Deluxe Package
Multi-Trip Annual Plan

About Your Travel Insurance:
This is your certificate of insurance, a contract detailing the terms and conditions of the insurance coverage(s) available. Refer to the insurance application/confirmation of coverage to view the coverages purchased. Keep it in a safe place and carry it with you when you travel.
A group insurance policy # F-1999987-A ("Policy") has been issued to Royal Bank of Canada ("RBC Royal Bank") by RBC Insurance Company of Canada to cover expenses related to:

- **Emergency** Medical expenses, incurred outside your Canadian province or territory of residence.
- **Trip** Cancellation/Trip Interruption expenses.
- Baggage & Personal Effects expenses.
- Flight & Travel Accident expenses.

This certificate of insurance contains the terms and conditions of your insurance coverage. Upon enrollment, this certificate, together with the insurance application/confirmation of coverage and medical questionnaire (if applicable), form your insurance contract.

You have the right to request a copy of the application, a copy of the policy of group insurance and/or a written record as evidence of insurability of the group person insured under the contract.

**IMPORTANT NOTICE – READ CAREFULLY BEFORE YOU TRAVEL**

You have purchased travel insurance – what’s next? We want you to understand (and it is in your best interests to know) what your certificate of insurance includes, what it excludes, and what is limited (payable but with limits). Please take time to read through your certificate of insurance before you travel. Bolded and italicized terms are defined in your certificate of insurance. RBC Insurance Company of Canada has appointed AZGA Service Canada Inc. (operating as “Allianz Global Assistance”) as the provider of all assistance, and claims services under this certificate of insurance.

- 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/or exclusions; e.g., 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 purchase.
- Contact Allianz Global Assistance before seeking treatment or your benefits may be limited or denied.
- 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 certificate of insurance will be voidable.

**IT IS YOUR RESPONSIBILITY TO UNDERSTAND YOUR COVERAGE. IF YOU HAVE QUESTIONS, CALL 1-800-387-2487, visit our website at www.rbcroyalbank.com/travelinsurance or contact us at RBC Insurance Company of Canada Claims, c/o Allianz Global Assistance P O Box 277, Waterloo, ON N2J 4A4.**

**What the Provincial Regulators want you to know:**

This certificate of insurance 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.
What to do if you need help on your trip

Call Allianz Global Assistance – 24/7 Help Wherever You Roam.

If you require emergency treatment during your trip, or for any other emergency, you must contact Allianz Global Assistance immediately at one of these numbers:

Please call 1-800-387-2487 toll-free from the U.S. and Canada or (905) 816-2561 collect from anywhere in the world. (Note: If international operator assistance is required, please confirm how to call collect to Canada from your destination before leaving.)

What Assistance Services are available?

Emergency Assistance Services

The following assistance services are available to you:

Medical Assistance & Consultation

When you have a medical emergency and you call us, whenever possible, you will be directed to one or more recommended medical service providers near you. In addition, whenever possible, we will:

- in consultation with your physician, arrange emergency medical transportation to a suitable facility if it is determined that existing facilities are inadequate in order to treat or stabilize your medical condition;
- provide confirmation of coverage and pay your eligible medical expenses directly to the recommended medical service provider;
- consult with your attending physician to monitor your care; and
- monitor the appropriateness, necessity and reasonableness of that care to ensure that your resulting eligible expenses will be covered by this insurance.

Pay Assistance

Whenever possible, the payment of the eligible medical services you receive will be co-ordinated through us, communicated with your medical provider, and billing arrangements will be discussed. Pay assistance may not be available from certain medical service providers for reasons beyond our control. You may be required to make payment up-front or to leave a deposit. If you are required to make payment up-front or leave a deposit, call us immediately.

Replacement Co-ordination

Whenever possible, we will help co-ordinate the replacement of your prescription eyeglasses or essential prescription medication in the event these items need to be replaced during your trip. This insurance does not cover the actual cost to replace your prescription eyeglasses or essential prescription medication.
How do I make a claim?

If you need a Claim & Authorization form to submit a new claim, or you want status on an existing claim, please contact our Claims Department at:

905-816-2572 or 1-800-263-8944

Address:
RBC Insurance Company of Canada Claims
c/o Allianz Global Assistance
P O Box 277
Waterloo, ON N2J 4A4

Or you can visit our website at
https://www.rbcroyalbank.com/travel-insurance/claims-service.html#make-travel-claim

to obtain an Emergency Medical claim form or a Cancellation & Interruption claim form.
Eligibility

To be eligible for insurance coverage you must:

- be a client of the RBC Companies or a spouse or child(ren) of a client;
- be a Canadian resident;
- be under 65 years of age;
- be covered under your government health insurance plan for the full duration of your trip.

**IMPORTANT**

This insurance is subject to a maximum of $20,000 if you do not have valid government health insurance plan coverage at the time of claim.

In addition,

**While you travel outside Canada**

Coverage is limited to an eligible person who is travelling outside of Canada for any number of trips for a maximum of:

- 9 consecutive days outside of Canada if you have purchased the 9-Day option; or
- 16 consecutive days outside of Canada if you have purchased the 16-Day option; or
- 30 consecutive days outside of Canada if you have purchased the 30-Day option.

The consecutive days for travel outside of Canada include your date of departure from Canada and the date you return to Canada. If you are travelling for more than 9 consecutive days under the 9-Day option, 16 consecutive days under the 16-Day option, or 30 consecutive days under the 30-Day option, you must top-up this coverage as outlined under “Topping Up another travel insurance coverage” in this certificate of insurance. If you do not top-up this coverage for a trip that is longer than your 9-Day, 16-Day or 30-Day, you will not have coverage for any claim incurred outside of your period of insurance during that trip.

While you travel within Canada

Coverage is limited to an eligible person and provides coverage for unlimited travel while travelling within Canada but outside your province or territory of residence.
When does your coverage start?
Insurance starts on your start-up date.

When does your coverage end?
Insurance ends on the earliest of:

a. the date of the cause of cancellation if your trip is cancelled before your date of departure from your departure point;
b. the date you return to your province, territory or country of residence;
c. midnight on the 9th day, the 16th day, or the 30th day (based on your purchased option) of your travel outside of Canada;
d. midnight of your return date;
e. midnight of your expiry date;
f. the day before the one-year anniversary of your start-up date;
g. 365 days after your date of departure from your departure point under Flight and Travel Accident.

IMPORTANT
Your Multi-Trip Annual Plan terminates at the end of each 365 day period and you must apply for new coverage.

10 Day Free Look
If you are not completely satisfied with this travel insurance, you may cancel it within 10 days of purchase for a full refund, provided you have not left on your trip and have not experienced an event that would cause you to submit a claim. Refunds after the 10 day may not be permitted.

What is Covered?
Before you leave:
Trip Cancellation – when a covered reason causes you to cancel your trip before leaving your departure point.

After you leave:
Trip Interruption – when a covered reason occurs during your trip which causes the delay of your departure from your departure point; or when a covered reason occurs during your trip which causes an early or late return back to your departure point.

Emergency Medical – covers the reasonable and customary medical expenses you incur on your trip for necessary medical care or surgery, as part of the emergency treatment arising from a medical condition that is sudden and unexpected.

Flight and Travel Accident – covers your accidental bodily injury resulting in your dismemberment, loss of sight, death or complete and irrecoverable loss of speech or hearing within 365 days from the date of the accident that occurs during your trip.

Baggage Loss or Damage – covers the loss or damage to baggage or personal effects.

Delays:
Transportation Delay – when your transportation carrier is delayed due to a covered reason which causes you to miss a connection or resulting in the interruption of your travel arrangements.

Baggage Delay – when your checked baggage is delayed by the carrier for 12 hours or more while en route and before returning to your departure point.

What is not Covered?
It is really important to read your insurance coverage before you travel. There are exclusions and limitations that apply to your coverage. Not every situation or loss is covered. We only cover claims that meet the terms and conditions as we outline in this document.

IMPORTANT
If you have any questions about your travel insurance coverage, please visit our website or call us.
## Summary of Travel Insurance Coverage

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<thead>
<tr>
<th>Deluxe Package Multi-Trip Annual Plan</th>
<th>Maximum Sums Included</th>
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</thead>
<tbody>
<tr>
<td><strong>Trip</strong> Cancellation – Before Departure</td>
<td>$1,500 per <em>trip</em> to a maximum of $10,000 per year</td>
</tr>
<tr>
<td><strong>Trip</strong> Interruption – After Departure Transportation</td>
<td>Economy class transportation</td>
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<tr>
<td><strong>Trip</strong> Interruption – After Departure</td>
<td></td>
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<tr>
<td>Unused Portion of Pre-paid Travel Arrangements</td>
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<tr>
<td>TRANSPORTATION</td>
<td></td>
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<tr>
<td><strong>Trip</strong> Interruption – After Departure</td>
<td>Up to maximum covered amount for <strong>Trip</strong> Cancellation –</td>
</tr>
<tr>
<td>Unused Portion of Pre-paid Travel Arrangements</td>
<td>Before Departure</td>
</tr>
<tr>
<td>TRANSPORTATION Delay</td>
<td>Up to $700</td>
</tr>
<tr>
<td><strong>Emergency</strong> Travel Medical Coverage¹</td>
<td>Unlimited¹</td>
</tr>
<tr>
<td>Baggage Loss or Damage²</td>
<td>$1000</td>
</tr>
<tr>
<td>Golf Club Delay or Ski Equipment Delay¹</td>
<td>12 Hours or more $400</td>
</tr>
<tr>
<td>Baggage Delay³</td>
<td>12 Hours or more $400</td>
</tr>
<tr>
<td>Flight Accident⁴</td>
<td>Principal Sum: $100,000</td>
</tr>
<tr>
<td>Travel Accident⁴</td>
<td>Principal Sum: $50,000</td>
</tr>
<tr>
<td><strong>Emergency</strong> Assistance</td>
<td>Included</td>
</tr>
</tbody>
</table>

¹This insurance is subject to a maximum of $20,000 if you do not have valid government health insurance plan coverage.
²The maximum for any one item or set of items is $500. The maximum sum insured per person or per family does not exceed $2,000 in total for all coverages issued by us.
³This insurance is available while en route and before returning to your departure point.
⁴You are entitled to a maximum of the largest amount specified for one of these benefits.
Definitions

When reading your insurance coverage, you will notice that certain words are bolded and italicized. Please review the “Definitions” section located on the last few pages of this insurance document.

