



ZURICH®

TravelCare Insurance Policy

In consideration of the payment of premium and subject to the definitions, exclusions, limitations, provisions and terms contained herein, endorsed hereon, or attached hereto, we agree to insure the *insured person(s)* named in the *schedule* issued in relation to an *insured journey* and promise to pay indemnity for loss to the extent provided herein.

Part 1 – Definition

Certain words in this policy have specific meanings. We have printed these words in italics throughout this policy and have given the meanings below:

<i>Accident</i>	a sudden and unforeseen event that happens unexpectedly and causes <i>injury</i> during an <i>insured journey</i> .
<i>China</i>	the territorial limit of the People's Republic of China, but excluding <i>Hong Kong</i> and <i>Macau</i> .
<i>Chinese Medicine Practitioner</i>	a registered Chinese medicine practitioner under the Chinese Medicine Ordinance (Cap.549, Laws of Hong Kong) but excluding a Chinese medicine practitioner who is the <i>insured person</i> or an <i>immediate family member</i> of the <i>insured person</i> .
<i>Compulsory Quarantine</i>	the <i>insured person</i> is being <i>confined</i> in an isolated ward of a <i>hospital</i> or kept in an isolated site appointed by the government for at least one full day and continuously stays in there until discharged from the quarantine.
<i>Confined/Confinement</i>	the <i>insured person</i> is registered as an in-patient in a <i>hospital</i> for medical treatment for an injury or illness upon the recommendation of a <i>medical practitioner</i> and continuously stays in the <i>hospital</i> prior to his/her discharge from the <i>hospital</i> . <i>Hospital</i> confinement will be evidenced by a daily room and board charge by the <i>hospital</i> .
<i>Documents</i>	documents include <i>schedule</i> , enrollment form, riders, endorsements, attachments and amendments.
<i>Effective Date</i>	when applying to single trip travel plan, it means the application date of this policy; when applying to annual travel plan, it means either (i) the application date of this policy or (ii) the date stated on the receipt issued by the travel agent or <i>public common carrier</i> for the confirmation of payment of <i>travel ticket</i> or tour, whichever is the later.
<i>Hong Kong Hospital</i>	the Hong Kong Special Administrative Region of the People's Republic of China. an establishment which meets all the following requirements: • holds a licence as a hospital (if licensing is required in the state or governmental jurisdiction); and • operates primarily for the admission, care and treatment of sick, ailing or injured persons as in-patients; and • provides 24-hour a day nursing service by registered or graduated nurses; and • has a staff of one or more licensed <i>medical practitioner</i> available at all times; and • provides organized facilities for diagnosis and major surgical facilities; and • is not primarily a clinic, nursing, rest or convalescent home or similar establishment or a place for alcoholics or drug addicts.
<i>Illness</i>	sickness or disease of the <i>insured person</i> contracted and commenced during the <i>insured journey</i> and which results in a loss covered by this policy
<i>Immediate Family Member</i>	the <i>insured person's</i> spouse, parent, parent-in-law, grandparent, son or daughter, brother or sister, grandchild or legal guardian.
<i>Infectious Disease</i>	any kinds of infectious disease with human-to-human spread in a large cluster(s) of a local population and which is announced by the World Health Organization.
<i>Injury</i>	bodily injury sustained in an <i>accident</i> directly and independently of all other causes.
<i>Insured Journey</i>	when applied to single trip travel plan for group tour travel, it means the period of travel commencing from the time when the <i>insured person</i> arrives at the venue designated by the tour agent as the meeting point for the purpose of commencing the group tour and until the time when the <i>insured person</i> arrives at the appointed dismissal place upon the completion of such group tour. For <i>insured person</i> who is not returning to <i>Hong Kong</i> on the same day after the completion of the group tour, the period of travel shall terminate when the <i>insured person</i> arrives at any <i>Hong Kong</i> Immigration Department office/counter for returning to <i>Hong Kong</i> on the return day as specified in the schedule. However, any period of insurance should not exceed 180 days for single trip travel plan. When applied to single trip travel plan for free itinerary travel, it means the period of travel commencing from the time when the <i>insured person</i> departs from an immigration counter in the territory of <i>Hong Kong</i> in order to depart from the territory of <i>Hong Kong</i> , until the time when the <i>insured person</i> (i) returns to <i>Hong Kong</i> on the date specified in the schedule or (ii) arrives at any immigration counter in the territory of <i>Hong Kong</i> in order to re-enter <i>Hong Kong</i> , whichever is the earlier, whichever is the earlier. However, any period of insurance should not exceed 180 days for single trip travel plan. When applied to annual travel plan, it means each period of travel commencing from the time when the <i>insured person</i> departs from an immigration counter in the territory of <i>Hong Kong</i> in order to depart from the territory of <i>Hong Kong</i> , until (i) the time when the <i>insured person</i> arrives at any immigration counter in the territory of <i>Hong Kong</i> in order to re-enter <i>Hong Kong</i> or (ii) the expiration of a ninety (90) days period beginning from the date of each journey, whichever is the earlier during a policy year.
<i>Insured Person</i>	the person named in the <i>schedule</i> or subsequently endorsed hereon as insured person.
<i>Itinerary</i>	the detailed plan for a journey issued and confirmed by <i>public common carrier</i> , travel agency, tour operator or cruise company, together with the payment receipt or confirmation, prior to the commencement of the <i>insured journey</i> .
<i>Lap-top Computer</i>	a lap-top, notebook or sub-notebook computer. Personal digital assistant (PDA), hand-held computer (HHC) and tablet PC of any kind are excluded from this category.
<i>Loss of Hearing</i>	<i>permanent</i> irrecoverable loss of hearing where: If a dB = Hearing loss at 500 Hertz If b dB = Hearing loss at 1,000 Hertz If c dB = Hearing loss at 2,000 Hertz If d dB = Hearing loss at 4,000 Hertz 1/6 (a+2b+2c+d) is above 80dB.
<i>Loss of Limb</i>	loss by physical separation at or above the wrist or ankle joint.

Part 2 – Benefits

Plans and section benefits contained hereunder are applicable in accordance with the plan level shown on the *schedule*.

Section	Coverage	Maximum Benefits Per Insured Person Per Insured Journey (HKD)		
		Alpine Plan	Vantage Plan	China Plan
1.	Medical Cover			
(a)	Medical Expenses including: – Sub-limit for follow-up medical expense due to accidental <i>injury</i> - 100% of <i>maximum benefits</i> – Sub-limit for follow-up medical expenses due to <i>illness</i> - 5% of <i>maximum benefits</i> – Additional benefits: Overseas travelling expenses for seeking medical treatment	1,000,000	300,000	250,000
(b)	Overseas <i>Hospital</i> Daily Cash Benefit	300	300	300
(c)	Additional Benefits: <i>Hospital confinement</i> or quarantine cash allowance due to <i>infectious disease</i> Hotel Room Accommodation for Convalescence and Travelling Expenses	5,000 (500 per day) 3,000 (300 per day) 30,000	5,000 (500 per day) 3,000 (300 per day) 10,000	Not applicable 1,500 (150 per day) 10,000
2.	Global Emergency Assistance	One economy class round-trip <i>travel ticket</i> Actual Cost Actual Cost One economy class one-way <i>travel ticket</i> and up to 30,000 39,000 One economy class one-way <i>travel ticket</i> and hotel accommodation expenses up to 7,800 Included		
(a)	Compassionate Visit			
(b)	Emergency Medical Evacuation			
(c)	Repatriation of Mortal Remains			
(d)	Return of Unattended Children			
(e)	Deposit Guarantee for <i>Hospital</i> Admission			
(f)	Travelling and Accommodation Expenses			
(g)	24-hour Telephone Hotline and Referral Services			
3.	Personal <i>Accident</i>			
(a)	<i>Accident</i> on <i>Public Common Carrier</i> or during robbery	1,200,000	600,000	600,000
(b)	Other <i>Accidents</i>	600,000	300,000	300,000
(c)	Burns Cover	600,000	300,000	150,000
4	Compassionate Death Cash and Visit – Including one economy class round-trip <i>travel ticket</i> and hotel accommodation expenses up to maximum	10,000 30,000	10,000 5,000	10,000 5,000
5	Personal Baggage Cover – Sub-limits: - HKD3,000 per item, pair, set or collection - HKD10,000 for lap-top computer An aggregate limit of HKD5,000 for all cameras, camcorders and their accessories and related equipment	20,000	5,000	3,000

Loss of Sight Loss of Speech

Loss of Use

Maximum Benefits

Medically Necessary Expenses

Medical Practitioner

Permanent

Permanent Total Disablement

Pre-existing Condition

Principal Home

Public Common Carrier

Schedule Serious Physical Injury or Serious Illness

Terrorism

Third Degree Burns Travel Companion

Travel Ticket Voluntary Travel Insurance Policy

War

We, Us or Our

the entire and *permanent* irrecoverable loss of sight.

the disability in articulating any three of the four sounds which contribute to the speech such as the labial sounds, the alveololabial sounds, the palatal sounds and the velar sounds or total loss of vocal cord or damage of speech centre in the brain resulting in aphasia.

permanent total functional disablement or complete and permanent physical separation at or above the wrists or ankle joints.

the benefit amount of each of the benefits covered under this policy as stated in the Table of Benefits.

expenses incurred from the first day of sustaining an *injury* or *illness* during the *insured journey* which are paid by the *insured person* to a legally qualified *medical practitioner*, physiotherapist, nurse, *hospital* and/or ambulance service for medical, surgical, X-ray, *hospital* or nursing treatment including the cost of medical supplies and ambulance hire but excluding any expenses incurred under Section 2(b) - Emergency Medical Evacuation or Section 2(c) - Repatriation of Mortal Remains of Part 2 of this policy. All treatments must be prescribed by a qualified *medical practitioner* in order for expenses to be reimbursed under this policy. In the event an *insured person* becomes entitled to a refund of all or part of such expenses from any other source, we will only be liable for the excess of the amount recoverable from such other sources.

a person other than the *insured person* or *immediate family member*, qualified by degree in western medicine and legally authorized in the geographical area of his/her practice to render medical and surgical services.

the period of 12 consecutive months from the date of an *accident* and at the expiry of that period being beyond hope of improvement.

when as the result of *injury* and commencing within 12 consecutive months from the date of an *accident* in which the *insured person* is totally and permanently disabled and prevented from engaging in each and every occupation or employment for compensation or profit for which the *insured person* is reasonably qualified by reason of the *insured person's* education, training or experience, or if the *insured person* has no business or occupation, it means the inability of the *insured person* to perform any activities which would normally be carried out by the *insured person* in his/her daily life.

the *insured person* received medical treatment, diagnosis consultation or prescribed drugs, or a condition for which medical advice or treatment was recommended by a *medical practitioner* before the *effective date*.

the house or building located in *Hong Kong* occupied as a private dwelling by the *insured person* as his/her only permanent residence.

any mechanically propelled conveyance operated by a company or an individual licensed to carry passengers for hire, including but not limited to bus, coach, ferry, hovercraft, hydrofoil, ship, train, tram or underground train, and any fixed-wing aircraft provided and operated by an airline or an air charter company which is duly licensed for the regular transportation of fare-paying passengers and operating only between established commercial airports.

the schedule attached to and incorporated in this policy.
an injury or illness which requires treatment by a *medical practitioner* or serious illness results in the *insured person* or *travel companion* being certified by that *medical practitioner* as being unfit to travel or continue with the *insured person's* original travel arrangement and having to be *confined* in a *hospital*. Serious physical injury or serious illness shall also include such injury or illness due to which the *insured person* or *travel companion* is being denied to board the scheduled *public common carrier* or is being denied to enter into the scheduled destination by any legal, governmental or airport authorities. When serious physical injury or serious illness is applied to the *immediate family member(s)*, it shall mean injury or illness for which the *immediate family member* requires treatment, and which is certified by *medical practitioner* as being dangerous to life and having to be *confined* in a *hospital*, and which results in the *insured person's* discontinuation or cancellation of his/her original *insured journey*.

an act of terrorism includes any act, preparation or threat of action including the intention to influence any government de jure or de facto of any nation or any political division thereof and/or to intimidate the public or any section of the public of any nation, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organization(s) or government(s) de jure or de facto committed for political, religious, ideological, or similar purposes, and which

- involves violence against one or more persons; or
- involves damage to property; or
- endangers life other than that of the person committing the action; or
- creates a risk to the health or safety of the public or a section of the public; or
- is designed to interfere with or disrupt an electronic system.

full thickness skin destruction due to burns.
the person who made the travel booking or reservation with the *insured person* and accompanied the *insured person* for the whole insured journey other than the tour guide or the tour member.

a travel ticket purchased for travelling on any *public common carrier*.

travel insurance policy actually paid by the *insured person* or the proposer as stated on the application form of such policy. Any group travel insurance policy which is actually paid by any company, group, or association to insure the *insured person* shall be excluded from this definition.

a contest by force between two or more nations, carried on for any purpose; or armed conflict of sovereign powers; or declared or undeclared and open hostilities; or the state of nations among whom there is (i) an interruption of peaceful relations and (ii) a general contention by force, both authorized by the sovereign.

Zurich Insurance Company Ltd.

Section	Coverage	Maximum Benefits Per Insured Person Per Insured Journey (HKD)		
		Alpine Plan	Vantage Plan	China Plan
6	Loss of Personal Money	3,000	2,000	2,000
7	Credit Card Protection	15,000	10,000	5,000
8	Loss of Travel Document and/or Travel Ticket	40,000	2,000	2,000
9	Loss of Home Contents due to Burglary	100,000	50,000	5,000
10	Personal Liability	2,500,000	1,500,000	1,500,000
11	Travel Delay			
(a)	Travel Delay (HKD 300 for each and every full 6 hours' delay)	2,100	900	300
(b)	Extra Hotel Cost due to Travel Delay	1,000	1,000	Not applicable
(c)	Extra Re-routing Costs due to Travel Delay	12,500	5,000	Not applicable
12	Baggage Delay Allowance (for delay over 6 hours)	1,000	500	300
13	Cancellation of Trip			
(a)	Cancellation of Trip; or	30,000	7,500	3,000
(b)	Single Occupancy	10,000	2,500	1,000
14	Curtailment of Trip	30,000	7,500	3,000
15	Unauthorized Use of Lost Credit Card	3,000	3,000	3,000
16	Rental Vehicle Excess	5,000	5,000	5,000
17	Missed Event Cover	2,000	1,000	300
18	MediExpress China Medical Card Service (applicable to annual travel plan only)	Included	Included	Not applicable

Section 1 – Medical Cover

(a) Medical Expenses

If the insured person suffers from injury or illness during the insured journey and incurs reasonable medically necessary expenses, we will reimburse the actual medically necessary expenses to the insured person.

Follow-up Medical Expenses

This section also insures the insured person up to the sub-limit as stated in the Table of Benefits against any actual medically necessary expenses charged by a medical practitioner in Hong Kong for the continuation of medical treatment sought by the insured person for the above injury or illness within three months after the insured person's return to Hong Kong. The Follow-up Medical Expenses shall also be extended to cover the medical expenses incurred for the same purpose paid to the Chinese medicine practitioner (up to maximum five visits), or for the purposes of Chinese medicine bone-setting, acupuncture or chiropractic treatment subject to an aggregate limit of HKD3,000 and a per visit and per day limit of HKD150. No Follow-up Medical Expenses shall be provided if the insured person returns to Hong Kong after 12 consecutive months from the first day of the above injury or illness was sustained. In no event shall the total amount payable under this Section 1(a) - Medical Expenses exceed 100% of the maximum benefits as stated in the Table of Benefits.

Extension to Section 1(a)

Under this section, we extend to reimburse:

- (i) any additional travelling expenses up to a maximum of HKD300 incurred by the insured person for the purpose of seeking medical treatment in an overseas hospital if the insured person suffers from injury or illness during the insured journey; and
- (ii) any actual medically necessary expenses charged by a medical practitioner in Hong Kong for the medical treatment sought by the insured person for infectious disease that is contracted during the insured journey and corresponding follow-up diagnosis within ten days after the insured person's return to Hong Kong. The total amount payable under this extension (ii) shall not exceed the sub-limit for follow-up medical expenses due to illness as stated in the Table of Benefits.

For insured person aged at or over 76 years upon the commencement of the insured journey, the maximum indemnity payable in regard to medical expenses pursuant to this section 1(a) (except for the travelling expenses under Extension to Section 1(a) (i)) will be 50% of the maximum benefits as stated in the Table of Benefits.

(b) Overseas Hospital Daily Cash Benefit

If the insured person is confined in an overseas hospital due to an injury or illness during the insured journey, we will pay a daily allowance of HKD500 and up to the maximum benefits as stated in the Table of Benefits.

Extension to Section 1(b) - Hospital Confinement or Quarantine Cash Allowance due to Infectious Disease

If the insured person is confined in an overseas hospital due to infectious disease during the insured journey, we will pay a daily hospital confinement allowance of HKD300 (for Alpine and Vantage Plan) or HKD150 (for China Plan) and to a maximum of ten days.

In the event that the insured person is suspected or confirmed to have contracted infectious disease during the insured journey and results in compulsory quarantine by the local government, or by the Hong Kong Government within three days upon completion of the insured journey and returning to Hong Kong, we will pay the insured person a daily quarantine allowance of HKD300 (for Alpine and Vantage Plan) or HKD150 (for China Plan) and to a maximum of ten days at a maximum amount of HKD3,000. In the event that more than one compulsory quarantine has been arisen in the same insured journey, the maximum amount payable under this benefit shall not exceed the maximum benefits as stated in the Table of Benefits.

The insured person can only claim for either overseas hospital confinement allowance or quarantine allowance. In no event shall the total amount payable under this extension exceeds the maximum benefits as stated in the Table of Benefits.

Special Conditions applicable to Overseas Hospital Confinement or Quarantine Cash Allowance due to Infectious Disease

- 1. This benefit is only payable when the relevant infectious disease has been rated at phase 5 or above under the Epidemic and Pandemic Alert and Response by the World Health Organization on or before the first day of compulsory quarantine of the insured person during the insured journey, or the Hong Kong Government has activated the Government's Preparedness Plan for Influenza Pandemic to the highest level – Emergency Response Level on or before the first day of compulsory quarantine of the insured person in Hong Kong.
- 2. Any dwelling quarantine is excluded from this benefit.
- 3. No benefit shall be payable if the planned destination(s) has been declared as an infected area on or before the departure date of the insured journey.

(c) Hotel Room Accommodation for Convalescence and Travelling Expenses

Where the insured person has suffered from serious physical injury or serious illness which necessitates hospital confinement in the insured journey, and upon his/her discharge from the hospital and as recommended by the attending medical practitioner to convalesce before continuing with the travelling, we will pay for the actual cost of hotel accommodation incurred overseas for the sole purpose of convalescence and subject to HKD1,000 per day. We will also pay for the additional one-way travel ticket (economy class only) incurred for the insured person to return to Hong Kong.

In no event shall the total amount payable under this Section 1(c) - Hotel Room Accommodation for Convalescence and Travelling Expenses exceed 100% of the maximum benefits as stated in the Table of Benefits.

Exclusions applicable to Section 1

This section does not cover:

- 1. non-essential medical treatment that is not recommended by a medical practitioner;
- any loss or medical expenses arising from any travel contrary to the advice of a medical practitioner or for the purpose of receiving medical or surgical treatment;
- 3. dental care and treatment unless such cost is necessarily incurred due to the necessary dental treatment for the sound and natural teeth of the insured person and is caused by injury during the insured journey; cosmetic surgery, refractive errors of eyes or hearing-aids, and prescriptions therefor except necessitated by injury occurring during the insured journey;
- 5. surgery or medical treatment which is not substantiated by a written report from a qualified medical practitioner;
- 6. surgery or medical treatment when in the opinion of the qualified medical practitioner treating the insured person, the treatment can be reasonably delayed until the insured person returns to Hong Kong;
- 7. any follow-up medical expenses paid to the Chinese Medicine Practitioner, Chinese medicine bone-setter, acupuncturist or chiropractor who is the insured person or immediate family member; or
- 8. any additional cost of single or private room accommodation at a hospital or charges in respect of special or private nursing except in the event of an emergency medical evacuation or repatriation under Section 2(b) - Emergency Medical Evacuation; non-medical personal services such as radio, telephone and the like; procurement or use of special braces, appliances or equipment.

