Supplementary Product Disclosure Statement (SPDS)

This document is an **SPDS** that updates and amends the STA Travel Insurance Standard Cover Combined Financial Services Guide and Product Disclosure Statement (including Policy Wording) with the preparation date of 10 February 2017 (**PDS**).

This **SPDS** is issued by the insurer Allianz Australia Insurance Limited ABN 15 000 122 850 AFSL 234708 of 2 Market Street Sydney NSW 2000.

This **SPDS** must be read together with the **PDS** and any other SPDS that you are given which updates and amends the **PDS**.

The preparation date of this **SPDS** is 1 November 2018.

Background to the change

From 1 November 2018, the Australian Financial Complaints Authority or 'AFCA' is the new external dispute resolution (EDR) scheme to deal with complaints from consumers in the financial system. It replaces the Financial Ombudsman Service Australia (FOS).

Changes to the PDS

The change to the **PDS** is as follows:

IMPORTANT INFORMATION (page 13)

Replace the entire section headed 'DISPUTE RESOLUTION PROCESS' with:

DISPUTE RESOLUTION PROCESS

In this section "we", "our" and "us" means Allianz and Allianz Global Assistance.

If **you** are dissatisfied with **our** service in any way, contact **us** and **we** will attempt to resolve the matter in accordance with **our** Internal Dispute Resolution procedures.

You can contact us using the contact details on the back cover of this PDS, or put the complaint in writing and send it to The Dispute Resolution Department, PO Box 162, Toowong, Queensland 4066. To obtain a copy of our procedures, please contact us.

We are a member of an external dispute resolution scheme which is independent and free to **you**. We are bound by determinations made by it in accordance with its relevant terms and rules applicable to **us**. Any complaint or dispute can be lodged with the Australian Financial Complaints Authority (AFCA). The contact details for the AFCA are:

Australian Financial Complaints Authority

Online:	www.afca.org.au
Email:	info@afca.org.au
Phone:	1800 931 678
Mail:	Australian Financial Complaints Authority, GPO Box 3, Melbourne, Victoria 3001.

TRAVEL INSURANCE STANDARD COVER



Supplementary product disclosure statement



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ABOUT THIS SUPPLEMENTARY PRODUCT DISCLOSURE STATEMENT (SPDS)

This document is an SPDS that updates and amends the STA Travel Insurance Standard Cover Combined Financial Services Guide and Product Disclosure Statement with the preparation date 10 February 2017 (PDS) and replaces the STA Travel Insurance Standard Cover Supplementary Product Disclosure Statement with the preparation date 31 January 2018.

This SPDS is issued by the insurer Allianz Australia Insurance Limited ABN 15 000 122 850 AFSL 234708 of 2 Market Street Sydney NSW 2000.

This SPDS must be read together with the PDS.

The preparation date of this SPDS is 22 February 2018.

Changes to the PDS

This SPDS amends the PDS as follows:

Words with Special Meanings (pages 15 to 17)

Replace existing definition of "Hospital" on page 15 with:

"Hospital" means an established hospital registered under any legislation that applies to it, that provides in-patient medical care. It does not include any institution used primarily as a nursing or convalescent home, a place of rest, a geriatric ward, a mental institution, a rehabilitation or external care facility or a place for the treatment of alcoholism, drug addiction or substance addiction.

Replace existing definition of "Medical Adviser" on page 16 with:

"Medical Adviser" means a doctor (including a clinical psychologist) or dentist qualified to diagnose the condition or disorder, holding the necessary current certification in the country in which they are currently practising, and who is not you or your Travelling Companion, or a Relative or employee of you or your Travelling Companion.

Replace existing definition of "Pre-existing Medical Condition" with:

"Pre-existing Medical Condition" means a condition of which you were, or a reasonable person in your circumstances should have been, aware:

- 1. prior to the time of the policy being issued that is:
 - a chronic or ongoing:
 - medical condition;
 - dental condition; or
 - Mental Illness, or
 - a current pregnancy; or
 - a medical condition connected with your current or past pregnancy; or
 - related to in vitro fertilisation or another form of assisted reproductive treatment or procedure, or
- 2. in the ten (10) years prior to the time of the policy being issued that involves:
 - your heart, brain, circulatory system or blood vessels; or
 - your respiratory system; or
 - your kidneys, liver or pancreas; or
 - cancer; or
 - back pain requiring prescribed pain relief medication; or
 - surgery involving any joints, the neck, back, spine, brain, skull, abdomen or pelvis requiring at least an overnight stay in Hospital; or
 - diabetes mellitus (type 1 or type 2); or
 - Mental Illness; or
 - signs or symptoms for which you:
 - have not yet sought a professional opinion regarding the cause; or
 - are currently under investigation to define a diagnosis; or
 - are awaiting specialist opinion, or
- 3. in the two (2) years prior to the time of the policy being issued for which you:
 - have been in Hospital, required an emergency department visit or had day surgery; or
 - have been prescribed a new medication or had a change to your medication regime; or
 - had or required regular review or check-ups; or
 - have required prescription pain relief medication.

Replace existing definition of "Sick" or "Sickness" on page 17 with:

"Sick" or "Sickness" means a medical condition (including a Mental Illness), not being an Injury, the symptoms of which first occur or manifest after the date of issue of the Certificate of Insurance.

The Benefits (page 26)

In SECTION 3 - Amendment or cancellation costs, immediately above the heading 3.1 WE WILL PAY, a paragraph is inserted as follows:

If your claim arises from or is related to your fitness to travel, written proof from a Medical Adviser must be provided.

General Exclusions that apply to all Claims (pages 37 & 38)

Replace General Exclusion 13. Signs and symptoms on page 37 with:

- 13. Signs and symptoms: your claim arises from, is related to or associated with any physical or mental signs or symptoms that you were aware, or a reasonable person in your circumstances would have been aware, of before your Period of Insurance commenced, and:
 - a) you had not yet sought a medical opinion regarding the cause; or
 - b) you were currently under investigation to define a diagnosis; or
 - c) you were awaiting specialist opinion.

Delete General Exclusion 16. Mental illness on page 38

Insert new General Exclusion on page 38 as follows:

- Addiction: your claim arises from or is in any way related to or connected with:
 - you or any other person being hospitalised or confined to a clinic, where you or that other person (as the case may be) is being treated for addiction to drugs, substances or alcohol, or is using the Hospital or clinic as a nursing, convalescent or rehabilitation place; or
 - a therapeutic or illicit drug, substance or alcohol addiction suffered by you or any other person.



This insurance is issued and managed by AWP Australia Pty Ltd trading as Allianz Global Assistance ABN 52 097 227 177 AFS Licence no. 245631 74 High Street, Toowong QLD 4066

This insurance is underwritten by Allianz Australia Insurance Limited ABN 15 000 122 850 AFS Licence no. 234708 2 Market Street, Sydney NSW 2000

STA Travel Ltd is an authorised representative of AWP Australia Pty Ltd

CALL US: 1300 676 561 ONLINE: STATRAVEL.COM

OR VISIT YOUR NEAREST STORE WWW.STATRAVEL.COM.AU/STORES

Supplementary Financial Services Guide (SFSG)

This document is an **SFSG** that updates and amends the STA Travel Insurance Standard Cover Combined Financial Services Guide and Product Disclosure Statement (including Policy Wording) with the preparation date of 10 February 2017 (**Combined FSG and PDS**).

The distribution of this **SFSG** has been authorised by AWP Australia Pty Ltd ABN 52 097 227 177 AFS Licence No 245631 trading as Allianz Global Assistance.

This **SFSG** must be read together with the **Combined FSG and PDS** and any other SFSG or SPDS that you are given which updates and amends the **Combined FSG and PDS**.

The preparation date of this SFSG is 1 November 2018.

Background to the change

From 1 November 2018, the Australian Financial Complaints Authority or 'AFCA' is the new external dispute resolution (EDR) scheme to deal with complaints from consumers in the financial system. It replaces the Financial Ombudsman Service Australia (FOS).

Changes to the Combined FSG and PDS

This SFSG amends the Combined FSG and PDS as follows:

FINANCIAL SERVICES GUIDE (pages 41-42)

Replace the entire section headed 'IF YOU HAVE A COMPLAINT' with:

IF YOU HAVE A COMPLAINT

Should you have a complaint or dispute arising out of this insurance, or our employees, authorised representatives or service providers, please call **Allianz Global Assistance** on 1800 901 078 or put the complaint in writing and send it to PO Box 162, Toowong, Queensland 4066.

We are a member of an external dispute resolution scheme which is independent and free to you. We are bound by determinations made by it in accordance with its relevant terms and rules applicable to us. Any complaint or dispute can be lodged with the Australian Financial Complaints Authority (**AFCA**). The contact details for the **AFCA** are:

Australian Financial Complaints Authority

Online:	www.afca.org.au
Email:	info@afca.org.au
Phone:	1800 931 678
Mail:	Australian Financial Complaints Authority, GPO Box 3,
	Melbourne, Victoria 3001.

TRAVEL INSURANCE STANDARD COVER



Combined financial services guide and product disclosure statement (including policy wording)



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List of automatically covered activities Inside back cover

Contact us

Sales

Phone: 1800 901 078 Email: stasupport@allianz-assistance.com.au

Claims Phone: 1800 901 078

Email: travelclaims@allianz-assistance.com.au All Mail: Locked Bag 3038, Toowong DC, QLD, Australia 4066

24 Hour Emergency Assistance

Phone: 1800 010 075 (within Australia) Phone: +61 7 3305 7499 (reverse charge from Overseas) 24 Hour Emergency Assistance - see page 8

Part 1: Product Disclosure Statement

Product Disclosure Statement

A Product Disclosure Statement (PDS) is a document required by the Corporations Act 2001 (Cth) and contains information designed to help you decide whether to buy the policy and to compare it with other products you may be considering.

Parts 1 and 2 of this document make up the PDS.

This PDS sets out the cover available and the terms and conditions which apply. Please note that any recommendations or opinions in this document are of a general nature only and do not take into account your objectives, financial situation or needs.

This PDS, together with the Certificate of Insurance and any other document we tell you forms part of your Policy, make up your contract with Allianz. Please keep these documents in a safe place for future reference.