General Conditions

There are general conditions that apply to all coverages and they can be found on last few pages of this insurance document.

Emergency Travel Medical Insurance

Description of Coverage:

Emergency Travel medical coverage provides benefits to travellers in emergency medical situations.

This insurance covers the reasonable and customary medical expenses you incur once you have left your departure point for necessary medical care or surgery, as part of the emergency treatment arising from a medical condition, up to the maximum amounts outlined in the section titled What is Covered.

This insurance only covers expenses in excess of those covered under your government health insurance plan and by any other insurance or benefit plan under which you are covered.

Emergency Contact Numbers:

- 1-800-387-2487 (toll-free call from the USA or Canada)
- 905-816-2561 (collect call from anywhere through a local operator)
- 1-888-298-6340 (toll-free fax from the USA or Canada)
- 905-813-4719 (fax)

IMPORTANT

What must you do in a medical emergency?

- You must contact us before seeking emergency treatment.
- In addition, all surgery and heart procedures, including heart catheterization, must be approved in advance by us.
- When you contact us, we will refer you or may transfer you, when medically appropriate, to one of the accredited medical service providers within the network.
- We will also request for the medical service provider within the network to bill the medical expenses covered under this insurance directly to us instead of to you.
- Failure to call may result in reduced benefits.
- If your medical condition prevents you from calling us before seeking emergency treatment, you must call us as soon as medically possible. As an alternative, someone else (family member, friend, hospital or physician’s office staff, etc.) may call on your behalf.
- 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 certificate of insurance.
What is Covered

Emergency Medical Treatment
This insurance covers medical expenses related to the following when required as part of the emergency treatment during your trip:

- emergency treatment, other than dental treatment;
- services of a legally licensed physician, surgeon, anaesthetist or registered graduate nurse;
- hospital accommodation in a semi-private room when you are a resident inpatient;
- outpatient services provided by a hospital;
- the services of a licensed private duty nurse while you are hospitalized;
- the lesser of the rental or purchase of a hospital-type bed, a wheelchair, brace, crutches and other medical appliances;
- diagnostic testing, when pre-authorized by us;
- the services of the following legally licensed practitioners for emergency treatment of a covered injury up to a maximum of $300 per profession: physiotherapist, chiropractor, chiropodist, podiatrist or osteopath; and
- prescription drugs.

Emergency Dental
This insurance covers the following dental expenses when required as emergency treatment and ordered by or received from a licensed dentist:

- if you need dental treatment to repair or replace your natural or permanently attached artificial teeth because of an accidental blow to your face, you are covered, for the emergency dental expenses you incur during your trip and you are also covered up to a maximum of $1,500, to continue necessary treatment after your return to Canada. However, this treatment must be completed within 180 days after the accident; and
- if you need other emergency dental treatment, you are covered for the emergency dental expenses you incur during your trip, up to a maximum of $300, and the complete cost of prescription drugs.

Out of Pocket Expenses

IMPORTANT
This benefit is subject to the pre-authorization of Allianz Global Assistance
Please call us:
1-800-387-2487 (toll-free call from the USA or Canada)
905-816-2561 (collect call from anywhere through a local operator)

- This insurance covers your reimbursement, up to $350 per day to a maximum of $3,500, for your commercial accommodations and meals, essential telephone calls, internet usage fees, and taxi fares (ride sharing or rental car in lieu of taxi fares) if, upon physician’s advice:
  - you, or your travelling companion, are relocated to receive medical attention for an emergency medical condition covered under this insurance; or
  - you are delayed beyond your return date in order to receive emergency treatment or because your travelling companion requires emergency treatment for an emergency medical condition covered under this insurance.

- Incidental Hospital Expenses: This insurance covers your reimbursement, up to $50 per day to a maximum of $500, for your incidental hospital expenses (telephone calls, television rental) while you are hospitalized for at least 48 hours.
Transportation

Ground ambulance
This insurance covers you for local ground ambulance service to a hospital, physician or medical service provider in an emergency. We will pay for local taxi fare in lieu of local ground ambulance service where an ambulance is medically required but not available.

Air Ambulance, Commercial Flight or Stretcher

IMPORTANT
This benefit must be pre-authorized and arranged by Allianz Global Assistance

Please call us:
1-800-387-2487 (toll-free call from the USA or Canada)
905-816-2561 (collect call from anywhere through a local operator)

If the physician treating you recommends to us in writing that you return to your province or territory of residence because of your medical condition in order to receive emergency medical attention, or if our medical advisors determine that you are able to and recommend that you return to your province or territory of residence following your emergency treatment, this insurance covers you for one or more of the following, when medically essential:

- the extra cost of a one-way economy air fare on a commercial flight via the most cost effective route to your province or territory of residence to receive immediate emergency medical attention; or
- the cost of a stretcher fare on a commercial flight via the most cost effective route to your province or territory of residence, if a stretcher is medically necessary; or
- when medically necessary or required by the airline, the cost of an upgraded airline seat on a commercial flight via the most cost effective route and the usual fees and expenses for a qualified medical attendant to accompany you; or
- the cost of air ambulance transportation.
IMPORTANT
The following benefits are subject to the pre-authorization of Allianz Global Assistance

Please call us:
1-800-387-2487 (toll-free call from the USA or Canada)
905-816-2561 (collect call from anywhere through a local operator)

Return of children and escort for children to their province or territory of residence
If children insured under one of our emergency medical insurances travel with you or join you during your trip and you are hospitalized for more than 24 hours or you must return to Canada because of your emergency medical condition covered under this insurance, this insurance covers:

▪ the extra cost of a one-way economy air fare on a commercial flight via the most cost effective route for the return of those children to their province or territory of residence; and

▪ the cost of a return economy air fare via the most cost effective route on a commercial flight for an escort if the airline requires that the children be escorted.

Return of travelling companion
If you are travelling with a travelling companion, this insurance covers one travelling companion for the extra cost of a one-way economy air fare on a commercial flight via the most cost effective route to your province or territory of residence if you must return to Canada to receive immediate medical attention because of a medical condition covered under this insurance.

Return to your trip destination
This insurance covers you for a one-way economy air fare on a commercial flight via the most cost effective route to your scheduled trip destination after you are returned to your province or territory of residence to receive immediate medical attention, provided your attending physician determines that you require no further medical attention for your medical condition. Your trip to return to your scheduled trip destination must occur during your period of insurance originally provided by this benefit.

▪ This benefit can only be used once during your trip.

▪ Once you return to your trip destination, a recurrence of the initial medical condition or related condition will not be covered under this insurance.

▪ When this benefit is provided to you, your effective date under this insurance becomes the day you leave your province or territory of residence to return to your trip destination.

Return of your dog or cat
If your domestic dog(s) or cat(s) travel with you during your trip and you must return to Canada because of your emergency medical condition covered under this insurance, this insurance covers the cost of one-way transportation up to a maximum of $500 to return your domestic dog(s) or cat(s) to your province or territory of residence.

Return of your excess baggage
If you return to your province or territory of residence by air ambulance (pre-authorized by us) because of your emergency medical condition, this insurance covers the cost to return your excess baggage up to a maximum of $500.

Return of vehicle
If, as a result of a medical emergency during your trip, you are unable to return a vehicle to its point of origin, this insurance covers the reasonable and customary charges for a commercial agency to return the vehicle to your residence or to a commercial rental agency.
Bedside companion’s travel to your bedside

**IMPORTANT**
A bedside companion is a person of your choice who is required at your bedside while you are hospitalized during your trip.

- If you are travelling alone and are hospitalized (for more than 24 hours) during your trip, then in the event a bedside companion is required, this insurance covers:
  - the cost of a return economy air fare on a commercial flight via the most cost effective route;
  - up to $500 for commercial accommodations and meals for the bedside companion; and
  - your bedside companion is insured under the terms of your insurance during the period in which this person is required as your bedside companion.

- If you are over age 20 and physically or mentally disabled, or under age 21 and dependant on your bedside companion for support, this insurance provides this benefit to you as soon as you are admitted to a hospital.

**Domestic Services**
- If you return to your province or territory of residence by air ambulance because of your emergency medical condition, and your medical condition restricts your ability to perform domestic services, this insurance covers the cost of reasonable and customary domestic services provided by a registered domestic service business up to a maximum of $250. Benefit must be used within 30 days of your return to your province or territory of residence. Note: this benefit is applicable to your primary residence.

**Physician visit to replace lost, stolen or damaged prescription medication**
- If your prescription medication (needed to stabilize your medical condition) is lost, stolen or damaged during your trip, and the medication is required for the balance of your trip, this insurance covers the cost of one visit to a physician to obtain a written prescription in order for your medication to be dispensed by a licensed pharmacist during your trip. Note: this benefit is only covered if the prescription medication requiring a written prescription must be dispensed during your trip and cannot be delayed until your return to your province or territory of residence.

