

AirPlus Travel Inconvenience

For the holders of an Account, a Virtual Card with AirPlus
Policy Number: Virtual Card & Account APAX1006CH

Scope of Insurance

According to the insurance agreement concluded between TSM and AirPlus International AG, your account / your Virtual Card, with the coverage AirPlus Travel Inconvenience, includes the insurance coverage as detailed below. This contract ends earliest on 31 December 2024.

You will find detailed explanations in the insurance conditions under the specified sections.

The "General Definitions regarding the General Insurance Information", the "General Insurance Information - TSM / AirPlus Special Conditions 2023", and "Bulletin on Data Processing".

A. Travel Health Insurance

up to	CHF 21.600.000,00	for medically required curative treatments and medically meaningful return transport
up to	CHF 108.000,00	for repatriation assistance
up to	CHF 11.340,00	for burial costs at the place of death
up to	CHF 1.674,00	for medically required accompanying persons
per day	CHF 33,48	if assumption of costs is waived for inpatient treatment

B. Transport delays

up to	CHF 378,00	for delays exceeding 4 hours
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C. Delayed luggage (checked luggage)

up to	CHF 324,00	for delays exceeding 4 hours
up to	CHF 1.620,00	for delays exceeding 48 hours

D. Damaged luggage

up to	CHF 1.080,00	
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E. Luggage lost in transport mode

up to	CHF 1.620,00	
Deductible	CHF 54,00	

F. Travel cancellation insurance

up to	CHF 5.400,00	
Deductible	20%	(min. CHF 108.00)

G. Event cancellation insurance

up to	CHF 5.400,00	
Deductible	10%	

Organisation of medical and travel assistance

General Definitions regarding the General Insurance Information

Translation from original German text.
In case of any discrepancies, the original German wording will apply.

<u>Insurer:</u>	<p>TSM Compagnie d'Assurances , Rue Jaquet-Droz 43b 2301 La Chaux-de-Fonds , Switzerland (company number CHE-105.763.241)</p> <p>Telephone: +41 (0) 22 819 44 00 E-mail : sales@tsm-assistance.com E-mail: airplusENG@axa-travel-insurance.com</p> <p>- hereafter "TSM", "we", "us" or "our"</p>
<u>Policyholder:</u>	<p>AirPlus International AG Obstgartenstraße 27 8302 Kloten, Switzerland</p> <p>- hereafter AirPlus</p>
<u>Insured person(s):</u>	<p>Insurance cover applies to the persons listed in the respective sections of the insurance conditions.</p> <p>- hereafter "you" or "your"</p>
<u>Corporate Card:</u>	<p>All Corporate Cards issued by AirPlus or its subsidiaries/affiliates or cooperation partners (currently: AirPlus Corporate Card Type 1,2,3, AirPlus Supreme Card, and AirPlus Corporate Credit Card as well as associated Private Cards issued until 2021).</p> <p>- hereafter "Corporate Card"</p>
<u>Company Account:</u>	<p>All central billing accounts issued by the policyholders or their subsidiaries or cooperation partners (currently: AirPlus Company Account, AirPlus Debit Account, MC Lodged Account).</p> <p>- hereafter "Account"</p>
<u>Virtual Card:</u>	<p>All Virtual Cards Classic issued by the policyholders or their subsidiaries or cooperation partners. The AirPlus Virtual Cards Classic is available in the versions single-use and multi-use. For the single-use version, a Virtual Card number can be used for a one-off payment. For the multi-use version, a virtual card number can be used for multiple payments with the same purpose of use.</p> <p>- hereafter "Virtual Card"</p>
<u>Travel Costs:</u>	<p>Travel costs include the costs directly related to the travel and can be paid with a Corporate Card or an Account or a Virtual Card. This includes the cost of transportation and the cost of accommodation (hotel, etc.). These costs must be paid to the account, the Virtual Card or the Corporate Card or the account, the Corporate Card or the Virtual Card must be deposited as cash. Not covered by the travel expenses as Costs of food, unless they are in the price fixed price included (for example, half board).</p>
<u>Means of Transport:</u>	<p>the transport of travel (plane, train, boat / ferry, distance buses or rental cars) and, where this is explained in the terms defined in the "conditions for the</p>

insurance coverage", the transport, which is used to the means of transport to reach or to move from transport to the destination.

Sharing Economy:

The insured person is able to borrow or rent assets owned by a third party through an officially authorised supplier. These include, for example, driving services and rental of accommodation.

Trip / Journey:

Any business or private journey worldwide that begins and ends during the period of cover. This does not include the regular route to the workplace (in terms of commuting), even if this is cross-border.

The insurance contract was concluded between us and AirPlus International AG in favour of the respective insured persons. The insured persons are entitled to exercise the rights from the contract. The respective insured person is responsible for complying with the conditions, and is also responsible for the consequences of non-compliance or non-fulfilment of the conditions.

General Insurance Information - TSM / AirPlus Special Conditions 2023

1. Identity of the insurer

TSM Compagnie d'Assurances ,
Rue Jaquet-Droz 43b
2301 La Chaux-de-Fonds ,
Switzerland
(company number CHE-105.763.241)

Telephone: +41 (0) 22 819 44 00
E-mail : sales@tsm-assistance.com
E-mail: airplusENG@axa-travel-insurance.com

2. Address for service:

TSM Compagnie d'Assurances
Rue Jaquet-Droz 43b,
2301 La Chaux-de-Fonds

Telefon : +41 22 819 44 00
E-Mail : sales@tsm-assistance.com

For English:
Telefon: +44 (0) 203 281 7210
E-Mail: airplusENG@axa-travel-insurance.com

For German:
Telefon: +49 (0)89 3803 5679
E-Mail: airplusDEU@axa-travel-insurance.com

For French:
Telefon: +33 170 770 434
E-Mail : airplusFRA@axa-travel-insurance.com

For Italian:
Telefon: +39 068 750 3255
E-Mail: airplusITA@axa-travel-insurance.com

3. Primary business purpose:

The primary business consists of undertaking insurance transactions in the area of accident and non-life insurance.

