

Essentials

TRAVEL INSURANCE

Budget Cover for
International and Domestic Travellers

SINGLE TRIPS • ANNUAL MULTI-TRIPS



Effective 1 July 2009

Arranged by **Cover-More** Travel Insurance



Combined Financial Services Guide and Product Disclosure Statement

This PDS is issued by Great Lakes Reinsurance (UK) PLC (ARBN 127 740 532, ABN 189 64 580 576, AFSL No. 318 603), trading as "Great Lakes Australia"

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The Purpose Of The Product Disclosure Statement (PDS)

The purpose of this PDS is to help you understand the policy and provide you with sufficient information to enable you to compare and make an informed decision about whether to buy or hold the policy.

Part 1 of this PDS includes general information about this insurance. Part 2 of this PDS is the Policy Wording that sets out the specific terms, conditions and exclusions of the cover that We will provide, which should be read carefully to ensure that it provides the cover you need.

You should keep a copy of this PDS and the Certificate of Insurance in a safe place for future reference, such as at the time of a claim.

Who Is The Insurer?

This insurance is underwritten by Great Lakes Australia, an authorised Australian insurer, regulated by the Australian Prudential Regulation Authority ("APRA"). References to "Us", "We" and "Our" in this PDS refer to Great Lakes Australia.

Great Lakes Australia is a branch of Great Lakes Reinsurance (UK) PLC which is a limited liability company incorporated in England and Wales, and a wholly owned subsidiary of the Munich Reinsurance Company. The Munich Re Group is one of the largest insurance groups in the world.

Great Lakes Australia enjoys a Standard and Poor's financial strength rating of AA- (Very Strong) at the date of this PDS.

Who Is Cover-More And The Providing Entity?

Cover-More Insurance Services Pty Ltd, ABN 95 003 114 145, AFS Licence No. 241713, administers the policy (including customer service, medical assessments and claims management) and will usually arrange for the issue of the insurance, either directly or through the appointment of authorised representatives. Alternatively, another financial services licensee or its authorised representatives may arrange for the issue of this insurance.

The person who provides you with this PDS is the Providing Entity. The capacity in which they act is displayed in the Financial Services Guide on page 25 of this booklet.

How You Contact Us

You may contact Us via Our Providing Entity. Alternatively you may contact Cover-More, who We have appointed to administer the policy:

Cover-More Insurance Services Pty Ltd

Customer Service: 1300 130 896

Claims: 1300 36 26 44

Email: enquiries@covermore.com.au

Fax: (02) 8920 2440

Mail: Private Bag 913, North Sydney, NSW, Australia 2059

You may also contact Us directly by phone on +612 9272 2050, or by writing to Us at Great Lakes Australia, PO Box H35, Australia Square NSW 1215.

How To Buy A Policy

1. Ask the agent for a quote.
2. Complete and sign the enrolment form
3. Pay your premium
4. You are covered

Important Information

The insurance We offer you is set out in the PDS and Policy Wording. It is important that you:

- are aware of the limits on the cover provided and the amounts We will pay you (including any excess that applies);
- are aware of the “Words With Special Meanings” found in the Policy Wording on pages 15-16; and
- are aware of the Maximum Benefit Limits shown in the “Schedule of Benefits” chart on pages 5-6.

Change Of Terms And Conditions

In some circumstances the terms and conditions of the policy may be amended by Us provided We give you notice in writing.

Commissions

Cover-More Insurance Services and certain other licensees who arrange for the issue of this PDS, have authority from Great Lakes Australia to do so and will receive remuneration for providing a financial service.

The Providing Entity who provided the policy booklet will also receive a commission for arranging for the issue of Great Lakes Australia’s insurance policies.

Your Duty Of Disclosure

You have a legal duty of disclosure to Us whenever you apply for, or change an insurance policy.

What You Must Tell Us

You have a general duty to disclose to Us everything that you know, or could reasonably be expected to know, is relevant to Our decision whether to insure you, and, if We do, on what terms.

However, your duty does not require you to disclose anything:

- that reduces the risk to be undertaken by Us;
- that is generally well known;
- that We know or, in the ordinary course of Our business, ought to know; or
- in respect of which We have waived your duty.

If You Do Not Tell Us

If you do not answer Our questions honestly or do not properly disclose to Us, We may reduce or refuse to pay a claim or may cancel the policy. If you act fraudulently in answering Our questions or not disclosing to Us, We may refuse to pay a claim or treat the policy as never having existed.

Your General Duty Applies To Changes

Your general duty applies in full when you change or reinstate the insurance policy.

Your General Duty Is Limited For New Policies

When you apply for a new policy your duty of disclosure applies, but you do not need to disclose something to Us unless We specifically ask you about it. However, you must be honest in answering any questions We ask you. You have a legal duty to tell Us anything you know, and which a reasonable person in your circumstances would include in answering the questions. We will use the answers in deciding whether to insure you and anyone else to be insured under the policy, and on what terms.

Who Needs To Tell Us

It is important that you understand you are disclosing to Us and answering Our questions for yourself and anyone else you want to be covered by the policy.

Policy Options

The following policy options are available to you:

Single Trip



Cover for one journey of up to 18 months* in duration.

Plans available:

- International (Plan IB)see pages 5-6
- Domestic (Plan D)see pages 5-6
- Domestic Alternative (Plan DA)see pages 5-6

* Restrictions may apply depending on your age / duration / destination.

Annual Multi-Trip



An annual policy that covers any number of journeys, where your destination is more than 250km’s from your home.

Plans available:

- International (Plan IB)see pages 5-6
Includes cover for travel within Australia.
Choose a maximum of 30, 45 or 60 days per journey.
Your maximum number of days will influence your premium.
- Domestic (Plan D)see pages 5-6
Choose a maximum of 15 or 30 days per journey.
Your maximum number of days will influence your premium.

After selecting a Single Trip or Annual Multi-Trip policy please see pages 5-9 for options to vary cover. You cannot vary cover on Plan DA.

Excess choices

On International Plan IB, you can choose your excess. The excess options we currently have available are \$Nil, \$100 and \$250. Higher excesses may also be available. The higher the excess you choose, the lower the premium. Your excess will be shown on your Certificate of Insurance.

Significant Benefits And Features Of Each Policy Plan

The levels of benefits for each Plan are outlined on pages 5-6. Please refer to the Policy Wording section for further details of this insurance cover, including the terms and conditions and general exclusions that may apply.

Schedule Of Benefits

Policy Section		Summary Of The Benefit / Feature
1	Overseas Medical And Dental	Cover for overseas hospital, medical, surgical, nursing, ambulance and emergency dental expenses.
2	Additional Expenses	Cover for additional accommodation and transportation expenses as a result of certain events including sickness, natural disasters, loss of travel documents and strikes.
3	Amendment Or Cancellation Costs	Cover, if due to unforeseen circumstances outside your control your journey has to be re-arranged or cancelled e.g. illnesses, accidents, extreme weather conditions, exam re-sit or retrenchment.
4	Luggage And Travel Documents	Luggage – cover for loss, theft or damage. Travel documents – cover for replacement cost if lost or stolen.
5	Delayed Luggage Allowance	Cover for the cost of essential emergency purchases overseas if all your luggage is delayed by a transport provider.
6	Rental Car Insurance Excess	Cover for the excess you become liable to pay as a result of damage to, or theft of, a rental car.
7	Travel Delay	Cover for additional accommodation expenses if your scheduled transport is delayed over 6 hours.
8	Special Events	Covers additional costs to get you to a special event (as defined) if you would miss it due to unforeseen circumstances outside your control.
9	Hospital Incidentals	Covers the cost of miscellaneous expenses up to \$20 per night if you are hospitalised overseas for at least 48 hours.
10	Hijacking	\$200 for each 24 hour period you are forcibly detained on a hijacked public transport vehicle.
11	Loss Of Income	Benefit payable if, due to an injury sustained during your journey, you are unable to work on your return to Australia.
12	Disability	Benefit payable if, due to an injury sustained during your journey, you suffer total loss of sight in one or both eyes or total loss of the use of a limb.
13	Accidental Death	Benefit payable (to your estate) if you die due to an injury sustained during your journey.
14	Personal Liability	Cover for legal liability if your negligent act or omission during the journey causes bodily injury or damage to property of other persons.
15	Medical And Dental Expenses In Australia	Cover for hospital, medical and emergency dental expenses incurred in Australia, provided you are not an eligible person within the meaning of the Health Insurance Act.

Subject to the terms, conditions, limits, sub limits and exclusions contained in the Policy Wording.

