

Manulife Travel Insurance Sunwing Vacations Inc. dba Sunwing and as WestJet Vacations Québec All-Inclusive Policy

This policy is underwritten by

The Manufacturers Life Insurance Company (Manulife)

and

First North American Insurance Company,

a wholly owned subsidiary of Manulife.

NOTICE REQUIRED BY PROVINCIAL LEGISLATION

This policy contains a provision removing or restricting the right of the insured to designate persons to whom or for whose benefit insurance money is to be payable.

Important Notice - Read Carefully Before You Travel

You have purchased a travel insurance policy - what's next? We want you to understand (and it is in your best interest to know) what your policy includes, what it excludes, and what is limited (payable but with limits). Please take time to read through your policy before you travel.

Italicized terms are defined in your policy.

- Travel insurance covers claims arising from sudden and unexpected situations (i.e. accidents and emergencies) and typically not follow-up or recurrent care.
- To qualify for this insurance, you must meet all of the eligibility requirements.
- This insurance contains limitations and exclusions (i.e. medical conditions that are not stable, pregnancy, child born on trip, excessive use of alcohol, high risk activities).
- This insurance may not cover claims related to pre-existing medical conditions, whether disclosed or not at time of policy purchase.
- Contact the Assistance Centre before seeking treatment or your benefits may be limited.
- In the event of a claim your prior medical history may be reviewed.
- If you have been asked to complete a medical questionnaire and any of your answers are not accurate or complete, your policy will be voidable.

It is your responsibility to understand your coverage. If you have questions, call 1 866 298-2722.

IMPORTANT INFORMATION ABOUT *YOUR* TRAVEL INSURANCE

It is important *you* read and understand *your* policy before *you* travel. It is ***your responsibility*** to review the terms, conditions and limitations outlined in this policy.

To be eligible for insurance under this policy, *you* must meet all the eligibility requirements outlined on Page 4 of this policy.

A *pre-existing condition* exclusion applies to *your* coverage. It is ***your responsibility*** to review and understand the *pre-existing condition* exclusion that applies to *you*:

- *Trip* Interruption Insurance: please review the *pre-existing condition* exclusions listed on Page 6 of this policy.
- *Emergency Medical* Insurance: please review the *pre-existing condition* exclusions listed on Pages 8 & 9 of this policy.

ITALICIZED WORDS have a specific meaning. Please refer to the “Definitions” section of this policy to find the meaning of each italicized word.

IN THE EVENT OF AN *EMERGENCY*, YOU MUST CALL THE ASSISTANCE CENTRE IMMEDIATELY

1 800 211-9093 toll-free from the USA and Canada,
+1 (519) 251-7821 collect where available.

Our Assistance Centre is there to help *you*
24 hours a day, every day of the year.

Our Assistance Centre can also be contacted through the **Manulife TravelAid™** mobile app. Download the app through the Google Play™ store or the Apple App Store®. For more information, visit active-care.ca.

Please note that if ***you do not call*** the Assistance Centre in an *emergency*, ***you will have to pay 25% of the eligible medical expenses*** we would normally pay under this policy. If it is medically impossible for *you* to call, please have someone call on *your* behalf.

THIS POLICY IS UNDERWRITTEN by The Manufacturers Life Insurance Company (Manulife) and First North American Insurance Company (FNAIC), a wholly owned subsidiary of Manulife. Claim payment and administrative services are provided by the administrator, Active Claims Management Inc. Manulife has appointed Active Claims Management (2018) Inc., operating as “Active Care Management,” “ACM,” “Global Excel Management,” and/or “Global Excel” as the provider of all assistance and claims services. Please note that risks identified with ¶ throughout this document are covered by FNAIC.



Everyone wants to have a carefree trip and should be able to travel with confidence in their travel insurance purchase. Most people travel every day without a problem, but if something does happen, the member companies of the Travel Health Insurance Association of Canada (THiA) want you to know your rights. THiA’s Travel Insurance Bill of Rights and Responsibilities builds on the golden rules of travel insurance:

- Know your health • Know your trip
- Know your policy • Know your rights

For more information, go to www.thiaonline.com

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10-Day Free Look to Review this Policy

You have 10 days from *your* insurance purchase date to review this policy. If it does not meet *your* needs, *you* may terminate this insurance coverage and receive a premium refund if:

- (i) *you* have not departed on *your trip*; and
- (ii) there is no claim in progress.

To request a premium refund, simply contact *your* travel agent from whom *you* purchased the insurance.

After the 10-Day Free Look, refund of premium is not available.

MEDICAL CONCIERGE SERVICES

Manulife Travel Insurance is pleased to provide you with value-added medical concierge services.

What services are available?

StandbyMD™ has an International network of medical providers and partners who provide services across time zones and who assure a quick and streamlined access to healthcare 24/7/365 all over the world.

StandbyMD allows you to access multiple levels of personalized care ranging from:

- Teleconsultations for eligible cases (telephone / chat / videoconference access to a qualified physician who can assess your symptoms and provide treatment options)
- A network of visiting physicians (in 141 countries and over 4,500 cities)
- In-network clinics close to the patient
- In-network ERs located close to the patient only if necessary

In addition, when you travel within Canada or to the United States, StandbyMD offers the following services:

- Same-day co-ordination and delivery of lost/forgotten prescription maintenance medication, eyeglasses or contact lenses and medical supplies.

How does this service work? StandbyMD's risk assessment algorithm triages patients according to their symptoms, profiles and location. Based on the information provided they are instantly referred to the most appropriate level of care their specific situation requires.

StandbyMD uses a worldwide network of providers that offer high-quality care at preferred rates and direct billing solutions, minimizing the likelihood of paying out-of-pocket.

The StandbyMD program will assist with co-ordinating payment of eligible expenses subject to the terms and conditions of the policy. To access this service, simply call the Assistance Centre using the phone numbers indicated on the wallet card.

Disclaimer, Waiver, and Limitation of Liability: StandbyMD is not intended to be a substitute for professional medical advice, it is provided for the purpose of assisting you in finding medical providers. The advice provided by StandbyMD is a recommendation only, and entirely voluntary. You still retain the right to choose for yourself, your own level of care regardless of StandbyMD's recommendation. Medical providers utilized by StandbyMD are not employees, agents, nor in any way affiliated with StandbyMD, beyond accepting StandbyMD's referrals. StandbyMD does not have any control, real or implied, over the medical judgment of participating medical providers, nor their actions or inactions. StandbyMD, upon making referrals under this policy does not assume any responsibility for:

- the availability,
- their quality,
- the results or outcome of any treatment or service.

Policyholders hereby specifically waive any and all rights to proceed legally against StandbyMD or anyone related to StandbyMD* in any and all claims, demands, actions, causes of action, and suits of any kind, nature, or amount which relate to, or in any way directly or indirectly flow from the medical concierge services that StandbyMD is offering. StandbyMD's liability under these medical concierge services, if any, is limited solely to the amount of payment made to participating medical providers for the services that a policyholder obtained after they received a referral from StandbyMD.

*Related persons include principals, parents, successors and assigns of StandbyMD.

INTRODUCTION

Policy Contract

This is *your* insurance policy, a contract detailing terms and conditions of the insurance coverage *you* purchased. Coverage under this policy is issued on the basis of information provided in *your* application. *Your* entire contract with *us* consists of: this policy; the *confirmation* issued in respect of that application; and any other amendments or endorsements resulting from extensions of coverage.

How to contact us

Prior to travelling, or when travelling and *you* require *emergency* assistance, call **1 800 211-9093** toll-free from the USA and Canada
+1 (519) 251-7821 collect where available

For coverage information or general enquiries, please contact Manulife Travel Customer Service at **1 866 298-2722**.

SCHEDULE OF BENEFITS

Sunwing Vacations Inc. dba Sunwing and as WestJet Vacations Québec All-Inclusive Policy	
Eligible Age*	No Limit
Medical Concierge Services	Included
Trip Interruption	
Trip Interruption	Unlimited
Default Protection	See Page 7
Act of Terrorism Coverage	See Page 10
Emergency Medical**	
Hospital & Medical	\$5,000,000
Act of Terrorism Coverage	See Page 10
Baggage Loss, Damage & Delay	
Baggage Delay	\$500
Flight & Travel Accident	
Flight Accident	\$100,000
Travel Accident	\$50,000

* *Your child* must be at least 31 days old to be insured.

** *Emergency Medical* coverage is limited to a maximum of \$25,000 if you do not have valid coverage under a *government health insurance plan* for the entire duration of *your trip*.

ELIGIBILITY

You are NOT eligible for coverage if:

- you have been advised by a *physician* not to travel; and/or
- you have been diagnosed with a terminal illness with less than 6 months to live; and/or
- you have a kidney condition requiring dialysis; and/or
- you have used home oxygen during the 12 months prior to the date of application.

TO BE ELIGIBLE FOR INSURANCE UNDER THIS POLICY

You must be a resident of Canada and covered under a *government health insurance plan* for the entire duration of the *trip*. If at time of claim, it is discovered that you no longer have coverage under a *government health insurance plan*, the maximum amount payable for all eligible expenses combined will be limited to \$25,000. You must be a Sunwing Vacations or a WestJet Vacations Québec customer and pay the required premium to your Sunwing Vacations or WestJet Vacations Québec travel advisor before you leave home. You must buy coverage for the entire duration of your *trip*. Coverage must be purchased at the time you book your *trip*.

GENERAL INFORMATION ABOUT YOUR TRAVEL INSURANCE

Children Under 2 Years Old at No Extra Charge:

If your children (or a child) is more than 30 days old, and will be under 2 years old for the entire duration of your *trip*, coverage will be provided to that child at no extra charge.

THE DATE YOUR COVERAGE STARTS / YOUR EFFECTIVE DATE OF COVERAGE

For **Emergency Medical Insurance**, coverage starts when you leave home.

For **Trip Interruption Insurance; Baggage Loss, Damage & Delay Insurance and Flight & Travel Accident Insurance**, coverage starts on your departure date.

THE DATE YOUR COVERAGE ENDS / YOUR COVERAGE EXPIRY DATE

For **Trip Interruption Insurance**, coverage ends on the earlier of:

- the date when you return to your departure point*; or
- on the expiry date as shown on your confirmation.