4. Information regarding the existence of a guarantee fund

A guarantee fund is not prescribed by law.

5. Key insurance features

Insurance cover applies to worldwide travel, subject to the sanctions clause in item I.5.

Travel Health Insurance

Reimbursement of all costs		for medically required curative treatments and medically meaningful return transport
up to	CHF21.600.000,00	for medically required curative treatments and medically meaningful return transport
up to	CHF 108.000,00	for repatriation assistance
up to	CHF 11.340,00	for burial costs at the place of death
up to	CHF 1.674,00	for medically required accompanying persons
per day	CHF 33,48	if assumption of costs is waived for inpatient treatment

Transport delays

up to CHF 378.00 for delays exceeding 4 hours

Delayed luggage (checked luggage)

up to CHF 324.00 for delays exceeding 4 hours

up to CHF 1,620.00 for delays exceeding 48 hours

Damaged luggage

up to CHF 1,080.00

Luggage lost in transport mode

up to CHF 1,620.00

Deductible CHF 54.00

Travel cancellation insurance

up to CHF 5,400.00

Deductible 20% (min. CHF 108.00)

Event cancellation insurance

up to CHF 5,400.00

Deductible 10%

Organisation of medical and travel assistance

6. Total price of insurance and costs

With respect to the insured persons themselves, no separate insurance premiums are payable to TSM for insurance benefits that are included in credit or client cards.

7. Payment, fulfilment and payment method of premium

With respect to the insured persons, these insurance conditions do not give rise to any provisions regarding payment, fulfilment and payment method of the premium to TSM.

8. Start and end of insurance coverage / Additional liability

Insurance cover for the insured persons begins with the purchase or availability of the credit card which includes the insurance benefits outlined herein.

Provisions that deviate from the above (e.g. activation of insurance cover by using the card) are described below.

Insurance cover lapses on the day on which the Corporate Card, the Virtual Card or the Account is no longer valid, or on the date on which the insurance cover is cancelled, or on the date on which the master insurance contract ends.

However, insurance cover will be granted beyond the expiry date with regard to services that have been paid prior to this date using the Corporate Card, the Virtual Card or the Account, and that fall under the insurance cover of this contract.

In the event of changes to the cover scope pursuant to these insurance conditions, the insured person will be informed by the insurer via AirPlus.

9. Right of withdrawal

The insured person does not have a separate right of withdrawal with regard to the insurance benefits included in the client or credit cards.

The respective provisions of the relevant client or credit card apply.

10. Place of jurisdiction and applicable law

With regard to lawsuits against TSM from the insurance contract, court jurisdiction is determined by the domicile of TSM represented by AXA Assistance. The court in whose district your permanent place of residence is located or, in the absence of such, the district in which you have your customary place of residence, shall also have local jurisdiction. If the lawsuit is directed against a natural person, lawsuits from the insurance contract must be filed against the natural person at the court that has jurisdiction over the person's permanent place of residence or, in the absence of such, the location of the person's customary place of residence. If the lawsuit is directed against a legal entity, the court with jurisdiction shall be determined by the entity's domicile or office.

If the natural person moves his permanent place of residence to a country outside of Germany, or their permanent or customary place of residence is not known at the time the suit is filed, then solely the court in whose district TSM's domicile is located shall have jurisdiction for lawsuits from the insurance contract and the insurance brokerage.

This contract is subject to German law.

11. Contract language

During the term of the contract, all communication will be conducted in German.
Information on claims and assistance services can also be provided in English.

The supervisory authorities in charge of complaints are as follows:

Swiss Financial Market Supervisory Authority FINMA
Laupenstrasse 27
CH-3003 Bern
Telefon: +41 31 327 91 00
Fax: +41 31 327 91 01
E-Mail: info@finma.ch

12. Out-of-court complaint and legal remedy process (ombudsman process)

In the event the insured person does not agree with our decision, there is the option of reaching an out-of-court settlement by involving the services of a neutral ombudsman.

The ombudsman for insurance is an independent arbitration office that works on behalf of consumers and small business operators; its services are available free of charge. However, the ombudsman may not be involved for the purpose of arbitration proceedings until the insured person has first provided us with an opportunity to review our decision.

The insurance ombudsman can be reached as follows:
OMBUDSMAN OF PRIVATE INSURANCE AND OF SUVA
CHEMIN DES TROIS-ROIS 5BIS
POSTFACH 5843, CH-1002 LAUSANNE

TEL.: +41(0)213175271,
FAX: +41(0)213175270

Email : OMBUDSMAN@AVOCATS-CH.CH

Additional details: <http://www.ombudsman-assurance.ch/>

TSM/AirPlus Special Conditions 2023

I. General provisions

1. What is the legal relationship between the persons involved in the contract?

- 1.1. If the insurance policy has been concluded for the benefit of third parties, it is the insured person who is entitled to exercise the rights from the contract.
- 1.2. All provisions that apply to the insured person must be applied accordingly to their legal successors and other claimants.
- 1.3. Insurance claims cannot be transferred or pledged before the due date without our consent.

2. When do claims from the insurance contract expire?

- 2.1. The claims from the insurance contract expire after three years. The calculation of dates is governed by the general provisions of the German Civil Code.
- 2.2. Once a claim from the insurance contract has been registered with us, the statute of limitations is suspended from the date of registration to the date on which you receive our decision in text form.

3. Prerequisites for insurance cover

A general prerequisite for insurance cover is that this insurance cover was obtained for the Account, the Virtual Card or the Corporate Card, and all of the travel costs were paid with the Account, the Virtual Card or the Corporate Card.

Regardless of card use, insurance cover applies to transport accident protection for the company car, for medically meaningful and physician-ordered return transport of repatriation due to an accident, and the travel health insurance policy.