**Repatriation of your remains**
If, during your trip, you die from a medical condition covered under this insurance, the insurance covers:
- the transportation of your remains in the common carrier’s standard transportation container to your province or territory of residence, and up to $5,000 for the preparation of your remains and for the cost of the common carrier’s standard transportation container; or
- the transportation of your remains to your province or territory of residence and up to $5,000 for the cremation of your remains at the location where your death occurred; or
- up to $5,000 for the preparation of your remains and the cost of a standard burial container and up to $5,000 for the burial of your remains at the location where your death occurred.

If someone is legally required to identify your remains, this insurance covers the cost of a return economy air fare on a commercial flight via the most cost effective route and up to $500 for commercial accommodations and meals for that person. That person is covered under the terms of your insurance during the period in which he/she is required to identify your remains, but for no longer than 3 business days.
Limitations, Conditions & Exclusions

What Coverage Limitations Apply:
1. You must call us 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 us before you obtain emergency treatment, you will be responsible for 30% of your medical expenses covered under this insurance.

2. This insurance does not cover expenses incurred within your home province or territory of residence.

3. We will not pay a benefit if you are not covered under the government health insurance plan (GHIP) of your province or territory of residence for the entire duration of the trip. It is your responsibility to check that you do have this coverage. If GHIP is not in force, this insurance is subject to a maximum of $20,000.

What Conditions Apply
1. By paying the premium for this insurance, you agree that we have:
   a. your consent to verify your health card number and other information required to process your claim with the relevant government and other authorities;
   b. your authorization to physicians, hospitals and other medical providers to provide to us any and all information they have regarding you while under observation or treatment, including your medical history, diagnoses and test results; and
   c. your agreement to the disclosure of the information available under a) and b) above to other sources, as may be required for the processing of your claim for benefits obtainable from other sources.

2. This insurance is subject to the “Terrorism Coverage”, “General Conditions” and “How Do You Submit a Claim?” sections outlined in this insurance.

What is Not Covered

Pre-existing Medical Condition Exclusions:

This insurance does not pay for any expenses incurred directly or indirectly as a result of:

1. Your medical condition or related condition (whether or not the diagnosis has been determined) if, at any time in the 90 days before you depart on your trip, your medical condition or related condition has not been stable.

2. Your heart condition (whether or not the diagnosis has been determined) if, at any time in the 90 days before you depart on your trip:
   a. Any heart condition has not been stable; or
   b. You have taken nitroglycerin more than once per week specifically for the relief of angina pain.

3. Your lung condition (whether or not the diagnosis has been determined) if, at any time in the 90 days before you depart on your trip:
   a. Any lung condition has not been stable; or
   b. You have been treated with or prescribed home oxygen (on a regular basis or on an as-needed basis) or treated with or prescribed oral steroids (prednisone or prednisolone) for any lung condition.
General Exclusions

In addition to the exclusion outlined above under “Pre-Existing Medical Condition Exclusions,” this insurance does not cover any loss, claim or expense of any kind caused directly or indirectly by:

1. The continued treatment, recurrence or complication of a medical condition or related condition, following emergency treatment during your trip, if our medical advisors determine that your emergency has ended.

2. The treatment of any heart or lung condition, following emergency treatment for a related or unrelated heart or lung condition during your trip, if our medical advisors determine that you were medically able to return to your home country and you chose not to return.

3. After your medical emergency treatment has started, we 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, invasive testing, surgery, cardiac catheterization, other cardiac procedures, transplant, and MRI.

4. Your self-inflicted injury, suicide or attempt to commit suicide.

5. Any claim that results from or is related to your involvement in the commission or attempted commission of a criminal offence or illegal act.

6. Any medical condition arising during your trip from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.

7. 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.

8. Any medical condition that is the result of you not following treatment as prescribed to you, including prescribed or over-the-counter medication.

9. We will not pay a benefit with respect to non-emergency, experimental or elective treatment (e.g. cosmetic surgery, chronic care, rehabilitation including any expenses for directly or indirectly related complications).

10. Your participation as a professional athlete in a sporting event including training or practice for the same.

11. Your participation in rock climbing or mountain climbing.

12. Your participation in a motorized race or motorized speed contest including training or practice for the same.

13. A 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.

14. A medical condition for which future investigation or treatment (except routine monitoring) is planned before your effective date.

15. Any medical condition or symptoms for which it is reasonable to believe or expect that treatments will be required during your trip.

16. a. Any claim related to routine pre-natal or post-natal care, or
   b. Any claim related to your child born during the trip, or
   c. Any claim related to pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.

17. Symptoms which would have caused an ordinarily prudent person to seek treatment or medication in the 90 days before your effective date.

18. Any claim incurred after a physician advised you not to travel.
Any expenses incurred if the reason for your emergency is associated in any way with an official travel advisory issued before your effective date by the Canadian government stating “Avoid all non-essential travel” or “Avoid all travel” regarding the country, region or city of your destination.

** 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.

If our medical advisors determine that you should transfer to another facility or return to your home province/territory of residence for treatment, and you choose not to, benefits will not be paid for further medical treatment and contract will be terminated.

a Applicable to optional insurance extension – Any medical condition which first appeared, was diagnosed or received emergency treatment prior to the effective date of the insurance extension if the extension was purchased after the contracted date of departure.

b Applicable to top-up coverage – Any medical condition which first appeared, was diagnosed or received emergency treatment prior to the effective date of this insurance if this insurance was purchased as top-up.

Any claim related to:

- an act of war whether declared or undeclared;
- rebellion;
- exposure to nuclear reaction or radiation;
- radioactive, biological or chemical contamination.

Any expenses resulting from orbital space flights, sub-orbital space flights and space tourism.

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**Trip Cancellation, Trip Interruption Insurance**

**Description of Coverage:**
This insurance covers you up to the amount of insurance coverage you purchased for losses incurred should a Covered Reason prevent you from travelling as planned.

**When does Coverage apply?**

**Trip Cancellation – Before you Leave:**
- when a covered reason causes you to cancel your trip before leaving your departure point.

**Trip Interruption – After you Leave:**
- when a covered reason occurs during your trip which causes the delay of your departure from your departure point; or when a covered reason occurs during your trip which causes an early return back to your departure point.

**Delayed Return – After you Leave:**
- when a covered reason occurs during your trip and results in your being delayed, beyond your scheduled return date, from returning to your departure point.

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**IMPORTANT**

When a cause of cancellation (the event that triggers one of the covered reasons) occurs before the date of departure from your departure point, you must:

a cancel your trip with the travel agent, airline, tour company or the carrier immediately, but no later than the business day following the cause of cancellation; and

b advise us at the same time.

Our maximum liability is the amounts or portions indicated in your trip contract that are non-refundable at the time of the cause of cancellation or on the next business day.
Covered Reasons

*Emergency Medical Condition* or Death:
For Covered Reasons 1 to 7 “you” or “your” applies to *you* or *your travelling companion*.

1. *Your emergency medical condition* or death.
2. The *emergency medical condition* or death of:
   a. *Your immediate family* member,
   b. *Your caregiver, key employee* or business partner.
3. The death or admission to a *hospital* of *your* host at destination following an *emergency medical condition*.
4. The death of *your* friend.
5. The quarantine or hijacking of *you*, *your spouse* or *your* child.
6. A *medical condition* which prevents *you* from being immunized or taking preventative medication which is unexpectedly required after the *effective date* by the government for entry into a country, region or city that is originally part of *your trip*.
7. Sickness, injury or death of *your* service dog, provided that travel arrangements have been made for the dog to accompany *you* on a covered *trip*.

What are you eligible for: (Covered Reasons 1 to 7)

<table>
<thead>
<tr>
<th>Covered Reasons 1 to 7</th>
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Review your benefit(s) under the “What are the Benefits?” section.

Pregnancy & Adoption:
For Covered Reason 8 “*your*” applies to *you*, *your spouse*, *your travelling companion*, *your travelling companion’s spouse*, *your immediate family* member or *your travelling companion’s immediate family* member.

8. *Your* complications of a pregnancy arising in the first 31 weeks of pregnancy. Note: the confirmation of a multiple pregnancy/or the confirmation of a pregnancy as a result of fertility *treatment* are not considered complications of pregnancy.

What are you eligible for: (Covered Reason 8)

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<th>Covered Reason 8</th>
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Review your benefit(s) under the “What are the Benefits?” section.
For Covered Reasons 9 and 10 “your” applies to you, your spouse, your travelling companion, your travelling companion’s spouse.

9  Your pregnancy being confirmed after your effective date, if your departure from your departure point is scheduled to take place in the 9 weeks before or after the expected date of delivery.

What are you eligible for: (Covered Reason 9)

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Review your benefit(s) under the “What are the Benefits?” section.

10  The legal adoption of a child, when the actual date of that adoption is scheduled to take place after your effective date and prior to, or during, your trip.

What are you eligible for: (Covered Reason 10)

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</table>

Review your benefit(s) under the “What are the Benefits?” section.

Work or Occupation:
For Covered Reasons 11 to 14 “your” applies to you, your spouse, your travelling companion.

11  A transfer by your employer with whom you or your spouse is employed on your effective date which requires the relocation of your principal residence (not applicable to self-employed people).

12  The involuntary loss of your permanent employment (not contract employment) due to lay-off or dismissal without just cause.

13  Cancellation of your business meeting beyond your or your employer’s control.

14  Your being summoned to service in the case of reservists, active military, police, essential medical personnel and fire personnel.

What are you eligible for: (Covered Reasons 11 to 14)

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Review your benefit(s) under the “What are the Benefits?” section.
**Government Travel Warning or Visas:**
For Covered Reason 15 “your” applies to you.