Section 2 – Global Emergency Assistance

Zurich Emergency Assistance will arrange for the following benefits in the event that the insured person has suffered from injury or illness during the insured journey and pay for any costs and expenses arising thereof:

(a) Compassionate Visit

In the event that the insured person suffered from serious physical injury or serious illness and being confined in a hospital outside Hong Kong for over three consecutive days, Zurich Emergency Assistance will pay one economy class round-trip travel ticket for one immediate family member to travel to the location of the insured person, and hotel accommodation expenses necessarily and unavoidably incurred by the immediate family member up to a maximum of HKD700 per day and a maximum of five days. This benefit can be claimed not more than once during any one insured journey.

(b) Emergency Medical Evacuation

The actual cost of transportation, medical services and medical supplies necessarily and unavoidably incurred as a result of an emergency medical evacuation or repatriation of the insured person. The timing, means and final destination of evacuation will be decided by Zurich Emergency Assistance and will be based entirely upon medical necessity.

(c) Repatriation of Mortal Remains

The reasonable and unavoidable expenses for transporting the insured person's mortal remains from the

place of death back to either Hong Kong, or the cost of local burial at the place of death as approved by Zurich Emergency Assistance.

(d) Return of Unattended Children

Zurich Emergency Assistance will arrange and pay the one-way economy class travel ticket for returning the insured person's unattended child(ren) aged below 17 year old back to Hong Kong in the event of death or confinement of the insured person in a hospital outside Hong Kong for over three consecutive days due to serious physical injury or serious illness, up to the maximum benefits as stated in the Table of Benefits. If necessary, Zurich Emergency Assistance will also arrange a qualified attendant to accompany the unattended child(ren) during the return journey.

(e) Deposit Guarantee for Hospital Admission

Upon admission to a hospital, Zurich Emergency Assistance provides guarantee for the medical expenses incurred by the insured person in the hospital up to a limit of HKD39,000 in respect of any one insured person. Such expenses are to be borne by the insured person unless otherwise covered under Section 1 - Medical Cover of Part 2 of this policy.

(f) Travelling and Accommodation Expenses

Zurich Emergency Assistance shall pay the one-way economy class travel ticket and hotel accommodation expenses necessarily and unavoidably incurred by the insured person in connection with any incident requiring emergency evacuation (pursuant to section 2(b) above) to resume the course of the insured person's insured journey or to return him/her to Hong Kong up to a maximum of HKD1,950 per day and up to a limit of HKD7,800 per insured journey. Prior approval and determination of Zurich Emergency Assistance on the payment of the expenses incurred by the insured person shall be based entirely on medical necessity.

(g) 24-hour Telephone Hotline and Referral Services

- (i) Pre-trip Information Assistance
- (ii) Embassy Referral
- (iii) Medical Service Provider Referral
- (iv) Lost Passport Assistance
- (v) Lost Luggage Assistance
- (vi) Interpreter Referral
- (vii) Lawyer Referral
- (viii) Telephone Medical Advice
- (ix) Monitoring of Medical Condition When Hospitalized
- (x) Arrangement for Medical Expenses Guarantee

In respect of services (ix) and (x) above, all hospitalization expenses or medical expenses charged to the insured person by a hospital or physicians other than our approved doctors, or any other medical professions are to be borne by the insured person unless otherwise covered under this policy.

ZURICH EMERGENCY ASSISTANCE is the service provider nominated by Zurich Insurance Company Ltd. Exclusions applicable to Section 2

No service will be provided or paid under this section:

- 1. when the insured person is located in areas which represent war risks or political conditions such as to make the provision of services under this section impossible or reasonably impracticable;
- 2. for emergency medical evacuation or repatriation of mortal remains or other cost not approved in advance and in writing and/or not arranged by Zurich Emergency Assistance. This exclusion shall not apply to emergency medical evacuation from remote or primitive areas where Zurich Emergency Assistance cannot be contacted in advance and delay might reasonably be expected to result in loss of life or extreme prejudice to the insured person's prospect;
- 3. when the insured person is residing or travelling outside Hong Kong contrary to the advice of a medical practitioner; or
- 4. when the insured person is residing or travelling outside Hong Kong for the purpose of obtaining medical treatment or for rest and recuperation following any prior accident or illness.

Section 3 – Personal Accident

(a) Accident on Public Common Carrier or during Robbery

In the event that during the insured journey the insured person suffers from injury while:

- (i) riding solely as a passenger (not as operator, pilot, or crew member) in or on, boarding or alighting from any public common carrier; or
- (ii) being an innocent victim in a robbery or attempted robbery including escape of the perpetrators therefrom;

we will pay in accordance with the percentage stated in the Compensation Table hereunder up to the maximum benefits as stated in the Table of Benefits, but only to the extent and provided that such injury results in any Event listed in the Compensation Table within 12 consecutive months after the date of the accident. This cover shall not apply to any insured person aged 17 year old or below or any insured person aged at 76 or above on the commencement date of the insured journey.

(b) Other Accidents

In the event that the insured person suffers from injury resulting from accident other than the accident referred in Section 3(a) "Accident on Public Common Carrier or during Robbery" above, during the insured journey, we will pay up to the maximum benefits as stated in the Table of Benefits in accordance with the percentage stated in the Compensation Table hereunder up to the maximum benefits as stated in the Table of Benefits, but only to the extent and provided that if such injury results in any one of the following Events within 12 consecutive months after the date of the accident.

Compensation Table	
Events	Percentage of Maximum Benefits
Accidental Death and Disablement	
1. Death	100%
2. Permanent Total Disablement	100%
3. Permanent and Incurable Paralysis of all Limbs	100%
4. Permanent Total Loss of Sight of both Eyes	100%
5. Permanent Total Loss of Sight of one Eye	100%
6. Loss of or the Permanent Total Loss of Use of two Limbs	100%
7. Loss of or the Permanent Total Loss of Use of one Limb	100%
8. Loss of Speech and Hearing	100%
9. Permanent Total Loss of Hearing in	
(a) both ears	75%
(b) one ear	15%

- (i) Benefit shall not be payable for more than one of the Events listed above in respect of the same accident. If more than one of the Events occur as a result of the same accident, we shall pay only for the Event for which the highest compensation will be payable under this section.
- (ii) The insurance for any insured person(s) under this policy shall terminate upon the occurrence of any compensation for which indemnity is payable under any one of the above Events, but such termination shall be without prejudice to any claim originating out of the accident causing such loss.
- (iii) When a limb or organ which had been partially disabled prior to an injury covered under this policy and which becomes totally disabled as a result of such injury, the Percentage of Maximum Benefits payable shall be determined by us having regard to the extent of disablement caused by the injury. However, no payment shall be made in respect of the loss of a limb or organ which was totally disabled prior to the injury.
- (iv) For insured person aged 17 year old or below or any insured person aged at or over 76 on the commencement of the insured journey, the maximum indemnity payable in regard to any accident as defined will be 50% of the maximum benefits as stated in the Table of Benefits and subject to the Percentage of Maximum Benefits as stated in the above Compensation Table.

(c) Burns Cover

In the event that the insured person suffers from third degree burns as a result of an accident during the

insured journey, we will pay in accordance with the percentage stated in the *Third Degree Burns Table* hereunder up to the *maximum benefits* as stated in the Table of Benefits, but only to the extent and provided that such *third degree burns* results in the specified damage to any one of the following specified Areas within 12 consecutive months after the date of the *accident*.

Third Degree Burns Table		Percentage of Maximum Benefits
Area	Damage as a percentage of total surface area	
Head	(a) Equal to or greater than 12% damage of total head surface area	100%
	(b) Equal to or greater than 8% but less than 12% damage of total head surface area	75%
	(c) Equal to or greater than 5% but less than 8% damage of total head surface area	50%
	(d) Equal to or greater than 2% but less than 5% damage of total head surface area	25%
Body	(a) Equal to or greater than 20% damage of total body surface area	100%
	(b) Equal to or greater than 15% but less than 20% damage of total body surface area	75%
	(c) Equal to or greater than 10% but less than 15% damage of total body surface area	50%

- Benefit shall not be payable for more than one of the Areas listed above in respect of the same *accident*. If damages occur to more than one of the Areas as a result of the same *accident*, we shall pay only for the Area for which the highest compensation will be payable under this section.
- When a limb or organ which had been partially disabled prior to an *injury* covered under this policy and which becomes totally disabled as a result of such *injury*, the Percentage of *Maximum Benefits* payable shall be determined by us having regard to the extent of disablement caused by the *injury*. However, no payment shall be made in respect of the loss of a limb or organ which was totally disabled prior to the *injury*.
- For *insured person* aged 17 year old or below or any *insured person* aged at or over 76 on the commencement of the *insured journey*, the maximum indemnity payable will be 50% of the *maximum benefits* as stated in the Table of Benefits and subject to the Percentage of *Maximum Benefits* as stated in the above *Third Degree Burns Table*.

Extension to Section 3

- Under this section, we extend to cover any *injury* sustained by the *insured person* while:
 - the *insured person* is travelling directly from his/her place of residence or place of regular employment in *Hong Kong* to an immigration counter in the territory of *Hong Kong* for the purpose of conducting immigration clearance procedures within three hours before the scheduled departure time of the *public common carrier* in which the *insured person* has arranged to travel for the purpose of commencing the *insured journey*; and
 - the *insured person* is travelling directly from an immigration counter in the territory of *Hong Kong* to his/her place of residence or place of regular employment within three hours after the actual arrival time of the *public common carrier* in which the *insured person* has arranged to travel for returning to *Hong Kong* from the *insured journey*.

2. Disappearance Clause

If the body of the *insured person* has not been found within one year after the date of the disappearance due to disappearance, sinking or wrecking of the aircraft or other *public common carrier* either on the ground or at sea in which the *insured person* was travelling at the time of the *accident* and under such circumstances as would otherwise be covered hereunder, it will be presumed that the *insured person* suffered death resulting from an *accident* covered by this policy at the time of such disappearance, sinking or wrecking.

Maximum Liability for Personal Accident

Where any individual life is insured under multiple policies which include Accidental Death and *Permanent* Disablement covers and are issued by us and/or our related companies, the maximum liability in respect of any one individual life under all Accidental Death and *Permanent* Disablement covers shall not exceed HKD5,000,000 in aggregate and each policy shall bear a proportionate share of the total loss.

Exclusion applicable to Section 3

This section does not cover any loss caused by an *injury* which is a consequence of any kind of disease and/or illness.

Section 4 – Compassionate Death Cash and Visit

In the event that the *insured person* dies (naturally or due to *accident*) during the *insured journey*, we will pay the Compassionate Death Cash as stated in the Table of Benefits to the estate of the *insured person* as emergency cash or for funeral expenses. We will also pay for one economy class round-trip *travel ticket* and the reasonable hotel accommodation expenses necessarily incurred and up to the *maximum benefits* as stated in the Table of Benefits to one *immediate family member* to travel over to the place where the *insured person* dies.

Section 5 – Personal Baggage Cover

We will pay the *insured person* up to the *maximum benefits* as stated in the Table of Benefits and subject to the sub-limits below, for the accidental loss of or damage to the personal possessions including luggage during the *insured journey* which are normally worn or carried by and owned by the *insured person*, provided that any personal possession and belonging that are kept inside an unattended vehicle are locked inside a trunk of the vehicle. We may make payment or at our option to reinstate or repair the personal possessions as we may elect, subject to due allowance for wear and tear and depreciation. If any damaged article is proven to be beyond economical repair, a claim will be dealt with as if the article has been lost.

Sub-limits applicable to Personal Baggage are as follows:

- HKD3,000 for any one article, pair, set or collection in respect of any one *insured person*.
- HKD10,000 for one *lap-top computer*.
- An aggregate maximum limit of HKD5,000 for all cameras and camcorders and their accessories and related equipment.

This section is extended to cover company possessions which would be normally carried by the *insured person* on a business trip, subject to the same *maximum benefits* as stated in the Table of Benefits and the sub-limits stated above.

In no event shall the total amount payable under this Section 5 - Personal Baggage Cover exceed 100% of the *maximum benefits* stated in the Table of Benefits.

Extension to Section 5

Golf Equipment

We will pay the *insured person* the cost of replacement or repair or arrangement for repair arising from the accidental loss of or damage to golf equipment, including but not limited to golf bags, golf balls, golf trolleys and umbrellas, whilst in transit to or from or whilst at any recognized golf club during the *insured journey*, subject to the sub-limits below and up to the *maximum benefits* stated in the Table of Benefits. Sub-limits applicable to this extension are as follows:

- HKD2,500 for any one article, pair, set or collection in respect of any one *insured person*; and
- The maximum amount we will pay under this extension shall not exceed HKD5,000 per *insured journey*.

Exclusions applicable to Section 5

This section does not cover:

- the following classes of property: business merchandise or sample, foodstuffs and/or medicine, tobacco, contact lenses, dentures and/or its appliances, animals, motor vehicles (including accessories), motorcycles, bicycles, boats, motors, or any other conveyances, household furniture, antiques, any kind of jewellery or accessories made of or contain any kind of gold, platinum, diamond, jade or pearl, mobile phone (including PDA phone, smart phone or similar device with telecommunications function and other accessories), money (including cheques, traveller's cheques, etc), plastic money (including the credit value of credit card, Octopus cards, etc), coupons or securities, bonds, negotiable instruments, tickets or documents;
- lap-top computer* with any problems or defects triggered by software and malicious code (including but not limited to download of such software);
- any loss not reported to the local police or public authority within 24 hours of discovery and such local report is not obtained;
- any loss or damage caused by wear, tear, gradual deterioration, insects, vermin, corrosion, rot, mildew, fungus, atmospheric conditions, the action of light, any process of heating, drying, cleaning, dyeing, alteration or repair, scratching, denting, breakdown, misuse, faulty workmanship or design, the use of faulty materials, or its resulting loss or damage;
- any loss or damage resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, *terrorism*, or action taken by government authorities in hindering, combating or defending against such an occurrence; destruction under quarantine or customs regulations, confiscation or detention by customs or other government officials or risk of contraband or illegal transportation or trade;
- any loss of property which occurs when it is not being on the same *public common carrier* as the *insured person*, or souvenirs or articles mailed or shipped separately;
- any loss of or damage to property which resumes to function normally after it has been fixed or repaired by a third party with no additional costs incurred by the *insured person*;
- any loss of property when it is left unattended in public place;
- in unlocked vehicle or in vehicle which is left unattended with no one inside, unless the property is locked inside a trunk of the vehicle;
- any loss of data recorded on tapes, cards, diskettes;
- damage to any brittle or fragile items such as glass or crystal;
- any loss of or damage to property while in the custody of a hotel or *public common carrier*, unless reported immediately on discovery in writing to such hotel or *public common carrier* within three days and a Property Irregularity Report is obtained if the event occurs in an aircraft;
- any loss claimed under Section 12- Baggage Delay Allowance of Part 2 of this policy arising from the same cause;
- any loss of or damage to property insured under any other insurance certificate/policy, or otherwise reimbursed by *public common carrier* or a hotel;
- loss of golf balls unless contained in the golf bag which is lost at the same time; or
- damage to golf balls in play.

Section 6 – Loss of Personal Money

We will reimburse the *insured person* for the loss of personal money, that is, cash, cheques, money order or traveller's cheques only, belonging to and being carried by the *insured person* or in a locked hotel room due to robbery, burglary or theft occurring during the *insured journey*, up to the *maximum benefits* stated in the Table

of Benefits.

Exclusions applicable to Section 6

This section does not cover:

- any loss not reported to the local police, or hotel management or public authority, as appropriate, within 24 hours upon discovery of loss and for which a relevant report is not obtained at the place of loss;
- loss of traveller's cheque not immediately reported to the local branch or agent of the issuing authority;
- shortage due to error, omission, exchange or depreciation in value;
- any unexplained loss or mysterious disappearance; or
- any loss arising from fraud or deception.

Section 7 – Credit Card Protection

If the *insured person* sustains *injury* during the *insured journey* which results in death, we will pay the outstanding balance of the *insured person*'s credit card as at the date of *accident* up to the *maximum benefits* stated in the Table of Benefits. No benefit shall be payable for corporate credit cards or supplementary cards. This cover shall not apply to any *insured person* aged 17 or below on the commencement of the *insured journey*.

Section 8 – Loss of Travel Document and/or Travel Ticket

We will pay the replacement cost of the *Hong Kong* Identity Card, credit cards, driving licence, *travel ticket* or travel document belonging to the *insured person* which is accidentally lost during the *insured journey*. In the event of the accidental loss of *travel ticket* and/or travel document belonging to the *insured person* during the *insured journey*, we will also reimburse the additional travelling expenses and/or accommodation expenses incurred by the *insured person*, provided that the travelling class and/or the room type for the accommodation shall not be better than the original travelling class and/or the room type for accommodation as stated in the *itinerary*.

In no event shall the total amount payable under this Section 8 - Loss of Travel Document and/or *Travel Ticket* exceed 100% of the *maximum benefits* stated in the Table of Benefits.

Exclusions applicable to Section 8

This section does not cover:

- any loss not reported to the local police within 24 hours upon discovery of loss and for which such police report is not obtained at the place of loss;
- any loss of travel document and/or visa and/or *travel ticket* which is not necessary for completing the *insured journey*;
- any unexplained loss or mysterious disappearance;
- any fine or penalties incurred due to non-replacement or late replacement of the documents by the *insured person*; or
- the replacement costs of both the temporary and permanent versions of the same travel document. In the event of such loss, the *insured person* may claim only one version of the same document.

Section 9 – Loss of Home Contents due to Burglary

We will pay for the loss or damage to the *home contents* within the *insured person*'s *principal home* in *Hong Kong* which is uninhabited during the *insured journey* as a direct result of burglary involving the use of forcible and violent entry to or exit from the premises, up to the *maximum benefits* as stated in the Table of Benefits.

We may make payment or at our sole discretion reinstate or repair the lost or damaged *home contents* subject to due allowance for wear and tear and depreciation, up to a maximum of HKD5,000 for any one article, pair, set or collection.

Special Definition applicable to Section 9

Home contents mean household goods, personal belongings, furniture, fixtures and fittings (including interior decorations) belonging to the *insured person* or a member living in the *principal home*.

Exclusions applicable to Section 9

This section does not cover:

- any loss or damage of bonds, bills of exchange, cash, coins, cheques, jewellery or accessories, promissory notes, postal or money orders, record or book or similar tokens, luncheon vouchers or other coupons, stored value cards, credit cards, deeds, documents of title, manuscripts, medals, passports, stamps, share certificates, contact or corneal lenses, mobile phones, travel tickets, foodstuffs, animals and motor vehicles (including accessories), motorcycles, boats, motors, any other conveyances, loss of data recorded on tapes, cards, diskettes or otherwise;
- any loss not reported to the police within 24 hours after the *insured person* returns to *Hong Kong* from the *insured journey* and for which a police report has not been obtained;
- shortage due to error, omission, exchange or depreciation in value; or
- special equipment or apparatus used in connection with any profession, business or employment.

Section 10 – Personal Liability

We will indemnify any amount which the *insured person* becomes legally liable to pay as compensation and/or legal expenses for an *accident* occurring during the *insured journey* which causes *injury* to a third party or damage to property of a third party, up to the *maximum benefits* as stated in the Table of Benefits. However, the *insured person* must not make any offer or promise of payment or admit liability to any other party, or become involved in any litigation without our prior written approval.