In the event payment cannot be made with the Account, the Virtual Card or Corporate Card before the start of travel, the insurance cover is also activated if the relevant card is filed as a payment method in a booking or reservation system prior to travel, and billing is in fact processed through this card. In the case of death, insurance cover can be activated as long as the relevant card has been filed with a booking or reservation system.

4. Provisions for travellers with Corporate Card and simultaneous Account or Virtual Card

In the event of the simultaneous existence of both an Account with insurance cover, a Virtual Card with insurance cover and a Corporate Card with insurance cover, the total insurance cover that applies to the Account, the Virtual Card and Corporate Card including all agreed benefits is activated by the use of one of the cards.

Regardless of card use, insurance cover applies to transport accident protection for the company car, for medically meaningful and physician-ordered return transport of repatriation due to an accident, and the travel health insurance policy.

Compensation benefits are always paid out of the contract that is most advantageous for the claimant. There is no addition of similar insurance benefits from multiple contracts under this master contract.

5. General exclusions

a) Sanction Exclusions

We do not provide any insurance cover, as long as it is prohibited by applicable statutory provisions under German and / or EU law. Applicable statutory provisions are:

- Foreign Trade Law AWG
- Foreign Trade Ordinance AWV
- Regulations of the European Union, such as Regulation EU 961/2010

Information on the relevant sanctions of the government authorities can also be found on the following website: https://www.eeas.europa.eu/eeas/european-union-sanctions_en

b) Travel Warning

Your travel to a country or specific area or event to which a government agency in the country of residence (the location of the registered office of the company where the traveling person is employed) or the World Health Organisation has advised the public not to travel, or which are officially under embargo by the United Nations. If you travel to a country under embargo or where a government agency has issued a travel warning at the time of the beginning of the journey, the insurer will make no payment of any expenses and will only assist with arrangements if another form of payment is made for the services.

However, insurance cover is provided and service is offered if an event that led to a travel warning occurs unexpectedly after the start of the trip. The insurance cover expires at the end of the seventh day after the travel warning was issued.

6. Exercising rights / beneficiaries

The insurance policy has been concluded in favour of the insured person.
In the case of a claim, rights may be exercised by the insured person, and by his heirs in the case of death.

The individual insured persons are entitled to receive benefits.
In the case of death, the death benefit goes to the estate of the deceased.

Claims by the insured person or his heir on the occasion of a claim are asserted by the same immediately and directly to the insurer without the consent of the policyholder.

The insurer hereby waives the option granted to him under sec. 35 VVG (German Insurance Act) to offset claims by the insured person from the insurance contract against due premium receivables and/or other claims to which he is entitled from the insurance contract.

7. Limitation of insurance benefits (cumulative)

The maximum benefit offered by us for all Accounts, Virtual Cards and Corporate Cards as a result of a damage event is:

CHF 48,600,000 per event in the case of an aircraft accident
CHF 75,600,000 per event if the event is another travel accident

If this amount is exceeded, the insurance benefits of all insured persons who are involved in the accident will be reduced by the corresponding amount.

8. Changes to the contract

In the event AirPlus and insurer agree to changes to the contract, these shall apply as of the effective date for already issued and newly added Accounts, Virtual Cards and Corporate Cards that offer insurance cover under this contract.

9. Secondary liability

Compensation benefits are always paid out of the contract that is most advantageous for the claimant.

a) Secondary liability vis-a-vis third parties

If the insured person has a claim to benefits vis-a-vis a third party, the insurer is only required to provide payments for expenses that exceed the third party's payments.

The insurer does not provide compensation insofar as a benefit from another insurance contract can be claimed for the damages.

This provision does not include death and disability benefits under the transport and traveller's accident insurance.

b) Secondary liability with several simultaneous AirPlus accident contracts

The amounts insured from the framework agreement between AirPlus and the insurer are approved either from the transport accident or traveller's accident insurance policy.

Compensation benefits are always paid out of the contract that is most advantageous for the claimant. There is no addition of equivalent insurance benefits from multiple contracts under the AirPlus master contract.

10. Payments in foreign currency

Costs incurred in foreign currency that are paid with a Corporate Card or a Virtual Card will be reimbursed in CHF according to the charges on the credit card account.

If the costs in foreign currency were not paid with a Corporate Card or a Virtual Card, amounts will be converted into CHF at the European Central Bank rate for the day on which the receipts are received by the insurer. If required, the CHF amount can also be made available in the foreign country in foreign currency - converted at the rate on the transfer date.

11. Submitting a claim

For claims or questions regarding the insurance cover you can reach our experts 9am - 5pm MEZ on +44 (0) 203 281 7210. In case of emergency you can reach assistance at the same number 24/7.

To submit a claim when back in your country of residence please call the claims department on +44 (0) 203 281 7210 (Monday - Friday 9:00 - 17:00) to obtain a claim form. You will need to give:

- your name

- your policy number (see page 1 of this document)
- brief details of your claim.

We ask that you notify us within 28 days of you becoming aware of needing to make a claim (unless otherwise stated) and return the completed claim forms with any additional requested documentation as soon as possible. Please complete and return the claim form provided by AXA with all necessary documentation to the following address: airplusENG@axa-travel-insurance.com

Do not forget to state your claim number in the header if you already have one.

From 1 January 2024, you will have the option of submitting this information online. Scan this QR code or follow the link: <https://airplus.claims.axa.travel/>



It is recommended to keep a copy of all documents sent to us.

12. What are the consequences of failure to comply with the obligations?

You will lose your insurance cover if you intentionally breach one of the obligations listed below under II Insurance benefits. In the case of a grossly negligent breach of an obligation, we are entitled to reduce our benefits by the amount that corresponds with the severity of fault. Both of the above only apply if we have advised you of these legal consequences via a separate notification in text form.

Insurance cover will be maintained if you are able to prove that you did not breach the obligation in a grossly negligent manner.

Insurance cover will also be maintained if you are able to prove that the breach of the obligation was not a cause for the occurrence or determination of the insured event, or for the determination or the scope of the benefit. This does not apply if you have fraudulently breached the obligation.