Understanding your policy and its important terms and conditions

To properly understand the policy's significant features, benefits and risks you need to carefully read:

- Part 1 Product Disclosure Statement (pages 1 to 13) which contains:
 - the benefit limits provided under each plan in the "Benefits Table" (pages 5 & 6);
 - any endorsements under "Options to Vary Cover" (page 7);
 - when you can choose your own doctor, when you should contact Allianz Global Assistance concerning 24 hour medical assistance, Overseas hospitalisation or medical evacuation, and more;
 - information on your Duty of Disclosure (including how the duty applies to you and what happens if you breach the duty), our privacy notice and dispute resolution process, and the Financial Claims Scheme.
- Part 2 Policy Wording (pages 14 to 39) which sets out:
 - important information on applicable Excesses;
 - the "Words with Special Meanings" (pages 15 to 18);
 - the benefits provided under each Section of the Policy;
 - when We will pay and when We will not pay a claim under each Section applicable to the cover you choose, certain obligations that you and we have when you are making a claim - if you do not meet them we may refuse to pay a claim;
 - "General Exclusions that apply to all Claims" which provides details of the general exclusions that apply to all covers and benefits (pages 37 to 39).

- Part 3 Financial Services Guide (pages 40 to 42).
- The Certificate of Insurance and any endorsements or other written changes to the Policy.

Applying for cover

When you apply for the Policy, we will confirm with you things such as the period of cover, your premium, what cover options and Excess will apply, and whether any standard terms are to be varied (this may be by way of an endorsement).

These details will be recorded on the Certificate of Insurance issued to you.

If we are unable to offer you the cover you seek, it will be because the particular product offered is not designed to cover a particular risk or risks including, but not limited to, some geographical regions or some ages. In such a case if you would like to discuss your options please use the contact details on the back cover of this PDS.

This PDS sets out the cover we are able to provide you with. You need to decide if the benefit limits, type and level of cover are appropriate for you and will cover your potential loss. If you have any queries, want further information about the Policy or want to confirm a transaction, please use the contact details on the back cover of this PDS.



About your premium

You will be told the premium payable for your Policy when you apply. In calculating the premium, we take into account a number of factors including your destination(s), length of Trip, the number of persons and age of persons to be covered under the Policy and the plan type you select. The amount of any excess payable and cover for additional options is also included in the calculation of your premium.

Your total premium reflects the amount we calculate to cover these factors as well as any relevant government charges, taxes or levies (such as stamp duty or GST) in relation to your Policy. These amounts are included in the total amount payable by you as shown in your Certificate of Insurance.

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

- Plan Plan A (*International*), which provides more cover, costs more than Plan B (*Domestic*).
- Destination higher risk regions cost more.
- Age higher age groups cost more.
- Excess the higher the Excess the lower the premium.
- Duration the longer your Trip and Period of Insurance, the more your Policy usually costs.

Cooling-off period

If you decide that you do not want your Policy, you may cancel it within 15 business days after you are issued your Certificate of Insurance and PDS, and you will be given a full refund of the premium you paid, provided you have not started your Trip or you do not want to make a claim or to exercise any other right under your Policy.

After this period, you can still cancel your Policy but we will not refund any part of your premium if you do.

Who is your Insurer?

This Policy is underwritten by Allianz Australia Insurance Limited (Allianz) ABN 15 000 122 850 AFS Licence No. 234708.

Who is Allianz Global Assistance?

Allianz Global Assistance is a trading name of AWP Australia Pty Ltd ABN 52 097 227 177 AFS Licence No. 245631. Allianz Global Assistance has been authorised by Allianz to enter into and arrange the Policy and deal with and settle any claims under it, as the agent of Allianz, not as your agent. Allianz Global Assistance acts under a binder which means that it can do these things as if it were the insurer. It administers all emergency assistance services and benefits of this insurance. You may contact Allianz Global Assistance in an emergency 24 hours a day, 7 days a week.

Updating the PDS

We may need to update this PDS from time to time if certain changes occur where required and permitted by law. We will issue you with a new PDS or a supplementary PDS to update the relevant information except in limited cases.

Where the information is not something that would be materially adverse from the point of view of a reasonable person considering whether to buy this product, Allianz Global Assistance may issue you with notice of this updated information (you can get a paper copy free of charge by calling us).

Preparation date

The preparation date of this PDS is 10 February, 2017.

		Per Adult	Per Adult
	Policy Benefits		
		Single	e Trip
1	Overseas Medical and Dental [^]	unlimited	\$Nil
2	Additional Expenses	\$100,000	\$10,000
* 3	Amendment or Cancellation Costs	\$5,000	\$5,000
* 4	Luggage and Travel Documents	\$3,000	\$3,000
5	Delayed Luggage Allowance [^]	\$300	\$Nil
* 6	Travel Delay Expenses	\$1,500	\$750
7	Resumption of Trip^	\$3,000	\$Nil
* 8	Hospital Incidentals [^]	\$3,000	\$Nil
9	Disability	\$20,000	\$10,000
*10	Accidental Death	\$20,000	\$10,000
11	Personal Liability	\$2,500,000	\$1,000,000
12	Medical and Dental Expenses in Australia	\$1,000,000 - only for Region 7	\$Nil

* sub-limits apply - refer to "**The Benefits**" section pages 21 to 36 for details. ^ you do not have cover under these Sections while travelling in Australia.

Summary of the Benefits

This is only a summary of the benefits provided and does not form part of the terms of insurance. Please read this PDS carefully to understand what this Policy covers. Importantly, please note that exclusions and limits apply.

Cover for Overseas medical treatment (including Hospital, surgical, nursing, ambulance and emergency dental expenses) if you are Injured or become Sick while on a Trip Overseas. Includes cover for overseas funeral expenses or repatriation of mortal remains.

Cover for Additional accommodation and travel expenses as a result of certain events including Sickness, natural disasters, loss of travel documents and strikes.

Cover if your Trip has to be re-arranged or cancelled due to unforeseen circumstances outside your control including Sickness, Injury, extreme weather conditions, exam re-sit or retrenchment.

Cover for accidental loss, damage to, or theft of, your Luggage and Personal Effects. Also cover for replacement cost of lost or stolen travel documents.

Cover to purchase essential emergency items Overseas if all your luggage is delayed by a Travel Services Provider for more than 24 hours.

Cover for Additional accommodation expenses if your scheduled transport is temporarily delayed for more than 6 hours.

Cover for the cost of airfares to resume your Trip if you need to return to Australia due to the ill health of a Relative or business partner.

Cover up to \$20 per night for the cost of miscellaneous expenses if you are hospitalised Overseas for at least 48 hours.

Benefit payable for total loss of sight in one or both eyes, or total loss of the use of a limb, within 12 months of, and because of, an Injury you sustained during your Trip.

Benefit payable to your estate if you die, within 12 months of, and because of, an Injury sustained during your Trip.

Cover for legal liability if your negligent act or omission during the Trip causes bodily injury or damage to property of other persons.

Cover for Hospital, medical and emergency dental expenses incurred by non-residents of Australia while travelling in Australia, provided you are not an eligible person as defined by the Health Insurance Act.

Policy Options

You can choose either of these 2 plans:

Plan A – International (includes Sections* 1 to 11 – if you have selected Region 7, then Section 12 is also included)

Plan B - Domestic (includes Sections 2, 3, 4, 6, 7, and 10 to 13

Options to Vary Cover

Excess choices (Plan A - International only)

If you purchase Plan A (International), you can choose your Excess.

The Excess options available are \$100 and \$250.

The higher the Excess you choose, the lower your premium will be. Your Excess will be shown on your Certificate of Insurance.

Pre-existing Medical Conditions

If you have a Pre-existing Medical Condition, we will not pay any claims arising from, related to or associated with that condition. This means that you may have to pay for an Overseas medical emergency and any associated costs, which can be prohibitive in some countries.

'*Pre-existing Medical Condition'* is defined in the section headed **"Words with Special Meanings"** on pages 16 & 17.

24 Hour emergency assistance

For emergency assistance anywhere in the world at any time, Allianz Global Assistance is only a telephone call away. The team will help with medical problems, locating nearest medical facilities, your evacuation Home, locating nearest embassies and consulates, as well as keeping you in touch with your family and work in an emergency.

If you are hospitalised, you or a member of your travelling party, MUST contact Allianz Global Assistance as soon as possible. If you do not, then to the extent permissible by law, we will not pay for



these expenses or for any evacuation or airfares that have not been approved or arranged by Allianz Global Assistance.

If you are not hospitalised but you are being treated as an outpatient and the total cost

of such treatment will exceed \$4,000, you MUST contact Allianz Global Assistance.

You can choose your own doctor

You are free to choose your own Medical Adviser or we can appoint an approved Medical Adviser to see you. You must, however, advise Allianz Global Assistance as soon as possible of your admittance to Hospital or your early return to Australia based on written medical advice.

Please note that if you do not get the medical treatment you expect, Allianz Global Assistance can assist you but neither Allianz nor Allianz Global Assistance are liable for anything that results from that.

In the event of a claim

Immediate notice of an event giving rise to a claim should be given to Allianz Global Assistance. Please advise your Policy number and contact phone number when you call.

24 Hour Emergency Assistance

- 1800 010 075 (within Australia); or
- the telephone number listed inside your Emergency Assistance Card corresponding to the country you are in; or



 +61 7 3305 7499 (reverse charge from Overseas for all countries not listed inside your Emergency Assistance Card).

Email: travelclaims@allianz-assistance.com.au

For claims purposes, evidence of the value of the property insured or the amount of any loss must be kept.

IMPORTANT

When travelling, remember to have this policy document, your policy number and Emergency Assistance Card with you at all times.

Claims

If you are admitted to Hospital or you anticipate you will incur medical expenses, you must immediately contact Allianz Global Assistance on the relevant 24 hour emergency assistance number.

If you need to make a claim, please follow the instructions on pages 18 to 21. Allianz Global Assistance will consider your claim within 10 business days of receiving a completed claim form and all necessary documentation. If they need additional information, a written notification will be sent to you within 10 business days.

The amount you pay towards a claim (Excess)

In the event of a claim, you may be required to pay an amount towards that claim. This amount is called an Excess. The amount you pay may vary depending on the plan purchased, and whether you have chosen the option to vary the level of Excess - refer to the section **"Options to Vary Cover"** on page 7 (Plan A – International only).

The Excess which applies to your Policy will be shown on your Certificate of Insurance.

This is only a summary of how Excesses will be applied and does not form part of the Policy conditions. Please see **'Policy Conditions'** on pages 18 to 21 for further details.