Exclusions applicable to Section 10

This section does not cover liability arising directly or indirectly from:

- any business, profession or trade;
- any wilful, malicious or unlawful act of the *insured person* or any criminal acts;
- any cause whatsoever liability to any person who is the *immediate family member* or relative or employer or employee of the *insured person*;
- contract;
- ownership, possession, use or control of any vehicle, aircraft, watercraft, land, buildings, firearms or animals;
- damage to property owned by or held in trust or in the custody of the *insured person* or the immediate family member or relative or employer of the *insured person*;
- any act of *terrorism*, regardless of any other cause or event contributing concurrently or in any other sequence to the loss; or
- any action in controlling, preventing, suppressing, retaliating against or responding to any such act of *terrorism*.

Section 11 – Travel Delay

In the event that the *public common carrier* in which the *insured person* has arranged to travel is delayed for at least six hours from the departure or arrival time specified in the *insured person*'s original *itinerary* as a result of strike or other industrial action, riot, civil commotion, hijack, *terrorism*, adverse weather conditions, natural disaster, mechanical and/or electrical breakdown of the *public common carrier*, or airport closure, we will pay the following benefits to the *insured person*:

(a) Travel Delay

HKD300 for each and every full six hours of delay up to the *maximum benefits* as stated in the Table of Benefits.

The period of delay will be calculated as follows:

- departure delay will be calculated from the original scheduled departure time of the *public common carrier* specified in the *itinerary* provided to the *insured person* until the actual departure time of (i) the original *public common carrier* or (ii) the first available alternative transportation offered by that *public common carrier*; or
- arrival delay will be calculated starting from the original arrival time specified in the *itinerary* provided to the *insured person*, until the actual arrival time of (i) the original *public common carrier* or (ii) the first available alternative transportation offered by that *public common carrier*.

The *insured person* can only claim for either departure or arrival delay of the same *public common carrier*. If the *insured person* has consecutive connecting flights, the delay is to be calculated based on the difference between actual arrival or departure time, as the case may be, and that stated on the *itinerary* regardless of the time spent on transit and the proximate cause of the delay must be one of the causes set out in the first paragraph of this Section 11(a).

(b) Extra Hotel Cost due to Travel Delay

The additional, reasonable and irrecoverable accommodation expenses incurred outside *Hong Kong*, as a result of the delay up to the *maximum benefits* as stated in the Table of Benefits.

(c) Extra Re-routing Costs due to Travel Delay

The additional costs incurred by the *insured person* for the purchase of the one-way economy class *travel ticket* in order to travel to the planned destination as specified in his/her original *itinerary* by an alternative *public common carrier*, up to the *maximum benefits* stated in the Table of Benefits. This benefit can be claimed not more than once during any one *insured journey*.

Special Condition applicable to Section 11

The *insured person* must check-in for the original scheduled *public common carrier* and all claims must be substantiated by written confirmation from the *public common carrier* on the number of hours of delay and the reason for such delay.

Exclusions applicable to Section 11

This section does not cover:

- delay of the *insured journey* as a result of any circumstance which is existing or announced before the *effective date*;
- any loss arising from late arrival of the *insured person* at the airport or port (i.e. arrival at a time later than the time required for check-in or booking except for the late arrival due to strike by the employees of the *public common carrier*);
- any loss in relation to alternations to original *itinerary* that is not verified by the airline, travel agency or other relevant organizations;
- any loss arising from airport closure due to air traffic control by local government or relevant authorities; or
- any circumstances covered by any other insurance scheme, government programme or which will be paid or refunded by travel agency, tour operator or other provider of any service forming part of the booked *itinerary* (except for Section 11(a) - Travel Delay).

Section 12 – Baggage Delay Allowance

In the event of the *insured person*'s checked-in baggage being delayed for over six hours after the *insured person*'s arrival at the scheduled destination abroad, we will pay a lump sum allowance to the *insured person* as stated in the Table of Benefits.

Special Condition applicable to Section 12

All claims must be substantiated by written confirmation from the *public common carrier* on the number of hours of delay and the reason of such delay.

Exclusions applicable to Section 12

This section does not cover:

- any baggage not being on the same *public common carrier* of the *insured person* or souvenirs and articles mailed or shipped separately;

- any loss resulting directly or indirectly from insurrection, rebellion, revolution, civil war, usurped power, terrorism, or action taken by governmental authorities in hindering, combating or defending against such an occurrence; detention or destruction under quarantine or customs regulations, confiscation by order of any government of public authority or risk of contraband or illegal transportation or trade; or
- any loss claimed under Section 5 - Personal Baggage Cover arising from the same cause.

Section 13 – Cancellation of Trip

(a) Cancellation of Trip

In the event that the *insured person* has to cancel the *insured journey* as a result of any of the following:

- death, *serious physical injury* or *serious illness* of the *insured person*, *immediate family member* or *travel companion* within 90 days before the commencement date of the *insured journey*;
- witness summons, jury service or *compulsory quarantine* of the *insured person* within 90 days before the commencement date of the *insured journey*;
- unexpected outbreak of strike, riot, civil commotion, *infectious disease*, *terrorism*, adverse weather conditions or natural disaster at the planned destination arising within one week before the commencement date of the *insured journey*; or
- serious damage to the *insured person's principal home* in *Hong Kong* due to fire, flood or burglary within one week before the commencement date of the planned *insured journey* which requires the *insured person's* presence in *Hong Kong* on the commencement date of the *insured journey* for the purpose of police investigation;

we will pay for the loss of unused travel fare and/or accommodation expenses which have been paid in advance and for which the *insured person* is legally liable and which are not recoverable from any other sources, up to the *maximum benefits* stated in the Table of Benefits.

(b) Single Occupancy

We will reimburse the *insured person*, up to the *maximum benefits* stated in the Table of Benefits, for the additional cost incurred as a result of a change in the per person occupancy rate applicable to the prepaid travel ticket and/or accommodation, or tour package, in the event of death, *serious injury* or *serious illness* of the *travel companion* which occurs within one week before the commencement date of the *insured journey* and the *insured person* decides to travel as planned.

Special Conditions applicable to Section 13

The *insured person* may make a claim pursuant to either Section 13(a) or 13(b), but not both Section 13(a) and 13(b), in respect of any losses arising from the same cause.

Section 14 – Curtailment of Trip

In the event that the *insured person* has to abandon the *insured journey* and return to *Hong Kong* after the *insured journey* has begun due to:

- death, *serious physical injury* or *serious illness* of the *insured person*, *immediate family member* or *travel companion*;
- unexpected outbreak of strike, riot, civil commotion, *infectious disease*, *terrorism*, adverse weather conditions or natural disaster at the planned destination which prevents the *insured person* from continuing with his/her scheduled journey; or
- serious damage to the *insured person's principal home* in *Hong Kong* arising from fire, flood or burglary;

we will pay for the loss of unused travel fare and/or accommodation expenses for which the *insured person* is legally liable and which is not recoverable from any other sources, or additional actual travel fare and accommodation expenses reasonably and necessarily incurred.

The amount of benefit payable under this Section 14 will be calculated in proportion to the number of unused days of the *insured journey* after the relevant interruption in view of the original *itinerary* of the *insured journey*. The *insured person* can only claim either the forfeited expenses for unused days of the *insured journey* or additional expenses incurred for the curtailment. In no event shall the total amount payable under Section 14 - Curtailment of Trip exceed the *maximum benefits* specified in the Table of Benefits.

Exclusions applicable to Section 13 and Section 14

These sections do not cover:

- any circumstances leading to the cancellation or curtailment of the *insured journey* which is existing or announced before the *effective date*;
- if the purpose of the *insured journey* is to obtain medical treatment or the *insured journey* is undertaken against the *medical practitioner's* recommendation;
- any medical condition or other circumstances known to have existed before the *effective date*;
- any loss directly or indirectly arising from any government's regulations control or act, bankruptcy, liquidation, error, omission or default of any travel agency, tour operator, *public common carrier* and/or other provider of any service forming part of the booked *itinerary*;
- failure to notify the travel agency, tour operator, *public common carrier* and/or other provider of any service forming part of the booked *itinerary* of the need to cancel or curtail the travel arrangement immediately when it is found necessary to do so;
- any loss in relation to cancellations or curtailments to schedules that is not verified by the airline, travel agency or other relevant organizations;
- any loss which will be paid or refunded by any existing insurance scheme, government programme, *public common carrier*, travel agent or any other provider of transportation and/or accommodation;
- failure to obtain a written medical report from the *medical practitioner*;
- any expenses incurred for services provided by another party for which the *insured person* is not liable to pay and/or any expenses already included in the cost of a scheduled *insured journey*;
- any loss if the *insured person* refuses to follow the recommendation of a *medical practitioner* to return to *Hong Kong*, or refuses to continue the *insured journey* whilst the *insured person's* physical condition at the time of recommendation is fit for travel (applicable to Section 14 - Curtailment of Trip only); or
- in respect of losses claimed under Section 11 - Travel Delay arising from the same cause (applicable to Section 14 - Curtailment of Trip only).

Section 15 - Unauthorized Use of Lost Credit Card

We will reimburse the *insured person* up to the *maximum benefits* as stated in the Table of Benefits for the monetary loss due to unauthorized use of credit card provided that the credit card is accidentally lost when carried with the *insured person* during the *insured journey*.

Exclusions applicable to Section 15

This section does not cover:

- any loss not reported to the local police, or hotel management or public authority within 24 hours upon discovery of loss and for which a relevant report is not obtained at the place of loss;
- loss of credit card not immediately reported to the local branch or agent of the issuing authority; or
- any unexplained loss or mysterious disappearance.

Section 16 - Rental Vehicle Excess

If the *insured person* rents or hires a rental vehicle in the course of the *insured journey* which is involved in a collision whilst under the control of the *insured person* or such vehicle is stolen or damaged and the rental agreement includes an excess (or deductible or similar condition), we will reimburse the *insured person* for the rental vehicle excess which is payable in respect of the loss of or damage to the rental vehicle, up to the *maximum benefits* stated in the Table of Benefits. In no event shall this benefit be paid more than once per *insured journey*.

Special Condition applicable to Section 16

The *insured person* must purchase the relevant comprehensive motor vehicle insurance policy arranged by the rental organization against loss of or damage to the rental vehicle during the rental period.

Exclusions applicable to Section 16

This section does not cover:

- any loss arising from the use of the rental vehicle by the *insured person* that is in violation of the terms of the rental agreement or applicable comprehensive motor vehicle insurance policy;
- any loss arising from the *insured person* being in charge of a rental vehicle while under the influence of alcohol or drugs;
- any loss arising from the illegal or unlawful use of the rental vehicle by the *insured person* during the rental period;
- any loss arising from the *insured person* not holding a driving license that is valid in the country where the rental vehicle is used; or
- any loss if the *insured person* fails to purchase a comprehensive motor vehicle insurance policy that covers the rental vehicle.

Section 17 - Missed Event Cover

We will reimburse the ticket cost not included in the travel tour package arranged by the travel agent but paid in advance by the *insured person's* or his/her spouse's credit card in the event that he/she is unable to utilize such ticket(s) which being tickets to overseas theme parks, or overseas sports events, music or performance events as caused by the following (which must occur within 90 days (except for sub-paragraphs (iii)) before the commencement date of the *insured journey*):

- death, *serious physical injury* or *serious illness* of the *insured person*, *immediate family member* or *travel companion*;
- witness summons, jury service or *compulsory quarantine* of the *insured person*; or
- mechanical and/or electrical breakdown of the *public common carrier* occurred before the scheduled start time of the aforesaid event.

Section 18 - MediExpress China Medical Card Service (applicable to annual travel plan only)

In the event that the *insured person* suffers from *injury* or *illness* during the *insured journey* in *China* and requires hospitalization, upon admission to an *appointed hospital*, we will provide guarantee for the medical expenses incurred within the *appointed hospital*, up to the *maximum benefits* applicable to of Section 1(a) - Medical Expenses as stated in the Table of Benefits.

Special Definition applicable to Section 18

Appointed hospital means any *hospital* listed in the MediExpress China Medical Card Appointed Hospital List provided by us.

Special Conditions applicable to Section 18

- The *insured person* must settle any medical expenses that are not payable by us under this policy or any amount in excess of the maximum benefit stated in Section 1(a) of Part 2 of this policy within 14 days after receiving the written notification from us. We will be entitled to cease providing the benefit under this Section 18 if the *insured person* fails to repay to us the outstanding amount as shown on the written notification within the time limit specified above. During the period when we cease to provide the benefits under this Section 18 or upon cancellation of the policy, the *insured person* has to return all the MediExpress China Medical Card(s) to us and will remain liable to us for any outstanding payment in arrears.

- In the event of loss of the MediExpress China Medical Card(s), the *insured person* should notify us immediately and pay us HKD100 for each replacement card.
- The *insured person* is required to provide the *appointed hospital* relevant identification document, including but not limited to Re-entry Permit, *Hong Kong* Identity Card or Passport, for verification of identity during hospitalization before we provide any guarantee pursuant to this Section 18.
- This section is applicable only to *insured person(s)* who is/are over 17 year old.
- The MediExpress China Medical Card Appointed Hospital List is subject to change without prior notice. The *insured person* should call the Zurich Emergency Hotline on +852 2886 3977 for referral to the nearest hospitals if he/she needs to visit any *hospital* on the list.

Admission Procedures for Appointed Hospital

- During office hours: admission registration at the In-patient Admission Registry of the *appointed hospital*;
- After office hour: admission registration at the In-patient Admission Registry or Emergency Department of the *appointed hospital*;
- Show and provide the MediExpress China Medical Card together with relevant identification document, including but not limited to Re-entry Permit, *Hong Kong* Identity Card or Passport at the *appointed hospital's* In-patient Admission Registry or Emergency Department for admission.
- In case of any problem arising during admission, please call Zurich Emergency Hotline +852 2886 3977 for assistance.

Part 3 – General Exclusions

This policy does not cover any loss or liability directly or indirectly arising as a result of or in connection with:

- any pre-existing condition, congenital and hereditary condition;
- any illegal or unlawful act by the *insured person* or confiscation, detention, destruction by customs or other authorities;
- the *insured person* is not taking all reasonable efforts to safeguard his/her property/money, or to avoid *injury* to minimize any claim under this policy;
- riding or driving in any kind of motor racing, or engaging in a sport in a professional capacity or where the *insured person* would or could earn income or remuneration from engaging in such sport;
- suicide or intentional self-inflicted *injury*;
- insanity, mental or nervous disorders, any condition under the influence of alcohol or drugs (other than those prescribed by a qualified medical practitioner), alcoholism, drug addiction or solvent abuse;
- any condition resulting from pregnancy, childbirth or miscarriage, abortion, pre-natal care as well as post-natal care and other complications arising therefrom, venereal disease;
- any home leave while the *insured person* is confined to a *hospital* as an in-patient;
- being a crew member or an operator of any air carrier;
- any activity or involvement of the *insured person* in the air unless such *insured person* is at the relevant time (i) travelling as a fare paying passenger on a regular scheduled flight or licensed chartered aircraft, or (ii) participating in such activity where the maneuver or navigation of such activity is responsible by another person who is adequately licensed for guiding such activity and the provider of such activity must be authorized by the relevant local authority;
- engaging in any kind of labour work; engaging in offshore activities like commercial diving, oil rigging, mining or aerial photography; handling of explosives, performing as an actor/actress, being a site worker, fisherman, cook or kitchen worker, tour guide or tour escort, naval, military or air force service or operations or armed force services;
- any *injury*, *illness*, death, loss, expense or other liability attributable to HIV (Human Immunodeficiency Virus) and/or HIV-related illness including AIDS and/or any mutant derivative or variations there of however caused or however named;
- any event arising from war, invasion, act of foreign enemy, hostilities (whether war is declared or not), civil war, rebellion, insurrection, military force or coup;
- trekking at an altitude greater than 5,000 meters above sea level or diving to a depth greater than 40 meters below sea level;
- any terrorism except for Section 1 - Medical Cover, Section 2 - Global Emergency Assistance, Section 3 - Personal Accident, Section 11 - Travel Delay, Section 13(a) - Cancellation of Trip and Section 14 - Curtailment of Trip and Section 18 - MediExpress China Medical Card Service of Part 2 of this policy;
- any medical treatment received during an *insured journey* which was taken for the purpose of receiving medical treatment or if the *insured journey* was taken while the *insured person* was unfit to travel; or the *insured person* is travelling against the advice of a *medical practitioner*;
- any expenses that can be compensated from any other sources except for Section 1(b) - Overseas Hospital Daily Cash Benefit, Section 3 - Personal Accident, Section 4 - Compassionate Death Cash, Section 11(a) - Travel Delay and Section 12 - Baggage Delay Allowance; or
- any *insured person* who is a holder of the People's Republic of China passport and travels to/within *China*. However, this exclusion will be waived if such *insured person* has an official document issued by an overseas government (other than *China*) as proof that he/she is a legal resident of the relevant country but travelling with a passport of the People's Republic of China.
- The policy does not cover any expenses, consequential loss, legal liability or loss of or damage directly or indirectly arising from:
 - ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel;
 - the radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component.

Part 4 – General Conditions

- At the time of effecting this policy the *insured person* must be fit to travel; otherwise we shall have the right to repudiate any liability under this policy.
- For *insured journey* which is not departing from *Hong Kong*, all the words "*Hong Kong*" which appears in the policy (Except for the definitions of "*China*" and "*Hong Kong*" under Part 1 and all provisions under Part 5) shall be changed to read as "Departure Country" except for the currency, and provided that the travel arrangements must be made and paid in *Hong Kong*. The following benefits shall not be available unless the *insured journey* is departing from and returning to *Hong Kong*: follow-up Medical Expenses under Section 1(a) - Medical Expenses and Section 9 - Loss of Home Contents due to Burglary. (Applicable to annual travel plan) All trips must depart from *Hong Kong*.
- For single trip travel plan, no refund of premium is allowed once the policy has been issued and the policy cannot be renewed once it has expired.
- If the *insured person's insured journey* cannot be completed within the period stated in the original *itinerary* issued by the travel agent, *public common carrier* or cruise company due to any circumstances which are beyond the *insured person's* control and arise after the *insured journey* has begun, we will automatically extend the cover period of insurance, subject always to a maximum of ten calendar days, without charge for such a period as is reasonably necessary for completion of the *insured person's insured journey*.
- The maximum period of the *insured journey* cannot exceed 180 days per trip for single trip travel plan and 90 days per trip for annual travel plan. For *insured person* who does not return to *Hong Kong* and has purchased a one-way single trip travel plan, the *insured journey* shall end within seven days upon the *insured person's* arrival at the declared final destination.
- The insurance policy is valid only for conventional leisure travel or business travel during which the *insured person* performs office or management duties without any manual work. The insurance shall not apply to persons undertaking expeditions, treks, equipped mountaineering or similar journey.
- If the same *insured person* is insured under more than one *voluntary travel insurance policy* underwritten by us or our affiliated companies and claims for the same benefit are made under such:
 - In respect of benefits other than Section 1(a) - Medical Expenses and Section 3 - Personal Accident cover of Part 2 of this policy, only the policy with the greatest compensation for the same cover shall apply.
 - In respect of Section 1(a) of Part 2 of this policy - Medical Expenses cover, our maximum liability to any one *insured person* in respect of such claim shall not exceed an aggregate limit of HKD1,500,000 or the highest benefit or sum insured amongst such policies, whichever is the higher.
 - In respect of Section 3 of Part 2 of this policy - Personal Accident cover, our maximum liability to any one *insured person* in respect of such claim shall not exceed an aggregate limit of HKD1,500,000 (or HKD750,000 for the *insured person* aged at or over 76 or above or aged 17 or below) or the highest benefit or sum insured amongst such policies, whichever is the higher.
 - In respect of Section 1(a) of Part 2 of this policy - Follow-up Medical Expenses paid to *Chinese Medicine Practitioner* or for the purpose of Chinese medicine bone-setting, acupuncture or chiropractic treatments, our maximum liability to any one *insured person* in respect of such claim shall not exceed an aggregate limit of HKD3,000 in any one accident.