15 The Government of Canada issues an “Avoid Non-Essential Travel” or an “Avoid All Travel” travel advisory after you purchase your insurance advising or recommending that Canadian residents should not visit a destination included in your trip. (Note: Not applicable if the reason for the travel advisory is related to COVID-19 including any mutation or variation).

**What are you eligible for: (Covered Reason 15)**

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<tr>
<th>Covered Reason 15</th>
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Review your benefit(s) under the “What are the Benefits?” section.

For Covered Reason 16 “your” applies to you or your travelling companion.

16 The non-issuance of your travel visa (not an immigration or employment visa) or the rejection of your travel visa application (not an immigration or employment visa) for reasons beyond your control.

**What are you eligible for: (Covered Reason 16)**

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<tr>
<th>Covered Reason 16</th>
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</table>

Review your benefit(s) under the “What are the Benefits?” section.

**Other:**
For Covered Reasons 17 and 18 “your” applies to you or your travelling companion.

17 An event completely independent of any intentional or negligent act that renders your principal residence uninhabitable or the business that you own inoperative.

18 Your, your spouse or your child being a) called for jury duty; b) subpoenaed as a witness; or c) required to appear as a party in a judicial proceeding during your trip.

**What are you eligible for: (Covered Reasons 17 to 18)**

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<tr>
<th>Covered Reasons 17 to 18</th>
<th>Trip Cancellation</th>
<th>Trip Interruption</th>
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</table>

Review your benefit(s) under the “What are the Benefits?” section.
Cruise, Tour or Travel Package:
For Covered Reasons 19 and 20, your applies to you.

19 The cancellation of your cruise, tour and travel package (excluding supplier default) by the cruise company or tour operator:
- prior to your departure from your departure point, or
- after your departure from your departure point, but prior to the departure of the cruise ship or tour.

**What are you eligible for: (Covered Reason 19)**

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<tr>
<th>Covered Reason 19</th>
<th>Trip Cancellation</th>
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Review your benefit(s) under the “What are the Benefits?” section.

20 Your cruise ship is delayed or the cruise itinerary is interrupted due to the emergency medical condition of another passenger on the ship causing you to miss a connection or resulting in the interruption of your travel arrangements.

**What are you eligible for: (Covered Reason 20)**

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<tr>
<th>Covered Reason 20</th>
<th>Trip Cancellation</th>
<th>Trip Interruption</th>
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Review your benefit(s) under the “What are the Benefits?” section.

For Covered Reason 21 your applies to you and your travelling companion.

21 The inability to use your cruise shore excursion tour ticket or special event ticket (theatrical, concert or sporting event) purchased while on your cruise trip due to your emergency medical condition.

**What are you eligible for: (Covered Reason 21)**

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<tr>
<th>Covered Reason 21</th>
<th>Trip Cancellation</th>
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Review your benefit(s) under the “What are the Benefits?” section.
Missed Connection, Schedule Change & Delays:
For Covered Reasons 22 to 26 “your” applies to you.

22 Your missed connection caused by the schedule change of the airline carrier that is providing transportation for a portion of your travels.

23 Your missed connection caused by the outright cancellation by the airline carrier that is providing transportation for a portion of your travels rendering your non-refundable prepaid connector ticket no longer useful for your trip.

What are you eligible for: (Covered Reasons 22 and 23)

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<th>Covered Reasons 22 and 23</th>
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Review your benefit(s) under the “What are the Benefits?” section.

24 A missed departure or the delay of your connecting transportation due to the following events:

- mechanical failure of that transportation
- a traffic accident
- an emergency police-directed road closure
- weather conditions, earthquakes, volcanic eruptions
- unannounced strike
- loss or theft of your passports, travel documents, or money

Transportation for covered reason #24 refers to a passenger plane, ferry, cruise ship, bus, limousine, taxi, ride sharing, private automobile or train.

**IMPORTANT**

- Your travel plans must include enough time to meet the travel supplier’s check-in procedure.
- Any amount payable will be reduced by any amount recoverable from another source (including but not limited to alternatives or replacement travel options offered by airlines, tour operators, cruise lines and other carriers) for the same cause.

What are you eligible for: (Covered Reason 24)

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<th>Covered Reason 24</th>
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Review your benefit(s) under the “What are the Benefits?” section.
25 The inability to use your golf course green fee that you booked and purchased while on your trip due to a covered reason listed under trip interruption.

26 The inability to use your ski lift tickets in the event of ski lift closures due to avalanche or severe weather conditions.

What are you eligible for: (Covered Reasons 25 & 26)

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<th>Covered Reasons 25 and 26</th>
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<td>Trip Cancellation</td>
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</table>

Review your benefit(s) under the “What are the Benefits?” section.

For Covered Reason 27 “your” applies to you and your travelling companion.

27 Delay of your scheduled carrier due to weather conditions, earthquakes or volcanic eruptions, for a period of at least 30% of the trip, when you choose not to continue with your travel arrangements.

Note: If you choose to continue on with the trip, only Benefit b) applies.

What are you eligible for: (Covered Reason 27)

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Review your benefit(s) under the “What are the Benefits?” section.

Burglary of Principle Residence or Place of Business:
For Covered Reason 28 “your” applies to you and your travelling companion.

28 The burglary of your principal residence or place of business within 7 days of your scheduled departure date, and as a result you or your travelling companion must remain behind to make the burglarized location secure or to meet with the insurance company or police authorities.

What are you eligible for: (Covered Reason 28)

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Review your benefit(s) under the “What are the Benefits?” section.
What are the Benefits?

*Trip* Cancellation – Before you Leave: (up to $1,500 per *trip* to a maximum of $10,000 per year)

If your *trip* is cancelled before you leave as a result of a Covered Reason, benefits are payable for:

a The non-refundable portion of your prepaid travel arrangements.

b The extra cost of the next occupancy charge if you choose to travel as originally planned.

*Trip* Interruption – After you Leave

Unused Portion of Pre-paid travel arrangements:

If your *trip* is interrupted after you leave as a result of a Covered Reason, benefits are payable for:

c The non-refundable unused portion of your prepaid travel arrangements, excluding partially used airline/transportation tickets back to your *departure point* (up to $1,500 per *trip*).

d Your economy class transportation via the most cost effective route to your *departure point*.

Transportation:

e Your economy class one-way air fare via the most cost effective route to your next destination (inbound and outbound) or to rejoin a tour or group.

Out of Pocket Expenses:

f Your commercial accommodations and meals, essential telephone calls, internet usage fees, and taxi fares (ride sharing or rental car in lieu of taxi fares), up to a daily maximum of:

- $350, to a maximum total of $3500.

*IMPORTANT*

Fly to Bedside or Funeral – Note: If you are required to interrupt your *trip* to attend a funeral, or travel to the bedside of a hospitalized immediate family member, business partner, key employee or caregiver, you have the option to purchase a ticket to the destination where the death or hospitalization has occurred. You will be reimbursed the cost of the ticket, up to the maximum amount of what it would have cost for one-way economy class transportation via the most cost effective route back to your departure point.

- This option is subject to the pre-authorization of Allianz Global Assistance
- This option can only be used once during your *period of insurance*.
- If you choose this option, it will replace benefit d).
- The Out of Pocket Expenses benefit is not applicable if you choose this option.

g Your commercial accommodations and meals, essential telephone calls, internet usage fees, and taxi fares (ride sharing or rental car in lieu of taxi fares), up to a daily maximum of:

- $350, to a maximum total of $700.
Missed Connection Benefit:
Reimbursement to you, up to the maximum covered amount for the lesser of the following, toward the expenses you incur as a result of the covered reasons #22 & #23.

- The change fee charged by the airline carrier(s) involved, when such an option is available to you; or
- Up to $1,000 for the extra cost of your one-way economy air fare via the most cost effective route to your next destination (inbound and outbound).

Cruise, Tour and Travel package Cancellation Benefit:
Reimbursement to you, up to the maximum covered amount for the lesser of the following, toward the expenses you incur as a result of covered reason #19.

- The change fee charged by the airline carrier(s) involved, when such an option is available to you; or
- Up to $1,000 for the extra cost of your one-way economy air fare via the most cost effective route to your next destination (inbound and outbound).

- The change fee charged by the airline carrier(s) involved, when such an option is available to you; or
- Up to $1,000 for the extra cost of your one-way economy air fare via the most cost effective route to your next destination (inbound and outbound).

- Up to $1,000 for your non-refundable prepaid air fare, which joins to or departs from your cancelled sea/land arrangements and that is not part of your package.

- The change fee charged by the airline carrier(s) involved, when such an option is available to you; or
- Up to $1,000 for the extra cost of your one-way economy air fare on a commercial flight via the most cost effective route to return you to your departure point.

Unused Cruise Shore Excursion Tickets or Special Event Tickets:
Reimbursement of your expenses incurred as a result of covered reason # 21 for your unused cruise shore excursion tickets or special event tickets (theatrical, concert, or sporting event) up to $100 per ticket to a maximum of $500.

Transportation Delay Benefit:
As a result of covered reason #24, reimbursement to you, up to a daily maximum of $350 to a total of $700:

- for your overnight commercial accommodations (if delayed for 6 hours or more and delay occurs overnight); and
- meals, essential telephone calls, internet usage fees, taxi fares (ride sharing or rental car in lieu of taxi fares).

IMPORTANT
This benefit can only be claimed if no other compensation was provided or offered by the delayed transportation.

Pet Care Expenses:
Reimbursement to you toward the expenses you incur, up to $100 maximum total, as a result of one of the covered reasons, for additional animal boarding fees if you were delayed and unable to return on your return date.

IMPORTANT
- This benefit is payable only if your pet care exceeds the quoted cost for the pre-booked period of accommodation with a licensed boarding kennel, cattery or animal shelter, in which case we will reimburse you for the boarding charges incurred after the first 24 hours of your delayed return, subject to a maximum total of $100.
- This benefit does not cover veterinary fees.