Maximum Benefit Limits

Per Adult	Per Adult	Per Person
International Plan IB	Domestic Plan D	Domestic Plan DA
Single Trip or Annual Multi-Trip	Single Trip or Annual Multi-Trip	Single Trip Only
\$10,000,000 Medical cover will not exceed 12 months from onset	\$Nil	\$Nil
	\$10,000	Level Of Cover Chosen
\$10,000		
\$3,000 Item limits apply – see page 9	\$3,000 Item limits apply – see page 9	
\$200	\$Nil	
\$Nil Unless purchased as an extra cover option – see page 9	\$2,000 Extra cover available – see page 9	
\$Nil	\$750	
\$Nil	\$2,000	
\$1,000	\$Nil	
\$2,000	\$Nil	
\$Nil	\$1,500 Up to \$250 per month	
\$Nil	\$10,000	
\$10,000 Up to \$1,000 per accompanied child	\$10,000	
\$1,000,000	\$200,000	
Only for Area 6 \$1,000,000 Medical cover will not exceed 12 months from onset	\$Nil	

Options to Vary Cover

Existing Medical Conditions (Your Or Your Travelling Companion's)

This policy does **not** automatically cover claims arising from, or exacerbated by, some existing medical conditions.

What is an Existing Medical Condition?

- Any physical defect, condition, illness or disease for which treatment, medication or advice (including investigation) has been received or prescribed by a medical or dental advisor in the 90 days prior to the Relevant Time; or
- Any chronic or ongoing (whether chronic or otherwise) medical or dental condition, illness or disease medically documented prior to the Relevant Time.

'Relevant Time' in respect of:

- Single Trip policies means the time of issue of the policy.
- Annual Multi-Trip policies means the first time at which any part of the relevant trip is paid for or the time at which the policy is issued, whichever occurs last.

If you are unsure whether you have an existing medical condition please phone Cover-More.

1. Conditions We Automatically Cover For Free

Subject to the requirements shown, this policy automatically covers:

Acne – If you have not required treatment by a medical practitioner in the last 60 days.

Allergies – If the condition has not required treatment by a medical practitioner in the last 6 months and you have no known respiratory conditions e.g. Asthma.

Asthma – If no exacerbation requiring treatment by a medical practitioner in the last 12 months. You must also be under 60 years of age.

Breast / Prostate / Kidney / Bowel / Colon Cancer – If you were diagnosed over 6 months ago, have not had any chemotherapy or radiotherapy in the last 6 months, your cancer has not spread beyond the primary site at any time and your journey is less than 6 months. In respect of prostate cancer you must also have a PSA of 10 or less.

Cataracts / Glaucoma – If you have no ongoing complications, are not on a waiting list for an operation and have not been operated on in the last 30 days.

Coeliac Disease – If the condition has not required treatment by a medical practitioner in the last 6 months.

Diabetes / Glucose Intolerance – If you were diagnosed over 6 months ago and have not had any complications in the last 6 months. You must also have a Blood Sugar Level reading between 4 and 12 or a HbA1C score of 9% or less. You must also have not been investigated for or diagnosed with kidney, eye or nerve complications.

Ear Grommets – With no current infection.

Epilepsy – If there are no underlying medical conditions (e.g. previous head trauma, stroke) and you have not required treatment by a medical practitioner for a seizure in the last 2 years.

Gastric Reflux – If the condition does not relate to another underlying diagnosis (e.g. Hernia / Gastric Ulcer).

Gout – If the gout has remained stable for the last 6 months.

Hiatus Hernia – If no surgery is planned.

Hip / Knee Replacement – If performed more than 6 months ago and less than 10 years ago.

Hypercholesterolaemia (High Cholesterol) – If you have no known heart conditions.

Hypertension (High Blood Pressure) – If you have no known heart conditions and your current blood pressure reading is lower than 165/95.

Menopause – Provided you do not suffer from Osteoporosis.

Peptic / Gastric Ulcer – If condition has remained stable for the last 6 months.

Skin Cancer (excluding Melanoma) – Provided the skin cancer was excised more than 30 days ago.

Underactive / Overactive Thyroid – If not as a result of a tumour.

2. Other Conditions (Extra Cost Applies)

Many conditions not listed under Point 1 on page 7 can still be covered, but only if you pay the extra premium specified on our Medical Assessment Form.

For conditions next to "No Assessment Required" below, simply pay the extra premium for cover to apply.

For conditions next to "Assessment Required" below, submit our Medical Assessment Form and, if approved you will need to pay an extra premium for cover to apply.

For Travellers To:

New Zealand Or Within Australia (excludes Norfolk Island and Inbound Policies)

<ul style="list-style-type: none"> Anxiety, depression, mental or nervous disorders Terminal conditions 	Assessment Required
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All conditions not specified above or on page 7†	No Assessment Required
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Europe, The Middle East, Asia, UK, SW Pacific or Norfolk Island

<ul style="list-style-type: none"> Anxiety, depression, mental or nervous disorders Cancer* Cerebrovascular conditions (e.g. stroke, transient ischaemic attack (TIA)) Dementia / Alzheimers disease Diabetes* Heart conditions Hypertension* Kidney conditions Liver conditions Organ transplant Peripheral vascular disease Reduced immunity (e.g. as a result of a condition or medication) Respiratory or lung conditions* Terminal conditions Conditions for which you; <ul style="list-style-type: none"> are under investigation or on a treatment waiting list have changed your medications in the last 60 days have been treated by a medical practitioner in the last 90 days* 	Assessment Required
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* If the condition satisfies the requirements of Point 1. on page 7, you are covered automatically and free of charge.

All conditions not specified immediately above or on page 7†	No Assessment Required
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Americas Or Africa

All conditions not specified on page 7†	Assessment Required
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† Under no circumstances is cover available for:

- Conditions involving the back or neck, or drug / alcohol dependency
- Conditions for which you are travelling to seek medical treatment or review
- Travel booked or undertaken against the advice of any medical adviser

Where Can I Get A Medical Assessment Form?

- From www.covermore.com.au or from the Providing Entity; or
- Apply online at www.covermore.com.au/assessments.

Pregnancy

If you are aware of the pregnancy at the time of issue of the policy, cover must be applied for if either of the following apply:

1. there have been complications with this or any previous pregnancy, or
2. the conception was medically assisted.

Whether or not you have to apply, the following restrictions apply to pregnancies:

- Cover is only provided for unexpected serious pregnancy complications which occur during or before the 26th week of pregnancy.
- No cover is provided for childbirth or the health of a newborn child, irrespective of the stage of pregnancy at which the child is born*.

To apply for cover, see "Where Can I Get A Medical Assessment Form?" on the previous page. Any extra cost will be advised if Your application is approved.

* Expectant mothers should therefore consider whether they travel under this policy, particularly beyond the 20th week of pregnancy.

Increase Luggage Item Limits

The following limits apply to any one item, set or pair of items (including accessories):

		Item Limit
Plan IB	\$	200
Plan D	\$	300

For items which are valued at more than the limits shown above, you may increase the item limit (on a per item basis) by paying an additional premium. For a quote, ask the agent.

For a single item you may increase the limit by up to \$4,500. For multiple items the overall increase in limits cannot exceed \$7,000. Receipts or valuations (less than 12 months old) must be attached to your Enrolment Form.

Increase Rental Car Insurance Excess Cover

Plan IB does not automatically provide rental car insurance excess cover. Plan D automatically provides up to \$2,000 cover. Cover can be bought under Plan IB, or increased for Plan D, by up to \$3,500 by paying an additional premium. For a quote, ask the agent.

Motorcycle / Moped Riding

If you wish to be covered for riding a motorcycle (including a moped) as the driver or pillion passenger during your journey, you must pay an extra premium. Please ask the agent for a quote.

Even if you pay the extra premium you will only be covered if:

- the engine capacity is 200cc or less
- you are wearing a helmet
- you are not participating in a professional capacity
- you are not racing
- whilst in control of a motorcycle, you hold a licence valid in the relevant country

Note: No cover will apply under Section 14 Personal Liability.

Snow Skiing And Snowboarding

If you wish to be covered for these activities during your journey, you must pay an extra premium. Please ask the agent for a quote.

Even if you pay the extra premium you will only be covered if:

- you are skiing or snowboarding on-piste
- you are not racing
- you are not participating in a professional capacity

Additional Information

Activities Included On All Policies

The following activities are covered under all Plans.

- Abseiling
- Ballooning
- Bungy Jumping
- Parachuting
- Paragliding
- Parasailing
- White Water Rafting
- Working Holidays

Note: Subject to the ordinary terms of cover and in particular exclusion 16 on page 24.

Cooling Off Period

You have the right to cancel the policy by notifying the Providing Entity in writing within 15 working days (i.e. Monday to Friday excluding public holidays where you are) of the date the policy was issued to you ("cooling off period").

Provided the circumstances specified in paragraphs (a) or (b) below do not apply, you are entitled, during the cooling off period, to a complete refund of the amount you have paid for the policy. You are not entitled to a refund if, during the cooling off period, you:

- a) make a claim under the policy; or
- b) cancel the policy after the commencement of the journey.

If you are entitled to a refund the Providing Entity will provide the refund.