Part 5 – General Provisions

1. Entire Contract

This policy including all *documents* will constitute the entire contract between the parties. No agent or other person has the authority to change or waive any provision of this policy. No changes in this policy shall be valid unless approved by our officer and evidenced by endorsement of amendment.

2. Age Limit

For single trip travel plan, the insurance shall apply to any *insured person* at all ages. For annual travel plan, unless we agree otherwise in writing, the *insured person* must be at or below 70 years of age on the commencement date of this policy and renewal is allowed up to the age of 75 years. For both single trip travel plan and annual travel plan, accompanied child(ren) insured under a family policy must be 17 year old or below.

3. Misstatement of Age

If the *insured person's* age has been misstated, the premium difference would be returned or charged according to the correct age. In the event that the *insured person's* age has been misstated and if, according to the correct age, the coverage provided by this policy would not have become effective, or would have ceased prior to the acceptance of each premium or premiums, then our liability shall be limited to the refund of premiums paid for this policy, and we will be entitled to void or terminate this policy totally. No refund shall be provided for any child(ren) covered under a family plan.

4. Notice of Claims

Written notice of claim must be given to us within 30 days of the date of the incident causing such loss. In the event of accidental death, immediate notice thereof must be given to us by *insured person's* legal representative.

5. Proof of Loss

Written proof of loss must be furnished to us within 30 days from the date of issuance of our receipt of the claim form. Failure to furnish such proof within the specified time frame shall not invalidate any claims if it was not reasonably practicable to provide proof within such time, provided that such proof

is furnished as soon as reasonably practicable, and in no event later than 180 days from the time when such proof is otherwise required. All certificates, information and evidence in such form and of such nature and within such time as we may reasonably require shall be furnished at the expense of the claimant without any expense to us.

6. **Medical Examination**
We shall be entitled in the case of non-fatal *injury* to call for examination by a medical referee appointed by us whenever we deem necessary and in the event of death to have a post-mortem examination at our expense.
7. **Payment of Claims**
Benefits payable for death of the *insured person* will be paid to the estate of the *insured person*. Benefits payable under Section 2(b) - Emergency Medical Evacuation and Section 2(c) - Repatriation of Mortal Remains of Part 2 of this policy will be paid directly to the service provider. All other benefits are payable to the *insured person*.
8. **Liability Claims**
The *insured person* must not admit, deny, or settle a claim without our consent.
9. **Misrepresentation**
If the *insured person* or anyone acting on behalf of the *insured person* makes a statement in the application or in connection with any claim knowing that the statement is false, we will not be liable for any claim and all covers and benefits under this policy shall cease, or we may void or terminate this policy totally. If any benefit has been paid by us, the *insured person* shall refund such benefit to us within seven working days from the date of our notice of demand.
10. **Legal Action**
No legal action shall be brought to recover on this policy prior to the expiration of 60 days after written proof of claims has been filed in accordance with the requirements of this policy, nor shall such action be brought at all unless commenced within one year from the expiration of the time within which proof of claims is required.
11. **Governing Law and Jurisdiction**
This policy shall be governed by and interpreted in accordance with the laws of Hong Kong and subject to the exclusive jurisdiction of the Hong Kong courts.
12. **Subrogation**
We have the right to proceed at our own expense in the name of the *insured person* against third parties who may be responsible for an occurrence giving rise to a claim under this policy.
13. **Alternative Dispute Resolution**
In the event of a dispute arising out of this Policy, the parties may settle the dispute through mediation in good faith in accordance with the relevant Practice Direction on civil mediation issued by the Judiciary of Hong Kong and applicable at the time of dispute. All unresolved disputes shall be determined by arbitration in accordance with the Arbitration Ordinance (Chapter 609), Law of Hong Kong as amended from time to time. The arbitration shall be conducted in Hong Kong by a sole arbitrator to be agreed by the parties. It is expressly stated that the obtaining of an arbitral award is a condition precedent to any right of legal action arising out of this Policy. Irrespective of the status or outcome of any form of alternative dispute resolution, if we deny or reject liability for any claim under this Policy and the *insured person* does not commence arbitration in the aforesaid manner within 12 calendar months from the date of our disclaimer, the *insured person's* claim shall then for a purposes be deemed to have been withdrawn or abandoned and shall not therefore under this Policy.
14. **Compliance with All Provisions**
Failure to comply with any of the provisions contained in this policy shall invalidate all claims hereunder.
15. **Zurich Emergency Assistance**
Zurich Emergency Assistance is an independent service provider providing such respective services to the *insured person* upon his/her request. We or any of our affiliates, agents, or employees of any of them has no responsibility or liability of any act, default, negligence, error or omission of the relevant service provider of Zurich Emergency Assistance or any of its respective employees, agents or representatives.
16. **Other Insurance**
If at the time of a claim there is any other policy insured by other insurance company which also provides the same benefits as the ones being claimed under this policy, we will only be liable for our proportionate share (except for Section 1(b) - Overseas Hospital Daily Cash Benefit, Section 3 - Personal Accident, Section 4 - Compassionate Death Cash, Section 11(a) - Travel Delay and Section 12 - Baggage Delay Allowance of Part 2 of this policy which will be paid as stated in the policy).

Additional General Provisions applicable to Annual Travel Plan only

17. **Cancellation**
We or the *insured person* may cancel this policy by giving 30 days' notice of cancellation in writing by mailing to the other party's last known address. In such event, we will return the pro-rata unearned portion of any premium actually paid by the *insured person*. In the event that this policy is cancelled by the *insured person* and provided that no claim has been made during the period starting from the effective date to the date on which the cancellation takes effect ("Policy Period"), the earned premium shall be calculated in accordance with the table below but in no event shall the earned premium be less than our customary minimum premiums.

Policy Period	Percentage of premium earned by us
Two months (Our customary minimum premiums)	40%
Three months	50%
Four months	60%
Five months	70%
Six months	75%
Over six months	100%

18. **Termination of Coverage**
Coverage under this policy shall automatically terminate at the earliest of the dates specified below:
(i) the premium due date when any or any part of the premium pertaining to this policy is not paid within the grace period;
(ii) the commencement date of any policy year on which the *insured person* has attained the age of 76;
(iii) the commencement date of any policy year on which the child insured under the family policy has attained the age of 18;
(iv) upon the *insured person's* request, termination of coverage will be effective on the date specified in the written notice received by us, provided that notice of cancellation is given no less than 30 days before the next premium due date; or
(v) the date on which we decide to exercise our right to terminate this policy under Section 9 - Misrepresentation of Part 5 of this policy.
19. **Grace Period**
We will allow the *insured person* 31 days for the payment of each premium after the first premium has been paid. During the grace period we will keep this policy in force. If the premium remains unpaid after the end of the grace period, this policy will be deemed to have lapsed from the date that the unpaid premium was due.
20. **Reinstatement of Policy**
If this policy lapses due to non-payment of premiums, it may be reinstated with our approval. Benefits will not, however, be payable for any event which may give rise to a claim under this policy which occurs while this policy has lapsed and *pre-existing condition* shall apply as if this policy commences on the reinstatement date.
21. **Renewal**
We reserve the right to amend any terms and conditions, including but not limited to the premium rates or benefits or exclusions of this policy at the time of renewal of this policy, either before or after the *insured person's* acceptance of such renewal, before the commencement date of any policy year. We will not be obligated to reveal our reasons for such amendments. If such amendments are not acceptable to the *insured person*, the renewal will not take effect.

Claims Procedure

Step One: Notify us within 30 days of any occurrence which may give rise to a claim.
Step Two: Complete and provide a claim form and the following documents to us.

Medical Expenses

- Diagnosis and treatment, including the *insured person's* name, diagnosis and date of diagnosis certified by *medical practitioner*, and receipt
- Original hospital bill with itemized list/receipts issued by a clinic or hospital

Personal Accident

- Certificate issued by a *medical practitioner* certifying the degree or severity of disability
- Police report, where relevant

Accidental Death/Compassionate Death Cash

- Death certificate
- Coroner's report
- (in the event of a disappearance) Presumption of death as proclaimed by a court or documents proving the disappearance of the body for one year due to sinking or wrecking of the transport

Personal Baggage, Loss of Personal Money, Travel Document and/or Travel Ticket

- Receipts, including date of purchase, price, model and type of items lost or damaged
- Official documentation such as property irregularity report from *public common carrier* and their official acknowledgement in writing when loss or damage has occurred in transit
- Police report (which must be made within 24 hours of the occurrence)
- Copy of notification to the issuing authority in respect of loss of traveller's cheques (which must be made within 24 hours of the occurrence)

Credit Card Protection

- Customer copy of the credit card sales slip, bill, invoice and/or payment receipt

Loss of Home Contents due to Burglary

- Receipts including date of purchase, price, model and type of items lost or damaged
- Police report (which must be made within 24 hours upon return from the *insured journey*)

Personal Liability

- Statement of the nature and circumstances of the incident or event (no admission of liability or settlement can be made or agreed to without our written consent)
- All associated documentation received in connection with the incident or event (including copies of any summons, all court documents, solicitors' and other legal correspondence)

Travel Delay/Extra Re-routing Costs due to Travel Delay

- Official documentation such as delay confirmation report from the *public common carrier* including date, times and duration of the delay, ticket for original *itinerary*, and ticket for the alternative means of transport travel to the planned destination

Baggage Delay Allowance

- Official documentation such as property irregularity report from airline/*public common carrier* including date, times and duration of the delay

Cancellation or Curtailment of Trip or Missed Event Cover

- All bills, receipts, coupons, credit card invoices or presentation of the actual ticket
- Diagnosis and treatment, including the *insured person/immediate family member/travel companion's* name, diagnosis and date of diagnosis certified by *medical practitioner*, and receipt
- Summons to a witness or jury service or subpoena or *compulsory quarantine*
- Documentary evidence which can verify the seriousness of damage to the *insured person's principal home*
- Written confirmation from the *public common carrier* including date, times in the event of mechanical and/or electrical breakdown

Unauthorized use of Lost Credit Card

- Police report (which must be made within 24 hours of the occurrence)
- Customer copy of the credit card sales slip, bill, invoice and/or payment receipt

Rental Vehicle Excess

- Copy of vehicle rental agreement
- Copy of the comprehensive motor vehicle insurance taken out by the *insured person* for the rental vehicle which contains details of coverage and deductible
- Copy of incident report issued by vehicle rental company and/or police report, which contains details of the *accident*
- Original invoice/receipt which shows the charge of the rental vehicle excess by the rental company

Additional documents relevant to the claim may be required and to be forwarded upon our request.

What To Do When the Insured Person Needs Help

In a medical or other emergency, call our 24-hour Emergency Assistance hotline in Hong Kong via +852 2886 3977 and quote the *insured person's* name and the policy number printed on the *schedule*. An experienced assistance coordinator will handle the *insured person's* enquiry.

To make a claim, call our claims hotline on +852 2903 9388. For our customer service, call our enquiry hotline on Customer Services Hotline: +852 2968 2288. Our office hours are Monday to Friday 9:00 a.m. to 5:30 p.m.


ZURICH[®]
蘇黎世

「暢遊樂」旅遊保險單

當「本公司」收妥保費後，即依據本保險單或批註內的定義、不承保事項、限制、條款和條件，同意承保名字列於「附表」內之「受保人」及對有關「受保旅程」之損失作出賠償。

第一部份 — 詞彙的定義

本保險單內某些詞彙具有指定含意，釋義已分別列明於下。為方便識別有關詞彙，特將此等詞彙全部加上引號。

「意外」	在「受保旅程」中，任何不可預見或預料並導致「受保人」蒙受「損傷」之突發事件。 指中華人民共和國，惟不包括「香港」及澳門。 指任何根據中醫藥條例(香港法律第549章)合法註冊成為中醫的人士，但是若果中醫為受保人本人或「直系親屬」則除外。 是指「受保人」必須入住「醫院」內之隔離病房或政府指定之隔離地點最少一整天，並連續逗留於該隔離地點直至可以離開隔離區為止。
「中國」 「中醫」	
「強制隔離」	
「住院」	因損傷或疾病而須遵照「醫生」囑咐入住「醫院」接受治療並在出院前一直逗留於「醫院」內。「受保人」須出示「醫院」發出的每日病房及膳食費用單據，以作證明。
「文件」 「生效日期」	包括「附表」、申請表、附加契約、批單、附件及修訂本。 於單次旅遊計劃中，是指本保險單的申請日期。 於全年旅遊計劃中，是指(i)本保險單的申請日期或(ii)由旅行社或「公共交通工具」機構發出確認有關旅程或團費或「旅行票」已繳付全費的收據，以較遲者為準。
「香港」 「醫院」	中華人民共和國香港特別行政區。 符合下列條件的機構： - 持牌醫院(如所在國家或司法管轄區規定領有牌照)； - 主要業務為接受患病、染恙或受傷人士住院及提供醫療護理服務； - 駐有註冊護士或合格護士每天24小時提供看護服務； - 有一名或以上持牌「醫生」時刻駐院； - 提供有組織的設施為住院病人進行醫學診斷及大型外科手術；及 - 主要業務並非診所、護理院、療養院、復康院或同類機構，亦非戒酒所或戒毒所。
「疾病」	「受保人」於「受保旅程」中感染或開始患上的疾病或病症，以致構成本保險單所承保的損失。
「直系親屬」	「受保人」的配偶、父母、配偶父母、祖父母、子女、兄弟姊妹、孫兒女或合法監護人。
「傳染病」	指任何被世界衛生組織宣佈由人傳人感染及已在有關當地人口中廣泛傳播的傳染病。
「損傷」 「受保旅程」	「受保人」純粹因「意外」而非任何其他事故下所蒙受之身體損傷。 於團體旅遊的單次旅遊計劃中，是指「受保人」於旅程出發日到達旅行社指定之集合地點開始其團體旅程，直至「受保人」完成該團體旅遊後到達指定之解散地點為止。如「受保人」並非於團體旅遊完結當天回程，旅程則在列明於「附表」內之回程日返回「香港」抵達香港入境事務處/櫃檯為止。無論如何，單次旅遊計劃之保險日數不得超過180天。於自訂行程旅遊的單次旅遊計劃中，是指「受保人」為出境「香港」而離開離開香港入境事務處/櫃檯開始，直至「受保人」(i)於列明於「附表」內之日期返回「香港」或(ii)返回「香港」境內抵達香港入境事務處/櫃檯為止，二者以較先為準。無論如何，單次旅遊計劃之保險日數不得超過180天。 於全年旅遊計劃中，是指每次「受保人」為出境「香港」而離開香港入境事務處/櫃檯開始，直至(i)「受保人」返回「香港」境內抵達香港入境事務處/櫃檯或(ii)每次旅程出發日起計90天為止的一段期間，二者以較先為準。 「附表」或批註內註明為受保人之人士。
「受保人」 「行程表」	在「受保旅程」開始前已由「公共交通工具」機構、旅行社、旅遊承辦商或郵輪公司確定，並連同付款收據或確認文件一同簽發的詳細計劃行程。
「手提電腦」	手提電腦、記事簿型電腦或迷你記事簿型電腦，惟不包括個人數碼助理(PDA)、掌上電腦(HHC)或任何類型的平板電腦。
「失聰」	「永久」及無法恢復之聽力，如： - a - 分貝 = 500赫茲失聰 - b - 分貝 = 1,000赫茲失聰 - c - 分貝 = 2,000赫茲失聰 - d - 分貝 = 4,000赫茲失聰 即1/6 (a + 2b + 2c + d)高於80分貝。

第二部份 — 保障

以下各項計劃及節數保障將根據「附表」內訂明之計劃級別為準。

節數	保障範圍	每名「受保人」每次「受保旅程」之「最高賠償額」(港元)		
		遨遊計劃	美景計劃	中國計劃
1. (a)	醫療保障 醫療費用包括： - 意外「損傷」之覆診費用限額 - 「最高賠償額」之100% 「疾病」之覆診費用限額 - 「最高賠償額」之5% - 額外保障：海外求診之交通費用	1,000,000	300,000	250,000
(b)	海外「住院」現金津貼保障 額外保障：「傳染病」引致的住院或隔離現金津貼	300 5,000 (每日500) 3,000 (每日300)	300 5,000 (每日500) 3,000 (每日300)	300 不適用 1,500 (每日150)
(c)	休養期間酒店住宿費用及交通費用	30,000	10,000	10,000
2. (a) (b) (c) (d) (e) (f) (g)	全球緊急支援 近親探望 緊急醫療運送 遺體運返 隨行兒童運送 入院保證金 交通及住宿費用 24小時電話熱線諮詢及轉介服務	一張來回經濟客位「旅行票」 實際費用 實際費用 一張單程經濟客位「旅行票」最高至 30,000 39,000 一張單程經濟客位「旅行票」及實際酒店住宿費用最高至 7,800 包括		
3. (a) (b) (c)	個人「意外」 乘坐「公共交通工具」或遇劫時發生之「意外」 其他「意外」 燒傷保障	1,200,000 600,000 600,000	600,000 300,000 300,000	600,000 300,000 150,000
4	身故恩恤金及緊急啟程 包括一張來回經濟客位「旅行票」及實際酒店住宿費用最高至	10,000 30,000	10,000 5,000	10,000 5,000
5	行李保障 - 包括： - 每件、每對、每套或每組物品限額 - 3,000港元 - 「手提電腦」限額 - 10,000港元 - 所有相機及數碼攝影機及其有關配件及裝備限額 - 5,000港元	20,000	5,000	3,000
6	遺失個人現金	3,000	2,000	2,000
7	信用卡保障	15,000	10,000	5,000
8	遺失旅遊證件及/或「旅行票」	40,000	2,000	2,000
9	因爆竊而損失家居物品	100,000	50,000	5,000
10	個人責任	2,500,000	1,500,000	1,500,000
11 (a) (b) (c)	旅程延誤 旅程延誤 (每滿六小時之延誤賠償300港元) 因旅程延誤引致之額外酒店費用 因旅程延誤引致之更改行程費用	2,100 1,000 12,500	900 1,000 5,000	300 不適用 不適用
12	行李延誤津貼 (超過六小時之延誤)	1,000	500	300
13 (a) (b)	取消行程：或 單人啟程	30,000 10,000	7,500 2,500	3,000 1,000

「斷肢」
「失明」
「喪失說話能力」

失去手腕或足踝處或其以上的肢體部份。
視力完全喪失及「永久」無法復原。
無法發出說話所需的四種語言中的三種，例如唇音、齒齶音、顎音及軟顎音，或聲帶完全喪失功能，或大腦控制說話的中樞受損，導致語言失能症。
「永久」完全喪失功能或手腕或足踝或其以上的肢體部份「永久」完全分離。
列於本保險單的保障表內每項受保障的賠償額。

「殘廢」
「最高賠償額」
「醫療必需費用」

是指「受保人」於「受保旅程」中由第一日遭遇「損傷」或感染「疾病」起計所須支付予合格「醫生」、物理治療師、護士、「醫院」及/或救傷車服務的費用，包括醫藥、手術、X光檢查、「醫院」或護理治療包括醫療用品及租用救傷車的費用，但不包括本保險單第二部份第二節(b)-緊急醫療運送及第二節(c)-遺體運返兩項保障所需的任何費用。
本保險單僅負責賠償經由合格「醫生」所處方或治療的費用。倘「受保人」可從其他來源取回全部或部份費用，「本公司」則根據保險單條款負責賠償剩餘的費用。

「醫生」

擁有西方醫藥學位及已獲准在其執業的地區合法提供醫療及外科服務的人士，惟「受保人」或「直系親屬」除外。

「永久」

「意外」事故發生之日起計，損害情況持續至少12個月，並於此段時間終結時沒有好轉之跡象。

「永久完全傷殘」

「受保人」遭遇「意外」而蒙受「損傷」，並且於事發後連續12個月內完全不能從事任何根據「受保人」的學歷、專業訓練或經驗而可賺取薪金、酬勞或利益的工作。如「受保人」並無從事任何職業或工作，則指其喪失應付日常生活事務的能力。