II. INSURANCE BENEFITS

A. Travel Health Insurance

1. Insured persons

Corporate Cards

Insurance cover is extended to

- all owners of a Corporate Card,
- the spouse or common-law partner of the card holder,
- as well as his children (including stepchildren, adoptive children and foster children and children of the insured life partners) up to 25 years of age, as long as they are undergoing vocational training or receiving a school education,

on business and private travel.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Account

Insurance is extended to all employees and authorised guests on business travel (contract in favour of third parties).

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Virtual Card

Insurance cover is extended to all employees and authorised guests,

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

2. Prerequisites for insurance cover

Benefits under travel health insurance are provided regardless of card use.

3. Scope of insurance cover

1. The insurer offers insurance cover for an unforeseen (acute) insured event that occurs during foreign travel for a period of maximum 90 days, and will reimburse expenses incurred overseas and other agreed benefits for

- illness and consequences of an accident,
- existing illnesses and consequences of an accident when it is not clear at the start of the travel that these will have to be treated if the trip abroad was carried out as planned,
- unforeseen and acutely occurring pregnancy complications that occur in a foreign country, as well as medically required terminations of pregnancy, insofar as regular check-ups in the case of a known pregnancy had assumed a normal course of the pregnancy.

We are liable up to the maximum compensation payment of 21,6 million CHF. This also applies to cases in which the sum of the individual insurance benefits is above this benefit limit. This applies to one or more insured persons who are victims of the same insured accident or event. In this case, the benefits will be reduced accordingly and paid in proportion to the number of victims.

2. An insured event refers to the medically required treatment of an insured person due to illness or the consequences of an accident. The insured event begins with the treatment and ends when there is no additional need for treatment according to a medical assessment. Death is also deemed an insured event.

3. The area of validity refers to foreign countries. This includes all countries, with the exception of the country in which the insured person maintains his permanent place of residence.

4. Benefits

4.1. Reimbursement of all costs up to the maximum compensation payment for medically required

- a) ambulant medical treatment,
- b) pain-relieving dental treatment, including simple fillings,
- c) repairs to existing tooth replacement to restore ability to chew,
- d) X-ray diagnostics,
- e) medicine and bandages,

- f) remedies (radiotherapy, heat, light and other physical therapy),
- g) aids that are ordered as a result of an accident:
aids required as part of the treatment for positioning body parts (e.g. walking casts, lying shells, bandages), walking aids prescribed by a physician,
- h) hospital treatment including accommodations, meals, operations and transport to inpatient treatment or to emergency physician.

A hospital per diem of CHF 33,48 will be paid in cases where cost reimbursement is waived for inpatient hospital treatments,

- 4.2. Reimbursement of additional expenses as a result of medically meaningful and justified return transport of an ill person to his permanent residence or the nearest available hospital with an ambulance flight. Organisation duties are assumed by the assistance coordinator.

If another service provider is used, reimbursements will be provided up to the amount that would have been incurred if the ambulance flight had been organised by the assistance coordinator.

In this case, a physician engaged by the insurer, in coordination with the on-site treating physician, will decide whether a medically meaningful and justified return transport will be undertaken. If the return transport is carried out without coordinating with the physician engaged by the insurer, medical certificates must be submitted with the application for cost reimbursement, which must show that the return transport was medically meaningful and justified.

The required additional costs for an accompanying person are assumed up to an amount of CHF 1.674,00, insofar as the accompaniment of such persons is medically required and prescribed by a physician, or has been prescribed by the authorities in charge or the airline.

- 4.3. Burial costs at the place of death: up to CHF 11.340,00. All required costs that are directly related to the burial at the place of death are eligible for reimbursement. A medical or official certificate regarding the cause of death must be attached to the receipts.
- 4.4. Transfer costs to the last permanent place of residence: up to CHF 108,000.00. All required costs that are directly related to the transfer to the last permanent residence are eligible for reimbursement. A medical or official certificate regarding the cause of death must be attached to the receipts.
5. During the term of the contract, insurance cover applies to all foreign travel not exceeding a period of 90 days per trip.
If return travel cannot be undertaken on the originally planned return date for medical reasons, the obligation to provide benefits for insured events that are subject to compensation will be extended beyond the planned return date, but at most 365 days. Insurance cover also applies during return flights that are taken after the expiry of the extension.
6. This insurance policy does not offer cover for expenses that are incurred in the travellers home country. This also applies to consequences of illnesses and accidents that have occurred during the foreign travel period.
7. If the insured person has an entitlement to benefits from statutory or private health insurance, or from statutory accident or pension insurance, the insurer is only liable for the expenses that exceed the benefits provided by these policies.

4. Obligation to pay benefits

1. The insured person is free to select from among physicians and dentists accredited to provide treatments.
2. Medicine, bandages, remedies and aids must be prescribed by the persons providing treatment who are listed in paragraph 1.
3. In the case of medically required inpatient treatments, the insured person may choose freely from among the hospitals that are under permanent medical supervision, offer adequate diagnostic and therapeutic options, work according to generally accepted scientific methods and maintain clinical records.
4. The insurer provides benefits according to the contractual scope -for examinations or treatment methods and medication that are mainly accepted by conventional medicine. In addition, the insurer also provides benefits for methods and medication that have shown to be just as promising in practice, or that are used because of a lack of availability of methods or medication under conventional medicine; however, the

insurer may reduce benefits to the amount that would have been incurred if existing methods or medication under conventional medicine were used.