When And How Benefits Are Provided

The benefits for which you are insured under this policy are payable:

- when an insured event occurs during the period of insurance causing you to suffer loss or damage or incur legal liability; and
- your claim is accepted by Us.

After calculating the amount payable We will either:

- pay for replacement (after allowing for depreciation) or repair of your personal luggage;
- pay for specified additional expenses;
- pay the person to whom you are legally liable; or
- pay you.

The Amount You Pay For This Insurance

You can obtain a quote from the Providing Entity. The amount we charge you for this insurance policy is the total amount of the premium that We calculate to cover the risk and any relevant government charges (such as GST and stamp duty). These amounts add up to the total amount you must pay.

Once the policy is issued your total premium and any relevant government charges are shown on the Certificate of Insurance.

If you change your policy in any way you may be entitled to a partial premium refund or required to pay an additional amount.

How Various Factors Affect The Amount Payable

We consider a number of factors in calculating the total amount payable. The key factors that affect the amount you pay include the plan, the area to which you are travelling, your age, the excess, the duration of your journey and whether you take out additional cover.

The following is a guide on how these factors combine together and may impact on the assessment of risk, and therefore your premium.

- **Plan** – the International Plan IB, which provides more cover, costs more than the domestic plans.
- **Area** – higher risk areas cost more.
- **Age** – Plan IB costs more for some travellers who represent a higher risk.
- **Excess** – the higher the excess the lower the cost.

- **Duration** – the longer your trip the more it usually costs.
- **Extra Cover Options** – additional premium may apply.
- **Cancellation Cover** – the more cover you require and the longer the cancellation lead-time, the higher the cost may be.

We Respect Your Privacy

Privacy Statement

The Privacy Act 1988 (as amended) requires Us to inform you that:

Purpose Of Collection

We collect personal information (this is information or an opinion about an individual whose identity is apparent or can reasonably be ascertained and which relates to a natural living person) for the purposes of providing insurance services to you, including:

- evaluating your application;
- evaluating any request for a change to any insurance provided;
- providing, administering, and managing the insurance services following acceptance of an application; and
- investigating and, if covered, managing claims made in relation to any insurance you have with Us or other companies within the same group.

The personal information collected can be used or disclosed by Us for a secondary purpose related to those purposes listed above, but only if you would reasonably expect Us to use or disclose the information for this secondary purpose.

However for sensitive information, the secondary purpose must be directly related to the purposes listed above.

Disclosure

When necessary and in connection with the purposes listed We may disclose your personal information to other companies within the same group, your insurance broker or our authorised representative, government bodies, loss assessors, claim investigators, reinsurers, other insurance companies, claims reference providers, other service providers, hospitals, medical and health professionals, legal and other professional advisers.

Consequences If Information Is Not Provided

If you do not provide Us with the information We need We will be unable to consider your application for insurance cover, administer your policy or manage any claim under your policy.

Access

You can request access to the personal information We hold about you by contacting Us. In some circumstances We may not agree to allow you access to some or all of the personal information We hold such as when it is unlawful to give it to you. In such cases We will give you reasons for Our decision.

Information About Other Products

Cover-More may provide information to you regarding other insurance products. Cover-More may also provide your contact details to the Providing Entity so that they can provide information to you regarding certain products. If you do not wish to receive this information please contact Cover-More quoting your policy number – We promise this information will not be sent to you.

Code Of Practice

We have adopted the General Insurance Code of Practice developed by the Insurance Council of Australia. The Code is designed to promote good relations and good insurance practice between insurers, authorised representatives and consumers.

The Code sets out what We must do when dealing with you. Please contact Cover-More if you want more information about the Code.

How We Resolve Your Complaints

Resolving Your Complaints

If you think We have let you down in any way, or Our service is not what you expect (even if through one of Our representatives), please tell Us so We can help.

You Can Tell Us...

By Phone – Cover-More will put you in contact with an appropriate person to deal with your complaint. Phone 1300 72 88 22.

In Writing – Please send Cover-More the full details of your complaint together with any supporting documents and an explanation of what you want Cover-More to do. Your letter will be directed to the appropriate person.

In Person – If you would like to come in to talk to a Cover-More representative face to face, please call and Cover-More will arrange an appointment.

What We Will Do To Resolve Your Complaint

When you first let Cover-More know about your complaint or concern:

- it will be handled by the person who has authority to deal with it; and
- this person will listen to you, consider the facts and contact you to resolve your complaint as soon as possible, usually within 24 hours.

If you are not satisfied with this person's decision on your complaint, then it will be referred to the relevant Operational Manager, who will contact you within 5 working days.

If you are not satisfied with the Operational Manager's decision, then it will be referred to the Dispute Resolution Officer or their delegate at Great Lakes Australia. We will send you Our final decision within 15 working days from the date you first made your complaint.

What If You Are Not Satisfied With Our Final Decision?

We expect Our procedures will deal fairly and promptly with your complaint.

However, if you are not satisfied with Our final decision you can choose to have the matter resolved externally – with the Financial Ombudsman Service Ltd (FOS). This is an independent body and its services are free to you. As a member We agree to accept the FOS's decision.

You also have the right to take legal action if you disagree with the FOS's decision.

You must contact the FOS within 3 months of receiving Our final decision. You can contact the FOS by:

Mail: Financial Ombudsman Service Ltd, GPO Box 3, Melbourne, Victoria, 3001

Telephone: 1300 78 08 08 **Facsimile:** (03) 9613 6399

Website: www.fos.org.au **Email:** info@fos.org.au



Extending Your Journey

Having too much fun? If you wish to be insured for longer than the original period you must purchase a new policy through the original Providing Entity prior to the expiry of the original policy. It is not an extension of the previous policy.

Should a medical condition first present itself prior to the time of issue of the new policy it may be considered an existing medical condition under the new policy and therefore may not be automatically covered by the new policy. Purchasing a longer duration policy up front can avoid this risk.

24 Hour Emergency Assistance

All policyholders have access to our emergency assistance team. This experienced team work around the clock assisting our clients when they are in need of help. The majority of requests for assistance are for clients requiring:

- **Medical treatment**

Our team of Doctors, Nurses and Case Managers can assist in helping you to find medical facilities and monitor your medical care.

- **Payment of hospital bills**

Those larger bills can be paid by us directly to the hospital.

- **Evacuation or repatriation**

We can decide if and when evacuation or repatriation is appropriate and co-ordinate the entire exercise.

- **Assistance when passports, travel documents or credit cards are lost**

If you need assistance in contacting the issuer of the document, we can help.

- **Assistance with rescheduling travel plans as a result of an emergency**

If your travel agent is not available to assist with rescheduling in an emergency situation, we can help.



Where relevant, all services are subject to a claim being accepted under the policy.

To Obtain Emergency Assistance

Before calling for assistance please:

- visit www.covermore.com.au (if your circumstances permit).

You will find information and directions such as:

- a) things you should do as soon as an event occurs.
 - b) instructions on how to contact the issuer of passports, credit cards etc.
 - c) online claim forms and instructions on how to submit a claim.
- read Policy Condition 5 (page 17), 10 (page 17) and Policy Conditions applying to Sections 1 and 2 only (page 18).

Should you require additional assistance you can contact Cover-More on one of the numbers below. When you call please advise Us of your:

- **policy number**
- **contact phone number**

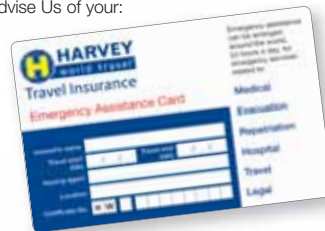
Please call Australia DIRECT and TOLL FREE from:

USA: 1866 354 3295

Canada: 1866 655 7570

UK: 0800 169 5847

NZ: 0800 540 520



(the cost of a local call may be required if calling from a pay phone)

If you are experiencing difficulties with one of the numbers above, call Australia reverse charge via the operator on:

Phone: +61 (2) 8907 5008 Fax: +61 (2) 8907 5009

Other Countries: Please call reverse charge via operator: +61 (2) 8907 5008

IMPORTANT:

You should have this policy booklet, your policy number and your Emergency Assistance Card with you at all times when travelling.

Claims

How To Make A Claim

Cover-More will respond to a claim within 10 working days of receipt of all necessary documentation.

Should an event occur which might give rise to a claim you should:

- visit www.covermore.com.au immediately.
This will assist in ensuring you have all the necessary information and documentation to support your claim, such as:
 - a) things you should do as soon as an event occurs.
 - b) detailed instructions on how to submit a claim.
 - c) online claim form/s.
- follow the instructions in Policy Condition 5 (page 17).

In particular you must:

- a) report lost or stolen property to the police or responsible transport provider and obtain a written report.
- b) phone the emergency assistance number as soon as physically possible if you are admitted to hospital or if you anticipate that any of your medical or related expenses are likely to exceed \$4,000.