For **Emergency Medical Insurance; Baggage Loss, Damage & Delay Insurance and Flight & Travel Accident Insurance**, coverage ends on the earlier of:

- the date you return home*; or
- the expiry date as shown on your confirmation.

***Your insurance coverage will not end if you temporarily return home** Your insurance coverage will not end if, under your *Trip Interruption* coverage, you temporarily return home prior to your return date for the purpose of attending a funeral or to go to the hospital bedside of an immediate family member and then resume your *trip*. In such a case, your policy will remain in effect up to your return date. However, you will not be covered for any pre-existing condition, sickness or injury for which you, or any other person whose medical condition gives rise to a claim, had sought or received medical treatment, or for which medication had commenced, or been changed in type, usage or dosage during the 90-day period immediately prior to the date you resumed your *trip*.

If you have requested and received prior approval from our Assistance Centre to return to your destination under the *Emergency Medical Insurance* benefit #14, Return to Destination, your medical coverage will deemed not to have terminated but will be suspended for the duration of your temporary return. Your medical coverage will resume once you begin travel in accordance with the coverage restrictions set out under *Emergency Medical Insurance* benefit #14, Return to Destination.

In all cases of such temporary returns, there will be no refund of premium for any of the days that you have returned to your home.

ADDITIONAL INFORMATION

AUTOMATIC EXTENSION

Under *Trip Interruption Insurance*, we will extend your coverage automatically beyond the date you were scheduled to return home as per your confirmation:

- for up to 10 days, if you have an emergency that prevents you from returning home on that date; or
- for up to 30 days, if you are hospitalized and that hospitalization prevents you from returning home on that date.

However, if travel is medically possible before the applicable 10 or 30 days have passed, we will honour your claim for eligible expenses only until such earlier date.

Under all other types of insurance, we will extend your coverage automatically beyond the date you were scheduled to return home as per your confirmation if:

- your common carrier is delayed. In this case, we will extend your coverage for up to 72 hours; or
- you or your travel companion are hospitalized on that date. In this case, we will extend your coverage during the hospitalization and for up to 5 days after discharge from the hospital; or
- you or your travel companion have an emergency that does not require hospitalization but prevents travel. In this case, we will extend your coverage for up to 5 days.

In any case, we will not extend any coverage beyond 12 months after your effective date of insurance.

TO STAY LONGER THAN PLANNED

Extensions: If you have not left home yet, simply contact your travel agency to ask for the extension. If however, you are already on your *trip* and need to apply for an extension of your coverage, simply contact your travel agency before the expiry date of your existing coverage. You may be able to extend your coverage as long as:

- the total length of your *trip* does not exceed 30 days;
- you pay the additional premium; and
- you have had no event that has resulted or may result in a claim.

Any extension is subject to the approval of the Assistance Centre.

TRIP INTERRUPTION INSURANCE

Trip Interruption Insurance

Trip Interruption Insurance coverage starts on your departure date.

Trip Interruption Insurance coverage ends on the earlier of:

- the date you return to your departure point; or
- on the expiry date as shown on your confirmation.

Benefits – What does *Trip Interruption Insurance* cover?

If your *trip* is interrupted due to a covered event listed immediately below that occurs on or after the day you plan to leave home, we will pay:

- For the prepaid unused portion of your *trip* that is non-refundable and non-transferable to another travel date less the prepaid unused transportation home.
- If you have booked and paid for a golf package, we will also pay up to \$100 for each unused day of your *trip*, to a maximum of \$500 for your prepaid non-refundable green fees. Alternatively, if you have booked and paid for a ski package, we will pay up to \$100 for each unused day of your *trip*, to a maximum of \$500 for your prepaid non-refundable ski package (lift passes; ski school fees; rental of a snowboard, skis, ski poles, bindings and/or boots).
- Your additional and unplanned hotel and meal expenses, your essential phone calls, internet usage fees and taxi fares (or car rental in lieu of taxi fares) to a maximum of up to \$350 per day for up to 2 days when no earlier transportation arrangements are available.
- Your extra cost of your one-way economy class transportation via the most cost-effective itinerary to your or your group's next destination, or to return home when you are eligible for benefits under this insurance.
- If you must interrupt your *trip* to attend a funeral or to go to the bedside of a hospitalized immediate family member, we will reimburse you for the cost of a round-trip ticket you have paid for, up to the amount of a one-way economy class fare to return home.

Events Covered Under **Trip** Interruption Insurance:

Medical Related Events

1. *You or your travel companion* develop(s) a *medical condition*.
2. A member of *your immediate family* or *your key-person*, a member of *your travel companion's immediate family* or their *key-person*, develops a *medical condition*.
3. *Your friend* or the person whose guest *you* will be during *your trip* is admitted to a *hospital* in an emergency.
4. A *medical condition* which, in the written opinion of the attending *physician*, prevents *you* or *your travel companion* from participating in a sporting event when the purpose of the *trip* was to participate in that sporting event.
5. ‡ *Sickness* or *injury* of *your service dog*, provided that *you* are an individual with a disability (physical, psychiatric or mental disability), and travel arrangements have been made for the dog to accompany *you* on *your trip*. For this benefit to apply, the travel arrangement cost for *your service dog* must be included in the covered amount insured.
6. *You, your spouse, your travel companion* or *your travel companion's spouse* are quarantined.

Pregnancy and Adoption

7. *You or your travel companion* develop(s) any complication of pregnancy within the first thirty-one (31) weeks of pregnancy.
8. A member of *your immediate family* or *your key-person*, a member of *your travel companion's immediate family* or their *key-person* develops any complication of pregnancy within the first thirty-one (31) weeks of pregnancy.
9. *You, your spouse, your travel companion* or *your travel companion's spouse* legally adopt(s) a child and the date of the adoption falls during *your trip*.

Death

10. *You or your travel companion* die(s).
11. A member of *your immediate family* or *your key-person*, a member of *your travel companion's immediate family* or their *key-person* dies.
12. *Your friend* or the person whose guest *you* will be during *your trip* dies.
13. ‡ Death of *your service dog*, provided that *you* are an individual with a disability (physical, psychiatric or mental disability), and travel arrangements have been made for the dog to accompany *you* on *your trip*. For this benefit to apply, the travel arrangement cost for *your service dog* must be included in the covered amount insured.

Work and Educational Obligations

14. ‡ *You, your spouse, your travel companion* or *your travel companion's spouse* are called to service as a reservist, firefighter, military or police staff during *your trip*.
15. ‡ *You, your spouse, your travel companion* or *your travel companion's spouse*:
 - a) lose a permanent job because of layoff or dismissal without just cause, or
 - b) are transferred by *you* / their respective employer and must move from *you* / their respective principal residence.
16. ‡ The cancellation of *your* or *your travel companion's* business meeting, conference or convention which was the main intent of this *trip* and was scheduled before the purchase of this insurance. The cancellation must be for a reason beyond *you* or *your travel companion's* control or *your* or *your travel companion's* employer's control. This event must be between companies with unrelated ownership, and, in the case of a conference or convention, *you* or *your travel companion* must be a registered delegate.
17. ‡ The requirement that *you* or *your travel companion* attend a registered professional career course examination or a university or college course examination on a date that occurs during *your trip*, provided the examination had a set date and time that was published before *you* purchased this insurance and subsequently changed after such purchase.

Government and Legal

18. ‡ *You, your spouse, your travel companion* or *your travel companion's spouse* are called to jury duty or to be a defendant in a civil suit or are subpoenaed to be a witness during *your trip*.
19. ‡ *Your* or *your travel companion's* travel visa is not issued for a reason beyond *you* / their control, provided the documentation shows *you* or *your travel companion* were eligible to apply, that the refusal is not due to a late application, and the application is not a subsequent attempt for a visa that had been previously refused.
20. ‡ The Government of Canada issues an "Avoid Non-Essential Travel" or an "Avoid All Travel" travel advisory after *your departure date*, advising or recommending that Canadian residents should not visit a destination included in *your trip*.

21. ‡ If *your* or *your travel companion's* passport and/or travel visa is lost or stolen during *your trip*, *you* will be reimbursed for reasonable travel and accommodation expenses until *your* replacement travel documentation is replaced. *You* will also be reimbursed for the change fee charged by the airline.

Accommodations and Transportation

22. ‡ *You, your spouse, your travel companion* or *travel companion's spouse* are unable to occupy *your* / their principal residence or to operate *your* / their place of business because of an event that is independent of any intentional or negligent act on *your* / their part.
23. ‡ A natural disaster renders *your* pre-booked destination accommodation uninhabitable after *you* book *your trip*. This benefit is only applicable if *your* prepaid accommodation arrangements are not eligible for reimbursement by the *travel supplier*.
24. ‡ *You* miss a connection or must interrupt *your trip* because of the delay of *your* connecting private passenger *vehicle*, when the delay is caused by the mechanical failure of *your* connecting private passenger *vehicle*, a traffic accident, an emergency police-directed road closure, weather conditions, earthquakes or volcanic eruptions. *Your* connecting private passenger *vehicle* must have been scheduled to arrive at *your* point of boarding in time to comply with the *travel supplier's* check-in procedure.
25. ‡ If *your trip* is interrupted and the planned time of arrival is delayed for any reason beyond *your* control, we will reimburse *you* for the *reasonable and customary* charges of taking an alternate route to the planned destination provided that the primary reason for *your trip* was to be present at a school graduation, wedding, funeral, sporting, theatrical, musical or other commercial entertainment event or conference, and such event cannot be delayed as a result of *your* late arrival.
26. ‡ A delay in *your* departure due to mechanical failure, weather conditions, earthquakes, volcanic eruptions, or grounding of *your* air transportation causes *you* to miss *your* scheduled cruise and *you* choose not to travel. This is applicable only if *your* airfare and cruise are insured with this Sunwing Vacations Inc. dba Sunwing and as WestJet Vacations Québec All-Inclusive Policy and purchased through the same travel agency from whom *you* purchased *your* cruise.
27. ‡ The flight *you* are booked to fly on is overbooked and *you* are denied boarding as a result, we will pay up to \$1,000 for the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another date. For this benefit to apply, the overbooked flight must have been insured with this Sunwing Vacations Inc. dba Sunwing and as WestJet Vacations Québec All-Inclusive Policy.
28. ‡ *You* miss a connection or must interrupt *your trip* because of the delay of *your* connecting *common carrier*, when the delay is caused by the mechanical failure of *your* connecting *common carrier*, a traffic accident, an emergency police-directed road closure, weather conditions, an unannounced strike, earthquakes or volcanic eruptions. The *common carrier* must have been scheduled to arrive at *your* point of boarding in time to comply with the *travel supplier's* check-in procedure.

