旅程**的情況。
- 直接或間接因**受保人**未能盡早通知旅行社、導遊公司、航運機構或旅館因第 4a 項「取消旅程」其中 i 至 iv 項的原因而要取消**旅程**或因第 4b(1)項「提早結束旅程」其中 i 至 iii 項的原因而要提早結束**旅程**。
- 基於同一原因於第 6a 項「旅程延誤」、第 4b(1)項「提早結束旅程」及第 4b(2)項「更改旅程」同時提出的索償。
- 受保人未能提供由政府或其他授權機構所簽發的有關強制隔離書面確認信，內容包括但不限於有關隔離的時期及隔離的原因。

第 5 項 - 個人財物保障

5a. 個人行李及物品

若**受保人**在受保**旅程**期間，屬於其個人之行李、衣服及個人物品有所遺失或損毀(包括穿戴或存放於行李箱內)，本公司以不超過**保障權益表**所規定之**最高賠償額**賠償予**受保人**。若修理費用超越損毀物品之價值時，本公司於處理該賠償申請時，會視該物品已遺失或被竊。賠償額為該物品之實際價值，但以每件、每對或每套的最高 HK\$3,000 為限額。若物品已使用超過一年(由購買日期起計)，本公司有權根據其損耗及折舊程度賠償其重估價值或維修此物品。

適用於第 5a 項 - 個人行李及物品的不保事項

以下情況不受保障：

- 貨物或貨艙、食物、動物、汽車(包括配件)、電單車、單車、船隻、發動機、其他交通工具、傢俬、古董、珠寶手飾或配件、手提電話(包括電子手帳電話及配件)、現金(包括支票/旅遊支票等)、電子貨幣(包括信用卡或八達通等)、證券、票或文件。
- 正常之磨損、消耗、蟲蛀、寄生蟲、固有毛病、或因維修、清潔、更改而導致的損失。
- 租借物品之遺失或損毀；
- 直接或間接因暴動、反叛、革命、內戰、篡權、恐怖行為或因政府意圖防止此等動亂所引起的損失；或由任何政府或公共機構基於任何海關或其他條例採取的行動而扣留、破壞、隔離或檢獲該財物；或走私財物或非法攜帶或交易的財物。
- 受保於其他保險，或將會獲得公共交通工具機構、酒店及其他服務供應商的退款。
- 已獲第三者機構提供維修服務，使操作回復正常的物品。
- 任何**受保人**蓄意以不同交通工具寄運之行李或分開寄運或郵寄的行李、紀念品或其他物品。
- 在公眾場所沒有**受保人**的看管下，或因**受保人**疏忽保管其財物而導致行李及個人物品的遺失。
- 存錄於磁帶、記憶儲存時、磁碟或其他的資料遺失。
- 易碎物品的破裂或損毀。
- 在酒店或**公共交通工具**機構保管下的損失，除非於3天內以書面通知該酒店或**公共交通工具**機構，如該機構為航空公司，需獲得其財物索賠報告。
- 遺失後24小時內未有向當地警方報失及未能提交當地警方之遺失報告。
- 任何因神秘失蹤而導致的損失。
- 因錯誤、遺漏、兌換率的浮動或貶值而出現的缺額。
- 遞交之索償物件收據上的名字並非**受保人**的名字。
- 基於同一原因於第 6b 項「行李延誤」同時提出的索償。

5b. 個人金錢

若**受保人**在受保**旅程**期間遺失的現金、銀行鈔票、旅行支票及匯票，本公司將賠償**受保人**實際所遺失的金額，但以不超過**保障權益表**所載之最高賠償為上限；**受保人**必須於遺失事件發生後 24 小時內向當地警方報失，並於索償時提交書面文件及警方之正本報告。

適用於第 5b 項 - 個人金錢的不保事項

以下情況不受保障：

- 電子貨幣(包括任何信用卡或八達通等)或證券。
- 遺失後24小時內未有向當地警方報失及未能提交當地警方之遺失報告。
- 錯誤、遺漏、兌換率的浮動或貶值而出現的缺額。
- 沒有立即向旅行支票的簽發銀行當地的分行或代理人報告旅行支票損失事宜。
- 任何因神秘失蹤而導致的損失。
- 直接或間接因暴動、反叛、革命、內戰、篡權、恐怖行為或因政府意圖防止此等動亂所引起的損失；或由任何政府或公共機構基於任何海關或其他條例採取的行動而扣留、破壞、隔離或檢獲的現金、銀行鈔票、旅行支票或匯票；或走私現金、銀行鈔票、旅行支票或匯票(或因此行動引致的相關收益)；或非法攜帶或交易的現金、銀行鈔票、旅行支票或匯票(或因此行動引致的相關收益)。

5c. 旅遊證件

若**受保人**在受保**旅程**期間直接間接被搶劫、爆竊或偷竊而遺失之旅遊證件及/或旅遊票，本公司將以**保障權益表**所載之最高賠償為上限賠償**受保人**(i)旅遊證件及/或旅遊票所需補領的費用；及/或(ii)因安排行程而必須衍生的額外合理的交通及/或住宿費用，而該費用僅作證件補領及**旅程**安排之用。

適用於第 5c 項 - 旅遊證件的不保事項

以下情況不受保障：

- 遺失後24小時內未有向當地警方報失及未能提交當地警方之遺失報告。
- 與是次受保**旅程**無關之證件及/或簽證及/或旅遊票。
- 任何因神秘失蹤而導致的損失。
- 直接或間接因暴動、反叛、革命、內戰、篡權、恐怖行為或因政府意圖防止此等動亂所引起的損失；基於海關條例而遭破壞或檢獲；政府充公之違禁品或非法攜帶或交易的物品。
- 同時擁有臨時或久屬同性質的旅遊證件，此情況下，**受保人**只能選擇索償其中一款。