Should you require additional assistance you can contact Cover-More by:

Phone: 1300 36 26 44 (from overseas +61 (2) 8907 5007)

Fax: +61 (2) 9202 8098

How A Claim Payment Is Calculated

When We pay a claim We consider a number of aspects in calculating the amount.

These can include:

- the amount of loss or damage or liability;
- the excess;
- maximum benefit limits and sub-limits;
- reasonable depreciation; and
- the terms and conditions of the policy.

The following example illustrates how We will calculate the amount payable for a claim:

- your new camera worth \$250 is stolen from a hotel room.
- you are travelling on the International Plan IB.
- you have chosen the nil excess option.
- you have not paid an additional amount to increase the standard item limit.

The amount payable following the claim would be calculated as follows:

- consider the value of the camera – \$250 (No depreciation applies because the camera was new).
- consider the maximum benefit limit for Luggage and Travel Documents - \$3,000.
- consider the maximum item limit payable for luggage items – \$200. The maximum limit does apply in this case.
- as you have chosen the nil excess option, no excess is deducted. This results in an amount payable of \$200.

The Amount You Pay Towards A Claim

You may be required to pay an amount in the event of a claim. This is called an excess. The amount of excess may vary depending on the travel plan chosen.

You may also have an option to choose from a range of excesses.

Your applicable excess level will be shown on your Certificate of Insurance.

In some circumstances We may require you to pay an additional excess for some medical conditions. We will inform you in writing if this excess applies. This is only a summary of how excesses will be applied. For full details please refer to the Policy Wording.

Part 2: Policy Wording

Insured and issued by Great Lakes Australia (a member of the global Munich Re Group) ABN 18 964 580 576, AFSL 318603

THIS POLICY IS NOT VALID UNLESS THE CERTIFICATE OF INSURANCE IS ATTACHED

We will give You the insurance cover described in this policy in return for receiving the total Amount Payable.

This policy is issued on the basis that, and it is a condition of this policy that:

- You are not aware of any circumstance which is likely to give rise to a claim.
- You are a permanent resident of Australia, or a non-resident of Australia travelling on international Plan IB Area 6 cover, and will be returning to Your country of residence at the completion of the Period Of Insurance and within 12 months of the Journey commencing.
- If You purchase the Annual Multi-Trip Policy, cover will only extend to a Journey that involves travel to a destination which is more than 250 kilometres from Your Home.

Words With Special Meanings

In this policy the following words have the following meanings:

“We”, “Our”, “Us” means Great Lakes Australia.

“You”, “Your” means the people listed as adults on the Certificate of Insurance and includes Accompanied Children except on Plan DA in which case cover applies on a per person basis only. Where more than one person is listed as an adult on the Certificate of Insurance all benefits, limitations, conditions and exclusions will be interpreted as if a separate policy was issued to each of the persons listed as an adult other than:

- In the event a claim arising from the one event is made, an excess (if applicable) will only be applied once.
- In the case of luggage item limits which shall be as per a single policy.

In respect of organised groups each child not travelling with their usual guardian must purchase a separate policy.

“Accompanied Children” means Your children or grandchildren who are identified on the Certificate of Insurance and travelling with You on the Journey, provided they are not in full-time employment and they are under the age of 21 years.

“Act Of Terrorism” means an act, including but not limited to the use of force or violence, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), which from its nature or context is done for, or in connection with, political, religious, ideological, ethnic or similar purposes or reasons, including the intention to influence any government and/or to put the public, or any section of the public in fear.

“Additional” means the cost of the accommodation or transport You actually use less the cost of the accommodation or transport You expected to use had the journey proceeded as planned.

“Amount Payable” means the total amount payable shown on Your Certificate of Insurance.

“Disabling Injury, Sickness or Disease” means a disabling injury, sickness or disease which first shows itself during the Period Of Insurance and which requires immediate treatment by a qualified medical practitioner.

“Existing Medical Condition” means:

- Any physical defect, condition, illness or disease for which treatment, medication or advice (including investigation) has been received or prescribed by a medical or dental advisor in the 90 days prior to the Relevant Time; or
- Any chronic or ongoing (whether chronic or otherwise) medical or dental condition, illness or disease medically documented prior to the Relevant Time.

“Home” means Your usual place of residence in Australia.

“Insolvency” means bankruptcy, provisional liquidation, liquidation, insolvency, appointment of a receiver or administrator, entry into a scheme of arrangement, statutory protection, presentation of a petition for the compulsory winding up of, stopping the payment of debts or the happening of anything of a similar nature under the laws of any jurisdiction.

“Journey” means the period commencing at the time You leave Your Home and ceasing at the time You return to Your Home.

“Limb” means a hand at or above the wrist or a foot at or above the ankle.

“Period Of Insurance” means:

- In respect of Single Trip Policies from the time You commence the Journey or the travel start date shown on Your Certificate of Insurance (whichever is later) until the time You complete the Journey or the travel end date shown on Your Certificate of Insurance (whichever is the earlier).
- In respect of Annual Multi-Trip Policies from the time You commence each Journey or the travel start date shown on Your Certificate of Insurance (whichever occurs last) until the earliest of the following times:
 - the time that You complete the Journey; or
 - the expiry of the maximum insured duration per Journey (this maximum duration is shown on Your Certificate of Insurance); or
 - 12 months from the travel start date shown on Your Certificate of Insurance.

Cover under Section 3 begins from the time the policy is issued. The dates on Your Certificate Of Insurance can only be changed with Our consent.

“Permanent” in respect of Section 12 means a period of time lasting 12 consecutive months after the expiry of which We consider there is no reasonable prospect of improvement.

“Public Place” means shops, airports, streets, hotel foyers and grounds, restaurants, beaches, private car parks and any place the public has access to.

“Relative” means Your spouse, defacto, parent, grandchild, brother, sister, son-in-law, daughter-in-law, parent-in-law, grandparent, child, step-parent, brother-in-law, sister-in-law, fiancée, first cousin, aunt, uncle, niece and nephew.

“Relevant Time” in respect of:

- Single Trip policies means the time of issue of the policy.
- Annual Multi-Trip policies means the first time at which any part of the relevant trip is paid for or the time at which the policy is issued, whichever occurs last.

“Rental Car” means a rented sedan, campervan, hatchback or station-wagon (including 4WD's) rented from a licensed motor vehicle rental company.

“Terminal Illness” means any medical condition which is likely to result in death.

“Transport Provider” means a properly licensed coach operator, airline, shipping line or railway company.

Policy Conditions

1. Excess

The excess is the first amount of a claim which We will not pay for. The excess, if applicable, applies to any claim arising from a separate event in respect of Sections 1, 2, 3, 4, 5, 8 and 15 of the policy only.

The excess is the amount shown on Your Certificate of Insurance.

An additional excess may apply in certain circumstances, such as cover for Existing Medical Conditions where You do not meet the provisions on page 7. If an additional excess applies We will notify You in writing.

2. Sections Of The Policy Applicable To Each Plan

If You purchase:

- Plan IB, Sections 1, 2, 3, 4, 5, 9, 10, 13 and 14 of the policy apply. Section 6 applies for all areas if you have paid an additional premium to activate the cover. For Area 5, Section 15 also applies;
- Plan D, Sections 2, 3, 4, 6, 7, 8, 11, 12, 13 and 14 of the policy apply;
- Plan DA, Sections 2 and 3 only of this policy apply.

3. Limits Of Liability

The limits of Our liability for each Section of the policy are the amounts shown in the relevant table for the plan selected (see page 6) except:

- where additional luggage cover has been effected, or
- Plan D where the maximum liability collectively shall not exceed in total the sum insured stated under the policy plan selected for Sections 2 and 3, or
- Plan DA where the maximum liability collectively shall not exceed in total the sum insured stated under the policy plan selected for Sections 2 and 3, or
- the maximum liability collectively for Sections 11, 12 and 13, shall not exceed \$10,000 on Plan D, or
- the maximum liability collectively for Sections 1 and 2 shall not exceed \$10,000,000 on Plan IB, or
- where You have paid an additional amount to increase the level of Rental Car Insurance Excess cover, or
- where We have notified You in writing of different limits.

4. Cooling Off Period/Refund Of Amount Payable

You have the right to cancel the policy by notifying the Providing Entity in writing within 15 working days (i.e. Monday to Friday excluding public holidays where You are) of the date the policy was issued to You (“cooling off period”). Provided the circumstances specified in paragraphs (a) or (b) below do not apply, You are entitled, during the cooling off period, to a complete refund of the amount You have paid for the policy. You are not entitled to a complete refund if, during the cooling off period, You:

- make a claim under the policy; or
- cancel the policy after the commencement of the Journey.

We will not refund any of the Amount Payable if notified outside the cooling off period. We may give a partial refund if You change Your policy before You depart for Your Journey.