Golf Course Green Fee / Ski Lift Ticket Expenses:
Reimbursement to you toward the expenses you incur, up to $100 per day/$400 maximum total, for the non-refundable green fee or ski
lift tickets as a result of one of the covered reasons.

**HolidaySure Plan Coupon:**
Upon your request, compensation to you in the form of a coupon of up to $750 in value when you cancel your trip due to hospitalization or death of:

- Your immediate family member (who is not at your destination)
- Your travelling companion
- Caregiver, key employee or business partner

and –
- you miss at least 75% of your trip as a result of the interruption of your travel plans;
- you use the coupon towards travel in the 180 days immediately following the date of your early return from your interrupted insured trip; and
- you use the coupon to purchase replacement travel.

Failure to meet these conditions will make the HolidaySure Plan benefit coverage null and void.

Your original Deluxe Multi-trip Annual Package does not provide insurance for the replacement travel.

**Limitations, Conditions & Exclusions**

**What Conditions Apply?**

1. It is a condition of any transportation and out of pocket expense benefit under this insurance that travel must be undertaken on the earliest of:
   a. the date when your travel is medically possible; and
   b. within 10 days following your originally scheduled return date if your delay is not the result of hospitalization; or
   c. within 30 days following your originally scheduled return date if your delay is the result of hospitalization, when the benefit is payable because of a medical condition covered under one of the covered reasons.

2. If before your date of departure you are prescribed any change to your current medication or treatment that would make your medical condition not stable and therefore ineligible for coverage under our emergency medical coverage, you may apply for our special consideration of your particular medical circumstance by calling us at 1-800-387-2487.

Note: Your medical condition must have been stable within the 90 days prior to the date your insurance premium is paid in order to apply for special consideration.

To apply, you must provide us with:

- copies of the clinical notes from your treating physician for the period starting 90 days prior to your effective date to the date of your request for consideration. You are responsible for any fees charged by your physician for copies of clinical notes;
- complete itinerary for your trip, including prepaid amounts, insured amounts, and cancellation penalties.

Once this information is received, we will, at our discretion, either:

- review your claim under our Cancellation & Interruption insurance; or
- waive the exclusion that would make you ineligible for benefits under our emergency medical insurance, for the medical condition or related condition for which the change to your current medication or treatment that would make your medical condition not stable was prescribed to you.

3. This insurance is subject to the “Terrorism Coverage”, “General Conditions” and “How Do You Submit a Claim?” sections outlined in this insurance document.

**What is Not Covered**

**Pre-existing Medical Condition Exclusions:**
When reading the Pre-existing Medical Condition exclusions, please review the definition of stable.
This exclusion applies to you, your spouse, your children whether or not they are travelling with you. It also applies to your parents and your siblings who live in the same home, whether or not they are travelling with you.

We will not pay for any expenses incurred directly or indirectly as a result of:

i  Your/their medical condition or related condition (whether or not the diagnosis has been determined) if at any time in the 90 days before your effective date, the medical condition or related condition has not been stable.

ii Any heart condition (whether or not the diagnosis has been determined) if at any time in the 90 days before your effective date:
   a  Your/their heart condition has not been stable; or
   b  You/they have taken nitroglycerin more than once per week specifically for the relief of angina pain.

iii Any lung condition (whether or not the diagnosis has been determined), if at any time in the 90 days before your effective date:
   a  Your/their lung condition has not been stable; or
   b  You/they have been treated with or prescribed home oxygen (on a regular or on an as needed basis) or treated with or prescribed oral steroids (prednisone or prednisolone) for any lung condition.

General Exclusions

In addition to the exclusion outlined above under “Pre-Existing Medical Condition Exclusions,” this insurance does not cover any loss, claim or expense of any kind caused directly or indirectly by:

a  Any known or anticipated event, occurrence, circumstance, or medical condition which you were aware of on or before your effective date, and which you knew might be cause for cancellation, interruption or delay of your trip.

b  A trip undertaken to visit or attend an ill person when the medical condition or death of that person is the cause of the claim.

c  Pre-paid travel arrangements for which an insurance premium was not paid.

d  Your self-inflicted injury, suicide or attempt to commit suicide.

e  Any claim that results from or is related to your involvement in the commission or attempted commission of a criminal offence or illegal act.

f  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.

g  Any medical condition arising during your trip from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.

h  Any medical condition that is the result of you not following treatment as prescribed to you, including prescribed or over-the-counter medication.

i  Any claim related to routine pre-natal or post-natal care, or

Any claim related to your child born during the trip, or

Any claim related to pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.
A 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.

Your participation in rock climbing or mountain climbing.

The non-issuance of a travel visa due to late visa application.

Your refused entry at customs, border crossing, or security checkpoint for any reason.

The schedule change of a medical test or surgery that was originally scheduled before your period of insurance.

Your medical condition if any answer provided in the medical questionnaire, when applicable, is incorrect, in which case the insurance is void and the premium paid is refundable at our option.

Any claim related to:
- an act of war whether declared or undeclared;
- rebellion;
- exposure to nuclear reaction or radiation;
- radioactive, biological or chemical contamination.

Any expenses resulting from orbital space flights, sub-orbital space flights and space tourism.

A travel advisory (“Avoid Non-Essential Travel” or “Avoid all Travel”) issued by the Government of Canada specifically related to COVID-19 (including any mutation or variation).

**IMPORTANT NOTE:**
**VOUCHERS OR FUTURE TRAVEL CREDITS**

1. A travel supplier may provide you with a voucher or future travel credit when your trip is cancelled or interrupted due to a covered reason.

2. We will, for Cancellation and Interruption claims, except as described in paragraph 3, reimburse you up to a maximum of 100% of your eligible loss covered under this insurance. You are required to contact the travel supplier and obtain proof of the cancelled voucher or future travel credit in order to proceed with your claim.

3. If payable combined Cancellation and Interruption claims related to one event exceed $1 million dollars, any voucher or future travel credit that has been made available to you, by a travel supplier, (whether it is accepted by you or not) will be considered a refund and your claim will not be covered. This limitation will only apply when the covered reason is related to the one event.

4. In the case of paragraph 3, when a claim is submitted, you will be informed to contact the travel supplier, for alternative or replacement travel options.
Baggage Loss, Delay & Damage Insurance

Description of Coverage:
This insurance covers you for direct physical loss of, or damage to, the baggage and personal effects you own and use during your trip. It also covers baggage delay if your baggage is delayed for 12 hours or more while en route. This benefit is payable only when the delay happens before your return home.

IMPORTANT
If you are insured under other Baggage & Personal Effects insurance issued by us, then the maximum sum insured per person or per family will not exceed $2,000 in total for all coverages.

What is Covered
Loss of or Damage to Baggage & Personal Effects:
- Reimbursement of your losses up to $1000 maximum, subject to a maximum of $500 for any one item or set of items (items which are purchased for use together and commonly used together).

Replacement of Travel Documents:
- Reimbursement of up to $300 in total towards the replacement expenses of one or more of the following documents: passport, driver’s licence, birth certificate or travel visa, in the event any one of these is lost or stolen.

Delay of Baggage & Personal Effects:
- Reimbursement up to $400 maximum for necessary toiletries and clothing when your checked baggage is delayed by the carrier for 12 hours or more while en route and before returning to your departure point.

Delay of Golf Clubs:
- Reimbursement up to $100 per day/$400 maximum for the rental of golf clubs, and the purchase of reasonable and customary golf accessories such as golf balls and tees, in the event your golf clubs which you own or use during your trip are delayed by the carrier for 12 hours or more while en route and before returning to your departure point.

Delay of Ski Equipment:
- Reimbursement up to $100 per day/$400 maximum for the rental of ski equipment, and the purchase of reasonable and customary ski accessories, in the event your ski equipment which you own or use during your trip is delayed by the carrier for 12 hours or more while en route and before returning to your departure point.

IMPORTANT
Ski equipment includes snowboards, skis, bindings, boots or poles.

Limitations, Conditions & Exclusions
What conditions apply?
1. In the event of theft, burglary, robbery, malicious mischief, disappearance, loss or damage of an item covered under this insurance, you must:
   a. during your period of insurance, immediately notify and obtain corroborating documentary evidence from the police or, if the police are not available, the hotel manager, tour guide or transportation authorities;
   b. promptly take all reasonable precautions to protect, save and/or recover the property; and
   c. notify us immediately upon your return to your departure point.

Failure to comply with this condition will invalidate any claim under this insurance.

2. If the insured property is under check of a common carrier and delivery is delayed, this insurance will continue until such property is delivered by the common carrier.

3. a. We are not liable beyond the actual cash value (original cost less deduction for depreciation) of the property at the time of loss.
   b. We have the option to repair or replace any damaged or lost property with other of similar kind, quality and value and to
require submission of the property for appraisal of damage.

4 If an article which is part of a set is lost or damaged, the measure of loss or damage to such article is a reasonable and fair proportion of the total value of the set, but not the total loss of or damage to the set.

5 This insurance is subject to the “Terrorism Coverage”, “General Conditions” and “How Do You Submit a Claim?” sections outlined in this document.

**What is Not Covered**

This insurance does not cover:

1 Animals, perishables, bicycles except while checked as baggage with a common carrier, household effects and furnishings, artificial teeth and limbs, hearing aids, eye glasses, sunglasses, contact lenses, money, tickets, securities and documents, *professional* or *occupational* items, antiques and collector items, breakage of or damage to brittle or fragile articles, property illegally acquired, kept, stored or transported.