第 6 項 - 延誤保障

6a. 旅程延誤

若**受保人**於受保**旅程**中，直接間接因惡劣天氣、天然災害、機械故障、騎劫或所乘之**公共交通工具**機構員工罷工，引致**受保人**所乘搭的**公共交通工具**比顯示於由**公共交通工具**機構提供的行程表內的出發或到達時間延誤至少 5 小時，首滿 5 小時的延誤，本公司會賠償 HK\$300，其後每滿十(10)小時的延誤賠償 HK\$700，但以**保障權益表**所規定之**最高賠償額**為上限。

出發或到達延誤是根據由**公共交通工具**機構提供給**受保人**的行程表上列明的原本航班出發或到達時間，直至 a) 原本**公共交通工具**或 b) 有關**公共交通工具**機構安排之首班取替的交通工具實際出發/或到達的時間作出計算。

在同一**公共交通工具**的延誤下，**受保人**只可選擇索償出發或到達其中一項的延誤。此項保障須在有關**公共交通工具**機構或其授權代表公佈有關事件可引致**公共交通工具**延誤前購買才會有效。

適用於第 6a 項 - 旅程延誤的不保事項

以下情況不受保障：

- 未能獲取**公共交通工具**機構書面證明延誤的時間及原因。
- 於受保**旅程**安排前已宣佈會引致延誤的事件。
- 受保人**遲到機場或碼頭(即在最後登記時間結束後才到達，但因**公共交通工具**機構員工罷工

引致的遲到則除外)。

- 受保人**最終未有登上有關**公共交通工具**機構所安排之首班取替交通工具。
- 受保人於受保**旅程**中所乘搭之**公共交通工具**延遲到達而相繼引起各接駁**公共交通工具**之延誤或未能登上預定接駁**公共交通工具**而導致的損失。
- 基於同一原因於第 4b(2)項「更改旅程」中同時提出的索償。

6b. 行李延誤

若**受保人**於受保**旅程**中因所乘搭的**公共交通工具**機構誤送行李以致**受保人**於抵達目的地十小時後仍未取得其行李，本公司將以**保障權益表**上所載賠償**受保人**，此保障只可於同一**旅程**中索償一次。

適用於第 6b 項 - 行李延誤的不保事項

以下情況不受保障：

- 未能獲取**公共交通工具**機構書面證明延誤時間及原因。
- 任何**受保人**蓄意以不同交通工具寄運之行李或分開寄運或郵寄的行李、紀念品或其他物品。
- 基於同一原因於第 5a 項「個人行李及物品」同時提出的索償。

第 7 項 - 個人責任

若**受保人**在受保**旅程**期間遇上下列情況而須負上法律責任賠償予第三者，本公司會以不超過**保障權益表**所規定之**最高賠償額**作出賠償：

- 誤傷第三者身體或引致其死亡；
- 誤損或遺失第三者之財物。

在未得到本公司書面同意前，**受保人**不可向他人承認過失、提出或允許付出任何賠償或有關承諾、或牽涉入任何訴訟中。

適用於第 7 項 - 個人責任的不保事項

以下情況不受保障：

- 所有屬於**受保人**、其直系親屬、僱主或僱員的財產損失。
- 受保人**對其直系親屬、僱主或僱員的責任。
- 屬於**受保人**或由**受保人**看管的財產。
- 在合約預期下應擔當的責任。
- 因**受保人**故意、蓄意或非法活動所引起的責任。
- 由於擁有或使用車輛、飛機、輪船、槍械或動物所引起的責任。
- 因貿易、商業或專業有關所引致的責任。
- 任何因非法行為引致的責任。

第 8 項 - 信用卡保障

如**受保人**因意外死亡及已獲得本保單第 2 項 - 人身意外保障之賠償，本公司亦會以不超過**保障權益表**所規定之最高賠償額，賠償**受保人**於受保**旅程**中以信用卡購買之物品而到期未繳之款項予**受保人**的合法遺產承辦人。

適用於第 8 項 - 信用卡保障的不保事項

以下情況不受保障：

- 因過期未繳而需支付之利息或財政費用。
- 已受其他保險的保障。
- 一切由疾病或病毒引致的意外死亡。

第 9 項 - 家居物品保障

如**受保人**於受保**旅程**期間，其香港主要住所遭爆竊，本公司會以不超過**保障權益表**上所規定之**最高賠償額**，賠償**受保人**於該住所擁有、使用或穿戴但因此而遺失或損毀的家居用品。損失必需向警方報告及需持有由警方發出的書面文件或報告作證明。若家居物品已使用超過一年(由購買日期起計)，本公司有權根據其損耗及折舊程度賠償其重估價值或維修此物品。

適用於第 9 項 - 家居物品保障的不保事項

以下情況不受保障：

- 受保人**的香港主要住所於受保**旅程**開始前 30 天或以上並未有任何人居住而引致的爆竊。
- 以下物品的遺失或損毀不受保障：債券、匯票、現金、貨幣、支票、本票、郵政匯票、記錄或帳簿或類似的證明、餐券或任何贈券、儲值卡、信用卡、契約、所有權證明文件、原稿、獎章、護照、郵票、股票、任何類型的隱形眼鏡、手提電話、旅遊票、食物、動物、汽車(包括配件)、電單車、船隻、發動機及其他交通工具、存錄於磁帶、記憶儲存時、磁碟或其他的資料遺失。
- 受保人**於受保**旅程**完結返回香港後 24 小時內未有向警方報案及未能提交警方之報告。
- 因錯誤、遺漏、兌換率的浮動或貶值而出現的缺額。
- 任何用於工作上、或具有專業或商業用途的儀器或設備，或已受其他保險的保障。
- 由合法進入香港主要住所人士作出的惡意或蓄意破壞。
- 受保人**未有為其香港主要住所作出合理的防衛及預防以減低對本保單的索償。