Important Information

Limitation of cover

Notwithstanding anything contained in this PDS we will not provide cover nor will we make any payment or provide any service or benefit to any person or party where providing such cover, payment, service or benefit would contravene or violate any applicable trade or economic sanction or any law or regulation.

Confirmation of cover

To confirm any Policy transaction, (if the Certificate of Insurance does not have all the information you require), call STA Travel using the contact details on the back cover of this PDS.

Extending your trip

You may extend your cover free of charge if you find that your return to Australia has been delayed because of one or more of the following:

- a bus line, airline, shipping line or rail authority you are travelling on, or that has accepted your fare or Luggage and Personal Effects, is delayed; or
- the delay is due to a reason for which you can claim under your Policy (subject to Allianz Global Assistance's written approval).

However, if you would simply like to be insured for longer than the original Period of Insurance, you must purchase a new policy through STA Travel prior to the expiry of your original Policy. Please note that if you purchase such a Policy, it will not be an extension of the previous Policy. If STA Travel accepts your application for the new policy, a new Period of Insurance will commence and you will be issued with a new Certificate of Insurance. The Period of Insurance on any Certificate cannot be longer than 12 months.

Cover cannot be extended:

- for any Pre-existing Medical Condition;
- for any medical conditions you suffered during the term of your original Policy;
- where you have not advised Allianz Global Assistance of any circumstances that have given (or may give) rise to a claim under your original Policy; or
- where at the time of application for the extension you are aged 75 years or over.

The Financial Claims Scheme

In the unlikely event Allianz Australia Insurance Limited were to become insolvent and could not meet its obligations under your Policy, a person entitled to claim may be entitled to payment under the Financial Claims Scheme.

Access to the Scheme is subject to eligibility criteria. More information can be obtained from http://www.fcs.gov.au.

Your Duty of Disclosure

Before you enter into this insurance with us, you have a duty of disclosure under the Insurance Contracts Act 1984.

The Act imposes a different duty the first time you enter into a contract of insurance with us to that which applies when you vary, extend or reinstate the contract.

This duty of disclosure applies until the contract is entered into (or varied, extended or reinstated as applicable).

Your duty of disclosure when you enter into the contract with us for the first time

When answering our specific questions that are relevant to our decision whether to accept the risk of the insurance and, if so, on what terms, you must be honest and disclose to us anything that you know and that a reasonable person in the circumstances would include in answer to the questions.

It is important that you understand that you are answering our questions in this way for yourself and anyone else that you want to be covered by the contract.

Your duty of disclosure when you vary, extend or reinstate the contract

When you vary, extend or reinstate the contract with us, your duty is to disclose every matter that you know, or could reasonably be expected to know, is relevant to our decision whether to accept the risk of the insurance and, if so, on what terms.

What you do not need to tell us

Your duty however, does not require disclosure of any matter:

- that diminishes the risk to be undertaken by us; or
- that is of common knowledge; or
- that we know or, in the ordinary course of business as an insurer, ought to know; or
- as to which compliance with your duty is waived by us.

Non-disclosure

If you fail to comply with your duty of disclosure, we may be entitled to reduce our liability under the contract in respect of a claim, cancel the contract or both.

If your non-disclosure is fraudulent, we may also have the option of avoiding the contract from its beginning.

Jurisdiction and choice of law

Your Policy is governed by and construed in accordance with the law of Queensland, Australia and you agree to submit to the exclusive jurisdiction of the courts of Queensland. You agree that it is your intention that this Jurisdiction and Choice of Law clause applies.

General Insurance Code of Practice

We proudly support the General Insurance Code of Practice. The Code sets out the minimum standards of practice in the general insurance industry. For more information on the Code please contact Allianz Global Assistance on 1800 901 078.

Privacy notice

To arrange and manage your travel insurance, we (in this Privacy Notice "we", "our" and "us" includes AWP Australia Pty Ltd trading as Allianz Global Assistance and its duly authorised representatives) collect personal information including sensitive information from you and those authorised by you such as your family members, Travelling Companions, your doctors, hospitals, as well as from others we consider necessary including our agents.

Any personal information provided to us is used by us to evaluate and arrange your travel insurance. We may also use it to administer and provide the insurance services and manage your and our rights and obligations in relation to those insurance services, including managing, processing and investigating claims. We may also collect, use and disclose it for product development, marketing, conducting customer research and analytics in relation to all of our products and services, IT systems maintenance and development, recovery against third parties and for other purposes with your consent or where authorised by law.

This personal information may be disclosed to third parties involved in the above process, such as travel agents and consultants, travel insurance providers and intermediaries, authorised representatives, reinsurers, claims handlers and investigators, cost containment providers, medical and health service providers, overseas data storage and data handling providers, legal and other professional advisers, your agents and our related and group companies including Allianz. Some of these third parties may be located in other countries such as Thailand, France and India. You agree that while those parties will often be subject to confidentiality or privacy obligations, they may not always follow the particular requirements of Australian privacy laws.

Unless you opt out, we may contact you on an ongoing basis by telephone, mail, electronic messages (including email), online and via other means with promotional material and offers of products or services that we consider may be relevant and of interest to you (including financial and insurance products and roadside assistance services).

If you do not want to receive such offers from us (including product or service offerings from us on behalf of our agents, intermediaries and/or our business partners) or do not want us to disclose your personal information to our related and group companies and business partners for marketing purposes, you can opt out at any time by calling us on 1800 023 767.

When you provide personal information about other individuals, we and our agents rely on you to have made or make them aware:

- that you will or may provide their personal information to us;
- of the types of third parties to whom the personal information may be provided to;
- of the relevant purposes we and the third parties we will disclose it to, will use it for;
- of how they can access it; and
- of the other matters in this Privacy Notice.

We rely on you to have obtained their consent on these matters. If you do not, you must tell us before you provide the relevant information.

You can seek access to and correct your personal information by contacting us. You may not access or correct personal information of others unless you have been authorised by their express consent or otherwise under law, or unless they are your children under 16 years of age.

If you have a complaint about your privacy, please contact:

Privacy Officer, Allianz Global Assistance, PO Box 162, Toowong, QLD 4066 or you can contact the Privacy Commissioner at the Office of The Australian Information Commissioner, GPO Box 2999, Canberra, ACT 2601.

For more information about our handling of personal information, including further details about access, correction and complaints, please see our privacy policy available on request or view it on the web at www.allianz-assistance.com.au.

If you do not agree to the above or will not provide us with personal information, we may not be able to provide you with our services or products or may not be able to process your application nor issue you with a policy. In cases where we do not agree to give you access to some personal information, we will give you reasons why.

Dispute resolution process

In this Section, "we", "our" and "us" means Allianz and Allianz Global Assistance.

If you have a complaint or dispute in relation to this insurance, or our services or our representatives, please call us on 1800 901 078, or put the complaint in writing and send it to The Dispute Resolution Department, PO Box 162, Toowong, Queensland 4066. We will attempt to resolve the matter in accordance with our Internal Dispute Resolution process. To obtain a copy of our procedures, please contact us.

A dispute can be referred to the Financial Ombudsman Service Australia (FOS), subject to its terms of reference. The FOS provides a free and independent dispute resolution service for consumers who have general insurance disputes falling within its terms.

The contact details for the FOS are:

Financial Ombudsman Service Australia (FOS)

GPO Box 3, Melbourne Victoria 3001 Phone: 1800 367 287 Fax: (03) 9613 6399 Website: www.fos.org.au Email: info@fos.org.au



Part 2: Policy wording

The Policy Wording tells you what you are covered for. We set out what *We will pay* and what *We will not pay* under each Section in the event of a claim. You must also check **"General Exclusions that apply to all Claims"** on pages 37 to 39 for other reasons why we will not pay.

In some cases, the Certificate of Insurance and/or endorsements issued by us may vary the terms, limits, exclusions and conditions of this document.

See **"Words with Special Meanings"** on pages 15 to 18 for the meanings of words that apply to all Sections.

You only have cover under a Section if the **"Benefits Table"** on pages 5 & 6 shows that there is cover for the Section under the plan you have selected as specified in your Certificate of Insurance.

The most we will pay for all claims under each Section, in total, is shown in the "**Benefits Table**" for the plan you have selected. Sub-limits may also apply to particular types of losses or claims.

The cover provided is subject to terms, limits, exclusions and conditions of your Policy.

It is a condition of this Policy that, at the time of purchasing the Policy,:

- you are not aware of any circumstance which is likely to give rise to a claim; and
- you are either:
 - a permanent resident of Australia, or
 - a Temporary Resident of Australia[#], or
 - a non-resident of Australia travelling on Plan A (International) – Region 7 cover,

and will be returning to your country of residence at the completion of the Period of Insurance and within 12 months of the Trip commencing; and

• you are aged 74 years or under as at the date of issue of your Certificate of Insurance.

Temporary Residents living in Australia (for travel within Australia or overseas)

Cover is available under all plans for Temporary Residents of Australia who are not eligible for a medicare card and wish to travel within Australia or Overseas (and back to Australia).

The following conditions apply:

- you must purchase your Policy in Australia before the Trip commences;
- your Trip must commence and end in Australia;
- you must hold a return ticket to Australia;
- you must have a home address in Australia to which you intend to return; and
- you must hold a current Australian visa which will remain valid beyond the period of your Trip.

Words with Special Meanings

Some words and phrases used in the Policy have a special meaning. When these words and phrases are used, they have the meaning set out below:

"Additional" means the actual accommodation or transport expenses incurred less the accommodation or transport expenses you expected to incur had the Trip proceeded as planned.

"Certificate of Insurance" means the document we give you which confirms that we have issued a Policy to you and sets out the details of your cover.

"**Dependants**" means your children or grandchildren listed on your Certificate of Insurance who are not in full time employment, are under the age of 21 and travelling with you on the Trip.

"Electronic Items" means tablets, mobile phones (including PDAs and any items with phone capabilities), GPS, electronic book readers, and portable audio and gaming equipment. However, it does not mean any business samples or items that you intend to trade, any photographic and video equipment or personal computers.

"Epidemic" means a sudden development and rapid spreading of a contagious disease in a region where it developed in a simply endemic state or within a previously unscathed community.

"Excess" means the first amount of a claim that we will not pay for. If you make more than one claim under your Policy, the Excess will apply to each claim arising from each separate event.

"Home" means your usual place of residence in Australia.

"Hospital" means an established hospital registered under any legislation that applies to it, that provides in-patient medical care.

"Injure", "Injured" or "Injury" means bodily injury caused solely and directly by violent, accidental, visible and external means, which happens at a definite time and place during your Period of Insurance and does not result from any illness, Sickness or disease.