Weather

29. ‡ Weather conditions, earthquakes or volcanic eruptions cause delays to at least 30% of *your trip* and *you* choose not to travel.

Hijacking

30. ‡ *You, your spouse, your travel companion* or *your travel companion's spouse* are hijacked.

Benefits – What does **Misconnection Insurance** cover?

If any of the covered events listed immediately below occurs before or after *your* originally scheduled *departure date* and causes a misconnection or a travel disruption which prevents *you* from travelling as shown on *your confirmation*, we will pay:

- A. Up to a maximum of \$2,000 for *your* misconnection or travel disruption expenses for:
 - i. the lesser of; the change fee charged by the *common carrier* for *your* missed connection or the cost of *your* one way same class transportation via the most cost-effective itinerary to the next destination, when *you* are eligible for misconnection and delay benefits,
 - ii. the unused prepaid portion of *your trip* (less the prepaid unused transportation *home*) that is non-refundable and non-transferable to another travel date (provided such expenses are not reimbursable by any other source).
- B. *Your* additional and unplanned hotel and meal expenses, *your* essential phone calls, internet usage fees and taxi fares (or car rental in lieu of taxi fares) to a maximum of \$350 per day for up to 2 days when no earlier transportation is available.

Misconnection Insurance or Travel Disruption Covered Events:

1. ‡You miss your next connecting *common carrier* because the *common carrier* that is providing transportation for a portion of your *trip* leaves later than originally scheduled.
2. ‡The *common carrier* that is providing transportation for a portion of your *trip* leaves earlier than originally scheduled and the ticket you have purchased for your prior connection via another *common carrier* becomes unusable.
3. ‡You or your *travel companion*, because of a delay, schedule change or cancellation of your or your *travel companion's common carrier*, causes a delay of at least 6 hours in arriving at your *trip* destination or returning to your *home*.
4. ‡You miss a connection because of a delay in clearing customs and security controls due to your or your *travel companion's* mistaken identity. You must have been scheduled to arrive at your point of boarding in time to comply with the *travel supplier's* check-in procedure.
5. ‡You miss a connection because the cruise ship you are travelling on is delayed (or the itinerary is modified) because of another passenger's medical emergency.

Only misconnection or travel disruption expenses outlined under this Misconnection Insurance will be payable.

You must make reasonable efforts to continue on your *trip* as originally planned. The amount payable will be reduced by any amounts paid or payable by the rescheduled or delayed *common carrier*.

Benefits – What does Delayed Return Insurance cover?

If any of the covered events listed immediately below happens after you leave home and makes it impossible for you to return home as shown on your *confirmation*, we will, for the length of time that you are prevented from travelling, pay for:

- A. Your additional and unplanned hotel and meal expenses, your essential phone calls, internet usage fees and taxi fares (or car rental in lieu of taxi fares) to a maximum of up to \$350 per day and \$3,500 in total.
- B. Up to \$2,000 for the extra costs of your same class transportation via the most cost-effective itinerary to return home when you are eligible for misconnection and delay benefits. If the delay is a result of a *medical condition*, it must be on the advice of the attending *physician* at your destination.

Delayed Return Insurance Covered Events:

1. You have a *medical emergency*.
2. A member of your *immediate family* has a *medical emergency* or dies at your destination.
3. Your *travel companion* has a *medical emergency* or dies at your destination.
4. Your friend or the person whose guest you are during your *trip* is admitted to hospital with an *emergency* or dies.

What else does Trip Interruption & Delayed Return Insurance cover?

1. ‡ In the event your *travel companion's plane* is delayed by weather conditions, earthquakes or volcanic eruptions for at least 30% of your *trip*, and your *travel companion* decides not to go on the *trip* as booked, we will cover the cost of your next occupancy charge up to the covered amount insured.
2. In the event you die after the start of your *trip*: We will reimburse your estate for your prepaid unused *trip* arrangements, plus we will reimburse your estate for:
 - the return home of your body (in the standard transportation container normally used by the airline); plus up to \$5,000 to have your body prepared where you die including the cost of a standard casket;
 - up to \$5,000 to have your body prepared and the cost of a standard casket or urn, plus up to \$5,000 for your burial where you die; or
 - the return home of your ashes, plus up to \$5,000 to cremate your body where you die including the cost of a standard urn.

In addition, if someone is required to identify your body and must travel to the place of your death, we will pay the round-trip economy class airfare via the most cost-effective itinerary for that person and up to \$300 for that person's hotel and meal expenses. We will also provide that person with *Emergency Medical Insurance* under the same terms and limitations of this policy for up to 72 hours.

3. ‡ If the primary reason for your *trip* was to attend a ticketed commercial event (sport, musical or other commercial entertainment) for which you had purchased and paid for tickets prior to booking your *trip* and purchasing this insurance, and such event is subsequently cancelled by the promoter of the event, we will pay up to the covered amount:
 - If the event is cancelled after you leave home:
 - i) the prepaid unused portion of your *trip* that is non-refundable and non-transferable to another travel date (less prepaid unused transportation home); and
 - ii) up to \$1,000 for the additional cost of one-way transportation via the most cost-effective itinerary (being the lesser of a one-way economy transportation or the change fee charged by the airline on existing tickets if this option is available) to return you home.

Exclusions & Limitations – What does Trip Interruption Insurance not cover?

When reading this section, please take the time to review the definitions of "pre-existing condition" and "stable" at the end of this policy.

We will not pay for losses or expenses incurred for, or as the result of, the following events which are applicable to all coverages detailed in this section, including Trip Interruption, Misconnection and Delayed Return Insurance:

1. A *medical condition* related to you, your spouse, or your children, if that *medical condition* was not stable in the 3 months before the insurance purchase date or application date as indicated on your *confirmation*. In addition to the "stable" requirement, we will not cover any expenses relating to:
 - your/ their heart condition if, in the 3 months before the insurance purchase date or application date as indicated on your *confirmation*, any of your /their heart condition(s) has/have not been stable or you/they have taken any form of nitroglycerine for the relief of angina pain; and/or
 - your/ their lung condition if, in the 3 months before the insurance purchase date or application date as indicated on your *confirmation*, any of your /their lung condition(s) has/have not been stable or you/they required treatment with oxygen or prednisone for any lung condition.
2. Trip cancellation expenses incurred before departure.
3. Any reason, circumstance, event or *medical condition* affecting you or anyone, which you were aware of on or before the date you purchased this coverage, and which may eventually prevent you from starting and/or completing your covered *trip* as booked when you purchase this insurance coverage.
4. The *medical condition* or death of a person who is ill when the purpose of your *trip* is to visit that person.
5. Your self-inflicted injuries, unless medical evidence establishes that the injuries are related to a mental health illness.
6. Any claim that results from or is related to your commission or attempted commission of a criminal offence or illegal act.
7. Any *medical condition* that is the result of you not following treatment as prescribed to you, including prescribed medication.
8. • Any *medical condition*, including symptoms of withdrawal, arising from, or in any way related to, your chronic use of alcohol, drugs or other intoxicants whether prior to or during your *trip*.
 - Any *medical condition* arising during your *trip* from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.
9. Any loss resulting from your minor mental or emotional disorder.
10. • routine pre-natal or post-natal care;
 - pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.
11. Your child born during the *trip*.
12. A *medical condition*:
 - when you knew or for which it is reasonable to believe or expect that treatment will be required during your *trip*; and/or
 - for which future investigation or treatment was planned before you left home; and/or
 - which caused symptoms that would have caused an ordinarily prudent person to seek treatment in the 3 months before leaving home; and/or
 - that caused a *physician* to advise you not to go on your *trip*.
13. A travel visa that is not issued because of a late application.
14. An act of war or act of terrorism. Limited coverage applies with respect to an act of terrorism as described in the Act of Terrorism Coverage provision.

15. Any act of terrorism or any medical condition you suffer or contract when an official travel advisory was issued by the Canadian government stating "Avoid all non-essential travel" or "Avoid all travel" regarding the country, region or city of your destination, before your effective date. To view the travel advisories, visit the Government of Canada Travel site. This exclusion does not apply to claims for an emergency or a medical condition unrelated to the travel advisory.

DEFAULT PROTECTION COVERAGE

We will provide Default Protection coverage subject to the benefit limits and exclusions listed below.

If you:

- have contracted with a travel supplier who defaults; and
- as a result of the default, you do not receive part or all of the travel services for which you have contracted; and
- cannot recover all of the cost of such undelivered travel services either from the travel supplier, any federal, provincial or other compensation fund, or from any other source that is legally responsible or under contract to reimburse you for the cost of such undelivered travel services,

then, we will reimburse you as follows:

for default after your departure date:

- the non-refundable portion of the amount that you prepaid for such undelivered travel services, except prepaid unused transportation home; and
- your additional and unplanned hotel and meal expenses, your essential phone calls and taxi fares up to a maximum of \$200 per day for up to 3 days; and
- the extra cost of your economy class transportation via the most cost-effective itinerary to your next destination or to return you home.

Benefit Limits

The amount payable to you in respect of any one trip will not exceed \$3,500 CDN; and will not exceed \$7,500 CDN for all persons who are covered under the same Sunwing Vacations Inc. dba Sunwing and as WestJet Vacations Québec All-Inclusive Policy. Any benefits payable shall also be subject to an overall maximum aggregate payable limit specified below relating to all in-force travel policies issued by us, including this policy.

If total claims otherwise payable for this type of coverage under all travel policies issued by us, resulting from the default of one or more travel suppliers occurring within an applicable time period, exceeds the maximum aggregate payable limit, then the amount paid on each claim shall be reduced on a pro rata basis so that the total amount paid in respect of all such claims shall be the maximum aggregate payable limit.

The maximum aggregate limits are:

- \$1,000,000 CDN with respect to the default of any one (1) travel supplier; and
- \$3,000,000 CDN with respect to all defaults of all travel suppliers occurring in the same calendar year.