5. Claims

- The loss or theft of luggage, personal effects, travel documents or money must be reported within 24 hours to the police or responsible Transport Provider and a written report must be obtained at that time.
- If You are admitted to hospital or You anticipate Your medical expenses and Additional expenses are likely to exceed A\$4,000 You must phone the emergency assistance number as soon as physically possible.
- You must take all reasonable steps to prevent or minimise a claim.
- You must not make any offer, promise of payment or admit any liability without Our written consent.
- You must advise Us of any claim or occurrence which may give rise to a claim as soon as possible and within 60 days of the return date shown on Your Certificate of Insurance by sending a completed claim form.
- You must at Your own expense, supply any documents in support of Your claim which We may request, such as original police reports, receipts, valuations and/or medical certificates and You must co-operate fully in the assessment or investigation of Your claim.
- Where You are a registered entity on a Plan D or Plan DA You may be entitled to an input tax credit for Your Amount Payable and/or for things covered by this policy. You must disclose these entitlements to Us if You make a claim under Your policy.
- If We agree to pay a claim under Your policy We will base any claim payment on the Goods and Services Tax (GST) inclusive costs (up to the relevant policy limit). However, We will reduce any claim payment by any input tax credit You are, or would be, entitled to for the repair or replacement of insured property or for other things covered by this policy.

6. If You Are Able To Claim From A Statutory Fund, Compensation Scheme Or Transport Provider

If You are able to claim from a statutory fund, compensation scheme (for example a private health fund or workers compensation scheme) or Transport Provider for monies otherwise payable under this policy You must do so and the policy will only cover the remaining amount.

7. You Must Help Us To Make Any Recoveries

We have the right to sue any other party in Your name to recover money payable under the policy or to choose to defend any action brought against You. You must provide reasonable assistance to Us.

8. Claims Payable In Australian Dollars

All amounts payable and claims are payable in Australian dollars at the rate of exchange applicable at the time the expenses were incurred.

9. Policy Interpretation

The policy shall be interpreted in accordance with the law of the State or Territory in which it is issued.

10. Emergency Assistance

- Where Your claim is excluded or falls outside the policy coverage, the giving of emergency assistance will not in itself be an admission of liability.
- The medical standards, sanitary conditions, reliability of telephone systems and facilities for urgent medical evacuations differ from country to country. Responsibility for any loss, medical complication or death resulting from any factor reasonably beyond Our control cannot be accepted by the emergency assistance network, Cover-More Insurance Services or Us.

11. Free Extension Of Insurance

Where Your Journey is necessarily extended due to an unforeseen circumstance outside Your control, Your Period Of Insurance will be extended until You are able to travel Home by the quickest and most direct route. The Period Of Insurance will not be extended for any other reason.

12. Special Conditions, Limitations, Excesses And Amounts Payable

If You:

- cover cover for an Existing Medical Condition which does not satisfy the provisions set out on page 7 or 8, or
- answer yes to the question in the "Medical Information" section of the Enrolment Form;

cover must be separately applied for and accepted by Us, and it may be subject to special conditions, limitations, excesses and amounts payable. We will notify You in writing of these before We issue the policy.

13. Automatic Reinstatement Of Sums Insured

If You purchase the Annual Multi-Trip Policy the sums insured under each section of the policy are automatically reinstated on completion of each Journey and in respect of Section 4, also once on each Journey.

14. Non-Australian Residents Travelling To Australia – Area 6 International Plan IB

This policy condition applies if You have paid the International Plan IB – Area 6 Amount Payable and You are a non-Australian resident. In this policy wording (other than in this policy condition, the second bullet point on page 15, Section 1 and Section 15):

- the word "Australia" should be replaced with Your country of residence; and
- the word "overseas" should be interpreted to mean a place outside Your country of residence.

Policy Conditions applying to Sections 1 and 2 only

- We have the option of returning You to Australia if the cost of medical and/or Additional expenses overseas are likely to exceed the cost of returning You to Australia subject always to medical advice. We also have the option of evacuating You to another country.
- In all cases the cost of evacuation or to bring You back to Australia will only be met if it was arranged by and deemed necessary by the emergency assistance network.
- If You are hospitalised We will pay for a share room. If a share room is not available We will, at Our discretion and that of Our medical advisers, pay to upgrade You to a single room.
- If You do not hold a return airline ticket an amount equal to the cost of an economy class one way ticket will be deducted from Your claim for repatriation expenses.

Policy Conditions applying to Sections 11, 12 and 13 only

- If the conveyance You are travelling in disappears, sinks or crashes and Your body has not been found after 12 months You will be presumed to have died.
- You must obtain and follow advice and treatment given by a qualified doctor as soon as possible after suffering a disabling injury, during the Period Of Insurance.

The Benefits

SECTION 1: Overseas Medical And Dental Expenses

If during the Period Of Insurance You suffer a Disabling Injury, Sickness or Disease We will pay the usual and customary cost of medical treatment, emergency dental treatment and ambulance transportation which is provided outside Australia by or on the advice of a qualified medical practitioner or dentist. Medical cover will not exceed a maximum of 12 months from the date of suffering the Disabling Injury, Sickness or Disease.

The maximum benefit limit for this section is:

Plan IB: \$10,000,000*	Plan D: No Cover	Plan DA: No Cover
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*Combined limit of Section 1 and 2

We Will Not Pay For:

- medical treatment, dental treatment or ambulance transportation which is provided in Australia. This exclusion does not apply to medical treatment provided whilst on a ship (including cruise ship, passenger ship or passenger ferry) even if that ship is within Australian territorial waters. However, this additional benefit does not apply to any medical treatment provided on Australian inland waterways or whilst the ship is tied up in an Australian port.
- dental treatment caused by or related to the deterioration and/or decay of teeth or associated tissue or involving the use of precious metals.
- the continuation or follow-up of treatment (including medication) started prior to Your Journey.
- medical treatment, dental treatment or ambulance transportation which is provided in Your country of residence.

SECTION 2: Additional Expenses

1. If You Become Sick

If during the Period Of Insurance You suffer a Disabling Injury, Sickness or Disease, We will pay the:

- reasonable Additional hotel accommodation and Additional transport expenses incurred by Your travelling companion who remains with or escorts You until the completion of the Period Of Insurance or until You are able to resume Your Journey or travel Home, whichever occurs first. This benefit is only payable on the written advice of the overseas medical practitioner;
- reasonable Additional hotel accommodation and Additional transport expenses incurred by Your Relative who travels to and remains with You following Your being hospitalised as an inpatient. The benefit ceases when You are able to continue Your Journey, travel Home or on completion of the Period Of Insurance, whichever is the earlier, and is subject to the written advice of the overseas medical practitioner and acceptance by the emergency assistance network;
- reasonable Additional hotel accommodation expenses and Additional transport expenses incurred by You and at the same fare class as originally booked, if You are unable to complete the Journey on the written advice of the overseas medical practitioner;
- reasonable expenses incurred in returning a hired motor vehicle to the nearest depot provided that, on the written advice of the overseas doctor, You are unfit to drive it.

2. If You Die

We will pay reasonable overseas funeral or cremation expenses or the cost of returning Your remains to Australia if You die during the Period Of Insurance. In either event the maximum amount We will pay in total will not exceed \$20,000.

3. If Your Relative Or Business Partner Becomes Sick

We will pay reasonable Additional transport expenses if You are required to return to Your Home due to the sudden Disabling Injury, Sickness or Disease or death of a Relative or business partner in Australia.

4. If Your Home Is Destroyed By Fire, Earthquake Or Flood

We will pay the reasonable Additional transport expenses for Your early return to Your Home in Australia if it is totally destroyed by fire, earthquake or flood while You are on Your Journey.

5. Other Circumstances

We will pay Your reasonable Additional hotel accommodation and Additional transport expenses incurred on the Journey resulting from:

- disruption of Your scheduled transport because of riot, strike or civil commotion occurring after the commencement of the Journey provided You act reasonably in avoiding Additional costs;
- loss of passport or travel documents except involving government confiscation or articles sent through the mail;
- a quarantine regulation You unknowingly breach;
- a natural disaster;
- a collision of a motor vehicle, watercraft, aircraft or train in which You are travelling;
- Your scheduled transport being delayed for at least 12 hours due to severe weather conditions. We will pay up to \$250 providing written confirmation from the Transport Provider has been obtained.

The maximum benefit limit for this section is:

Plan IB: \$10,000,000*	Plan D: \$10,000*	Plan DA: Cover Chosen**
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*Combined limit of Section 1 and 2 ^Combined limit of Section 2 and 3

**Shown on Your Certificate of Insurance

SECTION 3: Amendment Or Cancellation Costs

If due to circumstances outside Your control and unforeseen at the Relevant Time:

- You have to rearrange Your Journey prior to leaving Home, We will pay the reasonable cost of doing so (We will not pay more for rearranging Your Journey than the cancellation costs which would have been incurred had the Journey been cancelled).
- You have to cancel the Journey (where You cannot rearrange it prior to leaving Home) We will pay You:
 - the non-refundable unused portion of all travel costs prepaid in advance including a travel agent's cancellation fee (the travel agent's cancellation fee is limited to the lesser of \$4,000 or the amount of commission the agent

had earned on the pre-paid refundable amount of the cancelled travel arrangements).