「投保前已存在的傷疾」
「主要居所」

指「受保人」於「生效日期」前已曾接受「醫生」之治療、診症或傷疾處方服藥，又或「醫生」曾作出醫療建議或治療的任何狀況。
在「香港」被用作為私人住宅的屋苑或樓宇，而該屋苑或樓宇須為「受保人」唯一的永久住所。

「公共交通工具」

任何由個別公司或個人持牌出租的機動客運交通工具，包括但不限於公共巴士、旅遊巴士、渡輪、氣墊船、水翼船、輪船、火車、電車、地下火車，及由註冊的航空公司或包機公司營運以接載付款乘客、來往於商業機場之間的飛機。

「附表」

指隨附本保險單名為「Schedule」並構成保單一部份之附表。

「嚴重損傷」或
「嚴重疾病」

需經由「醫生」治療的損傷或疾病，並經「醫生」證實「受保人」或「同行人士」不適宜旅遊或繼續其原訂的旅遊行程及必須於「醫院」「住院」。嚴重損傷或嚴重疾病亦包括「受保人」或「同行人士」因損傷或疾病而被任何司法、政府或機場之管理機構拒絕登上原定之「公共交通工具」或拒絕入境。若套用於「直系親屬」，是指其「直系親屬」的損傷或疾病，經「醫生」證明他們會有生命危險及必須於「醫院」「住院」，以致「受保人」需要停止或取消原定「受保旅程」。

「恐怖活動」

恐怖活動包括任何人或團體為達到政治、宗教、思想或同類目的作出的行動、策劃或威脅活動，包括意圖影響任何國家法律上或實際上的政府或其政治部門，及/或威脅任何國家的公眾或部份公眾，不論是獨自行動又或代表或聯同任何組織或法律上或實際上的政府亦然。「恐怖活動」包括：

- 涉及以暴力對待一人或多人；或
- 涉及財物損毀；或
- 危害生命但不包括執行行動的人；或
- 對健康或公眾或部份公眾的安全製造風險；或
- 設計去干擾或破壞某電子系統。

「三級燒傷」
「同行人士」

皮膚所有皮層被燒毀。
與「受保人」一同報名參加或預訂旅遊行程的人士，於整個「受保旅程」一直與「受保人」同行，而非其導遊或團友。

「旅行票」

用以乘坐任何「公共交通工具」的旅行票。

「自願性旅遊保險保單」

由「受保人」或列明於保單申請表上之申請人(the proposer)實際購買及繳付之旅遊保險保單。惟任何由公司、團體或機構實際購買及繳付而保障「受保人」之團體旅遊保險保單並不包括於此定義內。

「戰爭」

兩國或多國因任何事故交戰，或主權國家之間的武裝衝突，不論正式或未正式宣戰的公開軍事衝突，又或國與國之間經國家正式批准而：(i)宣佈終止和平關係；及(ii)陷入武裝敵對局面。

「本公司」

蘇黎世保險有限公司。

節數	保障範圍	每名「受保人」每次「受保旅程」之「最高賠償額」(港元)		
		遨遊計劃	美景計劃	中國計劃
14	縮短行程	30,000	7,500	3,000
15	遺失之信用卡被盜用保障	3,000	3,000	3,000
16	租車自負額保障	5,000	5,000	5,000
17	缺席特別活動保障	2,000	1,000	300
18	醫療快線中國醫療卡服務(只適用於全年旅遊計劃)	包括	包括	不適用

第一節 – 醫療保障

(a) 醫療費用

如「受保人」在「受保旅程」中蒙受「損傷」或感染「疾病」而需支付合理的「醫療必需費用」，「本公司」會賠償有關實際之「醫療必需費用」予「受保人」。

覆診費用

本節亦承保「受保人」於返回「香港」後三個月內，因以上的「損傷」或「疾病」需要繼續接受「醫生」的醫療治療，「本公司」將負責賠償「受保人」所需的實際「醫療必需費用」，但不超過保障表所規定之覆診費用限額。而覆診費用當中亦包括「中醫」治療費用(治療次數不多於五次)及跌打或針灸治療，每日每次上限為150港元，最高累積至3,000港元。

如「受保人」於蒙受上述「損傷」或感染上述「疾病」當日起計連續12個月後返回「香港」，則不會獲得任何覆診費用之賠償。

在任何情況下，第一節(a)-醫療費用的合共總賠償額不可超過保障表所規定之「最高賠償額」。

第一節(a)的額外保障

「本公司」將支付「受保人」：

- (i) 於「受保旅程」中蒙受「損傷」或感染「疾病」而需往海外「醫院」求診之額外交通費用高達300港元；及
- (ii) 於「受保旅程」中已感染「傳染病」至返回「香港」後十日內才確診感染「傳染病」，於合格「醫生」的「醫療必需費用」。本額外保障(ii)的總賠償額將不超過保障表所載「疾病」之覆診費用限額。

於「受保旅程」開始時年齡為76歲或以上之「受保人」，其於本第一節(a)醫療費用之最高賠償保障表所載之「最高賠償額」的百分之五十(50%)(第一節(a)額外保障(i)之交通費用除外)。

(b) 海外「住院」現金津貼保障

如「受保人」在「受保旅程」中蒙受「損傷」或感染「疾病」而需於海外「醫院」「住院」，「本公司」將支付每日500港元現金津貼及以保障表所載之「最高賠償額」為限。

第一節(b)的額外保障 - 「傳染病」引致的海外「住院」或隔離現金津貼

如「受保人」在「受保旅程」中因「傳染病」需於海外「醫院」「住院」，「本公司」將支付每日300港元(遨遊及美景計劃)或每日150港元(中國計劃)的住院現金津貼，最長至十日。如「受保人」於「受保旅程」中因被懷疑或確診感染「傳染病」而被當地政府「強制隔離」，或於「受保旅程」完結後返回「香港」三日內被「香港」政府「強制隔離」，「受保人」可於被「強制隔離」期間獲得隔離現金津貼，每日300港元(遨遊及美景計劃)或每日150港元(中國計劃)，至十日。如因同一「受保旅程」而引致多於一次之「強制隔離」，本保障之合共最高賠償額均以保障表所載之「最高賠償額」為限。「受保人」只可索償「住院」現金津貼或隔離現金津貼其中一項。在任何情況下，「傳染病」引致的海外「住院」或隔離現金津貼的總賠償額不可超過保障表所規定之「最高賠償額」。

「傳染病」引致的住院或隔離現金津貼之特別條款

- 1. 此保障只適用於「受保人」於「受保旅程」中被「強制隔離」當日(以首日計)或之前，世界衛生組織有關「傳染病」列為「流感大流行警戒級別」五級或以上，或「受保人」於「香港」被「強制隔離」當日(以首日計)或之前，「香港」特區政府已啟動「流感大流行警戒級別」中最高之緊急應變級別。
- 2. 任何家居隔離並不包括於此保障之內。
- 3. 如於「受保旅程」出發當日或之前，有關之行程目的地已被宣佈為疫埠，則不會獲得任何保障。

(c) 休養期間酒店住宿費用及交通費用

如「受保人」在「受保旅程」中遭遇「嚴重損傷」或患上「嚴重疾病」而需於「醫院」「住院」，於出院時經主診「醫生」之建議需先作休養再繼續旅程，「本公司」將支付「受保人」因此休養目的而引致之實際海外酒店住宿費用，以每日1,000港元為上限。「本公司」亦會支付「受保人」一張單程的經濟客位「旅行票」予「受保人」返回「香港」。在任何情況下，第一節(c)-休養期間酒店住宿費用及交通費用的合共總賠償額不可超過保障表所規定之「最高賠償額」。

第一節的不承保事項

本節並不承保：

- 1. 非必要的醫療治療；
- 2. 任何有違「醫生」之勸喻出外旅遊，或旅遊的目的為接受醫療或手術治療而所衍生之任何損失或治療費用；
- 3. 牙科護理及治療，除非此等費用是於「受保旅程」中因「損傷」而導致「受保人」原本健全及天然之牙齒必須接受治療；
- 4. 整容手術、糾正眼球折射的誤差或配用助聽器，以及有關的處方費用，除非於「受保旅程」中因「損傷」導致之必須診治費用；
- 5. 任何未能提供合格「醫生」的醫療報告佐證的手術或治療；
- 6. 根據合格「醫生」的意見，在合理情況下該手術或治療可延期至「受保人」返回「香港」後進行；
- 7. 任何覆診費用支付予同時為「受保人」或「直系親屬」之「中醫」、中醫跌打師、針灸師或脊醫；或
- 8. 任何「醫院」內獨立或私人房間住宿、特別或私家看護的額外費用，惟第二節(b)、緊急醫療運送所述之緊急醫療運送或運返所需費用除外；非醫療用的個人服務，包括收音機、電話及類同的物品；採購或採用特別支架、儀器或裝置的額外費用。

第二節 – 全球緊急支援

如「受保人」在「受保旅程」中蒙受「損傷」或感染「疾病」，蘇黎世緊急支援將安排以下保障及支付有關所需費用：

(a) 近親探望

如「受保人」在「受保旅程」中遭遇「嚴重損傷」或患上「嚴重疾病」而需於「香港」境外之「醫院」「住院」連續三天以上，蘇黎世緊急支援將支付一張來回經濟客位「旅行票」予一名「直系親屬」前往該地及其「直系親屬」必要及無可避免地在當地引起的酒店住宿費用，每日上限為700港元及最高至五日，以陪伴及/或照顧「受保人」。本保障只可在同一「受保旅程」中索償一次。

(b) 緊急醫療運送

支付有關「受保人」因緊急醫療運送或運返所引致的必要及無可避免的交通、醫療服務及醫療用品費用。離境的時間、交通工具及離境最後目的地均由蘇黎世緊急支援服務完全根據醫療需要作出決定。

(c) 遺體運返

將「受保人」之遺體由身故地點運送回「香港」所引致合理及無可避免的開支，又或經蘇黎世緊急支援服務批准於身故地殮葬的費用。

(d) 隨行兒童運送

如「受保人」在「受保旅程」中死亡、或遭遇「嚴重損傷」或患上「嚴重疾病」而需於「香港」境外之「醫院」「住院」連續三天以上，其同行之17歲以下之兒童因此而失去照顧，蘇黎世緊急支援將支付一張單程的經濟客位「旅行票」予該名(等)兒童返回「香港」，最高至保障表所載之「最高賠償額」。如有需要，「本公司」亦可安排一名合資格的服務員陪伴該名(等)兒童返回「香港」。

(e) 入院保證金

蘇黎世緊急支援將支付每名「受保人」因入住「醫院」而需繳付的「醫院」醫藥費用保證金，惟不超過39,000港元。如該等醫療費用並非本保險單第一節-醫療保障承保之項目，則一律由「受保人」自付。

(f) 交通及住宿費用

蘇黎世緊急支援將支付「受保人」一張單程經濟客位「旅行票」及因必要及無可避免的事件而須緊急醫療運送後恢復「受保旅程」的行程或返回「香港」所引致的額外酒店住宿費用。本節的賠償上限為7,800港元，而每日賠償額為1,950港元。惟此事件必須基於醫療需要及預先得知蘇黎世緊急支援批核及確認。

(g) 24小時電話熱線諮詢及轉介服務

- (i) 啟程前諮詢援助
- (ii) 轉介使館
- (iii) 轉介醫療服務人員或機構
- (iv) 遺失護照援助
- (v) 遺失行李援助
- (vi) 轉介傳譯服務
- (vii) 轉介律師
- (viii) 電話醫療顧問服務

(ix) 住院期間監察病情

(x) 醫療費用保證金安排

除非本保險單另行訂明承保，有關以上(x)及(x)項的服務，「受保人」必須負責支付「醫院」、醫療人員(「本公司」指定的「醫生」除外)或任何其他醫療專業團體或人士收取的費用。

蘇黎世緊急支援服務由蘇黎世保險有限公司所委任的服務機構提供。

第二節的不承保事項

「本公司」不會就下列情況提供本節任何服務或支付其費用：

- 1. 如「受保人」身處的地點有爆發「戰爭」的危險或政治危機，以致無法或實際上不可提供本節訂明的服務；
- 2. 事前未經蘇黎世緊急支援服務書面同意及/或未經由蘇黎世緊急支援服務安排緊急醫療運送或遺體運返或其他費用。如「受保人」必須從偏遠或落後地區緊急撤離就醫而事前無法通知蘇黎世緊急支援服務，鑒於任何延誤可能危害「受保人」性命或構成嚴重影響，則屬例外；
- 3. 任何有違「醫生」勸喻，而到「香港」境外的國家旅遊或居住；或
- 4. 「受保人」離開「香港」旅行或居住之目的是為啟程前已發生的意外或疾病而接受治療、休養或療養。

第三節 – 個人「意外」

(a) 乘坐「公共交通工具」或遇劫時發生之「意外」

如「受保人」在「受保旅程」中乘坐「公共交通工具」或遇劫時因以下情況中發生「意外」而蒙受「損傷」：

- (i) 以乘客身份(並非操作員、機師或機員)乘坐、登上或離開任何「公共交通工具」時；或
 - (ii) 於遇劫或被企圖行劫事故中，包括於逃離有關事故時，成為無辜受害者；
- 而該「損傷」於「意外」發生當日起計連續12個月內導致以下賠償表內其中一項，「本公司」將根據賠償表所列的「最高賠償額」百分比作出賠償，但以保障表所載之「最高賠償額」為上限。

本保障並不適用於「受保旅程」開始時年齡為17歲或以下，或年齡為76歲或以上之「受保人」。

(b) 其他「意外」

如「受保人」在「受保旅程」中因「意外」而蒙受「損傷」，但並非因上述乘坐「公共交通工具」或遇劫時發生之「意外」導致，而該「損傷」於「意外」發生當日起計連續12個月內導致以下賠償表內其中一項，「本公司」將根據賠償表所列的「最高賠償額」百分比作出賠償，但以保障表所載之「最高賠償額」為上限。

賠償表	
保障項目	
意外死亡及傷殘	「最高賠償額」百分比
1. 死亡	100%
2. 「永久完全傷殘」	100%
3. 「永久」及無法痊癒之四肢癱瘓	100%
4. 雙眼「永久」完全「失明」	100%
5. 單眼「永久」完全「失明」	100%
6. 喪失任何兩肢或任何兩肢「永久」完全「殘廢」	100%
7. 喪失任何單肢或任何單肢「永久」完全「殘廢」	100%
8. 「喪失說話能力」及「失聰」	100%
9. 「永久」完全「失聰」：	
(a) 雙耳	75%
(b) 單耳	15%

- (i) 同一宗「意外」事件中只會獲賠償以上保障項目的其中一項。假如在同一次「意外」事件中遭受多於一項保障項目，則只會獲得較高賠償之保障項目。
- (ii) 任何「受保人」就上述任何一項保障項目獲得賠償後，其保障在本保險單下即時終止，但不會影響該「意外」所導致的索償事宜。
- (iii) 如「受保人」蒙受「損傷」前局部手足或器官已喪失功能，而在「損傷」後變成全部「殘廢」，「本公司」會決定「最高賠償額」之百分比作為賠償該「損傷」所引致的殘廢部份。倘於「損傷」前而之前手足或器官已完全喪失功能，則有關之殘廢不獲賠償。
- (iv) 於「受保旅程」開始時年齡為17歲或以下，或76歲或以上之「受保人」，其最高賠償(不論任何類型之「意外」)均為保障表所載之「最高賠償額」的百分之五十(50%)及根據賠償表所列的「最高賠償額」之百分比作出賠償。

(c) 燒傷保障

如「受保人」在「受保旅程」中因「意外」而蒙受「三級燒傷」，而該「三級燒傷」於「意外」發生當日起計連續12個月內導致以下賠償表內其中一項，「本公司」將根據賠償表所列的「最高賠償額」百分比作出賠償，但以保障表所載之「最高賠償額」為上限。

賠償表		
「三級燒傷」		「最高賠償額」百分比
部位	燒傷部位佔表面總面積的百分比	
頭部	(a) 燒傷佔頭部表面總面積達12%或以上	100%
	(b) 燒傷佔頭部表面總面積達8%或以上，但不足12%	75%
	(c) 燒傷佔頭部表面總面積達5%或以上，但不足8%	50%
	(d) 燒傷佔頭部表面總面積達2%或以上，但不足5%	25%
身體 不包括 頭部	(a) 燒傷佔身體表面總面積達20%或以上	100%
	(b) 燒傷佔身體表面總面積達15%或以上，但不足20%	75%
	(c) 燒傷佔身體表面總面積達10%或以上，但不足15%	50%

- (i) 同一宗「意外」事件中只會獲賠償以上保障部位的其中一處燒傷部位。假如在同一次「意外」事件中遭受多於一處燒傷部位，則只會獲得較高賠償之部位。
- (ii) 如「受保人」蒙受「損傷」前局部手足或器官已喪失功能，而在「損傷」後變成全部「殘廢」，「本公司」會決定最高賠償額之百分比作為賠償該「損傷」所引致的殘廢部份。倘於「損傷」前而之前手足或器官已完全喪失功能，則有關之殘廢不獲賠償。
- (iii) 於「受保旅程」開始時年齡為十七歲或以下，或七十六歲或以上之「受保人」，其最高賠償均為保障表所載之「最高賠償額」的百分之五十(50%)及根據「三級燒傷」賠償表所列的「最高賠償額」之百分比作出賠償。

第三節的額外保障

1. 在本節中，「本公司」提供額外保障予「受保人」於以下時間蒙受的任何「損傷」：

- (i) 「受保人」於安排乘坐的「公共交通工具」預定離港時間前三小時內，直接從「香港」住所或慣常工作地點為出境「香港」而啟程到香港入境事務處/櫃檯以開始「受保人」的「受保旅程」；及
- (ii) 「受保人」在結束「受保旅程」時，於安排乘坐的「公共交通工具」實際抵港時間後三小時內，直接從香港入境事務處/櫃檯進入「香港」境內返回「受保人」的「香港」住所或慣常工作地點。

2. 失蹤條款

倘若「受保人」乘搭之飛機、陸上或海上之「公共交通工具」發生「意外」，並導致失蹤、墮毀或沉沒，而「受保人」之遺體於該次「意外」事件發生後一年內，仍無法尋回；「本公司」將視「受保人」在本保險單承保的「意外」事故中死亡而作出賠償。

個人「意外」之最高賠償責任

如任何個別受保人士同時受保於多張由「本公司」及/或其有關公司所簽發含有意外死亡及「永久」傷殘保障的保單，則所有簽發含有意外死亡及「永久」傷殘保障的保單對該名個別受保人士之合共總賠償額不可超過5,000,000港元，而每份保單的賠償將根據總賠償額按比例分配。

第三節的不承保事項

本節並不承保一切由病毒及/或疾病引致的「損傷」。

第四節 – 身故恩恤金及緊急啟程

如「受保人」在「受保旅程」中死亡(意外死亡或自然死亡)，「本公司」將根據保障表所列支付一筆身故恩恤金以用作緊急現金或殮葬費用予其遺產承辦人。「本公司」亦會根據保障表所列之「最高

賠償額」為上限，支付一張來回經濟客位「旅行票」以及合理及必須的酒店住宿費用予一名「直系親屬」前往「受保人」身故當地。

第五節 – 行李保障

如「受保人」穿戴或攜帶及屬於「受保人」的個人財物，包括行李，於「受保旅程」中意外遺失或損毀，「受保人」將根據以下個別限額上限，但以不超過保障表所列的「最高賠償額」作出賠償。而任何存放在無人看管的汽車內之個人財物，則必須存放在上鎖的行李箱內。「本公司」有權根據其損耗及折舊程度賠償其重估價值或維修該物品。若修理費用超越損毀物品之價值時，「本公司」於處理該賠償申請時會視該物品已遺失。

在任何情況下，第五節-行李保障的合共總賠償額不可超過保障表所列之「最高賠償額」上限。

個人行李的個別限額如下：

- 每位「受保人」的每件、每對、每套或每組物品的最高賠償限額為3,000港元。
- 每部「手提電腦」最高賠償限額為10,000港元。
- 攝錄及/或攝影器材上，及其所有輔助配件或有關物品的最高賠償總額將不超過5,000港元。