2 Any claim arising from loss:
   a caused by wear and tear, deterioration, defect or mechanical breakdown;
   b caused by your imprudent act or omission;
   c of articles specifically insured on a valued basis by another insurer while this insurance is in effect;
   d caused by theft from an unattended vehicle unless the vehicle (including the vehicle’s trunk) was securely locked and there were visible marks indicating that the theft occurred as a result of forcible entry.

3 A *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.

4 Any claim related to:
   - an act of war whether declared or undeclared;
   - rebellion;
   - exposure to nuclear reaction or radiation;
   - radioactive, biological or chemical *contamination*.

5 Any expenses resulting from orbital space flights, sub-orbital space flights and space tourism.

**Flight & Travel Accident Insurance**

**Description of Coverage**

This insurance covers your *accidental bodily injury* sustained during your *trip* resulting in your *dismemberment, loss of sight*, death or complete and irrecoverable loss of speech or hearing within 365 days from the date of the accident.

**IMPORTANT**

For Flight Accident Insurance, the following applies:

- *Your trip* must take place on a *passenger plane*, between the *departure point* and the destination or the return to the *departure point* if a round *trip* ticket is obtained before leaving the *departure point*.

- At the time *you* sustain the *accidental bodily injury*, *you* must be travelling on a ticket or pass covering the whole airline *trip* issued to *you* for transportation on a *passenger plane* in which this insurance was purchased against. If the ticket is issued to *you* aboard such *passenger plane* after leaving the *departure point* but before reaching the first scheduled stop, it will be deemed to have been issued before leaving the *departure point*.

The *accidental bodily injury* must be sustained while *you* are:
a passenger on the trip shown on the insurance application/confirmation of coverage, or during a substitute trip if the ticket is exchanged;

- riding as a passenger in a land or water conveyance at the expense of the airline as a substitute for a passenger plane on which you are covered by this insurance;

- riding as a passenger in a limousine or bus service provided by the airline or airport authority;

- at an airport for the purpose of departure or arrival of the flight covered by this insurance;

- riding as a passenger in a scheduled helicopter shuttle service to and from airports to make a connection with the flight covered by this insurance; or

- exposed to the elements due to a forced landing or disappearance of a passenger plane on which you are riding.

### What is Covered

<table>
<thead>
<tr>
<th></th>
<th>Principal Sum:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flight Accident</td>
<td>$100,000</td>
</tr>
<tr>
<td>Travel Accident</td>
<td>$50,000</td>
</tr>
</tbody>
</table>

We will pay the greater of these benefits for all losses resulting from an accident:

1. 100% of the principal sum for death, double dismemberment or loss of sight of both eyes; or

2. 100% of the principal sum for complete and irrecoverable loss of speech or hearing; or

3. 50% of the principal sum for single dismemberment or loss of sight of one eye.

### Limitations, Conditions & Exclusions

#### What conditions apply?

<table>
<thead>
<tr>
<th>Conditions 1 to 5 apply to Travel Accident.</th>
<th>Conditions 2 to 7 apply to Flight Accident.</th>
</tr>
</thead>
</table>

1. If after 1 year following the accident covered under this insurance, your body has not been found, it will be presumed that you died as a result of such injuries occurring at the time of such accident.

2. This insurance is subject to the “Terrorism Coverage”, “General Conditions” and “How Do You Submit a Claim?” sections outlined in this certificate of insurance.

3. The maximum sums available are shown in the Summary of Insurance Coverage chart contained in this certificate of insurance.

4. Any expense incurred if the purpose of your trip is obtaining a diagnosis, treatment, surgery, investigation, palliative care, or any alternative therapy, as well as any directly or indirectly related complication.

5. The total benefits payable for one or more accidents will not exceed the applicable principal sum as outlined in the Summary of Insurance Coverage chart.

6. If after 1 year following the forced landing or disappearance of the passenger plane on which you are riding, your body has not been found, it will be presumed that you died at the time and place the passenger plane was last seen or heard from and as the result of an accident to such passenger plane.

7. This insurance starts on your effective date. It ends either upon completion of the airline trip or upon expiration of the passenger plane ticket or upon surrender of the passenger plane ticket for refund or credit.
What is Not Covered

Exclusions 1 to 13 apply to Flight Accident
Exclusions 1 to 16 apply to Travel Accident

This insurance does not cover any loss, claim or expense of any kind caused directly or indirectly from:

1. Any claim related to:
   - an act of war whether declared or undeclared;
   - rebellion;
   - exposure to nuclear reaction or radiation;
   - radioactive, biological or chemical contamination.

2. Your self-inflicted injury, suicide or attempt to commit suicide.

3. Any claim that results from or is related to you or your beneficiary’s involvement in the commission or attempted commission of a criminal offence or illegal act.

4. Participation in any military manoeuvre or training exercise.

5. Disease, even if the cause of its activation or reactivation is an accident.

6. Piloting, learning to pilot or acting as a member of a crew of an aircraft.

7. Contamination due to any act of terrorism.

8. Terrorism.

9. A 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.

10. Accidental bodily injury, 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.

11. Accidental bodily injury arising during your trip from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.

12. Accidental bodily injury that is the result of you not following treatment as prescribed to you, including prescribed or over-the-counter medication.

13. Any expenses resulting from orbital space flights, sub-orbital space flights and space tourism.

14. Participation as a professional athlete in a sporting event including training or practice for the same.

15. Participation in hang-gliding, rock climbing, mountain climbing, parachuting, skydiving or bungee jumping.

16. Participation in any kind of motorized race or motorized speed contest including training or practice for the same.
**Terrorism Coverage**

Where an *act of terrorism* directly or indirectly causes a loss that would otherwise be payable under one of the covered reasons in accordance with the terms and conditions of this insurance, this insurance will provide coverage as follows:

1. **Terrorism** Coverage is not available under Flight and Travel Accident Insurance.

2. We will, for Cancellation & Interruption claims, except in the case of catastrophic event, reimburse you up to a maximum of 100% of your eligible loss.

3. We will, for Cancellation & Interruption claims resulting in a catastrophic event, and subject to the limits described in paragraph 6), reimburse you up to a maximum of 50% of your eligible loss.

4. For all other classes of insurance, we will reimburse you up to a maximum of 100% of your eligible loss.

5. The benefits payable in accordance with paragraphs 2), 3) and 4) are in excess to all other potential sources of recovery, including but not limited to, 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 respond after you have exhausted all such other sources.

6. The benefits payable in accordance with paragraph 3) shall be paid out of a fund and, where total claims exceed fund limits, eligible claims shall be reduced on a pro rata basis so that the maximum payment out of the fund for all certificate of insurance holders shall be CDN$5,000,000 per act of terrorism or series of acts of terrorism occurring within a 72-hour period. The total maximum payment out of the fund for all certificate of insurance holders shall be CDN$10,000,000 per calendar year regardless of the number of acts of terrorism. If, in our judgment, the total of all payable claims for all certificate of insurance holders under one or more acts of terrorism may exceed the applicable fund maximum limits, your prorated claim will be paid after the end of the calendar year.

**How to Become Insured, Extend or Modify Your Insurance**

**How do you become insured?**

You become insured and this Insurance document becomes an insurance contract when:

- Your name is on the insurance application/confirmation of coverage.
- The required premium has been paid on or before your effective date.
- You have completed the medical questionnaire if required.

**When does your coverage automatically extend?**

1. If you cannot complete your trip by your return date because of the delay of a common carrier in which you are scheduled to travel, your coverage will automatically extend for the delay period to a maximum of 72 hours.

2. If you or your travelling companion are hospitalized on your return date or expiry date, your coverage will automatically extend for the period of hospitalization and up to an additional 5 days after discharge (not available for Cancellation & Interruption).

3. If you or your travelling companion are delayed beyond your return date because of a medical condition and are medically unable to travel, but are not hospitalized, your coverage will automatically extend for the delay period to a maximum of 5 days after your return date (not available for Cancellation & Interruption).

4. Regardless of the automatic extensions above, coverage will not continue beyond 365 days from your latest date of departure from your departure point.

**What if you decide to extend your trip?**

If you decide to extend your trip, any extension of your coverage is subject to the following conditions:

1. a If you have not had a medical condition under your existing coverage under any
of our insurances, you must request the extension by contacting us before your return date.

b If you have had a medical condition under your existing coverage under any of our insurances, you must request the extension by contacting us before your return date, and the extension is subject to our approval.

2 You must pay the required additional premium before your original return date.

3 If the insurance for which you require the extension is not available for the duration that includes the total number of days of your trip and any optional extension(s), your coverage cannot be extended. Instead, you may be able to purchase a new certificate of insurance under the coverage:
   a for which you are eligible; and
   b that is available for the duration that includes the period beginning with your effective date and ending at your new return date.

4 Any extension of your coverage is subject to our approval and we reserve the right to decline the request.

The terms, conditions and exclusions of the certificate extension apply to you during the extension period.

**Topping Up another travel insurance coverage**

If you are travelling for more than 9 consecutive days under the 9-Day option, 16 consecutive days under the 16-Day option, 30 consecutive days under the 30-Day option, you must top-up this coverage as outlined below.

If you want to top-up your coverage, you may purchase another certificate of insurance from us under the insurance for which you are eligible, and that is available for the duration that includes the period beginning with your effective date and ending at your new return date for the additional number of days beyond the duration provided by your Deluxe Package Multi-Trip Annual Plan:

a before your effective date, you may contact us to purchase top-up coverage.

b after your effective date and if you have not had a medical condition during your trip, you must contact us before your scheduled return date to purchase top-up coverage.

c after your effective date and if you have had a medical condition during your trip, you must contact us before your scheduled return date to purchase top-up coverage. The issuance of the top-up certificate of insurance is subject to our approval.

d the terms, conditions and exclusions of our new certificate of insurance issued as top-up apply to you.

e you cannot purchase an annual coverage to top-up a single trip (if you have travel insurance included with your credit card coverage, you can purchase an annual coverage as top-up).

f you must pay the required top-up premium on or before the effective date of the top-up period.

g Any top-up coverage is subject to our approval and we reserve the right to decline the request.