- for frequent flyer or similar flight reward points lost following cancellation of Your airline ticket. The amount We will pay is calculated as follows:
 - the cost of the equivalent class airline ticket, based on the best available advance purchase airfare at the time the claim is processed, less Your financial contribution towards the airline ticket multiplied by
 - the total amount of points lost divided by
 - the total amount of points used to obtain the airline ticket.

The maximum benefit limit for this section is:

Plan IB: \$10,000	Plan D: \$10,000*	Plan DA: Cover Chosen**
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*Shown on Your Certificate of Insurance ^Combined limit of Section 2 and 3

We Will Not Pay For

Claims caused by:

- Transport Provider caused cancellations, delays or rescheduling other than when caused by strikes.
- the disinclination of You or any other person to proceed with the Journey or deciding to change plans.
- any contractual or business obligation or Your financial situation.
- the failure of Your travel agent or Our agent who issued this policy to pass on monies to operators or to deliver promised services.
- a request by Your Relative or employer unless You are a member of the police force and Your leave is revoked.
- a lack in the number of persons required to commence any tour, conference, accommodation or travel arrangements or due to the negligence of a wholesaler or operator.
- any government regulation, prohibition or restriction.
- the death, injury, sickness or disease of any person living outside Australia.

SECTION 4: Luggage And Travel Documents

1. Loss, Theft Or Damage

If during the Period Of Insurance Your luggage or personal effects are lost, stolen or damaged We will replace, repair or pay You the value in cash of the luggage/ personal effects. It is Our choice which of these We do. If We pay You the value in cash, We will deduct reasonable depreciation from the amount We pay You. If We replace, We will deduct reasonable depreciation from the amount We pay the supplier and the amount deducted must be paid by You to the supplier. Our payment will not exceed the original purchase price of an item with a limit for any one item, set or pair of items including attached and unattached accessories of \$200 on Plan IB and \$300 on Plan D. The limit can be increased by up to \$4,500 per single item if the item is separately specified and the appropriate additional amount paid. For multiple items the overall increase in limits cannot exceed \$7,000.

2. Travel Document Replacement

We will pay You for the cost of replacing travel documents and credit cards lost or stolen on the Journey. We will also pay for Your legal liability arising from their illegal use. You must however comply with all the conditions of the issue of the document prior to and after the loss or theft.

3. Automatic Re-instatement Of Sum Insured

In the event that a claimable loss, or damage to Your luggage and personal effects is incurred, We will allow You one automatic re-instatement of the sum insured stated in the Plan selected whilst on Your Journey.

The maximum benefit limit for this section is:

Plan IB: \$3,000	Plan D: \$3,000	Plan DA: No Cover
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We Will Not Pay For:

- loss or theft which is not reported to the police or responsible Transport Provider within 24 hours. All reports must be confirmed in writing by the police or Transport Provider at the time of making the report.
- items left unattended in any motor vehicle unless stored in the boot and forced entry is gained.
- items left unattended in any motor vehicle overnight (even if in the boot).
- jewellery, camera and video camera equipment, sound equipment, mobile telephones or laptop computer equipment left unattended in any motor vehicle at any time (even if in the boot).
- more than \$1,000 in total for all items left unattended in any motor vehicle.
- more than \$1,000 in total for all jewellery placed in the care of a Transport Provider.

7. items left unattended in a Public Place.
8. sporting equipment whilst in use.
9. items sent under the provisions of any freight contract or any luggage forwarded in advance or which is unaccompanied.
10. surfboards or waterborne craft of any description. This exclusion does not apply if the item is lost, stolen or damaged while in the custody of a Transport Provider.
11. damage to fragile or brittle articles unless caused by a fire or motor vehicle collision. This exclusion does not apply to spectacles, or to lenses in cameras, video cameras, laptop computers or binoculars.
12. damage caused by atmospheric or climatic conditions, wear and tear, vermin or any process of cleaning, repairing, restoring or alteration.
13. electrical or mechanical breakdown.
14. negotiable instruments including cash, bank or currency notes or postal or money orders.
15. sunglasses, spectacles, contact lenses or dentures.

SECTION 5: Delayed Luggage Allowance

If all Your luggage is delayed by a Transport Provider during the Journey for more than 24 hours We will pay You up to \$200 on Plan IB for essential emergency items of clothing and toiletries You purchase overseas.

The original receipts for the items and written confirmation of the length of delay from the Transport Provider must be produced in support of Your claim. If Your luggage is not ultimately returned to You any amount claimable under this benefit will be deducted from any entitlement under Section 4 of this policy.

The maximum benefit limit for this section is:

Plan IB: \$200	Plan D: No Cover	Plan DA: No Cover
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We Will Not Pay For:

1. loss or theft which is not reported to the responsible Transport Provider within 24 hours. All reports must be confirmed in writing by the Transport Provider at the time of making the report.

SECTION 6: Rental Car Insurance Excess

We will pay You for any Rental Car insurance excess You become liable to pay as a result of damage to, or theft of, a Rental Car, whilst in Your control during the Journey.

The maximum benefit limit for this section is:

Plan IB: No Cover*	Plan D: \$2,000	Plan DA: No Cover
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*Unless cover is purchased as an extra cover option

We Will Not Pay For:

1. any damage or theft, arising from the operation of a Rental Car in violation of the terms of the rental agreement.
2. any damage sustained to a Rental Car while it is being driven on an unsealed surface.

SECTION 7: Travel Delay

If Your pre-booked transport is temporarily delayed for at least 6 hours due to an unforeseeable circumstance outside Your control, We will reimburse You up to \$150 on a Plan D for reasonable Additional hotel accommodation expenses. We will also reimburse up to these limits again for each full 24 hour period that the delay continues beyond the initial 6 hour delay.

You must claim from the Transport Provider first, and provide Us with written confirmation from the Transport Provider of the cause and period of the delay and the amount of compensation offered by them. You must also provide Us with receipts for the hotel accommodation expenses incurred.

The maximum benefit limit for this section is:

Plan IB: No Cover	Plan D: \$750	Plan DA: No Cover
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SECTION 8: Special Events

If due to an unforeseeable circumstance outside Your control Your Journey would otherwise be delayed resulting in You being unable to arrive in time to attend a wedding, funeral, pre-paid conference, 25th or 50th wedding anniversary or sporting event which cannot be delayed due to Your late arrival, We will pay for the reasonable Additional cost of using alternative public transport to arrive at Your destination on time.

The maximum benefit limit for this section is:

Plan IB: No Cover	Plan D: \$2,000	Plan DA: No Cover
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SECTION 9: Hospital Incidentals

If hospitalised, We will pay You for incidentals such as phone calls and magazines. The amount We will pay is limited to \$20 for each night You are hospitalised overseas as a result of a Disabling Injury, Sickness or Disease during the Period Of Insurance, provided that the period of confinement is at least 48 hours.

Original receipts for these expenses must be produced in support of Your claim.

The maximum benefit limit for this section is:

Plan I: \$1,000	Plan D: No Cover	Plan DA: No Cover
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SECTION 10: Hijacking

If whilst on the Journey You are detained on a means of public transport due to it being hijacked by persons using violence or threat of violence We will pay You \$200 for each 24 hour period You are forcibly detained by the hijackers.

The maximum benefit limit for this section is:

Plan IB: \$2,000	Plan D: No Cover	Plan DA: No Cover
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SECTION 11: Loss Of Income

If during the Period Of Insurance You suffer an injury caused solely and directly by violent, accidental, visible and external means (not caused by a sickness or disease) resulting in You being unable to attend Your usual work in Australia, We will pay You up to \$250 per month on Plan D for Your monthly net of income tax wage, but not in respect of the first 30 days after You originally planned to resume Your work in Australia. The benefit is only payable if Your disability occurs within 30 days of the accident. The maximum limit in respect of Accompanied Children is \$1,000 for each child. Cover for loss of income is limited to six months.

The maximum benefit limit for this section is:

Plan IB: No Cover	Plan D: \$1,500*	Plan DA: No Cover
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*Maximum liability collectively for Section 11, 12 and 13 is \$10,000

SECTION 12: Disability

If during the Period Of Insurance You suffer an injury caused solely and directly by violent, accidental, visible and external means (not caused by a sickness or disease) resulting in Your Permanent total loss of sight in one or both eyes or the Permanent total loss of use of one or more Limbs within one year of the date of the accident, We will pay You the amount shown in the Plan purchased.