本節會額外保障「受保人」正常出外公幹需攜帶而屬於公司之物品，但以保障表所列的「最高賠償額」及上述之個別限額為上限。

第五節的額外保障

高爾夫球用具

如「受保人」在「受保旅程」中意外遺失或損毀攜帶之高爾夫球用具，包括但不限於高爾夫球袋、球、推車及傘，「本公司」將根據以下個別限額上限，但以不超過保障表所列的「最高賠償額」作出賠償予以重新購買或修補該物件或作出安排修補的費用。

高爾夫球用具個別限額如下：

每位「受保人」的每件、每對、每套或每組物品的最高賠償限額為2,500港元。每次「受保旅程」的合共最高賠償限額為5,000港元。

第五節的不承保事項

本節並不承保：

- 以下之物品：商業貨品或樣本、食品或飲料及/或藥物、煙草、隱形眼鏡、假牙及/或其配件、動物、汽車(包括配件)、電單車、單車、船、發動機、或任何交通工具、家用傢具、古董、任何以黃金、白金、鑽石、翡翠或珍珠做成或配有以上物料的手飾或配件、任何手提電話(包括電子手帳電話，任何擁有對話功能之類似儀器及其他配件)、金錢(包括支票、旅行支票等)、電子貨幣(包括信用卡或八達通的信用額等)、票券或證券、債券、流通票據、票或文件；「手提電腦」因軟件或病毒問題故障或操作不善(包括但不限於下載軟件)；
- 任何在發現遺失後24小時內未向當地警方或公共機構報告及未能提供有關報告的任何損失；或任何由於磨損、逐漸退化、蟲蛀、侵蝕、腐蝕、腐爛、發霉、真菌、空氣狀況、光線作用、或在加熱、弄乾、清潔、染色、更換或維修過程中、刮損、凹痕、故障、使用不當、手工或設計欠佳、使用有問題物料，造成或引致的損失或損毀；
- 任何直接或間接因暴動、反叛、革命、內戰、暴權、「恐怖活動」或因政府意圖阻礙、對或防禦此等動亂所引起的損失；由於海關條例而遭破壞或檢疫；政府充公之違禁品或非法攜帶或交易的物品；
- 與「受保人」不同「公共交通工具」寄運之物品，或因獨立郵寄或付運紀念品與物件所引致的損失；
- 已獲第三者或機構提供維修服務，使操作回復正常的物品，而「受保人」並不需要支付任何額外費用；
- 任何在公眾場所因無人看管下而遺失的物品；
- 在沒上鎖的車輛內或無人在車內看管的車輛內引致遺失的物品，除非該物品被存放在已上鎖的行李箱中；
- 任何存錄於磁帶、記憶儲存卡、磁碟的資料遺失；
- 任何易碎或易破物品的損毀，如玻璃或水晶；
- 任何在酒店或「公共交通工具」機構保管下的財物損失或損毀，除非發現損失後三天內以書面通知該酒店或「公共交通工具」機構，如該機構為航空公司，亦需獲得由該航空公司發出之財物紊亂報告；
- 任何基於同一原因於第十二節-行李延誤津貼同時提出的索償；
- 任何遺失或損毀之物品已受其他保險承保，或已獲「公共交通工具」機構或酒店賠償的損失；
- 損失高爾夫球，但高爾夫球盛載於高爾夫球袋內並同時遺失則除外；或
- 於高爾夫球活動中損毀的高爾夫球。

第六節 – 遺失個人現金

如「受保人」在「受保旅程」中因搶劫、爆竊或偷竊而損失隨身攜帶或放在已鎖的酒店客房內的現金、支票、匯票或旅行支票，「本公司」將根據保障表所列的「最高賠償額」為上限作出賠償。

第六節的不承保事項

本節並不承保：

- 任何在發現遺失後24小時內未向當地警方、或酒店管理或公共機構報告及未能提供有關報告的任何損失；
- 在發現遺失旅行支票後，未即時向當地有關簽發機構或代理公司報告；
- 因錯誤、遺漏、兌換或貶值而減少的金額；
- 任何原因未明的遺失或神秘消失；或
- 任何因欺詐或行騙引致的損失。

第七節 – 信用卡保障

如「受保人」於「受保旅程」中蒙受「損傷」及因此而身故，「本公司」將以保障表所列的「最高賠償額」為上限，賠償「受保人」於「意外」發生當日其信用卡之結欠。本保障並不包括商務信用卡或附屬信用卡。

本保障並不適用於「受保旅程」開始時年齡為17歲或以下之「受保人」。

第八節 – 遺失旅遊證件及/或「旅行票」

若「受保人」的香港身份證、信用卡、駕駛執照、「旅行票」或旅遊證件於「受保旅程」中意外遺失，「本公司」將支付其補領費用。如「受保人」於「受保旅程」中意外遺失「旅行票」及/或旅遊證件，「本公司」將支付因此而衍生的額外交通及/或住宿費用，惟此交通座位及住宿房間等級不能比「受保人」原定「行程表」上的交通座位及/或住宿房間等級為高。在任何情況下，第八節-遺失旅遊證件及/或「旅行票」的合共總賠償額不可超過保障表所列之「最高賠償額」上限。

第八節的不承保事項

本節並不承保：

- 任何在發現遺失後24小時內未向當地警方報失及未能提供有關報告的任何損失；
- 沒有需要於是次「受保旅程」使用之任何旅遊證件及/或簽證及/或「旅行票」；
- 任何原因未明的遺失或神秘消失；
- 因「受保人」未有或延誤補領證件而需繳納的任何罰款；或
- 同時索償臨時或永久但屬相同性質的旅遊證件之補領費用，此情況下，「受保人」只能選擇索償其中之一款。

第九節 – 因爆竊而損失家居物品

如「受保人」於「受保旅程」期間，其「香港」「主要住所」因在沒有人居住的情況下遭爆竊(即被強行或使用暴力進出)，引致該住所內之「家居用品」損失或遭到破壞，「本公司」會以不超過保障表上所列之「最高賠償額」賠償「受保人」因此而遺失或損毀的家居用品。「本公司」有權根據「家居用品」之損耗及折舊程度賠償其重估價值或維修該物品之費用，而每件、每對、每套或每組物品的最高賠償限額為5,000港元。

第九節的特別附屬

「家居用品」是指「受保人」或「主要居所」內居住之成員擁有的家居物件、個人物件、傢俱、裝置或裝修(包括室內擺設)。

第九節的不承保事項

以下情況不承保：

- 匯票、匯票、現金、貨幣、支票、珠寶首飾或配件、本票、郵政匯票、記錄或帳簿或類似的證明、債券或任何證券、儲值卡、信用卡、契約、所有權證明文件、原稿、獎章、護照、郵票、股票、任何類型的隱形眼鏡、手提電話、旅行票、食物、動物、汽車(包括配件)、電單車、船隻、發動機及其他交通工具、存錄於磁帶、記憶儲存卡、磁碟或其他的資料遺失或損毀；
- 「受保人」於「受保旅程」完結返回「香港」後24小時內未有向警方報案及未能提交警方之報告；
- 錯誤、遺漏、兌換率的浮動或貶值而出現的缺額；或
- 任何用於工作上、或具有專業或商業用途的儀器或設備。

第十節 – 個人責任

如「受保人」在「受保旅程」中發生「意外」令第三者蒙受「損傷」或財物損失，以致必須承擔法律賠償責任及/或任何法律費用，「本公司」將作出賠償。「本公司」的賠償將以保障表所載之「最高賠償額」為限。惟在未取得「本公司」書面同意前，「受保人」不可向他人承認責任、提出或允許付出任何賠償或有關承諾、或牽涉入任何訴訟中。

第十節的不承保事項

本節並不承保因下列原因直接或間接引起的責任：

- 任何商業、專業或貿易活動；

- 「受保人」任何故意、蓄意及不法行為或刑事行為；
- 「受保人」對任何「直系親屬」或親屬或僱主或僱員的責任；
- 合約責任；
- 擁有、佔用、使用或控制任何車輛、飛機、船隻、土地、建築物、槍械或動物；
- 「受保人」或「直系親屬」或親屬或僱主擁有、持控托管或保管的財物損毀；
- 任何「恐怖活動」，不論損失是由同時或連接發生之其他原因或事故所引致；
- 任何「恐怖活動」或因政府意圖抑制、防止、鎮壓、報復或回應此等動亂所引起的損失。

第十一節 – 旅程延誤

如「受保人」安排乘坐及列明於原定「行程表」上之「公共交通工具」因罷工或其他工業行動、騷亂、暴亂、劫機、「恐怖活動」、惡劣天氣、天災、「公共交通工具」的機械及/或電路故障、機場關閉而延誤超過六小時，「本公司」會賠償以下保障予「受保人」：

(a) 旅程延誤

每滿六小時的延誤，「本公司」會賠償300港元，最高至保障表所列的「最高賠償額」為上限。

延誤時間將以下列其中一項方式計算：

- 出發延誤是由列明於「受保人」原定「行程表」上之「公共交通工具」的開出時間，直至(i)該「公共交通工具」的實際開出時間或(ii)由該「公共交通工具」機構安排的首班取替交通工具的實際開出時間作出計算；或
- 到達延誤是由列明於「受保人」原定「行程表」上之「公共交通工具」的到達時間，直至(i)該「公共交通工具」的實際到達時間或(ii)由該「公共交通工具」機構安排的首班取替交通工具的實際到達時間作出計算。

在同一班次的「公共交通工具」延誤下，「受保人」只可索償出發延誤或到達延誤其中一項。假如「受保人」有連續的接駁航班，不論轉機所需之時間，延誤均以「行程表」上列明和實際之出發或到達時間的差別作出計算，而延誤的主因必須為上述事故所導致。

(b) 因旅程延誤引致之額外酒店費用

「受保人」於「香港」境外所引致的額外及合理而且無法從其他途徑取回之額外住宿費用，惟以保障表所載之「最高賠償額」為上限。

(c) 因旅程延誤引致之更改行程費用

「受保人」因乘搭其他「公共交通工具」前往列明於原定「行程表」內目的地所需之「旅行票」(只限經濟客位)，惟以不超過保障表所載之「最高賠償額」為上限。本保障只可在同一「受保旅程」中索償一次。

第十一節的特別條款

「受保人」必須按照原定安排乘坐的「公共交通工具」辦理登機手續，及於索償時必須提供「公共交通工具」機構書面證明其延誤時間及原因以作證明。

第十一節的不承保事項

本節並不承保：

- 於「生效日期」前已發生或已宣佈會引致「受保旅程」延誤的情況；
- 因「受保人」遲到機場或碼頭所引起的任何損失(即在最後登記時間結束後才到達，惟因「公共交通工具」機構員工罷工導致遲到除外)；
- 任何未經航空公司、旅行社或其他有關機構證實的更改或取消「行程表」的損失；或
- 任何因由當地政府或有關機構的航空管制而引致機場關閉引致的損失；或
- 任何受保於其他保險計劃的事項、政府計劃所承保的項目或已由旅行社、旅遊承辦商或「行程表」內提供服務的機構/人士承諾賠償或退款(第十一節(a)-旅程延誤除外)。

第十二節 – 行李延誤津貼

如「受保人」已登記寄艙的行李於「受保人」抵達海外目的地後超過六小時，該行李仍未送抵，「本公司」將按保障表所載，向「受保人」發放一筆行李延誤津貼。

第十二節的特別條款

於索償時必須提供「公共交通工具」機構書面證明其延誤時間及原因以作證明。

第十二節的不承保事項

本節並不承保：

- 任何並非與「受保人」所乘坐的「公共交通工具」同時寄運之行李，或因獨立郵寄或付運紀念品與物件所引致的損失；
- 直接或間接因暴動、反叛、革命、內戰、暴權、「恐怖活動」或因政府意圖阻礙、反對或防禦此等動亂所引起的損失；基於海關條例或檢疫而遭扣留或破壞；政府或有關公共機構充公之違禁品或非法攜帶或交易的物品；或
- 任何基於同一原因於第五節-行李保障同時提出的索償。

第十三節 – 取消行程

(a) 取消行程

如「受保人」因以下事故必須要取消行程：

- 「受保人」、「直系親屬」或「同行人士」於「受保旅程」出發前90日內死亡、蒙受「嚴重損傷」或患上「嚴重疾病」；
- 「受保人」於「受保旅程」出發前90日內被傳召作證人、履行陪審員責任或需按規定接受隔離檢疫；
- 「受保旅程」出發前一星期內，預定前往之目的地突然發生不可預見的罷工、騷亂、暴亂、「傳染病」、「恐怖活動」或惡劣天氣或天災；或
- 「受保人」在「香港」的「主要居所」於「受保旅程」出發前一星期內因火災、水浸或盜竊而嚴重損毀，而「受保人」需於出發當日留於該處協助警方調查；

「本公司」會根據保障表列明的「最高賠償額」為上限，賠償「受保人」未有使用及無法從其他途徑追討但已依法支付或預付的旅行或住宿費用，惟以保障表所載之「最高賠償額」為限。

(b) 單人啟程

如在「受保旅程」出發前一星期內，「同行人士」因死亡、蒙受「嚴重損傷」或患上「嚴重疾病」而無法啟程，但「受保人」仍然決定繼續展開旅程，「本公司」將補償因單獨繼續行程而必須補回的旅程費用差額(包括已預先付訂之「旅行票」及/或住宿費用、旅遊計劃)，惟以保障表所載之「最高賠償額」為限。

第十三節的特別條款

就同一事故所引致的損失，「受保人」只能索償第十三節(a)或第十三節(b)其中一項保障而不可同時索償此兩項保障。

第十四節 – 縮短行程

如「受保人」於「受保旅程」啟程後因以下事故而必須放棄行程返回「香港」：

- 「受保人」、「直系親屬」或「同行人士」死亡、蒙受「嚴重損傷」或患上「嚴重疾病」；
- 預定的行程目的地突然發生「受保人」不可預見的罷工、騷亂、暴亂、「傳染病」、「恐怖活動」、惡劣天氣或天災，以致「受保人」未能繼續其已計劃的行程；或
- 「受保人」在「香港」的「主要居所」因火災、水浸或盜竊而遭嚴重損毀；

「本公司」將賠償「受保人」未有使用及無法從其他途徑追討已支付及須依法支付的旅遊費用及/或住宿費用，或額外所衍生的實際而合理的交通及住宿費用。有關第十四節之賠償將根據「受保旅程」中斷後按原定「行程表」內列明之「受保旅程」尚剩餘之日數按比例計算。「受保人」只可索償「受保旅程」尚剩餘日數內被沒收之費用，或因縮短行程而額外衍生的費用其中一項。於任何情況下，第十四節-縮短行程的賠償總額亦不可超過保障表列明的「最高賠償額」。

第十三及第十四節的不承保事項

此兩節並不承保：

- 於「生效日期」前已發生或已宣佈會引致「受保旅程」取消或中斷的任何情況；
- 「受保旅程」之目的為接受醫療治療或違反「醫生」之勸告進行「受保旅程」；
- 於「生效日期」前已發生或已得知任何身體醫療狀況或情況；
- 任何因政府法例及規條限制；因旅行社、旅遊承辦商、「公共交通工具」及/或於「行程表」內提供服務的機構/人士破產、清盤、錯誤、疏忽或不負責任的行為；
- 「受保人」已知必須取消或縮短行程但未有即時通知旅行社、旅遊承辦商、「公共交通工具」及/或於「行程表」內提供服務的機構/人士；
- 任何未經航空公司、旅行社或其他有關機構證實的取消或縮短行程的損失；
- 任何受保於其他保險計劃的事項、政府計劃所承保的項目或已由「公共交通工具」、旅行社、旅遊承辦商或任何其他交通及/或住宿服務機構/人士承諾賠償或退款；
- 未能提供「醫生」之醫療報告；
- 一切毋須由「受保人」支付及/或已包括於「受保旅程」中的費用；
- 「受保人」拒絕依循「醫生」之建議返回「香港」接受治療，或在身體狀況許可下，拒絕繼續其「受保旅程」(只適用於第十四節-縮短行程)；或
- 基於同一原因於第十一節-旅程延誤同時提出的索償(只適用於第十四節-縮短行程)。

第十五節 – 遺失之信用卡被盜用

如「受保人」在「受保旅程」中因意外遺失信用卡因而導致信用卡被盜用所引致的金錢損失。「本公司」將根據保障表所列的「最高賠償額」為上限作出賠償。

第十五節的不承保事項

本節並不承保：

- 任何在發現遺失後24小時內未向當地警方、或酒店管理或公共機構報告及未能提供有關報告的任何損失；
- 在發現遺失信用卡後，未即時向當地有關簽發機構或代理公司報告；或
- 任何原因未明的遺失或神秘消失。

第十六節 – 租車自負額保障

如「受保人」在「受保旅程」中租用出租車輛，在駕駛途中發生碰撞，或車輛被偷竊、或遭到損毀；而在租用條款上包括自負額(或扣減及或類似條款)，「本公司」將根據保障表所列明的「最高賠償額」為上限賠償予「受保人」。因該車輛被偷竊或遭到損毀而引致的自負額賠償。本保障在每一「受保旅程」中只可賠償一次。

第十六節的特別條款

「受保人」必須購買有關出租車輛機構安排的汽車綜合保險以保障於租車期間對出租車輛之損失。

第十六節不承保事項

本節並不承保：

- 「受保人」違反任何租車條款或必要的車輛保險條款使用車輛所引致的任何損失；
- 「受保人」受到酒精或藥物影響下使用出租車輛所引致的任何損失；
- 「受保人」作出任何違法或非法行為使用出租車輛所引致的任何損失；
- 「受保人」沒有在當地的合法駕駛证件下駕駛出租車輛所引致的任何損失；或
- 「受保人」沒有購買可保障有關出租車輛的汽車綜合保險保單所引致的任何損失。

第十七節 – 缺席特別活動保障

如「受保人」因以下事故於「受保旅程」出發前90日(第(iii)項除外)內未能出席但已預先以「受保人」或其配偶之信用卡購買海外體育、音樂或娛樂活動之門票，而此門票不包括在旅行社安排之旅行團行程中，「本公司」將賠償此門票費用予「受保人」：

- 「受保人」、「直系親屬」或「同行人士」死亡、蒙受「嚴重損傷」或患上「嚴重疾病」；
- 「受保人」被傳召作證人、履行陪審員責任或需按規定接受隔離檢疫；或
- (iii) 在上述活動之原定開始時間前發生的「公共交通工具」的機械及/或電路故障。

第十八節 – 醫療快線中國醫療卡服務 (只適用於全年旅遊計劃)

如「受保人」在「受保旅程」期間於「中國」內蒙受「損傷」或感染「疾病」而需入住醫院，於入住「指定醫院」時，「本公司」會根據列於保障表第一節(a) - 醫療費用所載之「最高賠償額」為上限，保證「受保人」於入住該「指定醫院」期間的醫療費用。

第十八節的特別詞彙

「指定醫院」是指列明於由「本公司」所提供之醫療快線中國醫療卡指定醫院名單內之任何「醫院」。

第十八節的特別條款

- 「受保人」保證如有任何並不需由本保險單支付或並不是本保險單承保的醫療費用，又或有關之醫療費用已超過本保單第二部份之第一節(a)所列之「最高賠償額」，會於收到「本公司」發出的通知書後14日內償還有關費用。如「受保人」並未有於上述限期內償還有關費用，「本公司」有權暫停所有第十八節之保障，直至「受保人」向「本公司」償還有關費用。於保障被暫停期間或保單被取消，「受保人」需退還其醫療快線中國醫療卡予「本公司」及仍需對有關醫療費用欠款負責。
- 如「受保人」遺失其醫療快線中國醫療卡，應立即通知「本公司」及繳付100港元予「本公司」作為補領費用。
- 「受保人」於入住「指定醫院」治療時，需提供證明文件作身份認證，包括但不限於回鄉證、「香港」身份證或護照，「本公司」才會提供本節之保證金。
- 此節只適用於17歲以上之「受保人」。
- 醫療快線中國醫療卡「指定醫院」名單或會有所更改而不需事先通知。如「受保人」需要查詢有關最近的醫院或任何轉介服務，請致電蘇黎世緊急支援熱線：+852 2886 3977。