If you do not top-up this coverage for a trip that is longer than your 9-Day, 16-Day, or 30-Day option, you will not have coverage for any claim at any time incurred outside of your period of insurance during that trip. If the certificate of insurance you are purchasing as top-up requires you to complete a medical questionnaire, you must complete the medical questionnaire for that top-up coverage.
Insurance Premium

About Your Premium

- The required premium is due and payable at the time of purchase and will be determined according to the schedule of premium rates in effect.
- Premium rates and coverage terms and conditions are subject to change without prior notice.
- Coverage will be null and void if credit card charges are invalid, or if no proof of your payment exists.

When can your premium be refunded?

If you are not completely satisfied with this travel insurance, you may cancel it within 10 days of purchase for a full refund, provided you have not left on your trip and have not experienced an event that would cause you to submit a claim. Refunds after the 10 day will not be permitted unless it is prior to your start-up date.

IMPORTANT

No refund of premium will be made in the event that a claim has been paid, incurred or reported, or if you have already departed on your trip.

Contract or Coverage Termination by Us

1. This certificate of insurance is issued on the basis of information in your application or provided in connection with your application (including answers to the medical questionnaire, if required). When completing the application and answering the medical questions, 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.

2. If you fail to meet the eligibility conditions as outlined under “Eligibility”, your insurance is void and our liability is limited to a refund of the premium paid.

3. 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 certificate of insurance.

4. This contract is void if a trip is 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.
How to Submit a Claim

1. When you call us at the time of an emergency, you will be given all the information required to file a claim. Otherwise, please refer to the instructions below.

2. We do not cover fees charged for completing a medical certificate.

3. For an Emergency Medical Insurance claim, Trip Cancellation/Trip Interruption claim, or a Flight and Travel Accident claim:
   - You must provide notice of your claim within thirty (30) days of the date the claim arises.
   - You must submit the information required for your claim within ninety (90) days of the date of the claim arises. If it is not reasonably possible to provide such information within ninety (90) days, you must do so within one (1) year of the date the claim arises or such other time period as may be permitted by your applicable provincial legislation or your claim may not be reviewed.

For a Baggage & Personal Effects or Baggage Delay Insurance claim:
   - You must provide notice of your claim as soon as you become aware of the claim and deliver as soon as practicable the information required by the insurer to adjudicate the claim.

4. If your claim is approved, payment will be made within sixty (60) days of receipt of all of the required information.
   - If you need a Claim & Authorization form, please contact our Claims Department at 1-800-387-2487 toll-free from the U.S. and Canada, or (905) 816-2561.
   - Or you can visit our website at https://www.rbcroyalbank.com/travel-insurance/claims-service.html#make-travel-claim to obtain an Emergency Medical claim form or a Cancellation & Interruption claim form.
   - Our address: RBC Insurance Company of Canada Claims c/o Allianz Global Assistance P O Box 277 Waterloo, ON N2J 4A

How to file a Complaint

Information Required for each type of Claim

If you are making an Emergency Medical Insurance claim:

We require the fully completed Claim & Authorization form, and when applicable:

- Original of all bills, invoices and receipts.
- Proof of payment by your government health insurance plan and payment from any other insurer or benefit plan.
- The completed and signed Power of Attorney and Régie de l’assurance maladie du Québec forms if you reside in the province of Quebec.
- A complete diagnosis from the physician(s) and/or hospital(s) who provided the treatment, including, where applicable, written verification from the physician who treated you during your trip that the expenses were medically necessary. In addition, for accidental dental expenses, we require proof of the accident.

If you are making a Trip Cancellation or Trip Interruption Insurance claim:

We require the fully completed Claim & Authorization form, and when applicable:

- A medical document, fully completed by the legally qualified physician in active personal attendance and in the locality where the medical condition occurred stating the reason why travel was not recommended, the diagnosis and all dates of treatment.
- Written evidence of the covered reason which was the cause of the cancellation, interruption or delay.
- Tour operator terms and conditions.
- Complete original unused transportation tickets, vouchers, cruise shore excursions or special ticket events.
- All receipts for the prepaid land arrangements and/or out of pocket expenses.
- Original passenger receipts for new tickets.
- Reports from the police or local authorities documenting the cause of the missed connection.
- Detailed invoices and/or receipts from the service provider(s).

IMPORTANT
To save you time, we’ve made it easier to submit your trip cancellation and trip interruption claims online.

Sign in to Online Insurance:

From the Policy Summary screen, find your travel policy/certificate number
Click on “Open a Claim” to get started
Please make sure to have all your supporting documents available when you open a claim online.

If you are making a Baggage & Personal Effects or Baggage Delay Insurance claim:

We require the fully completed Claim & Authorization form, and when applicable:

- Proof of loss/damage (copy of reports made to the authorities), proof of ownership and receipts for the items claimed in the event of loss or damage.
- Proof of delay and receipts for purchases of necessary toiletries and clothing in the event of a delay.

If you are making a Flight and Travel Accident Insurance claim:

We require the fully completed Claim & Authorization form, and when applicable:

- Police reports, medical records, death certificate, autopsy or coroner’s report.

FAILURE TO COMPLETE THE REQUIRED CLAIM & AUTHORIZATION FORM IN FULL WILL DELAY THE ASSESSMENT OF YOUR CLAIM.
What can you expect from us when making a claim

1. When making a claim under this insurance, you must provide the applicable documents we require. Failure to provide the applicable documentation will invalidate your claim.

2. We will pay the expenses, other than for loss of life, covered under this insurance to you or to the provider of the service(s). Any sum payable for loss of life will be payable to your estate unless otherwise specified in your insurance application/confirmation of coverage.

3. Payment, reimbursement and amounts shown throughout this contract are in Canadian dollars, unless otherwise stated. If currency conversion is necessary, we will use the exchange rate on the date the last service was rendered to you. This insurance will not pay for any interest.

4. 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 certificate of insurance.

5. During the processing of a claim under this insurance, we may require you to undergo a medical examination by one or more physicians selected by us and at our expense.

What can you do if your claim is not approved

If your claim is not approved and you disagree with our decision, you have the option to appeal. You can contact the RBC Client Complaints Appeal Office for assistance at: ccao@rbc.com or 1-888-728-6666 or https://www.rbcinsurance.com/contact-us/personal-insurance/index.html

In order to submit the appeal, you will need to outline your concerns and resolution expectations. You will also need to send us the following:

- A copy of the final decision/proposal letter that you received
- Any new information or documentation that has not already been submitted to support your position

There is a limitation period for commencing an action in the Province of Quebec. If you decide to commence an action in court, we recommend you seek independent legal advice on your rights and the applicable limitation period. You may only commence a legal action in the province or territory where the insurance was issued.
General Conditions

1 Throughout this document, any reference to age refers to your age on the date of insurance application/confirmation of coverage.

2 We and our agents are not responsible for the availability, quality or results of any medical treatment or of any transportation or of your failure to obtain medical treatment.

3 This document, including the insurance application/confirmation of coverage and, when applicable, the medical questionnaire, is the entire contract between you and us. Despite any other provision of this contract, this contract is subject to the statutory conditions in the Insurance Act respecting contracts of accident and sickness insurance.

4 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 (for actions or proceedings governed by the laws of Alberta and British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), or in other applicable legislation in your province of residence. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Quebec Civil Code.

5 You may only commence a legal action in the province or territory where the certificate of insurance was issued. You or your heirs assign consent to the transfer of any legal action to the province or territory where the certificate of insurance was issued.

6 If the aggregate of all Flight Accident insurance policies under which we cover you is in excess of $200,000, our total liability will be limited to $200,000 and any excess insurance will be void and the premiums paid will be refunded.

Access to Care

We will assist you to access care whenever possible; however, we are not responsible for the quality of care you receive.

Misrepresentation

1 This certificate of insurance is issued on the basis of information in your application or provided in connection with your application (including answers to the medical questionnaire, if required). When completing the application and answering the medical questions, 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

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

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

Co-ordination of Benefits

If you are eligible for benefits, similar to the benefits provided under this insurance, the total benefits paid to you by all insurers cannot exceed the actual incurred expense.

We will coordinate the payment of benefits from all insurers with whom you are eligible, to the maximum of the largest amount specified by each insurer.

1 In the case of out-of-country/province health care coverage:
   a if you are retired and your former employer provides to you, under an extended health insurance plan, a lifetime maximum coverage of:
      - $50,000 or less, we will not coordinate payment with such coverage;
• more than $50,000, we will coordinate payment with such coverage only in excess of $50,000; in accordance with the coordinating coverage guidelines issued by the Canadian Life and Health Insurance Association.

b if you are actively employed and your current employer provides to you, under a group health insurance plan, a lifetime maximum coverage of:

• $50,000 or less, we will not coordinate payment with such coverage;
• more than $50,000, we will coordinate payment with such coverage only in excess of $50,000.

2 If you are insured under more than one of our policies, the total amount paid to you cannot exceed the actual expense which you have incurred, and the maximum you are entitled to is the largest amount specified for the benefit in any one certificate of insurance.

3 Any of our policies are excess insurance and are the last payors. All other sources of recovery, indemnity payments or insurance coverage must be exhausted before any payments will be made under any of our policies.