主要不保項目

本公司不會賠償任何保單內直接或間接因以下事項而引致的索償：

- 戰爭、內戰、敵侵、叛亂、革命、運用軍事力量、篡奪政府或軍權；
- 本保單不會負責已經計劃或實際在、前往或途經古巴、伊朗、敘利亞、蘇丹、北韓、或克里米亞地區的旅程直接或間接地所引致的任何損失、損害、受損或法律責任；
- 本保單不會負責古巴、伊朗、敘利亞、蘇丹、北韓、或克里米亞地區居民所蒙受或遭受的任何索償、損失、損害或法律責任；
- 凡本公司提供之受保條款、索償賠償或本公司提供之保障會導致本公司、其母公司或其最終控制實體受到任何聯合國決議的制裁、禁止或限制、歐盟或美國的貿易或經濟制裁、法律或規例，本公司不會被當作提供這些保障及本公司不會負責任何該些索償或提供任何有關之保障；
- 受保人**不法的行為，或遭海關或有關當局充公、扣留或破壞；
- 任何政府的法案或禁令；**受保人**違反政府法案；或在預先警告會爆發**公共交通工具**職員罷工、暴動或民變、惡劣天氣、天然災害、或傳染病的情況下，**受保人**沒有作出合理的預防以防止索償的出現；
- 任何恐怖行為，但第 1 項「緊急醫療費用及援助」、第 2 項「人身意外保障」、第 3 項「緊急人息援助」及第 8 項「信用卡保障」除外；
- 受保人**沒有合理地看管個人財物，避免損害或減低索償；
- 以乘客或司機身份參與任何類型之賽車；比賽；職業運動或因參與該運動而可賺取收入或報酬；
- 與服用酒精或藥物有關的損失，但由合格醫生所處方之酒精或藥物除外；
- 妊娠、分娩或與之有關的損害或疾病；
- 自殺、企圖自殺或故意自我傷害；或自我暴露於不必要的危險中；
- 任何**受保前**已存在之狀況；先天性或遺傳病；
- 愛滋病或於人體免疫不全病毒血清測試呈陽性反應下出現之損害或疾病；性病；
- 精神病、睡眠、精神或神經失調；
- 受保人**從事或參與海陸空服務或行動；持械工作；以航空公司空勤人員身份搭乘飛機；測試交通工具；參與體力勞動性工作；參與離岸活動，如商業潛水；油田鑽探、採礦、空中攝影；爆竹品處理；演員；地盤工人、漁夫、廚師或廚房工人；導遊或領隊。

17. 受保人旅遊之目的為醫治疾病，或受保人在身體不適合旅遊的情況下旅遊或受保人違反合格醫生勸告出外旅遊；
18. 已從其他方面獲得的賠償，但第 1d 項「海外住院現金津貼」、第 2 項「人身意外保障」、第 3 項「緊急入息援助」及第 6 項「延誤保障」則除外；