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

"Luggage and Personal Effects" means any personal items owned by you and that you take with you or buy on your Trip and which are designed to be worn or carried about with you. This includes items of clothing, personal jewellery, watches, photographic and video equipment, personal computers and Electronic Items. However it does not mean any bicycles, watercraft of any type (other than a surfboard), business samples or items that you intend to trade. "Medical Adviser" means a qualified doctor of medicine or dentist, other than You or a relative, holding the necessary certification in the country in which they are currently practising.

"Mental Illness" means any illness, condition or disorder listed in the current edition of the Diagnostic and Statistical Manual of Mental Disorders.

"Moped" or **"Scooter"** means any 2-wheeled or 3-wheeled motor vehicle with an engine displacement of not greater than 50cc.

"Motorcycle" means any 2-wheeled or 3-wheeled motor vehicle with an engine displacement greater than 50cc.

"Off-piste" means areas within the boundaries of a ski resort that are not:

- groomed terrain; or
- marked slopes; or
- trails that are open, maintained, monitored and patrolled by the ski resort.

"Overseas" means any country other than Australia. For cover under Plan A (excluding Region 7), "Overseas" will also include, to the extent permitted by law, a cruise ship with foreign registry in Australian waters. *Refer to page 21 for the definition of "Overseas" if you have purchased Plan A (International) – Region 7.*

"Pandemic" means an Epidemic in 2 or more countries.

"**Period of Insurance**" means the time when you are insured under your Policy. Cover under Section 3 begins from the time your Policy is issued (as set out in the Certificate of Insurance).

Cover for all other sections starts from the time you commence your Trip or the start date shown on your Certificate of Insurance (whichever is later) and ends when you complete your Trip or the end date shown on your Certificate of Insurance (whichever is the earlier).

"Policy" means your travel insurance policy with us covering you and is made up of this Product Disclosure Statement, your Certificate of Insurance and any other document we tell you forms part of this policy. Together these documents make up your contract with us.

"Pre-existing Medical Condition" means a medical condition of which you were aware:

- 1. prior to the time of the policy being issued that involves:
 - a) your heart, brain, circulatory system/blood vessels; or
 - b) your lungs or Chronic Airways Disease; or
 - c) cancer; or
 - d) back pain requiring prescribed pain relief medication; or
 - e) surgery involving any joints, the back, spine, brain or abdomen requiring at least an overnight stay in Hospital; or
 - f) Diabetes Mellitus (Type 1 or Type 2); OR
- 2. in the 2 years prior to the time of the policy being issued:
 - a) for which you have been in Hospital or Emergency Department or day surgery; or

- b) for which you have been prescribed a new medication or had a change to your medication regime; or
- c) requiring prescription pain relief medication; OR

3. prior to the time of the policy being issued that is:

- a) Pregnancy; or
- b) connected with your current pregnancy or participation in an IVF program; OR
- 4. for which, prior to the time of the policy being issued:
 - a) you have not yet sought a medical opinion regarding the cause; or
 - b) you are currently under investigation to define a diagnosis; or
 - c) you are awaiting specialist opinion.

For the purposes of this definition, 'medical condition' includes a dental condition. This definition applies to you, your Travelling Companion, a Relative or any other person.

"**Professional Sport**" means training for, coaching or competing in any sporting event where you are entitled to receive, or are eligible to receive, an appearance fee, wage, salary or prize money in excess of \$1,000.

"Public Place" means any place that the public has access to, including but not limited to planes, trains, trams, cruise ships, taxis, buses, air or bus terminals, stations, wharves, streets, museums, galleries, hotels, hotel foyers and grounds, beaches, restaurants, private car parks, public toilets and general access areas.

"Relative" means your spouse, defacto, parent, parent-in-law, daughter, son, daughter-in-law, son-in-law, sister, brother, sisterin-law, brother-in-law, grandchild, grandparent, step-parent, fiance(e), first cousin, aunt, uncle, niece or nephew.

"Relevant Time" means the time of issue of the Policy.

"Rental Vehicle" means a campervan/motorhome that does not exceed 4.5 tonne, a sedan, hatchback or station-wagon, 4WD's or mini bus/people mover rented from a licensed motor vehicle rental company. A Rental Vehicle does not include a leased vehicle, or a motorcycle, moped, scooter or watercraft .

"Sick" or "Sickness" means a medical condition, not being an Injury, which first manifests itself during the Period of Insurance.

'Temporary Resident of Australia' means someone who holds a temporary residence visa granted under the Migration Act 1958 (Cth).

"Transaction Card" means a debit card, credit card or travel money card.

"Travel Services Provider" means any scheduled service airline, hotel and resort operator, accommodation provider, motor vehicle rental or hire agency, bus line, shipping line or railway company.

"Travelling Companion" means a person with whom you have made arrangements before your Policy was issued, to travel with you for at least 75% of your Trip.

"Trip" means your travel in the period:

- starting from the later of:
 - i) the time when you leave your Home to go directly to the place you depart from on your travels; or
 - ii) the start date shown on your Certificate of Insurance; and
- ending at the earliest of:
 - i) when you return to your Home; or
 - ii) the end date set out on your Certificate of Insurance.

"we", "our", "us" and "Allianz" means Allianz Australia Insurance Limited.

"you" and "your" means any person whose name is set out in your Certificate of Insurance and includes Dependants. Where more than one adult is listed on your Certificate of Insurance all benefits, limits, conditions and exclusions apply as if you are each insured under separate policies, except for:

- if a claim arising out of the one event is made, any Excess that applies will only be applied once.
- for any organised groups, each child not travelling with their usual guardian must purchase a separate policy.

Policy Conditions

1. Excess

If an Excess applies to your Policy, it will be shown on your Certificate of Insurance. The Excess, if applicable, applies to any claim arising from a separate event under the following Sections*:

- Section 1 Overseas Medical and Dental
- Section 2 Additional Expenses
- Section 3 Amendment or Cancellation Costs
- Section 4 Luggage and Travel Documents
- Section 5 Delayed Luggage Allowance
- Section 7 Resumption of Trip
- Section 12 Medical and Dental Expenses in Australia

* Refer to the "**Benefits Table**" (pages 5 & 6) for details of which Sections are available under each plan.

If any additional Excess applies to your Policy, the amount will be shown on your Certificate of Insurance, or advised to you in writing before the Certificate is issued to you.

2. Limits of liability

The limits of our liability for each Section of the Policy are the amounts shown in the **"Benefits Table"** for the plan selected (see pages 5 & 6).

3. Claims

You must give Allianz Global Assistance notice of your claim as soon as possible by completing a claim form and sending it to Locked Bag 3038, Toowong DC, QLD 4066, or by calling the contact number listed on the 'Contents' page of this PDS. You can also submit a claim online via www.travelclaims.com.au. If there is a delay in claim notification, or you do not provide Allianz Global Assistance with sufficient detail to consider your claim, they can reduce your claim by the amount of prejudice they have suffered because of the delay.

You must give Allianz Global Assistance any information they reasonably ask for to support your claim at your expense, such as but not limited to police reports, valuations, medical reports, original receipts or proof of ownership. If required, Allianz Global Assistance may ask you to provide them with translations into English of such documents to enable them to carry out their assessment of your claim.

You must co-operate with Allianz Global Assistance at all times in relation to the provision of supporting evidence and such other information as they may reasonably require.

- For medical, Hospital or dental claims, contact Allianz Global Assistance as soon as practicable.
- For loss or theft of your Luggage and Personal Effects, report it immediately to the police and obtain a written notice of your report.
- For damage or misplacement of your Luggage and Personal Effects caused by the Travel Services Provider, report the damage or misplacement to an appropriate official and obtain a written report, including any offer of settlement that they may make.
- Submit full details of any claim in writing within 30 days of your return.

Claims are payable in Australian dollars to you

We will pay all claims in Australian dollars. We will pay you unless you tell us to pay someone else. The rate of currency exchange that will apply is the rate at the time you incurred the expense.

You must not admit fault or liability

In relation to any claim under your Policy you must not admit that you are at fault, and you must not offer or promise to pay any money, or become involved in litigation, without the approval of Allianz Global Assistance.

You must help us to recover any money we have paid

If we have a claim against someone in relation to the money we have to pay or have paid under your Policy, you must do everything you can to help us do that in legal proceedings. If you are aware of any third party that you or we may recover money from, you must inform Allianz Global Assistance of such third party.

If you can claim from anyone else, we will only make up the difference

If you can make a claim against someone in relation to a loss or expense covered under this Policy and you do not get paid the full amount of your claim, we will make up the difference. You must claim from them first.

Other insurance

If any loss, damage or liability covered under the Policy is covered by another insurance policy, you must give us details of such insurance. If you make a claim under one insurance policy and you are paid the full amount of your claim, you cannot make a claim under the other policy.

If you make a claim under another insurance policy and you are not paid the full amount of your claim, we will make up the difference. We may seek contribution from your other insurer. You must give Allianz Global Assistance any information they reasonably ask for to help us make a claim from your other insurer.

Subrogation

Allianz Global Assistance may, at their discretion, undertake in your name and on your behalf, control and settlement of proceedings for our own benefit, to recover compensation or secure indemnity from any party in respect of anything covered by this Policy.

You are to assist and permit to be done, all acts and things as required by Allianz Global Assistance for the purpose of recovering compensation or securing indemnity from other parties to which we may become entitled or subrogated, upon us paying your claim under this Policy regardless of whether we have yet paid your claim and whether or not the amount we pay you is less than full compensation for your loss.

These rights exist regardless of whether your claim is paid under a non-indemnity or an indemnity clause of this Policy.

Recovery

Allianz Global Assistance will apply any money they recover from someone else under a right of subrogation in the following order:

- 1. to Allianz Global Assistance, their administration and legal costs arising from the recovery
- 2. to us, an amount equal to the amount that we paid to you under your Policy
- 3. to you, your uninsured loss (less your Excess)
- 4. to you, any Excess

Once we pay your total loss we will keep all money left over. If we have paid your total loss and you receive a payment from someone else for that loss or damage, you must pay us the amount of that payment up to the amount of the claim we paid you.

If we pay you for lost or damaged property and you later recover the property or it is replaced by a third party, you must pay us the amount of the claim we paid you.

Business travellers – how GST affects your claim

If you are entitled to claim an input tax credit in respect of a cost for which a claim is made, or would be entitled to an input tax credit if you were to incur the relevant cost (i.e. in replacing a lost or stolen item), the amount we would otherwise pay will be reduced by the amount of that input tax credit.