The maximum benefit limit for this section is:

Plan IB: No Cover	Plan D: \$10,000*	Plan DA: No Cover
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*Maximum liability collectively for Section 11, 12 and 13 is \$10,000

SECTION 13: Accidental Death

If during the Period Of Insurance You suffer an injury caused solely and directly by violent, accidental, visible and external means (not caused by a sickness or disease) resulting in Your death, We will pay Your estate the amount shown in the Plan purchased provided Your death occurs within one year of the accident. Our limit in respect of Accompanied Children is \$1,000 for each child.

The maximum benefit limit for this section is:

Plan IB: \$10,000	Plan D: \$10,000*	Plan DA: No Cover
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*Maximum liability collectively for Section 11, 12 and 13 is \$10,000

SECTION 14: Personal Liability

We will provide cover if, as a result of Your negligent act occurring during the Period Of Insurance, You become unintentionally legally liable to pay compensation in respect to damage caused to someone else's property or the injury or death of someone else.

The maximum benefit limit for this section is:

Plan IB: \$1,000,000	Plan D: \$200,000	Plan DA: No Cover
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We Will Not Pay For:

1. liability You become liable to pay to somebody related to You or to someone in Your employ or deemed to be in Your employ.
2. liability arising from loss or damage to property which is in Your legal custody or control.
3. liability arising from the conduct by You of any profession, trade or business

or the use or ownership by You of any firearm, aircraft, water borne craft or mechanically propelled vehicle.

4. liability arising out of occupation or ownership of any land, buildings or immobile property.
5. liability arising out of any wilful or malicious act.
6. liability arising out of the transmission of an illness, sickness or disease.
7. liability involving punitive, exemplary or aggravated damages or any fine or penalty.
8. liability arising out of Your liability under a contract or agreement unless You would be liable if that contract or agreement did not exist.

SECTION 15: Medical And Dental Expenses In Australia

If during the Period Of Insurance You suffer a Disabling Injury, Sickness or Disease, We will pay the usual and customary cost of medical treatment, emergency dental treatment and ambulance transportation which is provided in Australia by or on the advice of a qualified medical practitioner or dentist. Medical cover will not exceed a maximum of 12 months from the date of suffering the Disabling Injury, Sickness or Disease.

The maximum benefit limit for this section is:

Plan IB: \$1,000,000	Plan D: No Cover	Plan DA: No Cover
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We Will Not Pay For:

1. medical treatment, dental treatment or ambulance transportation which is provided outside Australia;
2. dental treatment caused by or related to the deterioration and/or decay of teeth or associated tissue or involving the use of precious metals;
3. the continuation or follow-up of treatment (including medication) started prior to Your Journey;
4. medical treatment, dental treatment or ambulance transportation which is provided in Australia if you are an Australian resident or a non-Australian resident who is an eligible person within the meaning of the Health Insurance Act 1973 (Cth).

We Will Not Under Any Section Pay For:

1. claims for costs or expenses incurred outside the Period Of Insurance.
2. claims involving air travel other than as a passenger on a fully licensed passenger carrying aircraft operated by an airline or an air charter company.
3. claims arising as a result of war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.
4. claims arising directly or indirectly from any nuclear reaction or contamination, ionising rays or radioactivity.
5. loss or damage caused by detention, confiscation or destruction by customs or other officials or authorities.
6. claims arising from any unlawful act committed by You or if You have not been honest and frank with all answers, statements and submissions made in connection with Your insurance application or claim.
7. claims arising from any government prohibition, regulation or intervention.
8. claims under Sections 2 or 3 in respect of any costs or expenses incurred prior to You being certified by a medical practitioner as unfit to travel.
9. claims in respect of travel booked or undertaken against the advice of any medical adviser or after Your Terminal Illness had been diagnosed. This exclusion will be waived from the time the appropriate additional amount payable has been received by Us if cover is separately applied for and accepted by Us in respect of Your Terminal Illness.
10. claims arising from loss or theft or damage to property, or death, illness or bodily injury if You fail to take reasonable care.
11. claims arising directly or indirectly from Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS) or any derivative of either. This exclusion will be waived when cover is separately applied for by You in respect of Your or Your travelling companion's condition/s from the time We accept Your application and the appropriate additional amount payable has been paid to Us.
12. claims directly or indirectly arising from, or exacerbated by, any Existing Medical Condition:
 - a) You or Your travelling companion has. This exclusion will be waived;
 - (i) if You satisfy the provisions set out under the heading "Conditions We Automatically Cover For Free" on page 7; or
 - (ii) from the time the appropriate additional amount payable has been received by Us in respect of conditions which require extra premium but can be covered without specific approval by Us; or

- (iii) from the time the appropriate additional amount payable has been received by Us in respect of the Existing Medical Conditions for which cover is separately applied for and accepted by Us and for which special conditions, limits and excesses may apply if We notify You in writing.
 - b) of Your Relative, business partner or of any other person who is known to You prior to the Relevant Time, unless You purchase a Plan IB or D and the person is hospitalised or dies in Australia after the Relevant Time and at the Relevant Time the chance of a claim occurring is highly unlikely. In any event, we will not pay more than \$4,000 under all sections of the policy combined.
13. claims directly or indirectly arising from:
- a) pregnancy of You or any other person if You are aware of the pregnancy prior to the Relevant Time and,
 - (i) where complications of this pregnancy or any previous pregnancy have occurred prior to this time; or
 - (ii) where the conception was medically assisted.
 This exclusion will be waived from the time the appropriate additional amount payable has been received by Us if cover is separately applied for and accepted by Us in respect of Your pregnancy only; or
 - b) pregnancy of You or any other person after the 26th week of pregnancy; or
 - c) pregnancy of You or any other person where the problem arising is not an unexpected serious medical complication; or
 - d) childbirth or the health of a newborn child whatever the proximate cause of the claim is. This exclusion applies irrespective of the stage of pregnancy at which the child is born.
14. claims involving Your suicide, attempted suicide, self inflicted injury or condition, stress, travel exhaustion, the effect of, or chronic use of, alcohol or drugs or the transmission of any sexually transmittable disease or virus.
15. claims directly or indirectly arising from Your anxiety, depression or mental or nervous disorders. If approved, this exclusion will be waived when cover is separately applied for by You in respect of Your condition/s, from the time We accept Your application and the appropriate additional amount payable has been paid to Us.
16. claims involving participation by You or Your travelling companion in hunting, racing (other than on foot), polo playing, hang gliding, off-piste snow skiing or snowboarding, rodeo riding, BASE jumping, sports activities in a professional capacity, mountaineering or rock climbing using ropes or guides, or scuba diving unless You hold an Open Water Diving Certificate or are diving with a qualified diving instructor.
17. claims involving participation by You (during the Journey) in motorcycling for any purpose. This exclusion, but not any other exclusion, will be waived from the time the appropriate additional amount payable has been received by Us, provided You are wearing a helmet, the motorcycle has an engine capacity of 200cc or less and whilst in control, You hold a licence valid in the relevant country.
18. claims involving consequential loss of any kind including loss of enjoyment or any financial loss not specifically covered in the policy.
19. any Goods and Services Tax (GST) liability or any fine, charge or penalty You are liable for because of a failure to fully disclose to Us Your input tax credit entitlement for the Amount Payable.
20. claims arising from the failure of any travel agent, tour operator, accommodation provider, airline or other carrier, car rental agency or any other travel or tourism services provider to provide services or accommodation due to their insolvency or the insolvency of any person, company or organisation they deal with.
21. claims under Sections 3, 7 and 8 arising directly or indirectly from an Act Of Terrorism or the threat or perceived threat of an Act Of Terrorism.
22. losses for which insurance is prohibited by law.
23. claims under Sections 2 (sub-sections 3 and 5), 3, 7 and 8 arising from Avian Influenza (including the H5N1 strain) or any derivative or mutation of such viruses, or the threat or perceived threat of any of the above.
24. claims arising directly or indirectly from complications following elective surgery.
25. claims involving participation by You (during the Journey) in on-piste snow skiing or snowboarding. This exclusion, but not any other exclusion, will be waived from the time the appropriate additional amount payable has been received by Us.
26. claims involving You travelling (during the Journey) in international waters in a private sailing vessel or a privately registered vessel.

Part 3: Financial Services Guide

This Financial Services Guide (FSG) is an important document and is designed to help you decide whether to use the financial services offered. It contains information about how Cover-More Insurance Services Pty Ltd (Cover-More) AFSL 241713, and the business that arranges the policy (Agent) is paid and how any complaints are handled. If you have a complaint about the financial services provided by Cover-More or the Agent you should contact Cover-More on 1300 72 88 22. If you are not satisfied with our response please see page 12 for details.

What financial services are provided?

The Agent is an authorised representative of Cover-More, and is authorised to provide you with general financial product advice about this travel insurance product and to issue these products to you. The Agent acts on behalf of Cover-More and the insurer, and not on your behalf. Cover-More is responsible for the provision of these services.