定義

「意外」是指於受保旅程期間遇上不能預料及非自願的事件而引致損害。
 「住宿」是指房租費用。
 「後天免疫力缺乏綜合症」或「愛滋病」是參照世界衛生組織之定義為標準，指人體免疫不全病毒血清測試呈陽性反應下出現機會性感染、惡性腫瘤、人類免疫不全病毒感染性腦病變、人體免疫不全病毒之消瘦症候群或其他病症。
 「中醫」是指任何跌打、針灸或中醫師根據中醫藥條例（香港法例第 549 章）合法註冊成為中醫，但是若果中醫為受保人本人或其直系親屬則除外。
 「密切商業夥伴」是指受保人的密切商業夥伴，可提供商業登記或公司的註冊文件予本公司作為佐證。
 「公共交通工具」是指由註冊的航運公司經營以接載付款乘客的巴士、旅遊巴士、的士、渡輪、氣墊船、水翼船、船、火車、電車或地下火車；及由註冊的航空公司或包機公司營運以接載付款乘客的飛機及直升機，來往於商業機場或直升機場之間；及有固定路線及班次的機場巴士。
 「強制隔離」是指受保人被政府或有關授權機構指令隔離。
 「留院」是指因醫療上的需要而在合格醫生的建議下入住醫院，被接納為留院病人接受治療。住院期間是指醫院提供治療而需要向受保人收取住房及膳食費用的期間。
 「生效日期」是指 1) 本保單的開始日期或 2) 取消旅程保障開始生效之日期，以較遲者為準。
 「香港」是指香港特別行政區，英文簡稱 HKSAR。
 「醫院」是指合法經營並為受傷及患病病人提供治療和照顧之醫院（不包括老人院、長期病患中心、靜養、護理、戒酒或戒毒等類似服務之醫療機構），此外，須設有完善的診斷及外科手術設備和 24 小時專業護理及醫療服務。
 「直系親屬」是指受保人的配偶、父母、配偶之父母、祖父母、子女、兄弟姊妹、孫、合法監護人。
 「損害」是指受保人遭遇意外事故，在直接及別無其他原因之下引致之身體損害。
 「受保人」是指受保人名字列於保障列表內或批註內之受保人。
 「旅程」是指該段旅遊期間由受保人離開香港入境事務處櫃檯開始，直至受保人於此段旅遊完結後到達香港入境事務處櫃檯為止，或受保旅程出發後 90 日，或受保日期的到期日，以較早者為準。
 「喪失」或「喪失功能」是指永久完全失去功能或手腕或足踝以上之部位完全分離；若套用於眼睛，是指完全及無法恢復的視力。
 「失聰」是指永久及無法恢復之聽力：
 如果 a 分貝 — 損失聽力至 500 赫 如果 b 分貝 — 損失聽力至 1,000 赫
 如果 c 分貝 — 損失聽力至 2,000 赫 如果 d 分貝 — 損失聽力至 4,000 赫
 (a+2b+2c+d) 之 1/6 高於 80 分貝。
 「喪失語言能力」是指構成語言之口唇音、齒舌音、口蓋音、喉頭音等之四種語言功能中，有三種以上不能發出者，聲帶全部切除或因腦部言語中樞神經的損傷而患失語症。
 「澳門」是指澳門特別行政區，英文簡稱 Macau SAR。
 「惡性腫瘤」是指後天免疫力缺乏症存在下出現包括但不限於卡波西肉瘤、中樞神經系統淋巴瘤或其他已知或未知之惡性病變，直接導致死亡、疾病或殘廢。
 「最高賠償額」是指列於本保單的保障權益表內每項受保保障的賠償額。
 「緊急醫療運送」及第 1c 項「運送費用」兩項保障利益所需的任何費用。本保單僅負責賠償經由合格醫生所處方或治療的費用。倘受保人可從其他來源取回全部或部份費用，本公司則根據保單條款負責賠償剩餘的費用。
 「機會性感染」包括但不限於肺囊蟲肺炎、慢性腸炎之生物膜、過渡性病毒或散佈性的真菌感染。
 「大流行病」指有關流感流行病毒擴散規模遍及世界各地，並導致大部份人類感染，有關程度被世界衛生組織宣佈為大流行警報級別 5 級或以上。
 「保額百分率」是指保單第 2 項「人身意外保障」中之保障表中的投保百分率，用以計算保障之最高賠償。
 「受保日期」是指附加於此保單的保障列表上所列出之受保日期。
 「永久」是指由意外事故發生之日起計損害情況持續至少 12 個月，並於此段時間終結時沒有好轉之跡象。
 「永久完全殘廢」是指由意外事故發生之日起計至少 90 天，受保人因蒙受損害而永久及完全不能從事任何業務或有薪酬的工作；若受保人沒有從事任何工作，則指完全不能進行一般日常生活活動。
 「保單」是指本保單以及於本保單基本條款第一點提及的所有文件。
 「保障列表」是指本保單其中一附頁名為「Policy Schedule」，本公司隨時有權對其作出更改。
 「受保前已存在之狀況」是指受保人、其直系親屬或旅遊夥伴於保單生效日期前因任何疾病或狀況，曾接受合格醫生之治療或建議(a)藥物治療；或(b)確診；或(c)醫療意見；或(d)處方藥劑，或於保單生效日期前已患有任何病徵而導致向本公司索償的情況。
 「主要住所」是指受保人永久居住及只用作為私人寓所的房子或樓宇。
 「保額」是指最高賠償額。
 「合格醫生」是指得到當地政府承認並准許在其管轄範圍內提供醫療服務之人士，但不包括受保人本人或其直系親屬。
 「保障權益表」是指在保障列表中所名為的「保障權益表」，本公司有權隨時對其作出更改。
 「嚴重損害或嚴重疾病」若套用於受保人或旅遊夥伴，是指受保人或旅遊夥伴需要合格醫生診治，及證明會有生命危險及不適於旅行或繼續原定受保之旅程；若套用於受保人的直系親屬或密切商業夥伴，是指其直系親屬或密切商業夥伴需要治療及經合格醫生證明他們會有生命危險，以致受保人需要停止或取消原定受保之旅程。
 「疾病」是指於受保旅程期間在直接及別無其他原因之下所開始罹患或感染之病症。
 「病徵」是指個別人士於失調或疾病前經歷的症候及跡象。
 「恐怖行為」是指所有確實發生或恐嚇使用武力或暴力手段造成損毀、傷害或混亂的行為，或此等行為對個人、財物或政府造成人命傷亡或財物損失，以達至經濟、部落、民族、種族或宗教上的利益，無論有否陳述其追求之目的。若盜竊或其他罪行主要是基於犯案者的個人利益出發，純粹只是犯罪者及犧牲者的關係，則不被視為恐怖行為。恐怖行為是必定要得到（有關）政府證實及承認才算是恐怖主義的行為。
 「三級程度燒傷」是指全部皮膚層因燃燒而完全遭到破壞。
 「旅遊夥伴」是指在整個受保旅程中與受保人同行的人士。
 「旅遊費」是指用以乘坐任何公共交通工具的經濟客位票。
 「實際、合理及慣常」是指(1)在合格醫生的照顧、監管或指示下為受保人提供必須的治療、醫療設施及服務的收費；(2)不超過同一地區內接受類似治療、醫療設施及服務費用之正常水平的收費；及(3)不包括在沒有保險的情況下便不會收取之費用。
 「戰爭」是指戰爭（不論有否宣戰），或任何類似戰爭的行為，包括任何國家利用軍事力量達到經濟、地理、民族、政治、種族、宗教或其他目的。

一般條件

1. 受保人必須為香港合法居民。

2. 在此保險生效時，受保人身體狀況必須適合旅遊及未意識到任何可引致取消或擾亂受保旅程的狀況，否則會喪失索償的權利。
3. 若此保單已經簽發，所有保費均不能退還。
4. 受保旅程必須由香港出發。
5. 如在保障列表的目的地為亞洲，此保障只適用於澳洲、汶萊、柬埔寨、中國、印度、印尼、日本、韓國、寮國、澳門、馬來西亞、緬甸、紐西蘭、菲律賓、新加坡、台灣、泰國、越南之受保旅程。
6. 若受保人為同一旅程購買多於一份由本公司承保的自購綜合旅遊保險，本公司只會根據可獲較高賠償額的一份保單作出賠償。
7. 此保單只適用於常規的假期旅遊及文職商務旅遊，而不適用於探險跋涉或類似旅程。
8. 此旅遊保險計劃每次受保旅程的保障期最長為 90 日。
9. 如受保人蓄意隱瞞或提供錯誤的重要資料，此保單將在生效日期起便失效。

基本條款

1. 完整的保險契約

保障列表、旅遊保險條文及條款和批註(如有者)將構成完整的保險契約。受保人未有在投保書上作出的任何陳述，除欺詐外，均不得作為廢除本契約或利用於合法的訴訟程序。任何營業員均無權更改或刪除本契約的任何條款，任何保險的更改需由本公司簽署同意並簽發批註後，方為有效。

2. 受保資格

個人計劃 — 年齡由 17 至 70 歲。
 家庭計劃 — 任何合法夫婦年齡由 17 至 70 歲及其合法 17 歲以下子女。

3. 續保條件

此保單需於下個保險生效期的開始日前繳付本公司所定之保費，保單方得以續保，本公司有權於保單週年日前 30 日以書面形式寄往或遞交至本公司紀錄內受保人之地址通知對方拒絕續保，或任何續保條件，包括減低賠償上限、增加保費、刪除保障、或任何以上之組合；如本公司已接受續保條件的確認及續保之保費，則已屬同意續保。除非已根據續保條款續保，否則本保單將由保費到期日終止。本公司亦有權隨時更改本保單之保費。