Travel within Australia only

If you are entitled to claim an input tax credit in respect of your premium you must inform Allianz Global Assistance of the amount of that input tax credit (as a percentage) at the time you first make a claim. If you fail to do so, you may have a liability for GST if we pay you an amount under your Policy.

Fraud

Insurance fraud places additional costs on honest policyholders. Fraudulent claims force insurance premiums to rise.

We encourage the community to assist in the prevention of insurance fraud. You can help by reporting insurance fraud by calling Allianz Global Assistance on 1800 453 937. All information will be treated as confidential and protected to the full extent under law.

4. Automatic reinstatement of sums insured

We will reinstate the benefit limits and sub-limits under Section 4 *(Luggage and Travel Documents)* once on each Trip.

5. Non-residents of Australia travelling to Australia – Region 7 Plan A (International)

If you are a non-resident of Australia and have purchased Plan A *(International)* – Region 7, the word '*Australia'* or '*Overseas'* should be read throughout this policy wording as stated below (apart from in this policy condition, the second bullet point on page 14, Section 1 and Section 12):

- a) the word Australia' should be replaced with your country of residence; and
- b) the definition under "Words with Special Meanings" (page 16) for 'Overseas' should be substituted as follows:

"Overseas" means any place outside your country of residence.

The Benefits

SECTION 1: Overseas medical and dental expenses

Cover under this section is provided subject to the following:

Notify Allianz Global Assistance if you're hospitalised: If you suffer an Injury or Sickness while Overseas and are hospitalised, then you, or a member of your travelling party, must contact Allianz Global Assistance as soon as possible.

Notify Allianz Global Assistance if your care will exceed \$4,000 (and you're not hospitalised): If you are not hospitalised but you are being treated Overseas as an outpatient and you become aware that the total cost of your treatment is likely to exceed \$4,000, you must contact Allianz Global Assistance as soon as possible and obtain approval before you incur any treatment expenses. If you do not, then we will not pay for treatment expenses that have not been approved by Allianz Global Assistance.

1.1 WE WILL PAY:

Overseas emergency medical assistance

If you are Injured or become Sick while Overseas during your Trip and you require emergency medical treatment, we will pay for the following assistance services Allianz Global Assistance can arrange:

- a) Medical Adviser: access to a Medical Adviser for emergency medical treatment while Overseas.
- b) Getting you to a Hospital, or Home: your medical transfer or evacuation if Allianz Global Assistance determines that you must be transported to the nearest Hospital for emergency medical treatment Overseas or be brought back to Australia with appropriate medical supervision.
- c) Getting your Dependants Home: the return to Australia of your Dependants if they are left without supervision after you are hospitalised or evacuated.
- d) Funeral/cremation or bringing your remains back Home: the reasonable cost of either:
 - a funeral or cremation Overseas, or
 - bringing your remains back to your Home,
 - if you die as a result of an Injury or Sickness during your Trip.

The most we will pay for the cost of either a funeral or cremation Overseas, or bringing your remains back to your Home is \$20,000 per person.

No liability if Allianz Global Assistance is unable to provide assistance services: Neither Allianz Global Assistance nor us will be liable if Allianz Global Assistance is unable to provide emergency assistance services due to unforeseeable and insurmountable events such as sabotage, terrorism, or restrictions to free circulation (including but not limited to the closure of territorial borders, curfew, natural disaster or government decision to restrict the use of planes, trains or other vehicles).

Overseas emergency medical and dental treatment

If you are Injured or become Sick while Overseas during your Trip and you require emergency medical and emergency dental treatment:

e) Emergency medical, Hospital, dental and ambulance: we will pay your reasonable emergency medical, Hospital, emergency dental and ambulance transportation expenses incurred Overseas for the first 12 months after you get Sick or Injured Overseas until you get back to Australia.

If you are hospitalised: If you are admitted to a Hospital due to a Sickness or Injury suffered while on a Trip Overseas, we will pay for a share room. If a share room is not available or on advice from Allianz Global Assistance, we will at our discretion pay to upgrade you to a single room. If we determine that you need to be brought back to Australia or evacuated for treatment: If, while on a Trip Overseas, you are Injured or become Sick we have the option of bringing you back to Australia or evacuating you to another country. We will only pay the cost of bringing you back to Australia or evacuating you if it was arranged by and determined to be necessary by Allianz Global Assistance.

If you decline to promptly follow the medical advice Allianz Global Assistance has provided, or refuse to be brought back to Australia for treatment when it is determined by Allianz Global Assistance that you should do so, then we will not pay for subsequent medical, Hospital or evacuation expenses. We will only pay you the amount which we have determined covers the Overseas medical expenses and related costs we would have spent had you agreed with Allianz Global Assistance's recommendation or determination. At that point, you will be responsible for all further costs.

If we determine that you need to return to Australia because you are Injured or Sick but you do not have a return ticket: If you do not have a return ticket booked to Australia before becoming Sick or Injured while on a Trip Overseas, then we will reduce the amount we pay by the price of an economy fare to Australia from the place from which you return to Australia.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
unlimited	No cover

1.2 🛞 WE WILL NOT PAY:

We will not pay for expenses:

- a) Incurred in Australia: for medical, Hospital or dental treatment or ambulance transportation which is provided in Australia. This exclusion does not apply to medical treatment provided while on a cruise ship with foreign registry in Australian waters. However, there is no cover for medical, Hospital or dental treatment provided on Australian inland waters or while the ship is tied up in an Australian port.
- b) Certain dental claims and treatment: arising directly or indirectly from, or in any way connected with, the deterioration and/or decay of teeth or associated tissue or involving the use of precious metals.
- c) Treatment started before your Trip: for the continuation or follow-up of treatment (including medication) you started before you commenced your Trip.
- d) Not taking Allianz Global Assistance's advice: if you do not take the advice of Allianz Global Assistance.
- e) **Incurred after 12 months:** incurred more than 12 months after the date of the Injury or Sickness.

Also check "General Exclusions that apply to all Claims" (pages 37 to 39).

SECTION 2: Additional expenses

Cover under this Section is provided subject to the following:

You must call Allianz Global Assistance and obtain approval before you incur Additional expenses covered under this Section in excess of \$4,000. If you do not, then we will not pay for expenses that have not been approved by Allianz Global Assistance.

2.1 WE WILL PAY:

If you are Injured or become Sick during your Trip while Overseas

- a) Getting a Travelling Companion to you: If you cannot travel during your Trip because of an Injury or Sickness which needs emergency medical treatment, then we will pay the reasonable Additional accommodation and Additional transport expenses incurred by your Travelling Companion to stay with you or escort you on the written advice of an Overseas Medical Adviser. Cover under this benefit ends when you are able to resume your Trip, travel Home or the Period of Insurance ends (whichever happens first).
- b) Getting a Relative to you: If during your Trip you are admitted to Hospital as an inpatient, then we will pay the reasonable Additional accommodation and Additional transport expenses incurred by your Relative who travels to and stays with you on the written advice of an Overseas Medical Adviser and agreement of Allianz Global Assistance. Cover under this benefit ends when you are able to resume your Trip, travel Home or the Period of Insurance ends (whichever happens first).
- c) You are too Sick to travel: If you cannot travel during your Trip because of an Injury or Sickness which needs emergency treatment from an Overseas Medical Adviser who certifies in writing that you are unfit to travel, then we will pay your reasonable Additional accommodation and Additional travel expenses incurred by you. We will only pay for the same or similar standard of accommodation and travel expenses as was originally booked.

If you return to Australia or your Home due to the death or serious Injury/Sickness of a Relative or business partner

- d) You return to your Home when your Relative or business partner dies or is seriously Injured/Sick: If during your Trip (whether Overseas or within Australia), your Relative or business partner in Australia:
 - dies unexpectedly,
 - is disabled by an Injury, or
 - becomes seriously Sick and requires hospitalisation,

and you are required to return to your Home, then we will pay your reasonable Additional transport expenses for your return Home.

If you did not have a return ticket booked to Australia or your Home before your Relative or business partner dies or is Injured or becomes Sick, then we will reduce the amount we pay by the price of an economy fare to Australia or your Home from the place from which you return to Australia or your Home.

Additional expenses arising from other circumstances

- e) If a disruption to your Trip (whether Overseas or within Australia), arises directly or indirectly from, or is in any way connected with, any of the following reasons, then we will pay your Additional accommodation and Additional transport expenses:
 - Strike, riot or civil protest: Your scheduled or connecting transport is cancelled, delayed, shortened, rescheduled or diverted because of a strike, riot, civil protest, weather, natural disaster or Accident affecting your mode of transport;
 - Breaking quarantine rules: You unknowingly break any quarantine rule.
 - Lost/stolen items: Your passport or other travel documents are lost or stolen except as a result of government confiscation or loss of item sent through the mail.
 - Natural disaster: Where your pre-booked accommodation or transport is affected by a natural disaster and cannot be utilised.
 - Your Home is destroyed by fire/earthquake or flood: Your Home is rendered uninhabitable by fire, explosion, earthquake or flood.

If you did not have a return ticket booked to Australia or your Home before your Home is destroyed by fire, explosion, earthquake or flood, then we will reduce the amount we pay by the price of an economy fare to Australia or your Home from the place from which you return to Australia or your Home.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$100,000	\$10,000

2.2 🛞 WE WILL NOT PAY:

We will not pay for:

- a) Costs/expenses incurred before you were unfit to travel: any costs or expenses incurred before a Medical Adviser certified that you were unfit to travel.
- b) **Epidemic or Pandemic:** claims arising directly or indirectly from, or in any way connected with:
 - an actual or likely Epidemic or Pandemic, or

• the threat of an Epidemic or Pandemic.

See www.who.int and www.smartraveller.gov.au for further information on Epidemics and Pandemics.

Also check "General Exclusions that apply to all Claims" (pages 37 to 39.

SECTION 3: Amendment or cancellation costs

3.1 🖌 WE WILL PAY:

If due to circumstances that are outside your control and neither expected nor intended by you at the Relevant Time:

- a) Rearranging your Trip: you have to rearrange your Trip, then we will pay the reasonable costs of rearranging your Trip. The most we will pay for rearranging your Trip is the cost that would have been payable had your Trip been cancelled.
- b) Cancelling your Trip: you have to cancel your Trip, then we will pay the unused portion of all travel or accommodation costs that you have paid in advance, less any refunds due to you.