4 These conditions are not applicable to benefits payable under Flight & Travel Accident Insurance.

Right to be Reimbursed (Subrogation) and Third Party Recovery

As a condition to receiving benefits under this certificate of insurance, you agree that if you have a claim or right of action against any person, company or organization for the loss or expenses for which under this certificate of insurance we have made payment, you shall, if requested by us, assign and transfer such claim or right of action to us. You agree that you will do nothing to prejudice our rights to recover, and you will cooperate fully with us and to allow us, at our own expense, to bring a law suit in your name against the third party. In the event that you institute a demand or action in connection with the losses or expenses for which under this certificate of insurance we have made payment, you agree to:

1 Immediately notify us of this claim and provide the name and address of the lawyer or firm pursuing this action on your behalf;

2 Advise the lawyer or firm acting on your behalf about our right to be reimbursed under this certificate of insurance, and instruct any such lawyer or firm acting on your behalf to include as part of your action all amounts paid by us under this certificate of insurance;

3 Keep us informed on the status of your legal action and to provide us, free of charge with such reports as we may reasonably require and details of any settlement negotiations; and

4 Reimburse us for all emergency medical, hospital, and related costs paid under the certificate of insurance from any amounts you receive from a third party responsible (in whole or in part) for your injury or sickness whether such amounts are paid under a judgment or settlement agreement.
Definitions

The following are our definitions and apply when bolded and written in italics throughout this document.

**Accidental bodily injury** – bodily injury caused by an accident of external origin occurring during the period of insurance and being the direct and independent cause of the loss.

**Business meeting** – a meeting, trade show, training course, or convention scheduled before your effective date between companies with unrelated ownership, pertaining to your full-time occupation or profession and that is the sole purpose of your trip. Legal proceedings are not considered to be a business meeting.

**Caregiver** – the permanent, full-time person entrusted with the well-being of your dependant(s) and whose absence cannot reasonably be replaced.

**Catastrophic event** – total eligible Cancellation & Interruption Insurance claims arising directly or indirectly from an act of terrorism, or series of acts of terrorism, occurring within a 72-hour period that exceed $1,000,000.

**Children** – dependent unmarried persons who are your natural, adopted or step-children, and are:

a. under 21 years of age; or
b. under 26 years of age if full-time students; or

c. your child of any age who is mentally or physically disabled.

**Commercial rental agency** – a car rental agency licensed under the law of its jurisdiction.

**Contamination** – the poisoning of people by nuclear, chemical and/or biological substances which causes illness and/or death.

**Departure point** – the place you depart from on the first day of your intended travel period, as shown on your trip itinerary insured by us.

**Dismemberment** – actual severance through or above your wrist or ankle joint.

**Effective date** – your effective date is shown on your insurance application/confirmation of coverage:

**Emergency Medical coverage, Travel Accident coverage and Baggage & Personal Effects coverage**:

- subsequent to your start-up date, the date on which you are scheduled to leave your departure point.

**Cancellation & Interruption coverage**:

- if your pre-paid travel arrangements are purchased before your start-up date, the effective date is the date your Deluxe Package Multi-Trip Annual Plan is purchased. If your pre-paid travel arrangements are purchased after your start-up date, your effective date is the date and time you purchased your prepaid travel arrangements, and before any cancellation penalties are in effect.

**Flight Accident coverage**:

- subsequent to your start-up date, the date and time shown on your passenger plane ticket.

**Top-up coverage**:

- 12:01 a.m. on the day following the date of expiry of your prior coverage; or

- if you purchase top-up coverage for the beginning portion of your intended travel period, your effective date is set out in the points above, based on the coverage you purchase as top-up (Not applicable if Deluxe Package Multi-Trip Annual Plan is purchased as top-up to your travel insurance included with your credit card coverage).

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

**Expire date** – the date on which your coverage ends under this insurance, as shown on your insurance application/confirmation of coverage.
**Government health insurance plan** – the health insurance coverage that Canadian provincial and territorial governments provide for their residents.

**Hospital** – 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.


**Insurance application/confirmation of coverage** – the document provided by us or through your online application which confirms the insurance coverage you have purchased. The insurance application/confirmation of coverage forms part of the insurance contract.

**Key employee** – an employee whose continued presence is critical to the ongoing affairs of the business during your absence.

**Loss of sight** – entire and permanent loss of eyesight.

**Medical condition** – Any disease, illness or injury (including symptoms of undiagnosed conditions).

**Medical questionnaire** – the form that contains questions that must be answered correctly at the time of insurance application/confirmation of coverage, and that, once completed and signed, forms part of the insurance contract. Your medical condition at the time of completion of the medical questionnaire determines the terms of coverage and/or the premium that apply to you.

**Mountain climbing** – the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pick-axes, anchors, bolts, carabiners and lead-rope or top-rope anchoring equipment.

**Network** – the hospitals, physicians and other medical service providers recognized by us at the time of the emergency.

**Passenger plane** – a certified multi-engined transportation aircraft provided by a regularly scheduled airline on any regularly scheduled trip operated between licensed airports and holding a valid Canadian Air Transport Board or Charter Air Carrier licence, or its foreign equivalent, and operated by a certified pilot.

**Period of insurance** – the period of time between your effective date and your return date.

**Physician** – A person who is not you or a member of your immediate family or your traveling companion, licensed in the jurisdiction where the services are provided, to prescribe and administer medical treatment.

**Pre-existing medical condition** – Any medical condition that exists prior to your effective date.

**Prescription drug** – drug or medicine that can only be issued upon the prescription of a licensed physician or dentist and is dispensed by a licensed pharmacist. Prescription drug does not mean such drug or medicine when you need (or renew) them to continue to stabilize a condition which you had before your trip, or a chronic condition.

**Professional** – engaged in a specified activity as your main paid occupation.

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

a Under Deluxe Package Multi-Trip Annual Plan, 11:59 p.m. on the last day of your purchased option (9, 16, or 30 day option);

b Under Flight Accident:
the return date and time shown on your passenger plane ticket. Your trip must be within your purchased option (9, 16, or 30 day option);

c If you purchase top-up coverage, your return date is 11:59 p.m. on the last day of your extended coverage. (Note: if you purchased your Deluxe Package Multi-Trip Annual Plan as top-up to your travel insurance included with your credit card coverage, the duration of your top-up coverage cannot exceed your purchased option (9, 16, or 30 day option).)

If you purchase top-up coverage for the beginning portion of your intended travel period, your return date is 11:59 p.m. on the day before the effective date of your subsequent coverage.

Schedule change – the later departure of an airline carrier causing you to miss your next connecting flight via a different airline carrier (or connecting cruise ship, ferry, bus or train), or the earlier departure of an airline carrier rendering unusable the ticket you have purchased for your prior connector flight via a different airline carrier (or connecting cruise ship, ferry, bus or train). Schedule change does not mean a change resulting from a supplier default, strike or a labour disruption.

Spouse – the person who is legally married to you, or has been living in a conjugal relationship with you for a continuous period of at least one year and who resides in the same household as you.

Stable – A medical condition is considered stable when all of the following statements are true:

- there has not been any change to any existing prescribed drug (including an increase, decrease, or stoppage to prescribed dosage), or any recommendation or starting of a new prescription drug, and
- the medical condition has not become worse, and
- there has not been any new, more frequent or more severe symptoms, and
- there has been no hospitalization or referral to a specialist, and
- there have not been any tests, investigation or treatment recommended, but not yet completed, nor any outstanding test results, and
- there is no planned or pending treatment.

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

Start-up date –

- for Cancellation insurance coverage, the date you purchase your Deluxe Package Multi-Trip Annual Plan insurance, as stated on your insurance application/confirmation of coverage.
- for Emergency Medical, Trip Interruption, Baggage & Personal Effects, Flight and Travel Accident insurance coverage, the date of your insurance application/confirmation of coverage; or the date you designate as the date of your departure on your first trip under this insurance, as entered on your insurance application/confirmation of coverage. This date cannot be more than 180 days from the date of your insurance application/confirmation of coverage. Coverage for each subsequent trip starts each date you leave your province or territory of residence and is based on your purchased option of: 9 consecutive days under the 9-Day option, 16 consecutive days under the 16-Day option, 30 consecutive days under the 30-Day option (while you travel outside of Canada).
Terrorism or act of terrorism – an act, including but not limited to the use of force or violence and/or the threat thereof, including hijacking or kidnapping, of an individual or group in order to intimidate or terrorize any government, group, association or the general public for religious, political or ideological reasons or ends, and does not include any act of war (whether declared or not), act of foreign enemies or rebellion.

Top-up –

a the coverage you purchase from us to add to your insurance beyond the duration covered under your Deluxe Package Multi-Trip Annual Plan; or

b the Deluxe Package Multi-Trip Annual Plan coverage you purchase from us to complement travel insurance included with your credit card coverage that is in effect for the initial portion of your trip duration and value.

Travelling companion – the person who is sharing travel arrangements with you, to a maximum of three persons.

Treat, Treated, Treatment – 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.

Trip – the period of time between leaving your departure point up to and including your return date.

Unannounced Strike – means any sudden or spontaneous work stoppage (whether or not organized or sanctioned by a labour union) which:

a is not announced in any media, and

b causes the delay of your departure and/or arrival of a common carrier (such as a passenger plane, ferry, cruise ship, bus, limousine, taxi or train).

Vehicle – a private passenger automobile, motorcycle, minivan, mobile home, camper truck or trailer home which you use during your trip exclusively for the transportation of passengers other than for hire. It can be either owned by you or leased by you from a commercial rental agency.

We, us and our refer to RBC Insurance Company of Canada and any services provided by Allianz Global Assistance.

You and your refer to the person named as the insured on the insurance application/confirmation of coverage when the required insurance premium has been paid before the effective date.

RBC Insurance Company of Canada
6880 Financial Drive
Mississauga, Ontario
L5N 7Y5

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