4. 續保寬限期

保費到期日後 31 日為繳付保費之寬限期，除非於續保寬限期內支保費及本保單未有因保單條款而被取消，否則保單將會因欠付保費而於保費到期日終止。續保寬限期並不適用於首次繳付之保費，如本公司並未收取首次保費保單會由生效日起取消。

5. 取消保單

本公司可隨時以書面形式投遞至受保人的最後紀錄之地址，通知解除契約的生效日期。於此情況下，本公司會按此比例退還剩餘保障年度的保費，此種解約並不影響任何已呈交之賠償申請。
 若此保單已經生效，所有保費均不能退還。

6. 保單終止

保單於以下情況終止：

- (a) 保費於本部份第 4 點「續保寬限期」後仍未繳付，所有保障於保單到期日終止；或
 - (b) 符合本保單第 2 項「人身意外保障」中「賠償」第 2 點所述的情況；
 - (c) 已到保單生效期；或
 - (d) 根據本部份第 2 點，當受保人已到達七十歲，保障會於下一個保費到期日終止。
7. 年齡錯誤陳述
 倘受保人錯誤陳述其年齡，而其正確年齡已超出此保單之年齡限制，或於接受保費前保單已屬失效，本公司則只負責承保受保人至保單之年齡限制及退回已多繳之保費，受保人需以書面通知本公司有關之要求。

8. 現況轉變

如受保人在投保書內所提供之資料有任何轉變，受保人須通知本公司有關之變更，否則本公司有權將所有賠償失效。

9. 申請賠償通知的期限

任何賠償申請需於事故發生後 30 日內以書面通知本公司，倘若受保人因意外引致死亡，應立即以書面通知本公司。

10. 損害證明文件

本公司於接獲該書面通知後，會將申請賠償表格送交索償人，以作填寫損害證明之用。倘索償人於書面通知書發出後 15 日內仍未收到該申請賠償表格，索償人可將事故的發生、性質與損害程度於本保單內損害證明文件遞交之期限前提交本公司，本公司會將此書面證明視作已符合本保單條款之要求。本公司所需之任何證明文件，須依據本公司所定之形式及性質提交，而所需費用概由受保人或其合法代理人負責。

11. 證明文件遞送之期限

倘受保人要申請傷殘賠償，受保人需於發生損害後 60 日內將損害證明文件送達本公司；若受保人在合理情況下未能於此限期內遞交證明文件，則須於合理時間內及事發日後 1 年內呈交。

12. 充足的通知期

申請賠償通知書可由受保人或其代表人送交本公司，並提供足夠資料以證明受保人之身份。倘有合理之理由不能於本保單之限期內將通知書送交本公司，而已盡可能將通知書於限期後即送交出，則不會被認為放棄申請賠償權利。

13. 賠償金支付時間

當本公司接獲所需的證明文件後，將根據本保單立即作出合理賠償。

14. 賠償金之支付

倘受保人死亡，賠償金將賠償予受保人的遺產繼承人，其他賠償則賠償予受保人本人，而緊急醫療運送及運送費用之賠償則根據本保單的條款直接支付有關之服務提供機構。

15. 欺騙索償

倘若保單受保人或其代表人在本保單的索償中存有任何欺詐成份，所有賠償均會作廢。

16. 追討權利

若本公司及/或其授權代表支付了不包括在此保單保障範圍內的索償，或超過此保險的賠償限額時，本公司會保留追討受保人之權利。

17. 第三者權利

除受保人及本公司以外，此保單未有賦予其它人士享有按《合約（第三者權利）條例》或以其它方式直接強制執行此保單條款的權益。惟特此說明及同意只有本公司及於保障列表上列明的保單持有人方可享有在無須給予其它人士通知或無須獲其它人士同意的情况下，可藉協議修改此保單或取消/終止此保單（如此保單載有此權利）的權利。

18. 身體檢查

於處理本保單的賠償申請時，本公司有權隨時要求受保人作身體檢查。倘受保人死亡，除法律不允許外，本公司有權要求解剖驗屍，而費用則由本公司負擔。受保人於遭遇損害發生或感染疾病後需聽從合格醫生的醫療建議，若受保人沒有依從正確的療法，本公司不會負責任何賠償責任。

19. 債權人之取代

若本公司已向受保人作出本保單的賠償，便可取代其爭取賠償的權利，向有關人士或機構追討，而受保人必須簽署及遞交法律文件和身份證件，或利用任何方法去保證此項的權利，對於損失此權利後，受保人不得採取任何行動。

20. 法律訴訟

依據本保單所規定之條款及期限內，將損害證明文件送交本公司後，60 日內不得進行法律訴訟以求賠償。倘須訴訟應於本保單規定之損害證明文件送交本公司限期後 3 年內進行，否則不得再進行訴訟。

21. 國家之法律限制

倘本保險有關呈交損害通知書或證明文件之期限少於香港法例所允許之期限，則將依法例延長至所

容許之最低限度的期限。

22. 保單條款之遵從

倘**受保人**有違反本**保單**內所載的任何條文，所有賠償申請均不會被接納。

23. 保單詮釋

本**保單**受香港法例之約束。本**保單**所涉及之人仕均同意服從香港特別行政區法庭之裁決。

24. 轉讓

本**保單**的轉讓權益不會對本公司構成法律的約束力，除非此轉讓權益的正本或副本已保存於美亞保險香港有限公司位於香港港島東華蘭路 18 號港島東中心 7 樓的辦事處，及獲得本公司的確認。此外本公司不會對轉讓的有效性承擔責任。任何的憲章、條款或法規均不可以阻礙本**保單**的索償，除非有關條款已詳細列於本**保單**內。