If, in our judgment, the total of all payable claims on account of the default of one or more travel suppliers exceeds the applicable limits, your pro-rated claim may be paid after the end of the calendar year in which you qualify for benefits.

Exclusions

We will not cover any expenses caused by or resulting from any of the following:

- Loss or damage, incurred by you, which is or can be recovered from any other source, including any federal, provincial or other compensation fund;
- Loss arising as a result of a default if, at the time of booking, the travel supplier is bankrupt, insolvent or in receivership or has sought protection from creditors under any bankruptcy, insolvency or similar legislation;
- Loss arising as a consequence of the bankruptcy or insolvency of a retail travel agent, agency or broker;
- Loss arising as a result of the default of a foreign travel supplier if the travel services to be provided by such foreign travel supplier are not part of a package tour sold to you (package tour for this exclusion means a travel itinerary which would include transportation, accommodation and possibly meals, packaged together for one price);
- Losses incurred by an individual who has not purchased coverage for Trip Interruption Insurance coverage under the Sunwing Vacations Inc. dba Sunwing and as WestJet Vacations Québec All-Inclusive policy, in connection with your trip which resulted in such losses;
- Insurance purchased or trips booked after the default; or
- Travel services that were actually provided.

EMERGENCY MEDICAL INSURANCE

Emergency Medical Insurance coverage starts when you leave home.

Emergency Medical Insurance coverage ends on the earlier of:

- the date you return home; or
- the expiry date as shown on your confirmation.

Benefits – What does Emergency Medical Insurance cover?

Emergency Medical Insurance covers you for up to \$5,000,000 CDN of reasonable and customary expenses incurred by you as a result of emergency treatment required by you during your trip if a medical condition begins unexpectedly after you leave home, but only if these covered expenses are not covered by your government health insurance plan or any other benefit plan. The medical attention must be required as part of your emergency treatment and ordered by a physician (or a dentist in the case of dental treatment).

In the event of an emergency, call the Assistance Centre immediately: 1 800 211-9093 toll-free from the USA and Canada or +1 (519) 251-7821 collect where available.

You must call the Assistance Centre before obtaining emergency treatment, so that we may:

- confirm coverage
- provide pre-approval of treatment.

If it is medically impossible for you to call prior to obtaining emergency treatment, we ask you to call or have someone call on your behalf as soon as possible. Otherwise, if you do not call the Assistance Centre before you obtain emergency treatment you will be responsible for 25% of your medical expenses covered under this insurance.

After your medical emergency treatment has started, the Assistance Centre must assess and pre-approve additional medical treatment. If you undergo tests as part of a medical investigation, treatment or surgery, obtain treatment or undergo surgery that is not pre-approved, your claim will not be paid. This includes but is not limited to MRI, MRCP, CAT Scan, CT Angiogram, sonograms, ultrasounds, Nuclear Stress Test, biopsies, Angiogram, Angioplasty, cardiovascular surgery including any associated diagnostic test(s), Cardiac Catheterization or any surgery.

Subject to the policy's maximums, exclusions and limitations the eligible covered expenses are:

- Expenses to receive emergency treatment** – Medical care received from a physician in or out of a hospital, the cost of a semi-private hospital room (or an intensive or coronary care unit where medically necessary and could not be omitted without adversely affecting your condition or quality of medical care), the services of a licensed private duty nurse while you are in hospital, the rental or purchase (whichever is less) of a hospital bed, wheelchair, brace, crutch or other medical appliance, tests that are needed to diagnose or find out more about your condition, and drugs that are prescribed for you and are available only by prescription from a physician or dentist.
- Expenses to receive professional services** – Care received from a licensed chiropractor, osteopath, physiotherapist, chiroprapist or podiatrist, up to \$300 by profession.
- Expenses for ambulance transportation** – Reasonable and customary charges for local licensed ambulance service to transport you to the nearest qualified medical service provider in an emergency.
- Expenses related to your death** – If you should die during your trip from an emergency covered under this insurance, we will reimburse your estate for:
 - the return home of your body (in the standard transportation container normally used by the airline); plus up to \$5,000 to have your body prepared where you die and the cost of a standard casket;
 - up to \$5,000 to have your body prepared and the cost of a standard casket or urn, plus up to \$5,000 for your burial where you die; or
 - the return home of your ashes, plus up to \$5,000 to cremate your body where you die including the cost of standard urn.

In addition, if someone is required to identify your body and must travel to the place of your death, when approved in advance by the Assistance Centre, we will pay the round-trip economy class airfare via the most cost-effective itinerary for that person and up to \$300 for that person's hotel and meal expenses. We will also provide that person with Emergency Medical Insurance under the same terms and limitations of this policy for up to 72 hours.

5. **Expenses to bring you home** – If your treating physician recommends that you return home because of your emergency or if our medical advisors recommend that you return home after your emergency, when approved and arranged in advance by the Assistance Centre, we will pay the reasonable and customary expenses for:
 - the extra cost of an economy class fare via the most cost-effective itinerary; or
 - a stretcher fare on a commercial flight via the most cost-effective itinerary, if a stretcher is medically necessary; and
 - the return cost of an economy class fare via the most cost-effective itinerary for a qualified medical attendant to accompany you, and the attendant's reasonable fees and expenses, if this is medically necessary or required by the airline; or
 - the cost of air ambulance transportation, if this is medically necessary, is appropriate and consistent with the diagnosis and could not be omitted without adversely affecting your condition or quality of medical care.
 6. **Extra expenses for meals, hotel, phone calls and taxi** – If a medical emergency prevents you or your travel companion from returning home as originally planned, or if your emergency medical treatment or that of your travel companion requires your transfer to a location that is different from your original destination, we will reimburse you to \$350 per day to you to a maximum of \$3,500 for your extra meals, hotel, essential phone calls, internet usage fees and taxi fares (or car rental in lieu of taxi fares). We will only pay for these expenses if you have actually paid for them.
 7. **Expenses to bring someone to your bedside** – If you are travelling alone and are admitted to a hospital for 3 days or more because of a medical emergency, when approved in advance by the Assistance Centre, we will pay the round-trip economy class fare via the most cost-effective itinerary for someone to be with you. We will also pay up to \$500 for that person's hotel and meals and cover him/her under Emergency Medical Insurance, under the same terms and limitations of this policy, until you are medically fit to return home. For a child insured under this policy, this benefit is available immediately upon his/her hospital admission.
 8. **Expenses for emergency dental treatment** – If you need emergency dental treatment, we will pay:
 - up to \$300 for the relief of dental pain; and
 - if you suffer an accidental blow to the mouth, up to \$3,000 to repair or replace your natural or permanently attached artificial teeth (up to \$2,000 during your trip and up to \$1,000 to continue medically necessary treatment in the 90 days after the accident).
 9. **Expenses to return children under your care** – If you are admitted to hospital for more than 24 hours or must return home because of an emergency, when approved in advance by the Assistance Centre, we will pay for the extra cost of one-way economy class airfare to return your children or grandchildren home via the most cost-effective itinerary and the return economy class airfare via the most cost-effective itinerary for a qualified escort when the airline requires it. We will cover him/her under the Emergency Medical Insurance, under the same terms and limitations of this policy for a qualified escort. The children or grandchildren must have been under your care during your trip and be covered under this policy.
 10. **Expenses for childcare** – If you are admitted to hospital, we will cover the expenses for an attendant to provide childcare services when such service is required. The attendant must be a person other than the child's parent, member of the immediate family, your travel companion, or the person whose guest you are during the trip. We will reimburse you up to \$100 per day to a maximum of \$300 per trip. The child(ren)/grandchild(ren) must have been under your care during your trip.
 11. **Expenses to return your domestic dog and/or cat** – When approved in advance by the Assistance Centre, we will pay up to \$500 for the extra cost of economy class transportation to return your domestic dog(s) and/or cat(s) home via the most cost-effective itinerary, if:
 - a) your treating physician recommends that you return home because of your medical condition;
 - b) our medical advisors recommend that you return home after your emergency treatment; or
 - c) you die.
 12. **Expenses to return your travel companion home** – We will pay the extra cost of one-way economy class airfare via the most cost-effective itinerary, to return your travel companion (who is travelling with you at the time of your emergency and insured under our travel medical insurance plan) home, if you return home under Benefit #5 (Expenses to bring you home).
 13. **Expenses to return your vehicle home** – If, because of a medical emergency, hospitalization, death or repatriation, you are unable to drive home the vehicle you used during your trip, when approved in advance by the Assistance Centre, we will cover up to the reasonable cost charged by a commercial agency to bring your vehicle home. If you rented a vehicle during your trip, we will cover its return to the rental agency.
 14. **Return to Destination** – When approved in advance by the Assistance Centre and provided your attending physician determines no further treatment is required, you will be reimbursed the extra cost of one-way economy transportation to return to your trip destination after you are returned to your home for emergency treatment under Benefit #5 (Expenses to bring you home). Once you return to your trip destination, a recurrence of the medical condition which required your return home or any related condition will not be covered under this policy. This benefit can only be used once during your trip and only if the return can be arranged within the original period of coverage.
 15. **Hospital Allowance** – If you are hospitalized for 48 hours or more, we will reimburse you up to \$50 per day, to a maximum of \$500 for your incidental expenses (telephone calls, television rental, etc.) while you are in the hospital.
 16. **Baggage Return** – If you return home under Benefit #5 (Expenses to bring you home), when approved in advance by the Assistance Centre, we will pay the extra costs to return your baggage to your home.
 17. **Expenses to replace prescription drugs** – Up to \$50 if you have misplaced or have forgotten your prescription medication during your trip and it is necessary for you to continue taking the prescribed medication. Charges for vitamins, vitamin preparations, over-the-counter drugs, contraceptives or birth control are not covered.
 18. **Hearing Aid** – Up to \$200 for the replacement of a hearing aid due to theft, loss or breakage during your trip and assistance to co-ordinate the replacement.
 19. **Vision Care** – Up to \$200 for the replacement of prescription eyeglasses due to theft, loss or breakage during your trip and assistance to co-ordinate the replacement.
- Exclusions & Limitations – What does Emergency Medical Insurance not cover?**
- We will not pay for any losses, expenses or benefits relating to:
1. **A pre-existing condition.** When reading this section, please take the time to review the definitions of "pre-existing condition" and "stable" at the end of this policy. The pre-existing condition exclusion which applies to you depends on your age at the time you purchased this policy as outlined below.
 - **If you are under the age of 75, this pre-existing condition applies to you.**
We will not pay any expenses relating to:
 - a pre-existing condition that was not stable in the **three (3) months** before your effective date; and/or
 - a heart condition, if, in the **three (3) months** before your effective date, any heart condition has not been stable or you have taken any form of nitroglycerine for the relief of angina pain; and/or
 - a lung condition, if, in the **three (3) months** before your effective date, any lung condition has not been stable or you required treatment with oxygen or prednisone for any lung condition.
 - **If you are age 75 or over, this pre-existing condition applies to you.**
We will not pay any expenses relating to:
 - a pre-existing condition that was not stable in the **twelve (12) months** before your effective date; and/or
 - a heart condition, if, in the **twelve (12) months** before your effective date, any heart condition has not been stable or you have taken any form of nitroglycerine for the relief of angina pain; and/or
 - a lung condition, if, in the **twelve (12) months** before your effective date, any lung condition has not been stable or you required treatment with oxygen or prednisone for any lung condition.
 2. Any medical condition when, prior to your departure date, you had not met all the eligibility requirements.
 3. Expenses that exceed a maximum of \$25,000, if you do not have valid coverage under a government health insurance plan for the entire duration of your trip.
 4. Covered expenses that exceed the reasonable and customary charges where the medical emergency happens.