Travel agent's cancellation fees

- c) We will pay the travel agent's cancellation fees in the following circumstances:
 - where the travel arrangements have been arranged through STA Travel, for each itinerary item, we will pay cancellation fees up to \$350 per item, or the cost of the item, whichever is lesser; or for lost commission, up to \$1,500 per person; or
 - where the travel arrangements have not been arranged through STA Travel, we will pay cancellation fees up to \$1,500 per person when all monies have been paid or the maximum amount of the deposit has been paid at the time of cancellation. However, we will not pay more than the level of commission or services fees normally earned by the agent, had the Trip not been cancelled.

We will only pay these costs if:

- at the time the circumstances giving rise to the cancellation happened, you had already paid all monies or at least the full deposit;
- we receive written evidence of the travel agent's fees, and
- the cancellation was made during the Period of Insurance.

Loss of frequent flyer points

d) We will pay for frequent flyer or similar air travel reward points lost by you as a result of cancelling your airline ticket that was paid for with those points, but only if you cannot recover your lost points in any other way.

We calculate the amount we pay you as follows:

 the cost of an equivalent class airline ticket based on the best available advance purchase airfare at the time your claim is processed, less your financial contribution toward the airline ticket, multiplied by

• the total number of points lost,

divided by the total number of points used to obtain the ticket.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$5,000	\$5,000

3.2 🛞 WE WILL NOT PAY:

We will not pay for claims caused by:

- a) Travel Services Provider: cancellations, delays or rescheduling by a Travel Services Provider other than when caused by strike.
- b) **Change of plans:** you or any other person changing plans or being disinclined to proceed with the Trip.
- c) **Contractual/business obligation or financial situation:** any contractual or business obligation or your financial situation.
- d) Failure by travel agent or representative: the failure of your travel agent or our representative who issues the Policy to pass on monies to operators or to deliver promised services.
- Request by employer: you being a full time permanent employee and your pre-arranged leave is cancelled by your employer, unless you are a full time member of the Australian Defence Force or of federal, state or territory emergency services.
- f) Insufficient numbers: a tour operator or wholesaler being unable to complete arrangements for any tour because there were not enough people to go on the tour, where the cost exceeds \$500 per person.
- g) Negligence of wholesaler/operator: the negligence of a wholesaler or operator.
- h) **Government action:** any government regulation, prohibition or restriction.
- Death, Injury or Sickness of a non-resident of Australia: the death, Injury, Sickness or disease of any person living outside Australia.
- j) Costs/expenses incurred before you were unfit to travel: any costs or expenses incurred before a Medical Adviser certified that you were unfit to travel.

We will also not pay for any claims arising directly or indirectly from, or in any way connected with:

- Act of terrorism: an act of terrorism or the threat or perceived threat of an act of terrorism.
- I) Epidemic or Pandemic:
 - · an actual or likely Epidemic or Pandemic, or
 - the threat of an Epidemic or Pandemic.

See www.who.int and www.smartraveller.gov.au for further information on Epidemics and Pandemics.

Also check "General Exclusions that apply to all Claims" (pages 37 to 39).

SECTION 4: Luggage and travel documents

Cover under this Section is provided subject to the following:

Notify police/Travel Services Provider within 24 hours and get a report: If your Luggage and Personal Effects or travel documents are lost or stolen during your Trip, you must report the loss or theft within 24 hours to the police or the Travel Services Provider you were travelling with when the loss or theft occurred. You must prove that you made such a report by providing us with a written statement from whoever you reported it to.

4.1 🕢 WE WILL PAY:

Repair costs or replacement value of lost/stolen/damaged Luggage and Personal Effects

If your Luggage and Personal Effects are permanently lost, stolen or accidentally damaged during your Trip, then we will (at our choice):

- pay for the repair cost,
- pay the replacement value, or
- pay you what it would cost us to repair or replace the item.

We will not pay more than the original purchase price of the individual item.

- a) Item limits: The most we will pay for any item (the item limit) is:
 - \$1,200 for personal computers/video cameras/cameras
 - \$600 for Electronic Items
 - \$300 for all other items.

A pair or related set of items is considered as only one item for the purpose of this insurance, and the appropriate single item limit will be applied.

For example:

- a camera, lenses (attached or not), tripod and accessories is one item.
- a matched or unmatched set of golf clubs, golf bag and buggy is one item.
- a matching pair of earrings is one item .
- b) Luggage and Personal Effects stolen from a motor vehicle: We will only cover Luggage and Personal effects stolen from a motor vehicle if:
 - the theft occurred during daylight hours between sunrise and sunset, and
 - the Luggage and Personal Effects were stored in the boot, and

- there is evidence of forced entry to get to them. The most we will pay is \$2,000 in total for all items left unattended in a motor vehicle.
- c) Jewellery placed in the care of a Travel Services Provider: The most we will pay is \$1,000 in total for the loss or theft of jewellery in the care of a Travel Services Provider you were travelling with when the loss or theft occurred.
- d) Automatic reinstatement of sum insured: If we agree to pay your claim for loss or damage to your Luggage and Personal Effects, we will provide one automatic reinstatement of the sum insured that applies to the plan you have chosen while on your Trip.
- e) Lost/stolen travel documents or Transaction Cards: If any travel documents (including passports) or Transaction Cards are lost by you or stolen from you during your Trip, then we will pay the issuer's fees for the replacement costs (including communication costs) of the items.

You must comply with all the conditions of use of the travel documents or Transaction Cards prior to and after the loss or theft.

f) Fraudulent use of lost/stolen travel documents or Transaction Cards: If during your Trip, any of your travel documents or Transaction Cards are lost or stolen, then we will pay for any loss resulting from the fraudulent use of the travel documents or Transaction Cards (other than any amounts covered by any guarantee given by the bank or issuing company to you as the holder of the Transaction Cards).

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$3,000	\$3,000

4.2 WE WILL NOT PAY:

We will not pay a claim in relation to your Luggage and Personal Effects, travel documents or Transaction Cards if:

- a) Unsupervised in a Public Place: the items were left unattended in a Public Place.
- b) Failing to promptly notify authorities: you do not report the loss or theft within 24 hours to the police or the Travel Services Provider you were travelling with when the loss or theft occurred.
- c) Stolen from a motor vehicle: the items were left unattended in any motor vehicle unless stored in the boot and forced entry was gained, or the items were left unattended in any motor vehicle overnight (even if stored in the boot).

- d) **Certain items left unattended in a motor vehicle:** the stolen item is jewellery, camera and video equipment, sound equipment, a mobile phone or laptop computer equipment left unattended in any motor vehicle at any time (even if stored in the boot).
- e) **Unaccompanied:** the items were forwarded in advance or were being sent unaccompanied or under a freight contract.
- f) Surfboards/waterborne craft: the loss, theft or damage is to surfboards or waterborne craft of any description. This exclusion does not apply if the item is lost, stolen or damaged while in the care of a Travel Services Provider you were travelling with when the loss, theft or damage occurred.
- g) **Fragile/brittle items:** the damage is to items that are fragile or brittle unless it is to spectacles or the lens of a camera, video camera, laptop computer or binoculars.
- h) Ordinary wear and tear, etc: the loss or damage is caused by ordinary wear and tear, atmospheric or climatic conditions or vermin.
- i) **Cleaning/repair/alteration:** the damage is caused by any process of cleaning, repair, restoration or alteration.
- j) Electrical/ mechanical breakdown: the Luggage and Personal Effects have an electrical or mechanical breakdown that does not result from an external influence.
- Negotiable instruments etc: the items are negotiable instruments including cash, bank or currency notes, or postal or money orders.

Also check "General Exclusions that apply to all Claims" (pages 37 to 39).

SECTION 5: Delayed luggage allowance

Cover under this Section is provided subject to the following:

Notify Travel Services Provider within 24 hours and get a report: If your Luggage and Personal Effects are delayed during your Trip, you must report it within 24 hours to the Travel Services Provider you were travelling with when the delay occurred. You must prove that you made such a report by providing us with a written statement from the Travel Services Provider.

5.1 🔗 WE WILL PAY:

If any of your items of clothing and toiletries are delayed by a Travel Services Provider for more than 24 hours during your Trip, then we will pay for the essential items of clothing and toiletries you purchased.

You must provide the original receipts for the items and written proof from the Travel Services Provider that your Luggage and Personal Effects were delayed.

We will deduct any amount we pay you under this Section from any subsequent Luggage and Personal Effects claim under Section 4 (Luggage and travel documents) for the same items.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$300	No cover

5.2 🛞 WE WILL NOT PAY:

Failing to promptly notify authorities: you do not report the delay to the Travel Services Provider you were travelling with when the delay occurred.

Also check "General Exclusions that apply to all Claims" (pages 37 to 39).

SECTION 6: Travel delay expenses

6.1 🕢 WE WILL PAY:

- Additional meal and accommodation expenses: If there is a temporary delay to your pre-booked transport during your Trip for at least 6 hours arising directly from unforeseeable circumstances outside your control, then we will pay the reasonable Additional meal and accommodation expenses you incur during the period in which you are delayed. We will pay:
 - up to \$150 for Plan B at the end of the initial 6 hour period, and
 - up to \$150 for Plan B for each full 24 hour period that the delay continues beyond the initial 6 hour delay.

You must claim from the Travel Services Provider first. You must provide us with written confirmation from the Travel Services Provider of the cause and period of the delay and the amount of compensation offered by the Travel Services Provider. You must also provide us with receipts for the meal and accommodation expenses incurred.

- b) Delay due to severe weather conditions: If there is a temporary delay to your pre-booked transport during your Trip for at least 12 hours due to severe weather conditions, then we will also pay:
 - up to \$250.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$1,500	\$750

6.2 🛞 WE WILL NOT PAY:

We will not pay if the delay to your Trip arises directly or indirectly from, or is in any way connected with:

a) Act of terrorism: an act of terrorism or the threat or perceived threat of an act of terrorism.

b) Epidemic or Pandemic:

- an actual or likely Epidemic or Pandemic, or
- the threat of an Epidemic or Pandemic.

See www.who.int and www.smartraveller.gov.au for further information on Epidemics and Pandemics.

We will also not pay if:

c) Claim recoverable elsewhere: you can claim your Additional meals and accommodation expenses from the Travel Services Provider.

Also check "General Exclusions that apply to all Claims" (pages 37 to 39).