5. Restriction to obligation to pay benefits

There is no obligation to pay benefits

- a) for illnesses and the consequences of accidents the treatment of which abroad was the sole reason or one of the reasons for undertaking the trip;
- b) for treatments with respect to which it was clear prior to the start of travel that they would have to be taken if the travel was undertaken as planned;
- c) for expenses incurred in the travellers home country, even if they refer to consequences of illnesses or accidents that occurred during the foreign travel;
- d) for illnesses and their effects, and for the consequences of accidents and deaths that were caused by the active participation in war events, civil unrest and sports competitions organised by associations and/or related training;
- e) for illnesses based on intent (including suicide and attempted suicide) and accidents, including their effects, and for withdrawal and recovery treatments;
- f) for the treatment of mental and psychological disturbances and illnesses, as well as hypnosis and psychotherapy;
- g) for examinations and treatments due to childbirth, insofar as they are not medically required due to unforeseen acute pregnancy complications that occurred abroad, and regular check-ups had assumed a normal course of the pregnancy;
- h) for tooth replacement including crowns and orthodontics (exceptions: repairs to existing tooth replacement to restore ability to chew);
- i) for aids (e.g. inserts, glasses etc. and sanitary items such as radiation lamps and fever thermometers), certifications, reports, preventative vaccinations and cosmetic treatments;
- j) for stays at health resorts and sanatoriums, and rehabilitation measures;
- k) for treatments by spouses, parents or children. Proven costs of materials (e.g. for medication) will be reimbursed as per the conditions;
- l) for accommodations required because of a need for care or safe keeping.
- m) for claims arising from your failure to obtain urgently recommended vaccines, inoculations or medication prior to your trip. For vaccinations, please refer to the recommendation of the responsible government agency (e.g. the Ständige Impfkommision of the Robert-Koch-Institut in Germany) in the country of residence (the location of the registered office of the company where the traveling person is employed).

Where a treatment or other measures for which benefits have been agreed exceed the medically required scope, the insurer may reduce the benefits to a reasonable amount.

6. Payment of insurance benefits

1. The insurer is only obliged to provide benefits if original receipts are submitted and the required supporting documents are provided; these will become the property of the insurer. Where original receipts were submitted to another cost carrier for reimbursement, copies of invoices are deemed sufficient if the other cost carrier has noted his payment on the copy.
2. All receipts must contain -the first name and surname of the person receiving treatment and the name of the hospital and individual medical services with treatment dates; the prescriptions must clearly show the prescribed medication, the price and acknowledgement of receipt. In the case of dental treatments, the invoices must also contain the names of the teeth that were treated, along with the treatments that were carried out in respect of the same.
3. Supporting documents for benefits or refusal to provide benefits from other providers or insurance carriers must be provided.
4. In addition, the exact account name of the recipient of the cost reimbursement must also be indicated.
5. The insurer is entitled to provide benefits to the provider or sender of proper invoice documents and supporting documents, unless the insurer is aware of justified doubts regarding the legitimacy of the provider or sender.

7. Responsibilities in the case of a damage event / Submitting a claim

Please observe the following in the case of a damage event:

- Each claim to insurance benefits must be immediately reported to the insurer.
- All documents deemed necessary by the insurer to assess damages must be submitted
- In particular all findings, invoices, doctor's fees, hospital bills and all documents regarding reimbursements from statutory or private health insurance (original copies), or invoice copies featuring notations of original reimbursements.
- In the case of return transport, a certificate from the treating physician abroad, which shows that the return transport was justified due to the type and extent of the illness.

- At the insurer's request, the insured person is required to be examined by a physician who has been engaged by the insurer.
- In addition, the insured person is also required to enable to insurer to obtain the required information (release from patient/physician confidentiality)

B. Transport delay > 4 hours

1. Insured persons

Account

Insurance cover is extended to all employees and authorised guests.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Virtual Card

Insurance cover is extended to all employees and authorised guests.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Corporate Cards

Insurance cover is extended to

- all owners of a Corporate Card,
- the spouse or common-law partner of the card holder,
- as well as his children (including stepchildren, adoptive children and foster children and children of the insured life partners) up to 25 years of age, as long as they are undergoing vocational training or receiving a school education,

on business and private travel.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

2. Prerequisites for insurance cover

Insurance cover is provided under the condition that all of the costs for

- airline tickets
- train tickets,
- ferry tickets or
- long-distance buses

have been paid with an Account, a Virtual Card or Corporate Card that provides insurance cover (contract in favour of third parties).

3. Scope of insurance cover

The insurer will reimburse costs incurred for meals, refreshments, hotel stays and transport to and from nearby hotel establishments, if a booked and confirmed trip is delayed by more than four hours as compared to the times indicated in the time table or flight schedule or cannot be undertaken as planned due to a breakdown.

4. Exclusions

Insurance cover is not extended in the following cases:

- a) if a transport mode of the same kind was made available within four hours after the planned departure time (as per the time table or flights schedule);
- b) if the insured person failed to check in at the prescribed time, except in the case of a strike;
- c) if the delay is due to a strike or a situation that was already known more than 24 hours before the start of travel, or which had already been advised previously;
- d) if the delay is due to the fact that the transport mode was withdrawn from transport by an official authority and this was already known prior to the start of travel;
- e) if the delay is due to direct or indirect war or civil war events;
- f) if the delay is due to an attempted or committed crime by the insured person;
- g) if the delay is due to a breach of the customs regulations of the relevant country by the insured person.

5. Responsibilities in the case of a damage event / Submitting a claim

Please observe the following in the case of a damage event:

- Each claim to insurance benefits must be immediately reported to the insurer.
- All documents that the insurer deems necessary for the assessment of damages (e.g. original tickets and confirmation from transport company regarding the minimum four-hour delay of the transport mode) must be submitted.

- Receipts for expenses that were required and are related to the delay of the transport mode must be submitted.
- The published time tables or flight schedules will be used to verify the travel time indicated on the ticket.

C. Delayed luggage > 4 hours

1. Insured persons

Account

Insurance cover is extended to all employees and authorised guests.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Virtual Card

Insurance cover is extended to all employees and authorised guests.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Corporate Cards

Insurance cover is extended to

- all owners of a Corporate Card,
- the spouse or common-law partner of the card holder,
- as well as his children (including stepchildren, adoptive children and foster children and children of the insured life partners) up to 25 years of age, as long as they are undergoing vocational training or receiving a school education,

on business and private travels.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

2. Prerequisites for insurance cover

Insurance cover is provided under the condition that all of the costs for

- airline tickets
- train tickets
- ferry tickets or
- long-distance buses

have been paid with an Account, a Virtual Card or Corporate Card that provides insurance cover (contract in favour of third parties).