5. Covered expenses that exceed 75% of the cost we would normally have to pay under this insurance, if you do not contact the Assistance Centre at the time of the *emergency*, unless your *medical condition* makes it medically impossible for you to call (in that case, the 25% co-insurance does not apply).
6. Any *treatment* that is not for an *emergency*.
7. Any non-*emergency*, experimental or elective *treatment* such as cosmetic surgery, chronic care, rehabilitation including any expenses for directly or indirectly related complications.
8. The continued *treatment* of a *medical condition* or related condition, following *emergency treatment* during your *trip*, if our medical advisors determine that your *emergency* has ended.
9. A *medical condition*:
 - when you knew or for which it is reasonable to believe or expect that *treatment* will be required during your *trip*; and/or
 - for which future investigation or *treatment* was planned before you left home; and/or
 - which produced symptoms that would have caused an ordinarily prudent person to seek *treatment* in the 3 months before your *effective date*; and/or
 - that had caused your *physician* to advise you not to travel.
10. Any *trip* made for the purpose of obtaining a diagnosis, *treatment*, surgery, investigation, palliative care, or any alternative therapy, as well as any directly or indirectly-related complication.
11. An *emergency* resulting from an accident that occurs while you are participating in:
 - any sport, snorkeling or scuba-diving when that sport, snorkeling or scuba-diving is your principal paid occupation;
 - any sport or activity indicated below:
 - any form of BASE jumping (ie: wingsuit flying);
 - hang-gliding;
 - rock climbing;
 - mountain-climbing which involves the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pickaxes, anchors, bolts, carabiners and lead or top-rope anchoring equipment;
 - any competition, speed event or other high-risk activity involving the use of a motor vehicle on land, water or air, including training activities, whether on approved tracks or elsewhere.
12. Your self-inflicted injuries, unless medical evidence establishes that the injuries are related to a mental health illness.
13. Any claim that results from or is related to your commission or attempted commission of a criminal offence or illegal act.
14. Any *medical condition* that is the result of you not following *treatment* as prescribed to you, including prescribed medication.
15.
 - Any *medical condition*, including symptoms of withdrawal, arising from, or in any way related to, your chronic use of alcohol, drugs or other intoxicants whether prior to or during your *trip*.
 - Any *medical condition* arising during your *trip* from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.
16. Any loss resulting from your *minor mental or emotional disorder*.
17.
 - routine pre-natal or post-natal care;
 - pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.
18. Your child born during the *trip*.
19. For insured *children* under 2 years of age: any *medical condition* related to a birth defect.
20. Any *treatment*, services or supplies not medically necessary, or any medical procedures and/or tests (**including** but not limited to MRI, MRCP, CAT Scan, CT Angiogram, Nuclear Stress Test, Angiogram or Cardiac Catheterization) not authorized by the Assistance Centre in advance. All surgery must be authorized by the Assistance Centre prior to being performed except in extreme circumstances where surgery is performed on an *emergency* basis.
21. Any further medical *treatment* if our medical advisors determine that you should transfer to another facility or return to your home province or territory of residence for *treatment*, and you choose not to.
22. Any benefit that must be authorized or arranged in advance by the Assistance Centre when it has given no authorization or made no arrangement for that benefit.
23. An *act of war* or *act of terrorism*. Limited coverage applies with respect to an *act of terrorism* as described in the *Act of Terrorism* Coverage provision.
24. Any *act of terrorism* or any *medical condition* you suffer or contract when an official travel advisory was issued by the Canadian government stating "Avoid all non-essential travel" or "Avoid all travel" regarding the country, region or city of your destination, before your *effective date*.
To view the travel advisories, visit the Government of Canada Travel site.
This exclusion does not apply to claims for an *emergency* or a *medical condition* unrelated to the travel advisory.

‡ BAGGAGE LOSS, DAMAGE & DELAY INSURANCE

Baggage Loss, Damage & Delay coverage starts on your *departure date*.
Baggage Loss, Damage & Delay coverage ends on the earlier of:

- a) the date you return home; or
- b) the expiry date as shown on your *confirmation*.

Maximum coverage under this policy cannot exceed **\$2,000** per *trip*.

Benefits – What does Baggage Loss, Damage & Delay Insurance cover?

Baggage Loss, Damage & Delay Insurance covers the loss of, damage to, and delay of the baggage and effects that belong to you and that you use during your *trip*.

We will pay:

1. The *reasonable and customary* charges for the replacement of a lost or stolen passport, driver's licence, birth certificate or travel visa. In addition, we will cover up to \$200 per *trip* for travel and accommodation expenses you actually incur while waiting to receive the replacement travel documents.
2. Up to \$500 in total per *trip* for necessary toiletries and clothing when your checked luggage is delayed by the carrier for at least 10 hours while you are en route. This benefit is payable only when the delay happens before your return home.
3. Up to \$100 per day to a maximum of \$500 in total for the rental of golf clubs or ski equipment or for the purchase of reasonable golf accessories (golf balls, gloves, tees, etc.) or ski accessories (ski equipment includes snowboards, bindings, boots or poles, etc.) in the event your checked golf clubs or ski equipment are delayed by the *common carrier* for at least 10 hours while you are en route. This benefit is payable only when the delay happens before your return home.
4. Up to \$300 per *trip* for any item or set of items which is lost, stolen or damaged during your *trip* to a maximum of \$1,500. Jewellery or cameras (including camera equipment) are respectively considered a single item.

Exclusions & Limitations – What does Baggage Loss, Damage & Delay Insurance **not** cover?

We will not cover expenses or benefits relating to:

1. Animals, perishable items, bikes that are not checked as baggage with the *common carrier*, household items and furniture, artificial teeth or limbs, hearing aids, glasses of any type, contact lenses, money, tickets, securities, documents, items related to your occupation, antiques or collector items, items that are fragile, items that are obtained illegally, or articles that are insured on a valued basis by another insurer.
2. Damage or loss resulting from wear and tear, deterioration, defect, mechanical breakdown, your imprudence or omission.
3. Unaccompanied baggage, personal property left unattended, personal property left in an unattended *vehicle* or unlocked trunk and any jewellery or cameras placed in the custody of a *common carrier*.
4. In instances of theft, losses unreported to authorities.
5. Any loss resulting from an *act of war* or an *act of terrorism* while at a destination when, an official travel advisory was issued by the Canadian government stating "Avoid all non-essential travel" or "Avoid all travel" regarding the country, region or city of your destination, before your *effective date*.

To view the travel advisories, visit the Government of Canada Travel site.

FLIGHT & TRAVEL ACCIDENT INSURANCE

Flight & Travel Accident coverage starts on *your departure date*.

Flight & Travel Accident coverage ends on the earlier of:

- the date *you return home*; or
- the expiry date as shown on *your confirmation*.

Benefits – What does Flight & Travel Accident Insurance cover?

We will cover the following Flight & Travel Accident Insurance benefits:

- If an accidental *injury* sustained during *your trip* causes *you* to die, to become completely and permanently blind in both eyes or to have two of *your* limbs fully severed above *your* wrist or ankle joint in the 12 months after the accident, we will pay \$100,000 under Flight Accident Insurance; or \$50,000 under Travel Accident Insurance.
- If an accidental *injury* sustained during *your trip* causes *you* to become completely and permanently blind in one eye or to have one of *your* limbs fully severed above *your* wrist or ankle joint in the 12 months after the accident, we will pay \$50,000 under Flight Accident Insurance or \$25,000 under Travel Accident Insurance.
- If *you* sustain more than one accidental *injury* during *your trip*, we will pay the applicable insured sum only for the one accident that entitles *you* to the largest benefit amount.

For Flight Accident Insurance, the accident giving rise to *your injury* must happen:

- while *you* are travelling on a commercial passenger *plane* for which a ticket was issued to *you* for *your* entire airline *trip*; or
- if making a flight connection, while riding over land or water at the expense of the airline, riding in a limousine or bus provided by the airport authority, or in a scheduled helicopter shuttle service between airports; or
- while *you* are at an airport for the departure or arrival of the flight covered by this insurance.

Exclusions & Limitations – What does Flight & Travel Accident Insurance not cover?