SECTION 7: Resumption of Trip

7.1 🕢 WE WILL PAY:

If, during your Trip, your Relative or business partner in Australia:

- dies unexpectedly,
- is disabled by an Injury, or
- · becomes Sick and requires hospitalisation,

and you are required to return to Australia, then we will pay for the economy class transport costs you incur to return Overseas to resume your Trip.

We will only pay if:

- There was at least 23 days remaining before the end of your Period of Insurance, and
- Less than 50% of the Period of Insurance had elapsed at the time of the onset of the sudden Injury, Sickness, or death of the Relative or business partner, and
- c) You return Overseas before the original expiry date of your cover for your original Trip, and
- No claim is made for the same event under Section 4 of the Policy, and
- The death was not caused by an Injury/Sickness that first occurred before you commenced your original Trip, and
- f) The onset of the Injury or Sickness did not occur before you commenced your original Trip.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$3,000	No cover

7.2 🛞 WE WILL NOT PAY:

Check "General Exclusions that apply to all Claims" (pages 37 to 39).

SECTION 8: Hospital incidentals

8.1 🕢 WE WILL PAY:

If, while on a Trip Overseas, you suffer an Injury or Sickness and you are in Hospital for more than 48 continuous hours while you are Overseas, then we will pay you:

• \$20 for each additional night you are in Hospital.

You must provide original receipts for these expenses in support of your claim.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$3,000	No cover

8.2 🛞 WE WILL NOT PAY:

First 48 continuous hours: We will not pay for the first 48 continuous hours you are in Hospital.

Also check "General Exclusions that apply to all Claims" (pages 37 to 39).

SECTION 9: Disability

For the purposes of Section 9, 'Permanently Disabled' means:

- a) you have totally lost either:
 - all of the sight in one or both eyes, or
 - the use of a hand at or above the wrist or a foot at or above the ankle, and
- b) the total loss is for at least 12 months, and
- c) in our opinion after consultation with an appropriate medical specialist, that loss will continue indefinitely .

9.1 🕢 WE WILL PAY:

If you are Injured during your Trip, and because of the Injury, you become Permanently Disabled within 12 months of the Injury, the amount we will pay for the Permanent Disability of persons (other than a Dependant) is the amount shown below for the plan you have selected.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$20,000	\$10,000

9.2 🛞 WE WILL NOT PAY:

Dependants: We will not pay if the Permanent Disability is of a Dependant.

Also check "General Exclusions that apply to all Claims" (pages 37 to 39).

SECTION 10: Accidental death

10.1 🕢 WE WILL PAY:

We will pay the accidental death benefit, to your estate, if:

- a) you are Injured during your Trip and you die because of that Injury within 12 months of the Injury, or
- b) during your Trip, the conveyance you are travelling on disappears, sinks or crashes and you are presumed dead and your body is not found within 12 months.

The amount we will pay for the death of persons (other than a Dependant) is the amount shown below for the plan you have selected.

The amount we will pay for the death of a Dependant is \$1,000.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$20,000	\$10,000

10.2 🛞 WE WILL NOT PAY:

Check "General Exclusions that apply to all Claims" (pages 37 to 39).

SECTION 11: Personal liability

11.1 🕢 WE WILL PAY:

For the purposes of Section 11, 'An Incident' means a single accident, or a series of accidents, arising out of the one event.

If you become legally liable to pay compensation for:

- · death or bodily injury to someone else, or
- physical loss of, or damage to, someone else's property

as a result of An Incident that happens during your Trip, then we will cover you for:

- the compensation (including legal costs awarded against you), and
- any reasonable legal costs incurred by you for settling or defending the claim made against you, providing you have our approval in writing before incurring these costs.

If someone is making a liability claim against you, you must not:

- · admit responsibility for the claim, or
- pay or promise to pay for the claim.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$2,500,000	\$1,000,000

11.2 🛞 WE WILL NOT PAY:

We will not pay for any amount you become legally liable to pay if the claim arises directly or indirectly from, or is in any way connected with, or is for:

- a) Bodily injury to you, etc: death of or bodily injury to:
 - you,
 - your Relative, or
 - an employee of you or someone deemed to be in your employ.
- b) **Damage to property, etc:** damage to property belonging to, or in the care, custody or control of you.
- c) Excluded craft/vehicles: the ownership, custody, control or use by you of any firearm or weapon, aerial device, watercraft or motorised vehicle.
- Any business, occupation, etc: your conduct of, or employment in any, business, profession, trade or occupation.
- e) Land/buildings/immobile property: occupation or ownership of any land, buildings or immobile property.
- f) Wilful/malicious act: any wilful or malicious act.
- g) Transmission of any illness/Sickness/disease: the transmission of an illness, Sickness or disease.
- Fines, penalties, etc: any fine, penalty or aggravated, punitive, or exemplary damages.
- Contractually assumed liability: liability arising from any contract or agreement, unless you would have the same liability without the contract or agreement.

Also check "General Exclusions that apply to all Claims" (pages 37 to 39).

SECTION 12: Medical and dental expenses in Australia

This section only applies if you are a non-resident of Australia and have purchased Plan A (*International*) – Region 7, providing you are not an eligible person within the meaning of the Health Insurance Act.

Cover under this Section is provided subject to the following:

Notify Allianz Global Assistance if you're hospitalised: If you suffer an Injury or Sickness while in Australia and are hospitalised, then you, or a member of your travelling party, must contact Allianz Global Assistance as soon as possible.

Notify Allianz Global Assistance if your care will exceed \$2,000 (and you're not hospitalised): If you are not hospitalised but you are being treated in Australia as an outpatient and you become aware that the total cost of your treatment is likely to exceed \$2,000, you must contact Allianz Global Assistance as soon as possible and obtain approval before you incur any treatment expenses. If you do not, then we will not pay for treatment expenses that have not been approved by Allianz Global Assistance.

12.1 WE WILL PAY:

If you are Injured in Australia or become Sick while in Australia during your Trip and you require emergency medical and emergency dental treatment:

Emergency medical, Hospital, dental and ambulance: we will pay your reasonable emergency medical, Hospital, emergency dental and ambulance transportation expenses incurred in Australia for the first 12 months after you get Sick or Injured while in Australia until you return to your country of residence.

If you are hospitalised

If you are admitted to a Hospital due to a Sickness or Injury suffered while on a Trip in Australia, we will pay for a share room. If a share room is not available or on advice from Allianz Global Assistance, we will at our discretion pay to upgrade you to a single room.

Funeral/cremation or bringing your remains back Home: we will pay the reasonable cost of either:

- a funeral or cremation Overseas, or
- bringing your remains back to your Home,

if you die as a result of an Injury or Sickness during your Trip.

The most we will pay for the cost of either a funeral or cremation Overseas, or bringing your remains back to your Home is \$20,000 per person.

The maximum amount we will pay for all claims combined under this Section is:

Plan A	Plan B
\$1 million	No cover

12.2 🛞 WE WILL NOT PAY:

We will not pay for expenses:

- Certain dental claims and treatment: arising directly or indirectly from, or in any way connected with, the deterioration and/or decay of teeth or associated tissue or involving the use of precious metals.
- b) Treatment started before your Trip: for the continuation or follow-up of treatment (including medication) you started before you commenced your Trip.
- c) Not taking Allianz Global Assistance's advice: if you do not take the advice of Allianz Global Assistance.
- d) Incurred after 12 months: incurred more than 12 months after the date of the Injury or Sickness.

Also check "General Exclusions that apply to all Claims" (pages 37 to 39).

To the extent permissible by law, we will not pay if:

- 1. **Costs/expenses incurred outside Period of Insurance:** Your claim is for costs or expenses incurred outside the Period of Insurance.
- 2. **Unlawful conduct by you:** Your claim arises from any unlawful act committed by you or if you have not been honest and frank with all answers, statements and submissions made in connection with your insurance application or claim.
- 3. Failing to take reasonable care/precautions: You do not take reasonable care or precautions to protect yourself and your property and to avoid loss or damage or Injury or death.
- 4. **Consequential loss:** Your claim is for consequential loss of any kind including loss of enjoyment or any financial loss not specifically covered in the Policy.
- 5. Losses that cannot be covered by insurance: Your claim is for a loss for which insurance is prohibited by law.
- 6. GST liability: Your claim is for any Goods and Services Tax (GST) liability or any fine, charge or penalty you are liable for because of a failure to fully disclose to us your input tax credit entitlement for the amount payable shown on your Certificate of Insurance.
- Government action: Your claim arises directly or indirectly from, or is in any way connected with, a government authority (including but not limited to customs) confiscating, detaining or destroying anything.
- 8. **Government prohibition etc:** Your claim arises from any government prohibition, regulation or intervention.
- 9. Act of war, insurrection, etc: Your claim arises out of any act of war, whether war is declared or not, or from any rebellion, revolution, insurrection or taking of power by the military.
- 10. **Nuclear:** Your claim arises directly or indirectly from a nuclear reaction or contamination from nuclear material, nuclear weapons or radioactivity.
- 11. **Insolvency of Travel Services Provider:** Your claim arises from the failure of a Travel Services Provider to provide accommodation or travel services due to their Insolvency or that of any person, company or organisation they deal with.
- 12. **Pre-existing Medical Condition:** Your claim arises directly or indirectly from, or is in any way connected with, any Pre-existing Medical Condition suffered by you, your Travelling Companion, a Relative or any other person.
- 13. **Signs or symptoms:** Your claim arises directly or indirectly from, or is in any way connected with, any signs or symptoms that you were aware of, or a reasonable person in your circumstances would have been aware of, before your Period of Insurance commenced, but:
 - a) you had not yet sought a medical opinion regarding the cause; or

- b) you were currently under investigation to define a diagnosis; or
- c) you were awaiting specialist opinion.
- 14. **Travelling against medical advice:** Your claim is in respect of travel booked or undertaken against the advice of any Medical Adviser.
- 15. **Pregnancy:** Your claim arises directly or indirectly out of pregnancy, childbirth or related complications.
- 16. Mental Illness: Your claim arises from, or is in any way related to:
 - Mental Illness; or
 - dementia, depression, anxiety, stress or other mental or nervous condition; or
 - conditions that have resulted in behavioural issues; or
 - a therapeutic or illicit drug or alcohol addiction.
- Suicide/attempted suicide: Your claim arises directly or indirectly from, or is in any way connected with, your suicide or attempted suicide, self-inflicted Injury or condition, stress or travel exhaustion.
- Sexually transmitted disease: Your claim arises directly or indirectly from, or is in any way connected with, a sexually transmitted disease or virus.
- 19. **Blood-thinning prescription medication:** Your claim arises from complications of any Injury or Sickness, or side effects, caused by you taking any blood thinning prescription medication.
- 20. Intoxicating liquor or drugs: Your claim arises directly or indirectly from, or is in any way connected with, you being under the influence of any intoxicating liquor or drugs except a drug prescribed to you by a Medical Adviser, and taken in accordance with their instructions.
- 21. Health insurance: Your claim arises from, or is in any way related to or associated with any loss, damage, liability, event, occurrence, Injury or Sickness where providing such cover would result in us contravening the Health Insurance Act 1973 (Cth), the Private Health Insurance Act 2007 (Cth) or the National Health Act 1953 (Cth) or where Allianz does not have the necessary licenses or authority to provide such cover.
- 22. **Elective surgery:** Your claim arises from, is related to, or associated with, elective surgery or treatment.
- 23. Complications: Your claim arises from, or is a consequence of complications from medical, surgical or dental procedures or treatments that are not for an Injury or Sickness that would otherwise be covered by this Policy.
- 24. **Professional sports:** Your claim arises from you or your Travelling Companion participating in Professional Sport of any kind (including professional racing on foot).