The Agent is not authorised to give you personal advice in relation to travel insurance. Any advice given to you about travel insurance will be of a general nature only and will not take account of your personal objectives, financial situation or needs.

Cover-More may also provide you with general advice and will issue the travel insurance product to you.

Cover-More acts under a binder authority. This means that Cover-More can enter into these policies and/or handle or settle claims on the insurer's behalf. Cover-More acts for the insurer when providing these services and will not be acting on your behalf. You can find full details of Cover-More and the insurer on page 2 of the PDS.

This FSG does not relate to any similar services provided to you in relation to any other insurance or other financial product. For services relating to other financial products, you will be given another FSG by the Agent that will describe the services and the AFS Licensee who is responsible.

How are we paid?

The Agent, and/or its associates, is paid a fee and/or commission by Cover-More for issuing your insurance policy. This amount is paid out of the commission that Cover-More receives from the insurer.

The Agent's employees may receive salaries, bonuses and/or company dividends in their own business depending on the nature of their employment. Bonuses may be linked to general overall performance and may include all or part of the commission received by the Agent.

If a travel services group is affiliated with the Agent they may be paid a commission out of the commission that Cover-More receives from the insurer for its role in supporting the Agent. The affiliate may also receive non-financial incentives from Cover-More to assist in marketing the travel insurance (e.g. sponsorship of training events and conferences).

Cover-More is paid a commission by the insurer when you are issued with an insurance policy. The commission is included in the premium charged by the insurer and is received after you have paid the premium. This commission is calculated as a percentage of the gross premium (premium including taxes but excluding GST).

Cover-More may also receive a share of profit earned by Great Lakes Australia if Great Lakes Australia makes an underwriting profit in accordance with the underwriting targets it has set. This amount is calculated and paid retrospectively only when Great Lakes Australia exceeds its underwriting target in a given year.

Cover-More's employees are paid an annual salary and may be paid a bonus based on business performance.

For more information about the remuneration or other benefits received for the financial services provided, please ask the Agent within a reasonable time of receiving this FSG and before they provide any financial services to you.

What professional indemnity insurance arrangements do we have in place?

Cover-More and the Agent each have their own professional indemnity insurance which covers errors and mistakes relating to their own financial services. Both policies provide cover for claims relating to the provision of financial services by their respective employees even after they cease to be employed, provided that the claim is notified to the insurer when it arises and within the relevant policy period. Cover-More's policy meets the requirements of the Corporations Act.

Who is responsible for this document?

Cover-More Insurance Services is responsible for the Financial Services Guide in this document and Great Lakes Australia is responsible for the Product Disclosure Statement in this document.

This Combined FSG and PDS was prepared on 01 June 2009.

Attach Certificate Of Insurance Here

Areas Of Travel

- Select the Area which you will spend the most time in.
- Area 1 is compulsory if more than 20% of your time is spent in the Americas / Africa.

Single Trip

Area 1 Worldwide

Including the Americas and Africa.

Area 2 Worldwide excluding the Americas and Africa

Europe, Middle East, Japan, China, Korea, Hong Kong and the Indian Sub Continent. Excludes the Americas and Africa if more than 20% of your journey is to these destinations.

Area 3 UK and South East Asia

UK, Republic of Ireland, Thailand, Vietnam, Malaysia, Singapore, Philippines and Asia (other).

Area 4 Indonesia and SW Pacific

Indonesia, South West Pacific, Norfolk Island, New Zealand and Domestic Cruising.

Area 5 Australia

Area 6 Australia Inbound

Annual Multi-Trip

Area 1 Worldwide

Including the Americas and Africa.

Area 2 Worldwide excluding the Americas and Africa

Excludes the Americas and Africa if more than 20% of any one journey is to these destinations.

Area 5 Australia (Plan D)

Note: Annual Multi-Trip policies:

- Choose from Area 1, 2 or 5.
- For Areas 1 and 2, cover is included for travel within Australia.

If Things Go Wrong

Claims

Please submit your claim form within 60 days of completing your journey. Refer to the claims procedures outlined on page 14 in this brochure. If you need further help:

Phone: from Australia 1300 36 26 44 from overseas +61 (2) 8907 5007
Fax: +61 (2) 9202 8098 Email: claims@covermore.com.au

When Must You Phone The Emergency Number?

You must phone the emergency assistance number as soon as physically possible if:

- you are admitted to hospital or;
- you anticipate that your medical or related expenses are likely to exceed \$4,000.

Subject to medical advice, Great Lakes Australia has the option of returning you to Australia or evacuating you to another country if the cost of your overseas medical and additional expenses is likely to exceed the cost of returning you to Australia.

24 Hour Emergency Assistance

If you need emergency assistance during the journey please call Australia DIRECT and TOLL FREE from:

USA 1866 354 3295 Canada 1866 655 7570
UK 0800 169 5847 NZ 0800 540 520

(the cost of a local call may be required if calling from a pay phone)

If you are calling from a country not listed above, or experiencing difficulties with one of the numbers above, call Australia reverse charge via the operator on:

Phone: +61 (2) 8907 5008 Fax: +61 (2) 8907 5009

IMPORTANT:

You should have this policy booklet, your policy number and your Emergency Assistance Card with you at all times when travelling.

Essentials Enrolment Form

Policy number (Agents must complete) **C M E**

Traveller and Contact Details

Main Policy Holder

#	Title	First Name	Surname	D.O.B.
1				/ /

Contact Details

Street Address	
Suburb	P/code
Day Phone ()	Mobile
Email	

List All Other Travellers On This Policy (including children)

#	Title	First Name	Surname	D.O.B.
2				/ /
3				/ /
4				/ /
5				/ /

Policy and Travel Details

Single Trip <input type="checkbox"/> OR Annual Multi-Trip <input type="checkbox"/>	Area of Travel (Pg 26) Choose from 1-6 <input type="checkbox"/>	Country Most Time Spent In <input type="text"/>	Travel Start Date <input type="text"/> / <input type="text"/> / <input type="text"/>	Travel End Date <input type="text"/> / <input type="text"/> / <input type="text"/>	Travel Duration <input type="text"/>	Domestic DA Plan Only Cover Chosen \$ <input type="text"/> Per Person (\$200, \$400, \$600, \$800, \$1,500)
	Area of Travel (Pg 26) Choose from 1, 2 or 5 <input type="checkbox"/>	Country Most Time Spent In <input type="text"/>	Travel Start Date <input type="text"/> / <input type="text"/> / <input type="text"/>	Maximum Duration Per Trip 15 days <input type="checkbox"/> 30 days <input type="checkbox"/> 45 days <input type="checkbox"/> 60 days <input type="checkbox"/>		

Trip Cost

This includes prepaid travel tickets, hotels, tours or other travel related expenses for all travellers on this policy.	Single Trip: enter the value of this trip Annual Multi-Trip: enter your highest trip value	\$ <input type="text"/>
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Vary Your Cover

Excess Chosen International Only (Pg 4)	\$Nil <input type="checkbox"/> \$100 <input type="checkbox"/> Other <input type="checkbox"/>	\$ <input type="text"/>
Increase Luggage Item Limit (Pg 9)	Item Description (attach valuations/receipts)	Increase The Item Limit By \$ <input type="text"/>
Increase Rental Car Insurance Excess Cover (Pg 9)	Extra Cover Required	\$ <input type="text"/>
Motorcycle / Moped Riding (Pg 9)	Tick If Cover Required <input type="checkbox"/>	
Snow Skiing And Snowboarding (Pg 9)	Tick If Cover Required <input type="checkbox"/> Snow Skiing <input type="checkbox"/> Snowboarding <input type="checkbox"/>	
Existing Medical Conditions / Pregnancy (Pg 7-9) This applies only to conditions not listed under the heading "Conditions We Automatically Cover For Free" on page 7	Conditions Not Requiring Assessment (Extra Cost Applies): List travellers who require cover (eg travellers 1 & 3)	
	Conditions That Require Assessment (Extra Cost Applies): List travellers who require cover (eg travellers 1 & 3)	

Total Amount Payable (based on the information I provided) \$

Travellers To The Americas And Africa Only

If you are not completely sure about the answer to the following question please get advice from your doctor.

Has anyone wishing to be insured ever been diagnosed with:

a heart condition a lung condition* reduced immunity**

* not including asthma if you are under 60 years of age

** e.g. as a result of medication or a medical condition

If you have been diagnosed with one or more of the above conditions, our Medical Assessment Form must be submitted to us. We will then advise if we can provide a policy, and if so, on what terms.

Declaration

- The PDS was given to me before I applied for this insurance.
- I understand that this policy does not automatically cover some existing medical conditions or some known pregnancies.
- I declare that all information supplied in this enrolment form and any attachments is truthful.

#	Applicant's Signature/s	Date
1		/ /
2		/ /

Note: If you need additional space, please provide extra information on a separate sheet of paper.