We will not pay for losses or expenses incurred for, or as the result of the following:

- An *emergency* resulting from an accident that occurs while *you* are participating in:
 - any sport, snorkeling or scuba-diving when that sport, snorkeling or scuba-diving is *your* principal paid occupation;
 - any sport or activity indicated below:
 - any form of BASE jumping (ie: wingsuit flying);
 - hang-gliding;
 - rock climbing;
 - mountain-climbing which involves the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pickaxes, anchors, bolts, carabiners and lead or top-rope anchoring equipment;
 - any competition, speed event or other high-risk activity involving the use of a motor vehicle on land, water or air, including training activities, whether on approved tracks or elsewhere.
- Piloting an aircraft, learning to pilot an aircraft, or acting as a member of an aircraft crew.
- Your* self-inflicted injuries, unless medical evidence establishes that the injuries are related to a mental health illness.
- Any claim that results from or is related to *your* or *your* beneficiary's commission or attempted commission of a criminal offence or illegal act.
- Any *medical condition* that is the result of *you* not following *treatment* as prescribed to *you*, including prescribed medication.
- Any *medical condition*, including symptoms of withdrawal, arising from, or in any way related to, *your* chronic use of alcohol, drugs or other intoxicants whether prior to or during *your trip*.
 - Any *medical condition* arising during *your trip* from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.
- Any loss resulting from *your minor mental or emotional disorder*.
- A loss caused directly or indirectly from an existing disease or bodily infirmity, even if the proximate cause of its activation or reactivation is the result of an accidental *injury*.
- An *act of war* or *act of terrorism*.
- Any *act of terrorism* or any *medical condition* *you* suffer or contract when an official travel advisory was issued by the Canadian government stating "Avoid all non-essential travel" or "Avoid all travel" regarding the country, region or city of *your* destination, before the *effective date*. To view the travel advisories, visit the Government of Canada Travel site. This exclusion does not apply to claims for an *emergency* or a *medical condition* unrelated to the travel advisory.

ACT OF TERRORISM COVERAGE

Where an *act of terrorism* directly or indirectly causes *you* a loss for which benefits would otherwise be payable in accordance with the terms and conditions of this policy, this insurance will provide coverage as follows:

- For **Emergency Medical Insurance and Trip Interruption Insurance coverage**, we will provide benefits to *you* for *your* eligible expenses, subject to the maximums shown in the benefits section and this provision; and
- The benefits payable, as described directly above, are in excess to all other potential sources of recovery, including alternative or replacement travel options offered by airlines, tour operators, cruise lines and other *travel suppliers* and other insurance coverage (even where such other coverage is described as excess) and will only become available after *you* have exhausted all such other sources.

Any benefits payable pursuant to our **Emergency Medical Insurance and Trip Interruption Insurance** shall be subject to an overall maximum aggregate payable limit relating to all in-force travel policies issued by us, including this policy. If total claims otherwise payable for a type of coverage under all travel policies issued by us, resulting from one or more *acts of terrorism* occurring within an applicable time period, exceed this maximum aggregate payable limit, then the amount paid on each claim shall be reduced on a pro rata basis so that the total amount paid in respect of all such claims shall be the maximum aggregate payable limit.

Coverage is only available for up to two (2) *acts of terrorism* within a calendar year and the maximum aggregate payable limit for each *act of terrorism* is:

Type of Insurance Coverage	Maximum Aggregate for Each Act of Terrorism (CDN\$)
Emergency Medical	\$35,000,000
Trip Interruption	\$2,500,000

If, in our judgment, the total of all payable claims under one or more *acts of terrorism* may exceed the applicable limits, *your* prorated claim may be paid after the end of the calendar year in which *you* qualify for benefits.

Exclusion to this Act of Terrorism Coverage provision

Notwithstanding any provision to the contrary within this policy or any endorsement thereto, this policy does not cover any liability, loss, cost or expense of whatsoever nature which is directly or indirectly caused by, resulting from, arising out of or in connection with any *act of terrorism* perpetrated by biological, chemical, nuclear or radioactive means, regardless of any other cause contributing concurrently or in any other sequence to the liability, loss, cost or expense.

WHAT ELSE DO YOU NEED TO KNOW?

General Conditions

This insurance is void in the case of fraud or attempted fraud, or if you conceal or misrepresent any material fact or circumstance concerning this insurance, either at time of application for this policy (including any request for extension of coverage for benefits), at the time of claim or at any other moment during your coverage period.

We will not pay a claim if *you*, any person insured under this policy or anyone acting on *your* behalf attempt to deceive us or makes a fraudulent, false or exaggerated statement or claim.

When completing the application, *your* answers must be complete and accurate. In the event of a claim, we will review *your* medical history. If any of *your* answers are found to be incomplete or inaccurate:

- your* coverage will be void,
- which means *your* claim will not be paid.

You must be accurate and complete in *your* dealings with us at all times.

This policy is non-participating. *You* are not entitled to share in our divisible surplus.

The right of any person to designate persons to whom or for whose benefit insurance money is payable is restricted.

This policy shall be governed by and construed in accordance with the laws of the province or territory of residence of the insured.

Despite any other provision contained in the contract, the contract is subject to the applicable statutory conditions in the Insurance Act, as applicable in your province or territory of residence, respecting contracts of accident and sickness insurance.

Limitation of Liability

Our liability under this policy is limited solely to the payment of eligible benefits, up to the maximum amount purchased, for any loss or expense. Neither we, upon making payment under this policy, nor our agents or administrators assume any responsibility for the availability, quality, results or outcome of any treatment or service, or your failure to obtain any treatment or service covered under the terms of this policy. The participation of the insurers is several and not joint and none of them will under any circumstances participate in the interest and liabilities of any of the others.

Premium

The required premium is due and payable at the time of purchase and will be determined according to the schedule of premium rates then in effect. Premium rates and policy terms and conditions are subject to change without prior notice. Upon payment of premium, this document becomes a binding contract provided it is accompanied by a confirmation upon which a contract number appears and we have received your completed application prior to your departure date. If the premium is insufficient for the period of coverage selected, we will:

1. charge and collect any underpayment; or
2. shorten the policy period by written endorsement if an underpayment in premium cannot be collected.

Coverage will be null and void if the premium is not received, if a cheque is not honoured for any reason, if credit card charges are invalid or if no proof of your payment exists.

Subrogation

How does this insurance work with other coverages that you may have?

This is second payor coverage. You may have other in-force plans or contracts such as, but not limited to, third party liability, auto insurance, group or individual health insurance providing hospital, medical or therapeutic coverage. In this case, the amounts payable under this insurance are limited to that portion of your eligible expenses that are in excess of the amounts provided by those other in-force plans or contracts.

Total benefits paid to you by all insurers cannot exceed your actual expenses. We will coordinate the payment of benefits with all insurers who provide you with benefits similar to those provided under this insurance (except if your current or former employer provides you with an extended health insurance plan with a lifetime maximum coverage of \$50,000 or less, we will not coordinate payment with that coverage. If your lifetime maximum is more than \$50,000, we will coordinate payment), to a maximum of the largest amount specified by any such insurer.

In addition, we have full rights of subrogation. In the event of a payment of a claim under this policy, we will have the right to proceed, in your name, but at our expense, against third parties who may be responsible for giving rise to a claim under this policy. You will execute and deliver such documents as are necessary and cooperate fully with us to allow us to fully assert our rights. You must do nothing to prejudice such rights.

If you are insured under more than one insurance policy underwritten by us, the total amount we pay to you cannot exceed your actual expenses; and the maximum you are entitled to is the largest amount specified for the benefit in any one policy. If the total amount of all accident insurance you have under policies issued by us is more than \$100,000, our aggregate liability will not exceed that amount, and any excess insurance will be void and the premiums paid for such excess insurance will be refunded.

IN THE EVENT OF A CLAIM

In the Event of an Emergency

In the event of an emergency, call the Assistance Centre immediately, prior to receiving treatment:

1 800 211-9093 toll-free from the USA and Canada or +1 (519) 251-7821 collect where available. The Assistance Centre is ready to assist you 24 hours a day, every day of the year.

Please note that if you do not call the Assistance Centre in an emergency, you will have to pay 25% of the eligible medical expenses we would normally pay under this policy (25% co-insurance).

If it is medically impossible for you to call when the emergency happens, the 25% co-insurance will not apply. In this case, we ask that you call as soon as you can or that someone call on your behalf. Do not assume that someone will contact the Assistance Centre for you. It is your responsibility to verify that the Assistance Centre has been contacted.

If at time of claim, it is discovered that you no longer have coverage under a government health insurance plan, the maximum amount payable for all eligible expenses combined will be limited to \$25,000.

If you choose to pay eligible expenses directly to a health service provider without prior approval by the Assistance Centre, these services will be reimbursed to you on the basis of the reasonable and customary charges that we would have paid directly to such provider. Medical charges that you pay may be higher than this amount; therefore, you will be responsible for any difference between the amount you paid and the reasonable and customary charges reimbursed by us. Some benefits are not covered if they have not been authorized and arranged by the Assistance Centre.

To Make a Claim for Benefits

To make a claim for benefits under this policy, your written proof of claim and your fully completed Manulife Travel Insurance claim form(s) must be submitted to us within 90 days after the event, but not more than 12 months after the date of such event or loss.

More information on the documentation that must be submitted with your written proof of claim is provided on the following pages.

Written claims correspondence should be mailed to:

Manulife Global Travel Insurance
c/o Global Excel Management
PO BOX 1237, Station A, Windsor, ON N9A 6P8

Claims Submission Mobile app

Use the app to begin the process to file a claim and track your claim status.

Online

Visit manulife.acmtravel.ca to submit your claim online. For faster and easier submissions, have all your documents available in electronic format, such as a PDF or a JPEG.

You may also call the Assistance Centre directly to inquire about your claim status at: 1 855 841-4793

For coverage information or general enquiries, please contact Manulife Travel Customer Service at 1 866 298-2722.

If you are making a Trip Interruption Insurance claim, we will need proof of the cause of the claim, including:

- a) a medical certificate completed by the attending physician and stating why travel was not possible as booked, if the claim is for medical reasons;
- b) a report from the police or other responsible authority documenting the reason for the delay if your claim is due to a misconnection or trip delay, or
- c) other appropriate documentation if the claim is not for medical reasons.

For example: copy of the subpoena if cancelling due to jury duty or being called as witness. If death is the cause of the claim, an official document such as a death certificate that establishes cause of death will also be required.

We will also need, as applicable:

- a) complete original unused transportation tickets and vouchers;
- b) original passenger receipts for the new tickets you had to purchase;
- c) original receipts for the travel arrangements you had paid in advance and for the extra hotel, meal, telephone, internet usage fees, taxi fares or car rental expenses you may have had;
- d) any other invoice or receipt supporting your claim; and
- e) the entire medical file of any person whose health or medical condition is the reason for your claim.