入住「指定醫院」手續

- 於辦公時間內，可到住院病人登記處辦理。
- 於非辦公時間，可到住院病人登記處或急症室辦理。
- 於辦理入院手續時需於有關「指定醫院」之病人登記處或急症處出示醫療快線中國醫療卡及有關身份證明文件，包括但不限於回鄉證、「香港」身份證或護照。
- 如於辦理入院手續時有任何問題，請致電蘇黎世緊急支援熱線：+852 2886 3977。

第三部份 – 不承保事項

本保險單將不會承保直接或間接由下列項目所引致的損失或責任：

- 任何「投保前已存在的傷疾」、先天及遺傳性疾；
- 「受保人」任何違法或非法行為，或被海關或其他機關充公、扣留、毀滅的財物；
- 「受保人」並未採取所有合理行動保障個人物品/金錢，或盡量避免蒙受「損傷」以減低對本保險提出索償機會；
- 以乘客或司機身份參與任何形式的賽車，又或參加職業體育活動或「受保人」可能或可以賺取收入或報酬的體育活動；
- 自殺或蓄意自我傷害；
- 神經錯亂、心智或精神不正常、受到酒精或藥物影響(除非由合格「醫生」處方)、酗酒、濫用藥物或其他混淆劑；
- 任何因妊娠、分娩或流產引致的狀況、墮胎，以及產前、產後護理及其他有關併發症、性病；
- 「受保人」以病人身份在「醫院」「住院」期間離院返家；
- 出任為任何空中乘載工具的機務人員或操作員；
- 「受保人」進行或涉及任何空中活動，除非當時「受保人」(i)是以付費乘客身份在持牌航空公司航機或包機上、或(ii)所參予之活動是由另一位已持牌帶領有關活動的人士負責操縱或航行而提供活動的舉辦者亦已獲當地有關當局授權；
- 從事任何體力勞動性工作、漁事、離岸活動如商業潛水、油田鑽探、採礦或空中攝影、處理爆炸品、演員、地盤工人、漁夫、廚師或廚房工人、導遊或領隊、從事或參與海陸空服務或活動或機械工作；
- 由於HIV(人類免疫力缺乏病毒)及/或愛滋病與HIV有關的任何疾病及/或不論如何引起或不論如何定名的有關疾病，其任何突變體衍化或變種造成的任何「損傷」、「疾病」、死亡、損失、費用或其他責任；
- 「戰爭」、侵略、外敵行動、敵對局面(不論曾正式宣戰與否)、內戰、叛亂、暴動、軍事力量或政變所引起的任何事件；
- 在海拔5,000米以上進行高山遠足，或在40米水深以下潛水；
- 任何「恐怖活動」，惟第一節 - 醫療保障、第二節 - 全球緊急支援、第三節 - 個人「意外」、第一節 - 旅程延誤、第三節 - 取消行程、第十四節 - 縮短行程及第十八節 - 醫療快線中國醫療卡服務除外；
- 「受保人」旅遊目的為醫療治療，或「受保人」在身體不適合旅遊的情況下旅遊；或「受保人」違反「醫生」勸喻出外旅遊；
- 已從其他方面獲得的賠償，惟第一節(b) - 海外「住院」現金津貼保障、第三節 - 個人「意外」、第四節 - 身故恩恤金及緊急啟程、第十一節(a) - 旅程延誤及第十二節 - 行李延誤津貼除外；或
- 任何持有中華人民共和國護照及以往往返「中國」之「受保人」，但若該「受保人」同時擁有由其他國家政府(「中國」除外)所簽發的法定文件證明為該地合法居民，則本項不適用。
- 本保單將不會承保直接或間接由下列原因造成的任何費用、間接損失、法律責任或任何損失或損毀：
 - 任何核子燃料、核子燃燒後所產生的核子廢料所產生的電離子輻射或放射性污染；
 - 任何核能裝置或元件所產生的放射性、有毒、爆炸性或其他危險物質。

第四部份 – 一般條款

- 本保險單生效時「受保人」的身體健康狀況必須適合旅遊；否則「本公司」有權拒付本保險單的賠償款項。
- (只適用於單次旅遊計劃)若旅遊人士之啟程地點不在「香港」、本保單內(惟不包括以下部份：第一部份的「香港」及「中國」定義及第五部份的條款)所提供「香港」的字詞(貨幣除外)將更改為出境國家，但該行程必須經「香港」安排及付款。除非「受保行程」的啟程及回程兩個地點均為「香港」，否則下列之保障亦不適用：第一節(a) - 覆診費用及第九節 - 因爆竊而損失家居物品。
- (只適用於單次旅遊計劃) 所有旅程均需由香港啟程。
- 單次旅遊計劃中 保險單一經簽發，恕不退還任何保費，而保險單亦不能續保。
- 如「受保人」因「受保旅程」開始後發生不能控制的事故而未能於原列於由旅行社或「公共交通工具」機構發出的「行程表」內之日期完成其「受保旅程」，「本公司」會免費延長保險的受保期至「受保人」能合理及必須地完成其「受保旅程」，惟最長以十日為上限。
- 單次旅遊計劃的每次最長「受保旅程」期限不得超過180天；全年旅遊計劃的每次最長「受保旅程」期限不得超過90天。如「受保人」不會返回「香港」及只購買單程的單次旅遊計劃，其「受保旅程」最長期限不得超過達所申報之最終目的地後七天。
- 本保障只適用於常規的假期旅遊及商務旅遊(只限不涉及任何體力勞動的文書工作)。本保險亦不適用於「受保人」進行探險、跋涉、附有裝備之登山運動或類似旅程。
- 若「受保人」為同一「受保旅程」購買多於一份由「本公司」或「本公司」之附屬公司承保的「自願性旅遊保險保單」及於同一事故索償相同之保障：
 - 除本保單第二部份第一節(a) - 醫療費用保障及第三節 - 個人「意外」保障外，賠償均以有關相同保障中最高保障額的一份保單為準。
 - 於醫療費用保障中，「本公司」對同一事故之索償所負之責任及合共總賠償不會超過1,500,000港元，或以最高保障額的一份保單為限，以較高者為準。
 - 於個人「意外」保障中，「本公司」對同一事故之索償所負之責任及合共總賠償不會超過1,500,000港元(如「受保人」年齡為76歲或以上或17歲或以下，則為750,000港元)，或以最高保障額的一份保單為限，以較高者為準。

- 於醫療費用中的覆診費用內包括之中醫跌打、針灸或脊椎治療費用中，「本公司」對同一事故之索償所負之責任及合共總賠償不會超過3,000港元。

第五部份 – 基本條款

1. 整體協議

本保險單包括所有「文件」，乃立約各方之間的整體協議。任何代理或其他人士均無權更改或豁免本保險單的任何條款。

本保險單如有任何修改，必須獲得「本公司」批准並簽發批單作實，方始生效。

2. 年齡限制

單次旅遊計劃： 本保險提供保障予任何年齡之「受保人」。

全年旅遊計劃： 除「本公司」另予書面同意外，在本保險單生效日，「受保人」的年齡必須為70歲或以下，並可續保至75歲。

於家庭保障中(不論是單次旅遊計劃或全年旅遊計劃)，同行之兒童年齡必須為17歲或以下。

3. 年齡錯誤陳述

如「受保人」年齡被錯誤陳述，「本公司」會按正確年齡應付之保費而退回或收取保費的差額。倘「受保人」投保時的正確年齡未符合本保險單的要求或已超出限制，「本公司」只會退回保費而不負責任何承保責任，「本公司」亦有權完全取消此保單。所有於家庭保單中受保的兒童均不會獲退回任何保費。

4. 索償通知

「受保人」必須於引致損失的事件發生後30天內向「本公司」遞交索償通知書。如「受保人」意外死亡，其合法代理人必須立刻通知「本公司」。

5. 損失證明

所有損失證明文件需於「本公司」收到賠償申報表後30日內呈交給「本公司」。倘有合理的緣由不能於限期內將有關證明文件送交「本公司」，但已盡可能於限期後立即送出，且不得超過180日之限，則不會被視為放棄申請賠償的權利。「本公司」所需之證書、資料及證據，須依據「本公司」所定之形式及性質提交，所有費用需由索償者負責，「本公司」概不會負責任何費用。

6. 身體檢查

如「受保人」蒙受非致命「損傷」，「本公司」有權按需要要求由「本公司」指定的醫療機構為「受保人」進行身體檢查。如「受保人」身故，「本公司」有權自費進行驗屍。

7. 支付索償

如「受保人」身故，「本公司」將支付賠償予「受保人」的遺產承辦人。所有其他賠償一律付予「受保人」，惟第二節(b) - 緊急醫療運送及第二節(c) - 遺體運返則實報實銷，直接付予服務提供者。

8. 責任索償

「受保人」未經「本公司」同意，不可承認、否認或解決任何索償。

9. 報稅資料

如「受保人」或任何「受保人」的代表於投保表格或就任何索償知情地作出任何虛假聲明，「本公司」概不就任何索償履行賠償責任。本保險單規定之所有保障亦停止生效，或「本公司」有權完全取消此保單。如「受保人」已支付本保單之任何保費，「受保人」必須於收到「本公司」發出之還款通知書後七日內退還有關之保障賠償予「本公司」。

10. 法律訴訟

依據本保險單規定，當索償證明文件送交「本公司」後，60日內不得進行法律訴訟以求賠償。此外，「受保人」亦不得在「本公司」要求其提供索償證明的指定限期屆滿一年後提出訴訟。

11. 管轄法律及司法裁判權

本保險單受「香港」法律管轄及按其詮釋，並且服從「香港」的專有司法裁判權。

12. 代位權

「本公司」有權自費以「受保人」名義對任何導致索償的承保事件的第三者進行追討。

13. 替代性爭議解決方案

如有任何關乎本保單出現的爭議，爭議各方可根據「香港」司法機構為民事調解所訂立及爭議當時所適用之有關實務指示，真誠進行調解。所有未能解決之爭議，一律按照「香港」法例第609章《仲裁條例》及不時生效的修訂本以仲裁方式裁定。整個仲裁過程必須在「香港」進行，並由爭議各方同意之單一仲裁人裁定。現明文述明，在爭議各方根據本保單行使任何法律權利前，必須先取得仲裁決定。不論任何類型爭議解決方案的任何狀況或結果，如「本公司」否認或否決「受保人」追索本保單之任何責任，而並未能於「本公司」所發出之通知12個月內按以上規定展開仲裁，「受保人」之賠償申請即被視作撤回或放棄，並且不能根據本保單再次進行追討。

14. 遵從基本條款

如「受保人」違反本保險單任何條款，所有就本保險單提出的索償均告無效。

15. 蘇黎世全球緊急支援服務

蘇黎世全球緊急支援機構乃是一間獨立公司，為「受保人」提供服務。如該機構之員工、代理或代表有任何錯漏或疏忽，皆與「本公司」、「本公司」的附屬機構、代理或旗下的員工無關。

16. 其他保險

如「受保人」於索償時同時受保於其他保險公司保單內的相同保障，「本公司」只會按比例作出賠償(惟第一節(b) - 海外「住院」現金津貼保障、第三節 - 個人「意外」、第四節 - 身故恩恤金及緊急啟程、第十一節(a) - 旅程延誤及第十二節 - 行李延誤津貼除外，並會按本保單所列作出賠償)。

只適用於全年旅遊計劃的額外基本條款

17. 取消保單

「本公司」或「受保人」均有權取消本保險單。任何一方只需給予30天書面通知，而該通知書需郵寄至對方最後登記的地址。如屬「本公司」取消保單，「本公司」會按比例退回餘下已繳付之保費予「受保人」。如屬「受保人」取消保單，如在該段保單生效期間無索償紀錄，已繳交之全年保費將根據下列適用之收費比率計算扣減，但在任何情況下不可低於「本公司」慣常收取之最低保費，並必須於該段保險單生效期間內沒有索償紀錄。

保障期	收費比率
兩個月(即慣常收取的最低保費)	40%
三個月	50%
四個月	60%
五個月	70%
六個月	75%
超過六個月	100%

18. 保障終止

本保險單之保障將會在遇到下列較早發生的一項時自動終止：

- 寬限期內仍未有繳交任何保費，則以欠繳保費之到期日為止；
- 「受保人」於保單續保日時年齡已到達76歲；
- 於家庭保單中的受保兒童於保單續保日時年齡已到達18歲；
- 「本公司」會按收到「受保人」的書面通知上註明終止保障的日期為準，惟該終止保障通知必須在保費到期日之三十天前提出；或
- 根據本部份第九項-虛報資料所述之情況。

19. 寬限期

「受保人」付訖首期保費後，「本公司」將於每次保費到期時給予「受保人」31天寬限期。在寬限期間內，本保險單仍維持有效。如於寬限期屆滿後尚未繳清保費，本保險單將於欠繳保費到期日起被視為過時失效。

20. 重訂保單

倘保費到期而未有繳訖以致本保險單失效，本保險單或可復效但必須獲得「本公司」同意。但於本保險單失效期間發生之索償不會獲得任何保障，本保險單仍於復效日重新開始，而「投保前已存在之傷疾」會再度執行。

21. 續訂保單

於任何保單年度內，續訂本保險單時，不論「受保人」已否接受續保，「本公司」保留權利更改條款及條件，包括但不限於保費、保障、或不承保事項。「本公司」毋須披露有關修訂的原因。在任何一个保單年度內，如「受保人」在生效日前尚未接受此修訂，有關保單之續保將不會生效。

賠償程序

步驟一：於可能導致索償的事件發生後30天內通知「本公司」。

步驟二：填寫賠償申報表及提交下列適當證明文件。

醫療費用

- 經「醫生」證明的診斷及治療，包括「受保人」的姓名、症狀、診治日期及收據
- 詳列各項費用之診所或「醫院」正本賬單

個人「意外」

- 「醫生」簽發的證明書，證明傷殘的嚴重程度
- 如適用者，提供警方報告

「意外」死亡/身故恩恤金

- 死亡證
- 法醫官報告
- (如屬失蹤) 因所乘搭的交通工具發生沉沒或撞毀，引致法院宣佈「受保人」假設死亡的證明或以致屍體失蹤一年的證明文件

行李保障、個人現金、旅遊證件及/或「旅行票」遺失

- 收據，包括遺失或損壞物件之購買日期、價格、型號及類別
- 如行李在轉境時遺失，提交正式文件如航空公司的財物紊亂報告/「公共交通工具」機構的正式通知或確認書
- 警方報告 (必須於事發後24小時內發出)
- 致旅行支票簽發機構之遺失通知書副本 (必須於事發後24小時內發出)

信用卡保障

- 以信用卡簽賬的持卡人存根、票據、單據及/或付款收據

因爆竊而損失家居物品

- 收據包括遺失或損壞物品的購買日期、價格、型號及類別
- 警方報告(必須於「受保旅程」結束後24小時內發出)

個人責任

- 事發或事件經過及聲明 (未經「本公司」書面同意，不得承認責任或作出解決或協議)
- 就事發或事件收到的所有有關文件(包括任何法院傳票副本、所有法院文件、律師函件及其他法律往來文件)

旅程延誤或因旅程延誤引致之更改行程費用

- 提交正式文件如航空公司的延誤報告/「公共交通工具」機構所發出的正式文件，包括日期、時間及延誤的時間、未使用原定「行程表」及票據，為抵達預先計劃目的地而更改行程的票據

行李延誤津貼

- 提交正式文件如航空公司的財物紊亂報告/「公共交通工具」機構所發出的正式文件，包括日期、時間及延誤的時間
- 在「受保旅程」中緊急購買物品的收據

取消或縮短行程或缺席特別活動保障

- 所有賬單、收據、代用券、信用卡繳費單或呈交實際的門票
- 經「醫生」證明的診斷及治療，包括「受保人」/「直系親屬」/「同行人士」的姓名、症狀、診治日期及收據
- 證人/陪審員傳票或傳召出庭令或隔離檢疫之文件
- 「受保人」的「主要居所」損毀證明
- 提交「公共交通工具」機構所發出的正式文件證明其機械及/或電路故障，並包括日期及時間

遺失之信用卡被盜用

- 警方報告 (必須於事發後24小時內發出)
- 顧客存留之信用卡購物收據、賬單、發票及/或付款收據

租車自負額保障

- 租車合約之副本
- 已詳細列出保障範圍及自負額的出租車輛的汽車綜合保險副本
- 由租車公司及/或警方有關事故之報告，該報告需詳細列明事故的明細
- 由租車公司發出有關租用該車輛之正式收據

如有需要，「本公司」將要求索償人提供額外之有關文件以供處理索償事宜用途。

求助須知

如「受保人」急需協助，可致電「香港」蘇黎世24小時緊急支援熱線：+852 2886 3977，說出「受保人」姓名及載於「附表」上的保單號碼。「本公司」的資深援助主任將處理「受保人」的查詢及提供協助。

如需索償，請致電「本公司」賠償熱線：+852 2903 9388。聯絡客戶服務，請致電「本公司」查詢熱線：+852 2968 2288。辦公時間為星期一至星期五上午9時至下午5時30分。

此乃中文譯本，僅供參考之用。若與英文版本有異，概以英文版本為準。

TravelCare Insurance Policy Rider

In consideration of payment of additional premium, it is hereby declared and agreed that:

- (1) the Compensation Table in Section 3 – Personal Accident under Part 2 – Benefits is deemed to be deleted and replaced by the follows:

Compensation Table		
Events		Percentage of <i>Maximum Benefits</i>
1.	Death	100%
2.	<i>Permanent total disablement</i>	100%
3.	<i>Permanent and incurable paralysis of all limbs</i>	100%
4.	<i>Permanent total loss of sight of both eyes</i>	100%
5.	<i>Permanent total loss of sight of one eye</i>	100%
6.	Loss of or the <i>permanent total loss of use of two limbs</i>	100%
7.	Loss of or the <i>permanent total loss of use of one limb</i>	100%
8.	<i>Loss of speech and hearing</i>	100%
9.	<i>Permanent and incurable insanity</i>	100%
10.	<i>Permanent total loss of hearing in</i> i) both ears ii) one ear	75% 15%
11.	<i>Loss of speech</i>	50%
12.	<i>Permanent total loss of the lens of one eye</i>	50%
13.	Loss of or the <i>permanent total loss of use of four fingers and thumb of</i> i) right hand ii) left hand	70% 50%
14.	Loss of or the <i>permanent total loss of use of four fingers of</i> i) right hand ii) left hand	40% 30%
15.	Loss of or the <i>permanent total loss of use of one thumb</i> i) both right joints ii) one right joint iii) both left joints iv) one left joint	30% 15% 20% 10%
16.	Loss of or the <i>permanent total loss of use of fingers</i> i) three right joints ii) two right joints iii) one right joint iv) three left joints v) two left joints vi) one left joint	15% 10% 7.5% 10% 7.5% 5%
17.	Loss of or the <i>permanent total loss of use of toes</i> i) all toes - one foot ii) great toe - both joints iii) great toe - one joint	20% 7.5% 5%
18.	<i>Permanent Disability not otherwise provided for under Events 10 to 17 inclusive, such percentage of the sum insured as we shall in its absolute discretion determine and being in its opinion not inconsistent with the Compensation provided under Events 10 to 17 inclusive.</i>	
Third Degree Burns		
Area	Damage as a percentage of total surface area	Percentage of <i>Maximum Benefits</i>
Head	(a) Equal to or greater than 12% damage of total head surface area	100%
	(b) Equal to or greater than 8% but less than 12% damage of total head surface area	75%
	(c) Equal to or greater than 5% but less than 8% damage of total head surface area	50%
	(d) Equal to or greater than 2% but less than 5% damage of total head surface area	25%
Body (Exclude Head)	(a) Equal to or greater than 20% damage of total body surface area	100%
	(b) Equal to or greater than 15% but less than 20% damage of total body surface area	75%
	(c) Equal to or greater than 10% but less than 15% damage of total body surface area	50%

- (2) Section 11(a) – Travel Delay under Part 2 – Benefits is deemed to be deleted and replaced by the follows:

Section 11(a) Travel Delay

In the event that the *public common carrier* in which the *insured person* has arranged to travel is delayed for at least six (6) hours from the departure or arrival time specified in the *insured person's* original itinerary as a result of strike or other industrial action, riot, civil commotion, hijack, *terrorism*, adverse weather conditions, natural disaster, mechanical and/or electrical breakdown of the *public common carrier*, we will pay HK\$300 for each and every full six (6) hours of delay up to the *maximum benefits* as stated in the Table of Benefits under the plan selected.