25. 私隱條例

受保人 / 保單持有人 / 申請人謹此同意及確認：

- (a) 美亞保險可按列於其私隱政策的用途使用於處理此保單申請或管理此保單所收集之個人資料，其用途包括核保及管理已申請的保單（包括獲取再保險、核保續保之保單、資料配對、處理索賠、調查、付款及行使代位權）；
- (b) 美亞保險可使用**受保人 / 保單持有人 / 申請人**的聯絡資料（姓名、地址、電話號碼及電郵地址）聯絡**受保人 / 保單持有人 / 申請人**有關其它由 AIG 集團提供之保險產品(如美亞保險已獲**受保人 / 保單持有人 / 申請人**同意可如此使用其聯絡資料)；
- (c) 美亞保險亦可向以下類別的人士（不論在香港或海外）轉交該些個人資料，作上述列明之用途：

- (i) 提供有關本人/吾等保單管理服務的第三者（包括再保險公司）(如上 (a) 項所述)；
 - (ii) 財務機構，作處理此申請及收取保費（如上 (a) 項所述）；
 - (iii) 公證人、調查員、第三者管理人、緊急支援服務提供者、法律服務提供者、零售商、醫療提供者、及交通工具機構，以處理索償事宜（如上 (a) 項所述）；
 - (iv) AIG 集團授權的市場推廣公司，以作直銷之用(如上 (b) 項所述)；
 - (v) 其它在任何國家之 AIG 集團之成員公司，作上述 (a) 及 (b) 項所有列明之用途；或
 - (vi) 其它於美亞保險私隱政策所列明的人士，作於私隱政策列明之用途。
- (d) **受保人 / 保單持有人 / 申請人**可隨時致函到美亞保險香港有限公司之私隱事務主任(地址:香港郵政總局信箱 456 號或電郵:cs.hk@aig.com) 查閱、或要求修改其個人資料(美亞保險可就查閱及修改要求收取合理費用)，或更改有關其個人資料被使用作直銷用途的選擇。如對美亞保險提供的服務有任何意見，可按上述地址聯絡美亞保險。美亞保險私隱政策的全文載於 www.aig.com.hk。

26. 筆誤

本公司的筆誤不會令生效的**保單**因而失效，或令失效的**保單**因而生效。

此旅遊保險條文及條款的版權為美亞保險香港有限公司所有。未經美亞保險香港有限公司同意不得複製全部或部分旅遊保險條文及條款之內容。

(此中文譯本乃供參考之用，如中文譯本與英文有異，一概以英文為準)



The following "Important Matters" is for reference only and does not form a part of the Policy.
以下之“重要事項”只供參考及不會構成保單之一部份。

IMPORTANT MATTERS

I. Medical Security Service

In the event of a serious Injury or Sickness which requires hospital confinement in overseas, the Company or its authorized representative will arrange payment to the hospital. You just contact the Travel Guard Assistance Hotline which helps those in need of medical care to get to the most appropriate medical facilities available.

II. Emergency Medical Evacuation & Repatriation

Please contact Travel Guard Assistance Hotline for arrangements.

III. Travel Insurance Claims Procedures

To ensure prompt processing of your claim, it is important that you submit a completed claim form with (1) the original or copy of your Policy, (2) proof of departure and arrival dates e.g. travel document, air ticket or train ticket copy, (3) together with all supporting documentation (please refer the following items). You should always retain copies for your records.

Medical Expenses

A full physician's report stipulating the diagnosis of the condition treated and the date the disability commenced in the physician's opinion and the physician's summary of the course of treatment including medicines prescribed and services rendered together with all original bills, receipts and tickets.

Child Guard

All related documents such as medical reports, proof of the relationship between parent(s) and child(ren), receipts of all accommodation and tickets should be submitted with your claim.

Personal Accident

Hospital and Physicians Reports giving details of the nature of the loss, police report where relevant and if death shall have resulted, a copy of the death certificate and the relevant coroner's report.

Journey Cancellation & Interruption

All related documents such as medical reports and receipts of all forfeited and additional accommodation and tickets should be submitted with your claim.

Delay Coverage

A proof of such loss must be obtained in writing from the common carrier management.

Personal Effects

(1) while the baggage or personal effect is/are in the hotel or a common carrier and proof of such loss must be obtained in writing from the hotel management or the common carrier management and such proof must be provided to the Company;

(2) as the result of loss of the baggage or personal effects, personal money, travel document, such loss must be reported to the police having jurisdiction at the place of the loss within twenty-four (24) hours from the incident. Any claim must be accompanied by written documentation from such police.

Personal Liability

Please immediately contact Travel Guard Assistance Hotline for legal advice. Please note: any offer or promise of payment or admit of fault to any other party, or any involvement in any litigation must not be undertaken without the Company's written approval.

The Company has the right to commence or take-over any legal proceedings to defend the Insured Person provided the Company choose to do so and to take any action to recover any payment made under this Policy. The Insured Person must co-operate with the Company to this end and do nothing to prejudice their rights.

重要事項

I. 一般住院保證服務

如受保人在旅遊期間需要入住醫院，本公司或其授權代表可提供協助受保人支付醫療費用予有關醫院。受保人只須在入院前致電 Travel Guard 國際支援熱線安排此項服務。

II. 緊急醫療運送及運返保障

受保人須致電 Travel Guard 國際支援熱線，以安排一切交通及醫療所需。

III. 旅遊保障計劃申請賠償手續

如需要申請賠償，請填妥賠償表格連同(1)保單正本或副本，(2)出入境證明如旅遊證件副本，飛機票，車票等及(3)有關所需文件(請參考下列所需文件)送交本公司，請自留影印本備查。

醫療費用

如申請醫療費用賠償，受保人須附上醫生填寫之報告列明病名 / 受傷情況，病發原因 / 受原因 及日期，處方藥物詳情及其他有關證明文件正本。

子女護送

如申請子女護送，受保人需附上一切有關文件如醫生證明，父母子女關係證明，交通或住宿費收據等。

人身意外保障

一切醫院收據和醫生報告並需列明受傷之性質及傷殘程度等。如遭遇死亡，必須附上死亡證之副本及驗屍官之報告。

旅程阻礙保障

受保人需附上一切有關文件如醫生證明及向旅行社索取文件證明已退回之定金，額外住宿費收據等。

延誤保障

如申請此項賠償，受保人須向有關運載公司取得報告，其報告需列明事發日期，原因及阻延的時間。

個人財物保障

(1) 如在酒店或運載公司內，引致行李損毀及遺失，受保人應向酒店或運載公司管理人員報告行李損毀及遺失，並取得管理人員填寫之報告包括事發日期及經過。受保人應連同損失物品的付款收據，有關證明一併送回本公司。