3. Scope of insurance cover

If the luggage that is checked in for transport with the same mode of transport also used by the insured person for travel purposes does not arrive at the intended location within four hours of the arrival of the insured person, the insurer will reimburse verified costs for the purchase of required replacement clothes and hygiene items purchased prior to the arrival of the luggage.

With respect to type, quantity and quality, the reimbursement will be based on the delayed or lost clothing items and hygiene articles of the insured person.

4. Exclusions

Insurance cover is not provided if

- a) the luggage was not properly checked in;
- b) the luggage was seized by customs or another government authority;
- c) the required replacement clothing and hygiene articles were not purchased within two days of arrival in the case of a 4 to 48 hour delay;
- d) the luggage delay is due to direct or indirect war or civil war events;
- e) the luggage delay is due to an attempted or committed crime by the insured person;
- f) the luggage delay is due to a breach of the customs regulations of the relevant country by the insured person;
- g) the luggage delay is due to a strike or other labour dispute measures by employees of the airline, flight attendants, baggage crews or air traffic controllers;
- h) the luggage delay or loss of luggage occurs during the return trip to the insured person's permanent place of residence.

5. Responsibilities in the case of a damage event / Submitting a claim

Please observe the following in the case of a damage event:

- Each claim to insurance benefits must be immediately reported to the insurer.

- All documents that the insurer deems necessary for the assessment of damages (e.g. original tickets and confirmation from transport company regarding the minimum four-hour luggage delay) must be submitted.
- Receipts for expenses that were required and are related to the delay of the luggage must be submitted.
- The published time tables or flight schedules will be used to verify the travel time indicated on the ticket.

The appropriate steps to retrieve the luggage must be taken.

Supporting information must be provided that the travel service was paid with the Company Account, the Virtual Card or Corporate Card

D. Damaged luggage

1. Insured persons

Account

Insurance cover is extended to all employees and authorised guests.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Virtual Card

Insurance cover is extended to all employees and authorised guests.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Corporate Cards

Insurance cover is extended to

- all owners of a Corporate Card,
- the spouse or common-law partner of the card holder,
- as well as his children (including stepchildren, adoptive children and foster children and children of the insured life partners) up to 25 years of age, as long as they are undergoing vocational training or receiving a school education,

on business and private travel.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

2. Prerequisites for insurance cover

Insurance cover is provided under the condition that all of the costs for

- airline tickets
- train tickets
- ferry tickets or
- long-distance buses

have been paid with an Account, a Virtual Card or Corporate Card that provides insurance cover (contract in favour of third parties).

3. Scope of insurance cover

If the luggage of the insured person, which was checked in in good condition for transport with the same mode of transport used by the insured person for travel purposes, arrives at the intended destination with damages, the insurer will reimburse verified costs for the repair or purchase of required replacement clothing, luggage items and hygiene articles.

With respect to type, quantity and quality, the reimbursement will be based on the damaged luggage of the insured person.

4. Exclusions

Insurance cover is not provided if

- a) the luggage was not properly checked in;
- b) the luggage was seized by customs or another government authority;
- c) the luggage item features normal damages that are typical for transport, such as scratches, stains etc., which however do not impact the use of the item itself.

5. Responsibilities in the case of a damage event / Submitting a claim

Please observe the following in the case of a damage event:

- Each claim to insurance benefits must be immediately reported to the insurer.

- All documents that the insurer deems necessary for the assessment of damages (e.g. original tickets and confirmation from the airline regarding the damages to the luggage) must be submitted.
- Receipts for expenses that were required and are related to the damages to the luggage must be submitted.
- The published time tables or flight schedules will be used to verify the travel time indicated on the ticket.

Supporting information must be provided that the travel service was paid with the Account, the Virtual Card or Corporate Card.

E. Luggage lost in transport mode

1. Insured persons

Account

Insurance cover is extended to all employees and authorised guests.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Virtual Card

Insurance cover is extended to all employees and authorised guests.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Corporate Cards

Insurance cover is extended to

- all owners of a Corporate Card,
- the spouse or common-law partner of the card holder,
- as well as his children (including stepchildren, adoptive children and foster children and children of the insured life partners) up to 25 years of age, as long as they are undergoing vocational training or receiving a school education,

on business and private travel.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

2. Prerequisites for insurance cover

Insurance cover is provided under the condition that all of the costs for

- airline tickets
- train tickets / boat tickets
- long-distance buses
- car rental (= self-propelled rental cars)
- taxi trips booked via the "FREE NOW" app in Germany
- hotel stays (including bed and breakfasts, Airbnb rentals, rentals via a Sharing Economy company, motels, vacation apartments and firmly attached living units on camping grounds. Mobile caravan trailers, trailers or caravans are not insured.)
- sea voyages / cruises (equivalent to hotel)
- all-inclusive travel (bundling of at least two travel services, if at least one insured mode of transport is included in the package)

have been paid with an Account, a Virtual Card or Corporate Card that provides insurance cover (contract in favour of third parties).

1. As a guest on flights with an aircraft authorised for air travel, as a traveller using the train or ferries

Insurance cover always begins when the person has entered the airport premises/train station/ferry station, applies for the duration of the flight/train ride/boat ride and expires when the person leaves the airport premises/train station/ferry station at the destination.

If the traveller is already in possession of a valid airline ticket or ticket, or such has been filed at the airport/train station/port, the following also applies:

Where modes of transport are used for direct travel to the airport/train station/port prior to the intended departure, insurance cover already begins at the time the person enters the mode of transport. It expires after the arrival of the air plane/train/ferry when the person leaves the mode of transport that was used to reach the nearest destination (hotel, workplace, residence, collection site) after the flight/train ride/boat ride.