If you are making a Default Protection claim, we must receive written notice of the claim within 60 days of the day on which the travel supplier announces that it is in default. You must submit proof of loss (including original receipts, proofs of payment to travel suppliers, proof of payment for insurance, unused transportation or accommodation documents and, where appropriate, evidence of claim to or reimbursement from any federal, provincial or other compensation fund, or other insurance, or any other source (including credit card companies) that is legally responsible or under contract to reimburse you for the cost of such undelivered travel services) no later than 30 days immediately after such filing deadline.

If you are making an Emergency Medical Insurance claim, we will need:

- a) original itemized receipts for all bills and invoices;
- b) proof of payment by you and by any other benefit plan;
- c) medical records including complete diagnosis by the attending physician or documentation by the hospital, which must support that the treatment was appropriate and consistent with the diagnosis and could not be omitted without adversely affecting your condition and quality of medical care and cannot be delayed until your return home;

DEFINITIONS

When italicized in this policy, the term:

Act(s) of terrorism means any activity that involves a threat to use or the actual use of violence or any dangerous or threatening act, or the use of force. Such act is directed against the general public, governments, organizations, properties or infrastructures, or electronic systems.

The intention of such activity is to:

- instill fear in the general public;
- disrupt the economy;
- intimidate, coerce or overthrow a sitting government or occupying power; and/or
- promote political, social, religious or economic objectives.

Act of war means hostile or warlike action, whether declared or not, in a time of peace or war, whether initiated by a local government, foreign government or foreign group, civil unrest, insurrection, rebellion or civil war.

Age means *your age* at time of application.

Change in medication means the medication dosage, frequency or type has been reduced, increased or stopped, and/or new medication(s) has/have been prescribed. **Exceptions:** the routine adjustment of Coumadin, warfarin or insulin (as long as they are not newly prescribed or stopped) to test *your* blood levels; and a change from a brand name medication to a generic brand medication of the same dosage.

Child, Children means *your* unmarried, dependent son or daughter or *your* grandchild(ren) travelling with *you* or joins *you* during *your trip* and is either:

- i) under 21 years of age;
- ii) under 26 years of age if full-time student; or
- iii) *your child* of any age who is mentally or physically disabled.

In addition, for *Emergency Medical Insurance*, the *children* must be older than 30 days of age.

Common carrier means a conveyance (such as a bus, taxi, train, boat, airplane) which is licensed, intended and used to transport paying passengers.

Confirmation means the application for this policy, and any other documents confirming *your* insurance coverage once *you* have paid the required premium and *your trip* arrangements. It may also include tickets or receipts issued by an airline, travel agent, tour operator, rental agency, cruise line or other accommodation or travel provider with whom *you* made arrangements for *your trip*.

Default means the inability of a *travel supplier* to provide *travel services* for which *you* have contracted with the *travel supplier*, because of complete or substantially complete cessation of business by the *travel supplier* resulting directly or indirectly from bankruptcy or insolvency thereof.

Departure date means the date *you* leave for *your trip*.

Departure point means the place *you* leave from for *your trip* and are going to return to.

Effective date means the date on which *your* coverage starts.

- For *Emergency Medical Insurance*, coverage starts when *you* leave home.
- For *Trip Interruption Insurance*; *Baggage Loss, Damage & Delay Insurance* and *Flight & Travel Accident Insurance*, coverage starts on *your departure date*.

Emergency means a sudden and unforeseen *medical condition* that requires immediate *treatment*. An *emergency* no longer exists when the evidence reviewed by Assistance Centre indicates that no further *treatment* is required at destination or *you* are able to return to *your* province or territory of residence for further *treatment*.

Expiry date means the date *your* coverage ends.

- For *Trip Interruption Insurance*, coverage ends on the earlier of:
 - a) the date when *you* return to *your departure point*; or
 - b) on the expiry date as shown on *your confirmation*.
- For *Emergency Medical Insurance*; *Baggage Loss, Damage & Delay Insurance* and *Flight & Travel Accident Insurance*, coverage ends on the earlier of:
 - a) the date *you* return home; or
 - b) the expiry date as shown on *your confirmation*.

d) proof of the accident if *you* are submitting a claim for dental expenses resulting from an accident;

e) proof of travel (including *departure date* and return date); and

f) *your* historical medical records (if we determine applicable).

If *you* are making a **Baggage Loss, Damage & Delay Insurance claim**, the following conditions apply:

1. In the event of theft, burglary, robbery, malicious mischief, disappearance or loss of an item, *you* must obtain written documented evidence from the police immediately or, if the police are unavailable, the hotel manager, tour guide or transportation authorities. *You* must also take all precautions to protect, save or recover the property immediately, and advise *us* as soon as *you* return home. *Your* claim will not be valid under this insurance if *you* do not comply with these conditions.
2. If the property *you* have checked with a *common carrier* is delayed, *we* will continue to provide coverage until the property is delivered by the carrier.
3. *We* cover the current actual cash value of *your* property when it is lost or damaged. *We* also reserve the option to repair or replace *your* property with other of similar kind, quality and value. *We* may also ask *you* to submit damaged items for an appraisal of the damage. If a lost or damaged article is part of a set, *we* will cover a reasonable and fair proportion of the total value of the set, but not the total value of the set.
4. If *you* need to make a claim under this insurance, *we* will need:
 - a) copies of reports from the authorities as proof of loss, damage or delay; and
 - b) proof that *you* owned the articles, and receipts for their replacement.

If *you* are making a **Flight & Travel Accident Insurance claim**, the following conditions apply:

1. *We* will need:
 - a) police, autopsy or coroner's report;
 - b) medical records; and
 - c) death certificate, as applicable.
2. If *your* body is not found within 12 months of the accident, *we* will presume that *you* died as a result of *your* injuries.

Who will we pay your benefits to if you have a claim?

Except in the case of *your* death, *we* will pay the *reasonable and customary* expenses under this insurance to *you* or the provider of the service, less any applicable deductible. Any sum payable for loss of life will be payable to *your* estate. *You* must repay *us* any amount paid or authorized by *us* on *your* behalf if *we* determine that the amount is not payable under *your* policy. All amounts shown throughout this contract are in Canadian dollars. If currency conversion is necessary, *we* will use *our* exchange rate on the date *you* received the service outlined in *your* claim. *We* will not pay for any interest under this insurance.

Is there anything else you should know if you have a claim?

If *you* disagree with *our* claim decision, the matter may be submitted for judicial resolution under the applicable law(s) of the Canadian province or territory where *you* reside at the time of application for this policy.

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act*, or in the *Limitations Act, 2002* in Ontario, or other applicable legislation.

For the purposes of determining the validity of a claim under this policy, *we* may obtain and review the medical records of the attending *physician(s)*, including the records of the regular *physician(s)* at home. These records may be used to determine the validity of a claim whether or not the contents of the medical records were made known to *you* before *you* incurred a claim under this policy. In addition, *we* have the right, and *you* shall afford *us* the opportunity, to have *you* medically examined when and as often as may reasonably be required while benefits are being claimed under this policy. If *you* die, *we* have the right to request an autopsy, if not prohibited by law.

Government health insurance plan means the health insurance coverage that a Canadian provincial or territorial government provides to its residents.

Heart condition means **ANY** disorder relating to the heart. *Heart conditions* include but are not limited to the following:

- An abnormal cardiac test result
- Atrial fibrillation
- Chest pain or discomfort due to the heart, or angina
- Heart failure, or heart attack, or myocardial infarction, or cardiac arrest
- Heart murmur (Does not include a murmur that existed as a child if the *physician* has advised that there is no murmur as an adult.)
- Narrowing or blockage of a coronary artery, or coronary artery disease
- Prior heart surgery of any kind, including but not limited to angioplasty, bypass surgery, valvuloplasty, valve replacement, heart ablation surgery, heart transplantation or surgery for any congenital heart disorder
- Any heart valve disorder, or any rapid, or slow, or irregular heartbeats or heart rates for which a *physician* has prescribed medication, or for which there has been surgery or cardioversion
- *Treatment* with a pacemaker or a cardiac defibrillator device
- Water on the lungs or swelling of the ankles due to a heart disorder.

Home means *your* Canadian province or territory of residence. If *you* requested *your* coverage to start when *you* leave Canada, *home* means Canada. In the case of *Trip Interruption*, *Trip Delay*, *Flight* and *Travel Accident* and *Baggage Insurance*, it means the *departure point*.

Hospital means an institution that is licensed as an accredited *hospital* that is staffed and operated for the care and *treatment* of in-patients and out-patients. *Treatment* must be supervised by *physicians* and there must be registered nurses on duty 24 hours a day. Diagnostic and surgical capabilities must also exist on the premises or in facilities controlled by the establishment. A *hospital* is not an establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, addiction treatment centre, convalescent, rest or nursing home, home for the aged or health spa.

Immediate family means *spouse*, parent, legal guardian, step-parent, grandparent, step-grandparent, grandchild, in-law, natural or adopted child, step-child, brother, sister, step-brother, step-sister, aunt, uncle, niece or nephew.

Injury means sudden bodily harm that is caused by external and purely accidental means, and independent of *sickness* or disease.

Key-person means someone to whom a dependent's full-time care is entrusted and who cannot reasonably be replaced, a business partner, or an employee who is critical to the ongoing affairs of *your* business, during the *trip*.

Medical condition means any disease, *sickness* or injury (including symptoms of undiagnosed conditions).

Minor mental or emotional disorder means:

- having anxiety or panic attacks, or
- being in an emotional state or in a stressful situation.

A *minor mental or emotional disorder* is one where *your treatment* includes only minor tranquilizers or minor anti-anxiety (anxiolytics) medication or no prescribed medication at all.

Physician means a person:

- who is not *you* or a member of *your immediate family* or *your travel companion*;
- licensed in the jurisdiction where the services are provided, to prescribe and administer medical *treatment*.

Plane means a multi-engine aircraft operated by and licensed to a regularly scheduled airline on a regularly scheduled *trip* operated between licensed airports and holding a valid Canadian Air Transport Board licence, Charter Air Carrier licence, or its foreign equivalent, and operated by a certified pilot.

Pre-existing condition means any *medical condition* that exists prior to *your effective date*.

Reasonable and customary means charges incurred for goods and services that are comparable to what other providers charge for similar goods and services in the same geographical area.

Sickness means illness, disease, disorder or any symptom.