(2) 如行李金錢/旅遊證件遺失或被盜竊，受保人須於 24 小時內向當地警局報告，並取有關報告。

個人責任

請立即致電 Travel Guard 國際支援熱線查詢有關法律責任問題。請注意:如未經本公司的同意，受保人不可向第三者作出任何法律責任的承諾，或同意賠償。在法律上本公司擁有為受保人辯護的權利，而受保人必須與本公司合作，不可作任何行動以阻止本公司在這方面的權益。

Address 地址: 7/F, One Island East, 18 Westlands Road, Island East, Hong Kong

香港港島東華蘭路18號港島東中心7樓

Enquiry Hotline 查詢電話: (852) 3666 7022

Claims Hotline 索償熱線: (852) 3666 7090

Travel Guard Services
Travel Guard 國際支援服務
(852) 3516 8699

For Emergency assistance, please call our Travel Guard Assistance Hotline.
在旅程中，如有任何緊急事故，請致電Travel Guard國際支援熱線。

- Evacuation and Repatriation Service 醫療運送及運返
- Referral of Legal Service 法律轉介服務
- Pre-Trip Assistance Service 出發前所需的諮詢
- Medical Assistance Service 醫療服務諮詢
- Baggage Service 行李服務
- Emergency Ticket Service 緊急訂票服務

Travel Insurance Endorsement

TravelWise Protection Plan

Effective Date: 1st August 2017 to 31st August 2022 (based on Departure Date)

It is hereby declared and agreed that effective from 1st August 2017 to 31st August 2022 coverage under the **Deluxe Plan** of this Policy shall be extended as follows:

Unless otherwise stated or the context otherwise requires, terms and expressions used in this Travel Insurance Endorsement shall have the same meaning as defined in the Policy.

Schedule of Benefits – Outbound Travel Alert (“OTA”)

Outbound Travel Alert	Red Alert cover	Black Alert cover
Benefits payable for Journey Cancellation due to the relevant OTA	50% of the Loss	100% of the Loss
Benefits payable for Journey Interruption due to the relevant OTA	50% of the Forfeited Amount and/or the Additional Expenses	100% of the Forfeited Amount and/or the Additional Expenses

Benefits

If the Government of Hong Kong issues a Red Alert or Black Alert in accordance with the Outbound Travel Alert System advising Hong Kong travelers to avoid non-essential travel or all travel to a city, location or country that is included in the Insured Person’s original Journey itinerary, then provided that the event giving rise to the Outbound Travel Alert (“OTA”) being issued prevents the Insured Person from commencing or continuing the planned Journey, the Company shall provide cover for the following:

a. Journey Cancellation

The Company shall reimburse the Insured Person according to the Schedule of Benefits – Outbound Travel Alert as stated in this Travel Insurance Endorsement and up to the Maximum Benefit stated in Section 4a “Journey Cancellation” of the Schedule of Benefits in the Policy, for loss of basic tour fee and/or Accommodation paid in advance by the Insured Person and for which the Insured Person is legally liable to pay and which are not recoverable from any other source (collectively, the “Loss”) consequent upon the cancellation of the insured Journey.

Provided that the insured Journey must be cancelled a) as a direct result of the event giving rise to the OTA ; and b) within seven (7) days immediately prior to the scheduled departure of the insured Journey.

b. Journey Interruption

The Company shall reimburse the Insured Person according to the Schedule of Benefits – Outbound Travel Alert as stated in this Travel Insurance Endorsement and up to the Maximum Benefit stated in Section 4b “Journey Interruption” of the Schedule of Benefits in the Policy for either Curtailment Expenses or Journey re-arrangement as stated in b(1) or b(2) below, whichever is applicable:

1. Curtailment Expenses

The Company shall reimburse the Insured Person according to the Schedule of Benefits – Outbound Travel Alert as stated in this Travel Insurance Endorsement and up to the Maximum Benefit stated in Section 4b “Journey Interruption” of the Schedule of Benefits in the Policy for:

- i). the amount of forfeited basic tour fee and/or Accommodation of the insured Journey (collectively, the “Forfeited Amount”), and/or
- ii). the reasonable additional travel fare and/or Accommodation necessarily incurred (collectively, the “Additional Expenses”),

- if as a direct result of the event giving rise to the OTA, the Insured Person had to cut short the insured Journey whilst outside Hong Kong territories and immediately return to Hong Kong .

OR

2. Journey re-arrangement

The Company shall reimburse the Insured Person according to the Schedule of Benefits – Outbound Travel Alert as stated in this Travel Insurance Endorsement and up to the Maximum Benefit stated in Section 4b “Journey Interruption” of

the Schedule of Benefits in the Policy for the additional and reasonable travel fare and/or Accommodation (collectively "Additional Expenses") necessarily incurred after the commencement of the insured Journey outside Hong Kong territories as a direct result of the event giving rise to the OTA. Such reimbursement is only payable if the Additional Expenses are incurred solely for the purpose of continuing to the original planned destination comprised in the insured Journey.

In relation to part b(1) and b(2) above:-

- i). Curtailment Expenses payable under part b(1) above in relation to the amount of forfeited basic tour fee and/or Accommodation will be calculated in proportion to the number of days remaining after the relevant interruption of the Insured Person's Journey.
- ii). Actual expenses incurred by an Insured Person in relation to additional travel fare and/or Accommodation will be reimbursed according to the Schedule of Benefits – Outbound Travel Alert as stated in this Travel Insurance Endorsement and up to the Maximum Benefit as stated in the Schedule of Benefits for the applicable Policy Section.