Accidents during the course of replacement transport provided by a transport company due to bad weather or for technical reasons are also co-insured in the same manner.

Insurance cover also extends to the drive to and from evening luggage check-in for plane travel.

the following applies to railway passes:

Insurance cover also applies to trips undertaken with railway passes, as long as the pass was paid for with an insured Account, a Virtual Card or a Corporate Card.

2. As the passenger of a long-distance bus
Insurance cover begins when the person enters the bus, applies for the duration of the bus trip and ends when the person leaves the bus at the destination.
3. As the user of a rental car (passenger vehicles)
Insurance cover applies as a driver or passenger in the passenger vehicle. Each entitled driver or passenger of a rental car has a claim for the full amount insured as per this contract. This also includes accidents that occur while entering or exiting the car, or fuelling.
Entitled driver or passengers include all employees of the company for whom the Account or the Virtual Card was issued, and also persons not related to the company who travel in the rental car together with the person renting the car and whose employer also possesses an Account or a Virtual Card with insurance cover, as well as other travelling owners of a Corporate Card and their co-insured family members.
4. As a passenger in taxi cars in a taxi booked through "FREE NOW" app in Germany
Insurance cover only applies as a passenger in the taxi. Each entitled passenger of a taxi has a claim for the full amount insured as per this contract. This also includes accidents that occur while entering or exiting the car, or fuelling.
Entitled passengers include all employees of the company for whom the Account or the Virtual Card was issued, and also persons not related to the company who also travel in the taxi and whose employer also has an Account or a Virtual Card with insurance cover, as well as other travelling owners of a Corporate Card and their co-insured family members.
5. As a hotel guest on hotel premises or as an overnight guest during a stay in a company of the Sharing Economy
Insurance cover begins at arrival upon entry of the hotel grounds prior to check-in, and expires at departure following check-out and departure from the hotel grounds. Accidents outside of hotel grounds in the time between check-in and check-out are not insured.
6. As a participant in all-inclusive travel (bundling of at least two travel services, if at least one insured mode of transport is included in the package)
Insurance cover under items 1. - 6. applies accordingly to the services included in all-inclusive travel. In the case of sea voyages / cruises, ships are deemed equal to hotels.
7. As a participant in sea voyages and cruises
Insurance cover under items 1. - 6. applies accordingly to the services included in sea voyages / cruises. The ship is deemed equal to a hotel.

3. **Scope of insurance cover**

The insurer provides compensation if luggage brought along on a trip is lost or damaged in an insured mode of transport, and during travel to and from the same.

The following are deemed insured:

- a) theft, breaking and entering, robbery, extortionate robbery, intention property damage by third parties;
- b) accident of a mode of transport;
- c) fire, explosion, storm, hail, snow loads, lightning strikes, flood water, flooding, avalanches, volcanic eruptions, earthquakes and landslides

All items of the insured person's personal travel needs, including gifts and souvenirs, are deemed insured luggage.

4. **Amount insured and deductible**

In the case of an insured event, the insurer will provide the following compensation, up to the amount insured

- a) for lost or destroyed items - the current market value The current market value refers to the amount that is generally required to acquire new items of the same type and quality, less the amount that corresponds with the condition of the insured item (age, wear and tear, use etc.);
- b) for damaged items, the required repair costs and possibly any remaining reduction in the value, but at maximum the current market value;
- c) for films, video, sound and data carriers, the value of the materials;
- d) for official identification and visas, the official fees for replacing such documents.

For each insured event, the insured person is responsible for a deductible of CHF 54.00.

5. **Exclusions**

1. No insurance cover exists for the following:
 - a) cash, securities, travel tickets and all types of documents with the exception of official identification and visas
 - b) other items brought along (including EDP devices and so) provided by the employer
 - c) sports equipment
 - d) jewellery and valuable items
 - e) subsequent financial losses.
2. No insurance cover is provided for
 - a) damages due to forgetting something, leaving something lying, hanging or standing somewhere, losing items;
 - b) if the insured person has brought about the insured event in an intentional or grossly negligent manner. In the event the insured person brings about the damages in a grossly negligent manner, the insurer is entitled to reduce benefits in proportion to the severity of the fault of the insured person.
3. Restrictions to insurance cover
 - a) private mobile telephones, EDP devices and software including accessories are insured for a total of up to CHF 216.00;
 - b) cameras and video cameras (including accessories) brought along as luggage are insured for a total of up to CHF 108.00;
 - c) glasses, contact lenses, hearing aids, orthodontic braces and prostheses including accessories are insured for up to CHF 108.00 each;
 - d) gifts and souvenirs are insured for a total amount of up to CHF 54.00;
4. Luggage in parked rental car
Insurance cover for the theft of luggage during an insured travel period from a rental car and from attached containers or roof/rear racks that are locked is only available if the rental car or the containers or roof/rear racks were secured with a lock and the damages occur between 6:00 am and 10:00 pm. Insurance cover is also extended to overnight periods in the case of stop-overs that do not exceed two hours at a time.

6. **Responsibilities in the case of a damage event / Submitting a claim**

Please observe the following in the case of a damage event:

- Each claim to insurance benefits must be immediately reported to the insurer.
- The insured person is required to immediately report damages caused by criminal acts to the nearest or closest available police detachment by submitting a list of all lost or damaged goods, and to obtain confirmation of the same. A certificate in this regard must be submitted to the insurer.
- All documents deemed necessary by the insurer to assess damages must be submitted.
- Receipts for expenses that were required and are related to the lost luggage must be submitted.

The appropriate steps to retrieve the luggage must be taken.

Supporting information must be provided that the travel service was paid with the Account, the Virtual Card or Corporate Card.