This section is extended to cover in the event that the Security Bureau of HKSAR Government issues a Red or Black Color-Coded alert in accordance with the Outbound Travel Alert System and the circumstances leading to the issuance of such alert delay the departure or arrival time of the *public common carrier* specified in the *insured person's* original itinerary, we will pay HK\$300 for each and every full six (6) hours of delay up to a maximum of HK\$1,500. Should the circumstances leading to the issuance of such alert is same as any one (1) of the named perils listed above, the insured person can only claim for the Travel Delay above or this extended cover under Travel Delay.

The period of delay will be calculated from either:

- departure delay will be calculated from the original scheduled departure time of the *public common carrier* specified in the itinerary supplied to the *insured person* until the actual departure time of (i) the original *public common carrier* or (ii) the first available alternative transportation offered by that *public common carrier*; or
- arrival delay will be calculated from the original arrival time specified in the itinerary provided by the *public common carrier* supplied to the *insured person* until the actual arrival time of (i) the original *public common carrier* or (ii) the first available alternative transportation offered by that *public common carrier*.

The *insured person* can only claim for either departure or arrival delay of the same *public common carrier*. If the *insured person* has consecutive connected flights, each period of delayed hours cannot be accumulated and the proximate cause of the delay must be due to the above-mentioned reasons.

- (3) Section 14 – Curtailment of Trip under Part 2 - Benefits is deemed to be deleted and replaced by the follows:

Section 14 – Curtailment of Trip

In the event that the *insured person* has to abandon the *insured journey* and return to Hong Kong after the *insured journey* has begun due to:

- death, *serious physical injury* or *serious illness* of the *insured person*, *immediate family member*, *close business partner* or *travel companion*;
- unexpected outbreak of strike, riot, civil commotion, *terrorism*, adverse weather conditions or natural disaster at the planned destination which prevents the *insured person* from continuing with his/her scheduled journey;
- serious damage to the *insured person's principal home* in Hong Kong arising from fire, flood or burglary;
- the Security Bureau of HKSAR Government issues a Red Color-Coded alert in accordance with the Outbound Travel Alert System at the planned destination which prevents the *insured person* from continuing with his/her scheduled journey;

we will pay for the loss of unused travel fare and/or accommodation expenses for which the *insured person* is legally liable and which is not recoverable from any other sources, or additional actual travel fare and accommodation expenses reasonably and necessarily incurred.

Curtailment expenses payable in relation to the amount of travel fare and/or accommodation expenses forfeited will be calculated in proportion to the number of days remaining after the relevant interruption of the *insured journey*.

In the event of (iv) above, the maximum indemnity payable shall be 50% of the curtailment expenses payable.

The *insured person* can only claim for either the forfeited expenses for the *insured journey* or additional expenses incurred for the curtailment. In no event shall the total amount payable under Section 14 - Curtailment of Trip exceed the *maximum benefits* as stated in the Table of Benefits.

Subject otherwise to the terms, conditions, limitations and exclusions of the Policy.

「暢遊樂」旅遊保險單附加保障契約

「本公司」根據已收取之額外保費，於此聲明及同意本保單之保障更改如下：

(1) 於第二部份第三節 - 個人「意外」之賠償表已刪除及已由以下所取代：

賠償表

保障項目		「最高賠償額」百分比
1.	意外死亡	100%
2.	「永久完全傷殘」	100%
3.	四肢「永久」癱瘓	100%
4.	雙眼「永久」完全「失明」	100%
5.	一眼「永久」完全「失明」	100%
6.	喪失任何雙肢（「失肢」）或任何雙肢「永久」完全「殘廢」	100%
7.	喪失任何一肢（「失肢」）或任何一肢「永久」完全「殘廢」	100%
8.	「喪失說話能力」及「失聰」	100%
9.	「永久」及無法痊癒之精神錯亂	100%
10.	「永久」完全「失聰」： i) 雙耳 ii) 單耳	75% 15%
11.	完全「喪失說話能力」	50%
12.	「永久」完全喪失一眼晶狀體	50%
13.	喪失四隻手指及姆指或「永久」完全「殘廢」 i) 右手 ii) 左手	70% 50%
14.	喪失四隻手指或「永久」完全「殘廢」 i) 右手 ii) 左手	40% 30%
15.	喪失一隻姆指「永久」完全「殘廢」 i) 兩個右關節 ii) 一個右關節 iii) 兩個左關節 iv) 一個左關節	30% 15% 20% 10%
16.	喪失手指或「永久」完全「殘廢」 i) 三個右關節 ii) 兩個右關節 iii) 一個右關節 iv) 三個左關節 v) 兩個左關節 vi) 一個左關節	15% 10% 7.5% 10% 7.5% 5%
17.	喪失腳趾或「永久」完全「殘廢」 i) 所有腳趾 一隻腳 ii) 腳拇趾 兩個關節 iii) 腳拇趾 一個關節	20% 7.5% 5%
18.	倘「完全」傷殘狀況並未包括於上述保障項目10至17內，「本公司」有絕對決定權以符合上述傷殘程度之比例釐定應予賠償投保額之百份比，但不會與以上第10至17項之百份比不一致。	
「三級燒傷」		
部位	燒傷部位佔表面總面積的百分比	「最高賠償額」百分比
「頭部」	(a) 燒傷佔「頭部」表面總面積達12%或以上	100%
	(b) 燒傷佔「頭部」表面總面積達8%或以上，但不足12%	75%
	(c) 燒傷佔「頭部」表面總面積達5%或以上，但不足8%	50%
	(d) 燒傷佔「頭部」表面總面積達2%或以上，但不足5%	25%
身體 (不包括 「頭部」)	(a) 燒傷佔身體表面總面積達20%或以上	100%
	(b) 燒傷佔身體表面總面積達15%或以上，但不足20%	75%
	(c) 燒傷佔身體表面總面積達10%或以上，但不足15%	50%

(2) 於第二部份第十一節(a) – 旅程延誤之保障內容已刪除及已由以下所取代：

第十一節(a) – 旅程延誤

如「受保人」安排乘坐及列明於原定行程表上之「公共交通工具」因罷工或其他工業行動、騷亂、暴亂、劫機、「恐怖活動」、惡劣天氣、天災、「公共交通工具」的機械及/或電路故障而延誤超過六小時，則每滿六小時的延誤，「本公司」會賠償港幣300元，最高至保障表所選計劃所列的「最高賠償額」為上限。

本節亦伸延保障「受保人」安排乘坐及列明於原定行程表上之「公共交通工具」因香港特區政府保安局根據外遊警示制度發出黑色或紅色警示，而引起有關外遊警示之狀況導致「受保人」安排乘坐之「公共交通工具」延誤超過六小時，則每滿六小時的延誤，「本公司」會賠償港幣300元，最高至港幣1,500元。如引起有關外遊警示之狀況與上段所列明之任何受保狀況相同，「受保人」只可索償上段之旅程延誤或此伸延保障其中一項。

延誤時間將以下列其中一項方式計算：

- 出發延誤是由列明於「受保人」原定行程表上之「公共交通工具」的開出時間，直至 (i) 該「公共交通工具」的實際開出時間或 (ii) 由該「公共交通工具」機構安排的首班取替交通工具的實際開出時間作出計算；或
- 到達延誤是由列明於「受保人」原定行程表上之「公共交通工具」的到達時間，直至 (i) 該「公共交通工具」的實際到達時間或 (ii) 由該「公共交通工具」機構安排的首班取替交通工具的實際到達時間作出計算。

在同一班次的「公共交通工具」延誤下，「受保人」只可索償出發延誤或到達延誤其中一項。假如「受保人」有連續的接駁航班，則不可累積計算每段航班的延誤時間，而延誤的主因必須為上述事故所導致。

(3) 於第二部份第十四節 – 縮短行程之保障內容已刪除及已由以下所取代：

第十四節 – 縮短行程

如「受保人」於「受保旅程」啟程後因以下事故而必需放棄行程返回「香港」：

- 「受保人」、「直系親屬」、「緊密商業夥伴」或「同行人士」死亡、蒙受「嚴重損傷」或患上「嚴重疾病」；
- 預定的行程目的地突然發生「受保人」不可預見的罷工、騷亂、劫機、暴亂、「恐怖活動」、惡劣天氣或天災，以致「受保人」未能繼續其已計劃的行程；
- 「受保人」在「香港」的「主要居所」因火災、水浸或盜竊而遭嚴重損毀；
- 預定的行程目的地突然因香港特區政府保安局根據外遊警示制度發出紅色警示，以致「受保人」未能繼續其已計劃的行程；

「本公司」將賠償「受保人」未有使用及無法從其他途徑追討已支付及須依法支付的旅遊費用及/或住宿費用，或額外所衍生的實際而合理的交通及住宿費用。

縮短行程保障是根據「受保旅程」中斷後，按比例賠償剩餘「受保旅程」日數中未有享用的旅遊費用及/或住宿費用。

如因上述(iv)之狀況而縮短行程，「本公司」只會賠償有關縮短行程費用之百分之五十。

「受保人」只可索償上述未有享用的旅遊費用及/或住宿費用或因縮短行程而衍生的額外交通及住宿費用其中一項。在任何情況下，第十四節的總賠償額不可超過保障表所選計劃規定之「最高賠償額」。

其他條款、條件及不保事項則以保單為準。

(此中文譯本乃供參考之用，如有異議，均以英文為準)

Notice to Customers relating to the Personal Data (Privacy) Ordinance (“Ordinance”)

1. The personal information of customers (include policy owners, insured persons, beneficiaries, premium payors, trustees, policy assignees and claimants) collected or held by **Zurich Insurance Company Ltd (“Company”)** may be used by the Company for the following **obligatory purposes** necessary in providing services to the customers (otherwise the Company is unable to provide services to customers who fail to provide the required information):
 - (1) to process, investigate (and assist others to investigate) and determine insurance applications, insurance claims and provide ongoing insurance services;
 - (2) to process requests for payment, and for direct debit authorization;
 - (3) to manage any claim, action and/or proceedings brought against the customers, and to exercise the Company’s rights as more particularly defined in applicable policy wording, including but not limited to the subrogation right;
 - (4) to compile statistics or use for accounting and actuarial purposes;
 - (5) to meet the disclosure requirements of any local or foreign law, regulations, codes or guidelines binding on the Company and/or its group (“**Zurich Insurance Group**”) and conduct matching procedures where necessary;
 - (6) to comply with the legitimate requests or orders of the courts of Hong Kong and regulators including but not limited to the Insurance Authority, Hong Kong Federation of Insurers, auditors, governmental bodies and government-related establishments;
 - (7) to collect debts;
 - (8) to facilitate the Company’s authorized service providers to provide services to the Company and/or the customers for the above purposes; and
 - (9) to enable an actual or proposed assignee of the Company to evaluate the transaction intended to be the subject of the assignment.
2. The Company may provide any personal information of customers to the following parties, within or outside of Hong Kong, for the **obligatory purposes**:
 - (1) companies within the Zurich Insurance Group, or any other company carrying on insurance or reinsurance related business, or an intermediary;
 - (2) any agent, contractor or third party service provider who provides administrative, telecommunications, computer, payment or other services to the Zurich Insurance Group in connection with the operation of its business;
 - (3) third party service providers including legal advisors, accountants, investigators, loss adjusters, reinsurers, medical and rehabilitation consultants, surveyors, specialists, repairers, and data processors;
 - (4) credit reference agencies, and, in the event of default, any debt collection agencies or companies carrying on claim or investigation services;
 - (5) any person to whom the Zurich Insurance Group is under an obligation to make disclosure under the requirements of any law binding on the Zurich Insurance Group or any of its associated companies and for the purposes of any regulations, codes or guidelines issued by governmental, regulatory or other authorities with which the Zurich Insurance Group or any of its associated companies are expected to comply;
 - (6) any person pursuant to any order of a court of competent jurisdiction;
 - (7) any actual or proposed assignee of the Zurich Insurance Group or transferee of the Zurich Insurance Group’s rights in respect of the policy owners.
3. *Certain personal information of policy owners and insured persons collected or held by the Company, in particular, names, contact information, age, gender, identity document reference, marital status, policy information, claim information, and medical history may be used by the Company for the following **voluntary purposes**:*
 - (1) *to provide marketing materials and conduct direct marketing activities in relation to insurance and/or financial products and services of the Zurich Insurance Group and/or other financial services providers, and/or other related services of business partners, with whom the Company maintains business referral or other arrangements;*
 - (2) *to perform customer analysis, profiling and segmentation; and*
 - (3) *to conduct market research and insurance surveys for the Zurich Insurance Group’s development of services and insurance products.*

The Company is not allowed to use the personal information of any customer for the above voluntary purposes without such customer’s consent. In the absence of any “opt-out” request, the Company shall treat the insurance application and continuation of the policy(ies) held with the Company as an indication of no objection of such policy owner and insured person to the Company’s use of their personal information for the above voluntary purposes.
4. *The Company may provide certain personal information, in particular, name, contact information, age, gender and policy information of a policy owner and an insured person, upon such policy owner’s and insured person’s written consent, to the following parties, within or outside of Hong Kong, for the **voluntary purposes**:*
 - (1) *companies within the Zurich Insurance Group;*
 - (2) *other banking/financial institutions, commercial or charitable organisations with whom the Company maintains business referral or other arrangements;*
 - (3) *third party marketing service providers and insurance intermediaries.*

The Company is not allowed to provide to any third party the personal information of any customer, specifically, policy owners or insured persons, for the above voluntary purposes without their written consent.
5. All customers have the right to access to, correct, or change any of their own personal information held by the Company, and in the case of policy owners and life insured, opt-out of the Company’s use and transfer of their personal information for the voluntary purposes, by request in writing to the Company’s Personal Data Privacy Officer at the address below. Requests for opt-out must state clearly the full name, identity document number, policy number, telephone number and address of the person making such request. Policy owners and insured persons may otherwise delete both the above paragraphs 3 and 4 (in italics) to indicate their wish to opt-out altogether.

Personal Data Privacy Officer
26/F, One Island East
18 Westlands Road
Island East
Hong Kong

6. In accordance with the Ordinance, the Company has the right to charge a reasonable fee for processing any data access request.
7. In the event of any discrepancy or inconsistencies between the English and Chinese versions of this notice, the English version shall prevail.

有關個人資料（私隱）條例（「私隱條例」）的客戶通知

1. 由 Zurich Insurance Company Ltd（「本公司」）收集或持有的客戶（包括保單持有人、受保人、受益人、保費付款人、信託人、保單受讓人及索償人）個人資料，均可供本公司使用作以下**強制性用途**，以便為客戶提供服務（否則本公司將無法為未能提供所需資料的客戶提供服務）：
 - (1) 辦理，調查（及協助他人調查）和決定保險申請、保險索償及提供持續的保險服務；
 - (2) 辦理付款要求及直接付款授權；
 - (3) 處理任何對客戶的索償、訴訟及／或司法程序；以及行使本公司的權利（詳情見適用保單條款所定），包括但不限於代位權；
 - (4) 編撰統計數字，或作會計及精算用途；
 - (5) 符合對本公司及／或其所屬集團（「蘇黎世保險集團」）具約束力的任何本地或外國法例、規則、守則或指引的披露規定及如需要時進行核對程序；
 - (6) 遵循香港法院及監管機構作出的合法要求或指令，包括但不限於保險業監理處、香港保險業聯會、核數師、政府組織和政府相關機構；
 - (7) 債務追討；
 - (8) 便利本公司的認可服務供應商，就上述目的為本公司及／或客戶提供服務；及
 - (9) 使本公司的實際或建議承讓人能夠評核擬進行涉及有關轉讓的交易。
2. 本公司可就**強制性用途**，向以下於香港境內或境外的人士提供任何客戶個人資料：
 - (1) 蘇黎世保險集團成員公司，或任何進行保險或再保險相關業務的其他公司或中介人；
 - (2) 任何向蘇黎世保險集團提供行政、電訊、電腦、付款或其他與其業務運作有關的服務的代理人、承包商或第三方服務供應商
 - (3) 第三方服務供應商，包括法律顧問、會計師、調查員、理賠師、再保公司、醫護及復康顧問、考察員、專家、維修人員、及資料處理者；
 - (4) 信貸諮詢機構、而在客戶欠賬時，任何債務追收代理或進行索償或調查服務的公司；
 - (5) 根據對蘇黎世保險集團或其任何關連機構具約束力的任何法例，及就任何由政府、監管或其他機關所頒佈且蘇黎世保險集團或其任何關連機構預期須遵守的任何規例、守則或指引而言，蘇黎世保險集團有責任向其作出披露的任何人士；
 - (6) 根據主管司法權區的法院的任何頒令的任何人士；及
 - (7) 蘇黎世保險集團的任何實際或建議承讓人或蘇黎世保險集團對保單持有人的權利的受讓人。
3. 由本公司收集或持有的保單持有人及受保人的某些個人資料，特別是姓名、聯絡資料、年齡、性別、身份證明文件資料、婚姻狀況、保單資料、索償資料、及醫療紀錄等，均可供本公司使用作以下**自願性用途**：
 - (1) 為蘇黎世保險集團及／或與本公司維持業務引薦關係或其他安排之其他金融服務供應商的保險及／或金融產品及服務，及／或其他商業合作伙伴之相關服務，提供市場推廣資料及進行直接市場推廣活動；
 - (2) 進行客戶研究分析及分層；及
 - (3) 就蘇黎世保險集團的服務及保險產品發展進行市場調查及保險研究。未經客戶同意，本公司不得使用任何客戶的個人資料作上述自願性用途。在未有收到任何「反對」要求，本公司將把有關保險申請及持續投保，視作有關保單持有人及受保人之不反對本公司使用其個人資料作上述自願性用途。
4. 經保單持有人及受保人書面同意後，本公司可就上述**自願性用途**，向以下於香港境內或境外的人士提供其**某些**個人資料，特別是姓名、聯絡資料、年齡、性別、保單持有人及受保人的保單資料等：
 - (1) 蘇黎世保險集團成員公司；
 - (2) 與本公司維持業務引薦關係或其他安排的其他銀行／金融機構、商業或慈善組織；
 - (3) 第三方市場推廣服務供應商及保險中介人。未經客戶書面同意，本公司不得向任何第三方提供有關客戶（特別指保單持有人及受保人）的個人資料作上述自願性用途。
5. 所有客戶均有權以書面向本公司之個人資料私隱主任（地址如下）要求查閱、修正及／或更改由本公司所持有有關其本身的任何個人資料。如保單持有人及受保人欲反對本公司使用及提供其個人資料作上述自願性用途，亦可向本公司提出，並於有關反對要求中清楚註明要求人士之全名、身份證明文件編號、保單編號、電話號碼和地址。保單持有人及受保人亦可同時刪劃以上第3及4段（見斜字）以提出有關所有自願性用途之反對要求。

個人資料私隱主任
香港港島東華蘭路18號
港島東中心26樓
6. 根據私隱條例，本公司有權收取合理費用，藉以處理任何資料的查閱要求。
7. 本通知的中英文版本如有任何歧異或不一致，概以英文版為準。