- 25. Racing, speed, or endurance events: Your claim arises directly or indirectly from, or is in any way connected with, you participating in any race, speed or time trial, or endurance event except for amateur racing on foot in races for distances up to and including the full marathon (42.2 kilometres or 26.2 miles).
- 26. Motorcycles: Your claim arises directly or indirectly from, or is in any way connected with, you being in control of a Motorcycle without holding a motorcycle licence valid in the country you are riding, or you are a pillion passenger on a Motorcycle and the person in control does not hold a motor cycle licence valid in the country you are travelling in.
- 27. Mopeds or Scooters: Your claim arises directly or indirectly from, or is in any way connected with, you being in control of a Moped or Scooter without holding a motor cycle or drivers licence valid in the country you are riding, or you are a pillion passenger on a Moped or Scooter and the person in control does not hold a motorcycle or drivers licence valid in the country you are travelling in.
- 28. No helmet: Your claim arises directly or indirectly from, or is in any way connected with, you not wearing a helmet while riding or being a pillion passenger on a Motorcycle or Moped or Scooter.
- 29. Flying: Your claim involves air travel other than as a passenger on a fully licensed passenger carrying aircraft operated by an airline or charter company, except:
 - for regulated or licensed ballooning, or
 - as provided for under the list of automatically covered activities (see inside back cover of this policy document).
- 30. Diving involving artificial breathing apparatus: Your claim arises because you dive underwater using an artificial breathing apparatus, unless you hold an open water diving licence/ certificate or are diving with a licensed instructor.
- Skiing/snowboarding Off-piste: Your claim involves participation by you or your Travelling Companion skiing or snowboarding Off-piste.
- 32. **Certain other sports/activities:** Your claim involves participation by you or your Travelling Companion in hunting, polo playing, hang gliding, rodeo riding, BASE jumping, mountaineering or rock climbing using ropes or guides or any sport or recreational activity not listed as automatically covered on the inside back cover of this policy document.
- 33. Travelling in international waters: Your claim involves you travelling in international waters in a private sailing vessel or a privately registered vessel.

Part 3: Financial Services Guide

This Financial Services Guide (FSG) has been designed to help you make an informed decision about the financial services that STA Travel and Allianz Global Assistance can provide to you. It also contains information about how they and others are remunerated for providing these financial services and how your complaints are dealt with.

The distribution of this FSG has been authorised by Allianz Global Assistance.

Where they arrange an insurance policy for you, they will give you a Product Disclosure Statement (PDS) when required. The PDS is designed to provide important information on the significant features and benefits of the policy and is designed to assist you in making an informed decision about whether to buy the product. It may consist of more than one document.

Any advice that is provided to you is general in nature and does not take into account your individual objectives, financial circumstances or needs. Before you make any decisions about the product, you should read the PDS carefully to ensure that it is suitable for you.

About Allianz Global Assistance

Allianz Global Assistance (a trading name of AWP Australia Pty Ltd ABN 52 097 227 177 AFS Licence No. 245631) of 74 High Street, Toowong, Queensland 4066 is an Australian Financial Services Licensee authorised to deal in and provide general advice on general insurance products. Allianz Global Assistance has been authorised by the insurer Allianz Australia Insurance Limited (Allianz) ABN 15 000 122 850 AFS Licence No 234708 of 2 Market Street, Sydney, New South Wales, 2000 Telephone 13 26 64 to act on its behalf to deal in and provide general advice and handle and settle claims in relation to travel insurance products underwritten by Allianz.

Allianz Global Assistance has a binding authority which means it can enter into, vary or cancel these insurance products and handle and settle claims without reference to Allianz provided it acts within the binding authority. When providing these services, Allianz Global Assistance acts for Allianz and does not act on your behalf.

About STA Travel

STA Travel Pty Ltd (STA Travel) ABN 34 004 801 512, AR No 261330 of Level 3, 6 Riverside Quay, Southbank VIC 3006, Telephone 03 9097 6900 is an authorised representative of Allianz Global Assistance.

STA Travel is authorised by Allianz Global Assistance to deal in and provide general advice on travel insurance products underwritten by Allianz. STA Travel acts for Allianz Global Assistance and does not act on your behalf.

Professional indemnity insurance arrangements

Allianz Global Assistance and its representatives (including its authorised representatives) are covered under professional indemnity insurance that complies with the requirements of section 912B of the Corporations Act. The insurance (subject to its terms and conditions) will continue to cover claims in relation to representatives/employees of Allianz Global Assistance who no longer work for it (but who did at the time of the relevant conduct).

Remuneration

The premium for this travel insurance policy is payable to Allianz as the insurer.

STA Travel may receive from Allianz Global Assistance:

- commission (inclusive of GST) which is calculated as a percentage of the premium you pay for a travel insurance policy issued to you. It is only paid if you buy a policy. In some cases STA Travel is required to apply part of the commission they receive for particular purposes, such as advertising and marketing.
- a share of profit if STA Travel meets certain profitability targets agreed with Allianz Global Assistance.
- payments if certain performance targets related to the amount of premium collected by STA Travel for travel insurance policies sold by Allianz Global Assistance are exceeded.

Allianz Global Assistance is also remunerated by Allianz for providing services on behalf of Allianz. This is a percentage (exclusive of GST) of the premium that you pay for a travel insurance policy and is only paid if you buy a policy. Employees and representatives of STA Travel and Allianz Global Assistance receive an annual salary, which may include bonuses and/or other incentives, which can be based on performance or other criteria.

Employees and representatives of STA Travel may also qualify to participate in an incentive scheme under which they may receive incentives (either monetary or not) relating directly to their sales of travel insurance products.

The above remuneration is included in the premium you pay.

If you would like more information about the remuneration that STA Travel, or employees and representatives of STA Travel or Allianz Global Assistance receives, please ask them. This request should be made within a reasonable time after this FSG is provided to you and before the financial services are provided to you.

If you have a complaint

Should you have a complaint or dispute arising out of this insurance, or our employees, authorised representatives or service providers, please call Allianz Global Assistance on 1800 901 078 or put the complaint in writing and send it to PO Box 162, Toowong, Queensland 4066.

A dispute may also be referred to the Financial Ombudsman Service Australia (FOS), which is an independent external dispute resolution body. For more information or to access the FOS process please call 1800 367 287. Alternatively, you can write to the FOS at GPO Box 3, Melbourne, Victoria 3001. Access to the FOS is free.

Privacy statement

Allianz Global Assistance and STA Travel are committed to ensuring the privacy and security of your personal information. They adhere to the Privacy terms set out in Part 1 of this document.

How to contact us

You can contact STA Travel or Allianz Global Assistance or provide them with instructions by using the contact details outlined in this FSG. Please keep this document in a safe place for your future reference.

Date prepared

This FSG was prepared on 10 February, 2017.



List of automatically covered activities

Your policy provides cover for claims involving participation by you in the activities listed below. Cover is subject to the terms, conditions, limits and

- Abseiling
- Aqua zorbing
- Archery
- Bicycling (not bicycle motorcross (BMX))
- Bungee/bungy jumping
- Camel or donkey riding (supervised)
- Canoeing/sea canoeing
- Caving / potholing
- Contact sports (including any form of rugby, Australian rules football or American football)
- Dancing
- Deep sea fishing
- Dog sledding
- Fishing (on land or within 2 nautical miles of a land mass)
- Flying fox/zip lining
- Go karting

- Golfing
- Gym activities (not powerlifting)
- Gymnastics
 (not competitions)
- Hiking
- Horse riding (not competitions, equestrian events, steeple chasing, jumping or polo)
- Hot air ballooning
- Ice skating on a rink (not competitive skating, racing, speed skating, or tour skating)
- Jet boating
- Jet skiing
- Kayaking
- Kite surfing
- Motorcycling or moped riding (restrictions apply)

exclusions that apply to the Section under which your claim is made and the "General Exclusions that apply to all Claims" on pages 37 to 39.

- Mountain biking
- Mountaineering where ropes and guides are not required
- Orienteering
- Paintball (with eye protection)
- Paragliding
- Parasailing
- Quad biking
- Racing on foot (restrictions apply)
- Racquet and ball sports not involving physical contact
- Safari (supervised and excluding hunting)
- Sailing (up to 10 nautical miles off any land mass)
- Scuba diving (restrictions apply)

- Shark cage diving
- Shooting (at a range)
- Skateboarding, roller skating, rollerblading (not vert skating or inline skating)
- Skydiving
- Snorkeling
- Snowmobiling, skiing and snowboarding (on-piste) /cross country skiing
- Soccer
- Surfing
- Wake boarding / wake skating
- White water rafting
- Windsurfing
 - Working holidays



This insurance is issued and managed by AWP Australia Pty Ltd trading as Allianz Global Assistance ABN 52 097 227 177 AFS Licence no. 245631 74 High Street, Toowong QLD 4066

This insurance is underwritten by Allianz Australia Insurance Limited ABN 15 000 122 850 AFS Licence no. 234708 2 Market Street, Sydney NSW 2000

STA Travel Ltd is an authorised representative of AWP Australia Pty Ltd

CALL US: 1300 676 561 ONLINE: STATRAVEL.COM

OR VISIT YOUR NEAREST STORE WWW.STATRAVEL.COM.AU/STORES