Conditions applicable to all benefits in this Travel Insurance Endorsement:

1. The Insured Person is only permitted to claim once during the Period of Insurance for any one of the following benefits arising from the same cause:
 - a) Outbound Travel Alert Cover; or
 - b) Section 4 – Journey Cancellation and Interruption.
2. The Red Alert cover is effective only if the insurance is purchased before the announcement or issuance of the Red Alert or Black Alert under the Outbound Travel Alert System.
3. The Black Alert cover is effective only if the insurance is purchased before the announcement or issuance of the Black Alert under the Outbound Travel Alert System.
4. General Conditions are applied.

Exclusions applicable to all sections in this Travel Insurance Endorsement:

1. The Company will not pay under this Travel Insurance Endorsement for claims arising directly or indirectly out of:
 - a. nuclear explosion including all effects thereof or radioactive contamination caused by ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste caused by the combustion and/or ongoing combustion of nuclear fuel; or the radioactive, toxic, explosive or other hazardous properties of any nuclear equipment or component thereof; or
 - b. the dispersal or application of pathogenic or poisonous biological or chemical materials; or the release of pathogenic or poisonous biological or chemical materials.
2. Exclusions Applicable to Section 4 – Journey Cancellation and Interruption and General Exclusions Applicable To All Sections of the Policy shall apply to the cover under this Travel Insurance Endorsement.

Unless otherwise provided, the terms, exceptions and conditions of this Policy, including but not limited to all the General Exclusions and General Conditions, shall remain in full force and apply to this Travel Insurance Endorsement.

Hong Kong, 2nd September 2020

This endorsement is issued by



AIG Insurance Hong Kong Limited

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旅遊保險批註

「旅遊智易保」旅遊保險計劃

生效日期：2017年8月1日至2022年8月31日（以出發日期為準）

本公司於此聲明及同意由2017年8月1日至2022年8月31日，以下保障將附加於本保單的**超卓計劃**。

除非文意另有所指，本旅遊保險批註使用的詞彙及用語與本保單所訂的涵義相同。

外遊警示保障權益表（以下稱為「警示」）

外遊警示	紅色警示保障	黑色警示保障
因相關外遊警示 而需取消旅程的保障金額	損失的 50%	損失的 100%
因相關外遊警示 而需旅程中斷的保障金額	未享用的金額及／或額外支出的 50%	未享用的金額及／或額外支出的 100%

保障

若香港政府根據外遊警示制度宣佈或發出紅色警示或黑色警示，建議香港旅客要避免前赴非必要或不應前赴在受保人原定旅程中的城市、地點或國家，而有關引致發出**外遊警示**（以下稱為「警示」）的事件令受保人不能開始或繼續已計劃的旅程，本公司將提供以下保障：

a. 取消旅程

若受保人需要取消受保旅程，本公司將根據本旅遊保險批註的**外遊警示保障權益表**賠償受保人無法由其他途徑取回其已支付或法律上須負責支付之旅費及／或住宿費用（統稱為“損失”），但不超過本保單保障權益表內第4a項「取消旅程」之最高賠償額。惟：

取消受保旅程必須 (a) 直接因為引致警示的事故而導致 及 (b) 於原本受保旅程出發前7日內發生。

b. 旅程中斷

本公司將以本旅遊保險批註的**外遊警示保障權益表**，及以不超過本保單保障權益表內第4b項「旅程中斷」的最高賠償額，賠償以下 1) 提早結束旅程或 2) 更改旅程其中一項：

1. 提早結束旅程

若受保人直接因引致警示的事件而必須縮短在香港以外的受保旅程並立即返回香港，本公司將根據本旅遊保險批註的**外遊警示保障權益表**及以不超過本保單第4b項「旅程中斷」最高賠償額賠償受保人

- i. 不能退回之未享用的旅費及／或住宿費用（統稱為“未享用的金額”），及／或
- ii. 合理必須衍生的額外交通及／或住宿費用（統稱為“額外支出”）

或

2. 更改旅程

本公司將以本旅遊保險批註的**外遊警示保障權益表**，及以不超過本保單保障權益表內第4b項「旅程中斷」的最高賠償額，賠償受保人在香港以外的受保旅程開始後，因引致警示的事故而合理必須衍生的額外交通及／或住宿費用（統稱為“額外支出”）。有關額外支出必須為繼續前往原本包括於受保旅程目的地之用途才可獲得賠償。

就上述 b(1) 及 b(2)

- i. 於 b(1) 部分，「提早結束旅程」的保障是根據受保旅程中斷後，按比例賠償剩餘旅程日數中未享用的旅費及／或住宿費用。
- ii. 受保人引致的旅費及／或住宿實際費用的賠償將根據本旅遊保險批註的**外遊警示保障權益表**及以不超過本保單保障權益表所載有關項目保障的最高賠償額。

適用於本旅遊保險批註的所有保障項目的條件

1. 受保人於受保期間因同一原因只可索償一次以下任何一項保障：
 - a. 外遊警示保障; 或
 - b. 第 4 項「旅程阻礙保障」
2. 只有在有關外遊警示制度下發出紅色或黑色警示前購買此保險，此紅色警示保障才生效。
3. 只有在有關外遊警示制度下發出黑色警示前購買此保險，此黑色警示保障才生效。
4. 所有一般條件都適用。

適用於本旅遊保險批註的所有保障項目的不保事項包括

1. 本公司不會賠償任何本旅遊保險批註內直接或間接因以下事項而引致的索償：
 - a. 核爆炸包括其所引致的後果或因游離輻射引致的放射性污染或因核燃料或因核燃料燃燒及／或持續燃燒產生的任何核廢料所引致的放射性污染；或任何核能裝置或組件造成的放射性、有毒、爆炸性或其他危險性物質；或
 - b. 散播或運用致病或有毒生物或化學材料，或釋放致病或有毒生物或化學材料。

所有適用於**第4項**「旅程阻礙保障」的不保事項及一般不保事項都適用以上保障

除特別註明外，保單中所有條文及條款及不保事項將維持原有效力。

香港，2020 年 9 月 2 日

(此中文譯本乃供參考之用，如有異議，均以英文為準)

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