Spouse means someone to whom one is legally married, or with whom one has been residing and publicly represented as a *spouse*.

Stable means a *medical condition* is considered *stable* when all of the following statements are true:

1. there has not been any new *treatment* prescribed or recommended, or change(s) to existing *treatment* (including a stoppage in *treatment*), and
2. there has not been any *change in medication*, or any recommendation or starting of a new prescription drug, and
3. the *medical condition* has not become worse, and
4. there has not been any new, more frequent or more severe symptoms, and
5. there has been no hospitalization or referral to a specialist, and
6. there have not been any tests, investigation or *treatment* recommended, but not yet complete, nor any outstanding test results, and
7. there is no planned or pending *treatment*.

All of the above conditions must be met for a *medical condition* to be considered *stable*.

Travel companion means someone who shares *trip* arrangements with *you* on any one *trip*, up to a maximum of 5 persons including *you*.

Travel services means transportation, sleeping accommodation or other service provided or arranged by a *travel supplier* for *your* use (but does not include taxes or insurance).

Travel supplier means a tour operator, travel wholesaler, airline, cruise line, provider of ground transport or provider of travel accommodation or provider of other services to *you* that is:

- a) contracted to provide *travel services* to *you*; and
- b) licensed, registered or is otherwise legally authorized in the particular location of the *travel supplier* to operate and provide *travel services* as shown on *your confirmation*.

Treatment means hospitalization, a procedure prescribed, performed or recommended by a *physician* for a *medical condition*. This includes but is not limited to prescribed medication, investigative testing and surgery.

Important: Any reference to testing, tests, test results, or investigations excludes genetic tests. "Genetic test" means a test that analyzes DNA, RNA or chromosomes for purposes such as the prediction of disease or vertical transmission risks, or monitoring, diagnosis or prognosis.

Trip means the period of time between *your* effective date and expiry date as shown on *your confirmation*.

Vehicle includes any private or rental passenger automobile, boat, mobile home, camper truck or trailer home which *you* use during *your trip* exclusively for the transportation of passengers (other than for hire).

We, us, our means FNAIC in connection with risk identified with ‡ throughout this document; and Manulife in connection with all other coverages under this policy.

You, your means the person(s) named as the insured(s) on the *confirmation*, for whom insurance coverage was applied for and for whom the appropriate premium was received by *us*.

In this policy, words and terms denoting the singular shall be interpreted to mean the plural and vice versa, unless the context clearly indicates otherwise.

NOTICE ON PRIVACY AND CONFIDENTIALITY

At Manulife¹ protecting your personal information and respecting your privacy is important to us.

"We", "us" and "our" refer to The Manufacturers Life Insurance Company and our affiliated companies and subsidiaries.

Why do we collect, use, and disclose your personal information?

For the purposes of establishing and managing our relationship with you, providing you with products and services, administering our business, and complying with legal and regulatory requirements.

What personal information do we collect?

Depending on the product or service, we collect specific personal information about you such as:

- Identifying information such as your name, address, telephone number(s), email address, your date of birth, driver's license, passport number or your Social Insurance Number (SIN)
- Financial information, investigative reports, credit bureau report, and/or a consumer report
- Information about how you use our products and services, and information about your preferences, demographics, and interests
- Banking and employment information
- Medical information that any organization or person has about you
- Any test that may be necessary for underwriting purposes
- Other personal information that we may require to administer your products or services and manage our relationship with you

We use fair and lawful means to collect your personal information.

Where do we collect your personal information from?

Depending on the product or service, we collect personal information from:

- Your completed applications and forms
- Other interactions between you and us
- Other sources, such as:
 - Your advisor or authorized representative(s)
 - Third parties with whom we deal with in issuing and administering your products or services now, and in the future
 - Public sources, such as government agencies, credit bureaus and internet sites
 - Financial institutions
 - Your employer or Plan Sponsor and their authorized agents, consultants and plan service providers
 - The MIB, Inc. (formerly known as the Medical Information Bureau)
 - Health Care Professionals, including Medical Practitioners, health care institutions, pharmacy and any other medically-related facility

What do we use your personal information for?

Depending on the product or service, we will use your personal information to:

- Administer the products and services that we provide and to manage our relationship with you
- Confirm your identity and the accuracy of the information you provide
- Evaluate your application
- Comply with legal and regulatory requirements
- Understand more about you and how you like to do business with us
- Analyze data to help us make decisions and understand our customers better so we can improve the products and services we provide
- Perform audits, and investigations and protect you from fraud
- Determine your eligibility for, and provide you with details of, other products and services that may be of interest to you
- Automate processing to help us make decisions about your interactions with us, such as, applications, approvals or declines

Who do we disclose your personal information to?

Depending on the product or service, we disclose your personal information to:

- Persons, financial institutions, reinsurers, and other parties with whom we deal with in issuing and administering your product or service now, and in the future
- Authorized employees, agents and representatives
- Your advisor and any agency which has entered into an agreement with us and has supervisory authority, directly or indirectly, over your advisor, and their employees

- Your employer or Plan Sponsor and their authorized agents, consultants and plan service providers
- Any person or organization to whom you gave consent
- People who are legally authorized to view your personal information
- Service providers who require this information to perform their services for us (for example data processing, programming, data storage, market research, printing and distribution services, paramedical and investigative agencies)
- Your doctor
- Public health authorities as required

Except where there are contractual restrictions, these people, organizations and service providers are both within Canada and outside of Canada.

Therefore, your personal information may be subject to interprovincial or cross-border transfers in order to provide services to you and subject to the laws of those jurisdictions.

Where personal information is provided to our service providers, we require them to protect the information in a manner that is consistent with our privacy policies and practices.

Withdrawing your consent

You may withdraw your consent for us to use your personal information for certain uses, subject to legal and contractual restrictions.

You may not withdraw your consent for us to collect, use, or disclose personal information we need to issue or administer your products and services. If you do so, we may not be able to provide you with the products or services requested or we may treat your withdrawal of consent as a request to terminate or refusal the product or service.

If you wish to withdraw your consent, phone our customer care center at 1-888-MANULIFE (626-8543) or 1-888-MANUVIE (626-8843) in Quebec or write to the Privacy Officer at the address below.

Accuracy

You will notify us of any change to your contact information. If your information has changed, or if you need to make a correction of any inaccuracies to your personal information in our files, contact your travel agent or broker or Manulife Customer Service.

Access

You have the right to access and verify your personal information maintained in our files, and to request any factually inaccurate personal information be corrected, if appropriate. Requests can be sent to: **Privacy Officer Manulife, P.O. Box 1602, Del Stn 500-4-A, Waterloo, Ontario N2J 4C6 or Canada_Privacy@manulife.ca**

For more information you can review our [Canadian Privacy Policy](#). Please note the security of email communication cannot be guaranteed. Do not send us information of a private or confidential nature by email.

¹Manulife, "we", "us", "our" refers to. The Manufacturers Life Insurance Company—Canadian Division operations, Manulife Securities Inc., Manulife Securities Investment Services Inc., Manulife Securities Insurance Inc., Manulife Asset Management Limited, Manulife Assurance Company of Canada, First North American Insurance Company, Manulife Bank of Canada, and affiliates of these entities.



Manulife, P.O. Box 670, Stn Waterloo, Waterloo, ON N2J 4B8.

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App Store is a trademark of Apple Inc.

Google Play is a trademark of Google LLC.

Accessible formats and communication supports are available upon request.

Visit [Manulife.ca/accessibility](https://www.manulife.ca/accessibility) for more information.

TRAVEL ASSISTANCE. ANYWHERE IN THE WORLD.

Before *you* travel, be sure to download the Manulife TravelAid mobile app through the Google Play store or the Apple App Store. It provides travellers with the following services, from anywhere in the world:

- Direct link to the Assistance centre
- Healthcare provider information
- Directions to the nearest medical facility
- Official travel advisories
- Travel tips
- Claim submission support

The Manulife TravelAid mobile app can also provide *you* with local emergency telephone numbers (such as 911 in North America), and pre- and post-departure travel tips. *We* recommend that *you* download the app before *you* travel to avoid incurring roaming charges that may apply at *your* destination.

HELP IS JUST A PHONE CALL AWAY.

Our multilingual Assistance Centre is there to help and support *you* 24 hours a day, every day of the year, with:

Pre-Trip Information

- ✓ Passport and Visa information
- ✓ Health hazards advisory
- ✓ Weather information
- ✓ Currency exchange information
- ✓ Consulate and Embassy locations

During A Medical Emergency

- ✓ Verifying and explaining coverage
- ✓ Referral to a doctor, *hospital*, or other health care providers
- ✓ Monitoring *your* medical *emergency* and keeping *your* family informed
- ✓ Arranging for return transportation *home* when medically necessary
- ✓ Arranging direct billing of covered expenses (where possible)

Other Services

- ✓ Assistance with lost, stolen or delayed baggage
- ✓ Assistance in obtaining emergency cash
- ✓ Translation and interpreter services in a medical *emergency*
- ✓ Emergency message services
- ✓ Help to replace lost or stolen airline tickets
- ✓ Assistance in obtaining prescription drugs
- ✓ Assistance in obtaining legal help or bail bond

IN THE EVENT OF AN EMERGENCY, CALL THE ASSISTANCE CENTRE IMMEDIATELY

1 800 211-9093 toll-free from the USA and Canada
+1 (519) 251-7821 collect where available.

Our Assistance Centre is there to help *you* 24 hours a day, every day of the year.

Our Assistance Centre can also be contacted through the **Manulife TravelAid** mobile app.

IN EVENT OF AN *EMERGENCY*, CALL:

1 800 211-9093

toll-free from the USA and Canada

+1 (519) 251-7821

collect where available

NAME _____

POLICY # _____

Manulife
GLOBAL
Travel Insurance



If *you* need medical attention or must make any other type of claim during *your* trip, call us for assistance first. The Assistance Centre is open 24 hours a day, every day of the year.

Before *you* travel download the free assistance & claim mobile app, **Manulife TravelAid™**.

Please note that if *you* do not call the Assistance Centre in an *emergency*, or prior to any *treatment*, *you* will have to pay 25% of the eligible medical expenses we would normally pay under this policy. If it is medically impossible for *you* to call, please have someone call on *your* behalf.

 **Manulife**



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