F. **Travel cancellation insurance**

1. **Insured persons**

Account

Insurance cover is extended to all employees and authorised guests. Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Virtual Card

Insurance cover is extended to all employees and authorised guests. Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Corporate Cards

Insurance cover is extended to

- all owners of a Corporate Card,

- the spouse or common-law partner of the card holder,
- as well as his children (including stepchildren, adoptive children and foster children and children of the insured life partners) up to 25 years of age, as long as they are undergoing vocational training or receiving a school education,

on business and private travel.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

2. Prerequisites for insurance cover

Insurance cover is provided under the condition that the travel components were paid with a valid Account, a Virtual Card or valid Corporate Card. Cancellation costs can be claimed for the travel components that were fully paid with a valid Account, a Virtual Card or valid Corporate Card. The name of the cardholder must be indicated on the booking confirmation, and the cardholder must also take part in the trip.

3. Deductible

For each insured event, the insured person is responsible for a deductible of CHF 108.00. If the insured event is triggered by illness, then the insured person is responsible for 20% of the damages eligible for reimbursement, but at minimum CHF 108.00.

4. Scope of insurance cover

(1) The insurer provides compensation:

- a) in the event **the trip does not take place**, for irrecoverable unused travel and accommodation costs and any pre-paid excursions, tours or activities at **your trip** destination which you are contractually obligated to pay or have paid;
- b) in the event **the trip is aborted**, for verified additional return travel costs and hereby directly resulting other additional costs incurred by the insured person, provided that to/from travel is included in the insured arrangement; the same applies in the case of subsequent return travel. With respect to the reimbursement of these costs, the quality that was booked for the travel will be used as a basis for the type and class of transport mode, accommodations and meals. In the event a return trip by plane is required, which is different from the booked trip, only the costs for a seat in the lowest economy class will be reimbursed. Treatment costs, costs for accompanying persons and costs for the transfer of a deceased insured person are not covered.
- c) in the event the trip is aborted, additional expenses of the insured person for booked but not utilised services.

(2) The insurer is required to provide benefits if it is expected - as a result of one of the important reasons outlined below - that the insured person will not be able to travel based on general life experience, or he cannot be reasonably expected to start the trip or end it as planned:

- a) death, serious accident or unexpected serious illness where it was necessary to abort or cancel your trip as confirmed by a medical practitioners report of the insured person, his spouse / life partner / common law spouse, his children, parents, siblings, grandparents, grandchildren, parents in law, children in law or, if the trip was booked for two people, of the second person, provided that this person is among the insured persons;
- b) vaccination intolerance of the insured person or, in the case of joint travel, his spouse, / life partner / common law spouse, his dependent children up to 25 years of age or siblings of the insured person, as long as the other traveller is also among the insured persons;
- c) pregnancy of an insured person or, in the case of joint travel, the spouse / life partner / common law spouse or the mother of a minor insured person, insofar as the travelling person is also among the insured persons;
- d) damages to the property of an insured person as a result of fire, acts of god or an intentional criminal act by a third party. The damages must be significant in relation to the financial position and wealth of the damaged party or his presence is required to assess damages;
- e) loss of the insured person's workplace with subsequent unemployment as a result of an unexpected termination of the employment relationship for business reasons, by the employer;
- f) start of employment following a period of unemployment, as long as the insured person was registered as unemployed when the travel was booked, and the employment office agreed to the travel;
- g) serious accident or vaccination intolerance of a dog of the insured person that was booked for travel. However, failure of the vaccination or insufficient build-up of the antibody value prescribed for the country of travel are not insured;
- h) unexpected call-up of the insured person to a military exercise, if the date cannot be moved and the cancellation costs are not assumed by a cost carrier;
- i) repeat of failed exams by the insured person at a school/university, which must be repeated to avoid an extension to the school/study period or to graduate from the school/course of studies. A requirement in

these cases is that the insured travel was booked prior to the date of the failed exam, and the date for the repeat exam unexpectedly falls during the insured travel period.

- j) Your destination is subject to travel restrictions imposed by the German Foreign Office or local authorities who refuse entry unless these restrictions are due to a pandemic declared by the World Health Organization.

5. Exclusions

- a) The insurer is not liable for the hazards of war, civil war or warlike events and such hazards that arise from the hostile use of military equipment and the presence of military equipment as a result of one of these hazards, regardless of the state of war, along with violent political acts, unrest, other civil unrest and nuclear energy.
- b) The insurer is released from the obligation to provide benefits if the insured event could be foreseen with respect to the insured person at the time the insurance policy was concluded, or was brought about by the insured person himself.
- c) Any unused or additional costs that you incur and can be reimbursed by:
- Accommodation providers, their booking agencies, travel agencies or other compensation schemes.
 - Your transportation providers, their booking agents, travel agencies or other compensation schemes.
 - Your credit or debit card provider or Paypal.
- d) Any claim where you are unable to travel or decide not to travel because the German Foreign Office (or other equivalent governmental body in another country) advises against travel due to a pandemic.
- e) We are not liable for circumstances that were already known to you before you took out the insurance or when you booked the trip and which could reasonably be expected to cause a claim under this insurance.

6. Responsibilities in the case of a damage event / Submitting a claim

Please observe the following in the case of a damage event:

- Each claim to insurance benefits must be immediately reported to the insurer.
- All documents deemed necessary by the insurer to assess damages must be submitted.
- All reasons must be outlined in full and in detail, and must be confirmed by supporting documents where applicable (e.g. physician's certificate or medical report confirming inability to travel).

Supporting information must be provided that the travel service was paid with the Account, the Virtual Card or Corporate Card.

G. Event cancellation

1. Insured persons

Account

Insurance cover is extended to all employees and authorised guests.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Virtual Card

Insurance cover is extended to all employees and authorised guests.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

Corporate Cards

Insurance cover is extended to

- all owners of a Corporate Card,
- the spouse or common-law partner of the card holder,
- as well as his children (including stepchildren, adoptive children and foster children and children of the insured life partners) up to 25 years of age, as long as they are undergoing vocational training or receiving a school education,

on business and private travel.

Reservations up to 10 people are considered insured. Coverage is provided for all individuals of the collective/group bookings.

2. Prerequisites for insurance cover

The prerequisite for insurance cover is that contractually owed costs for attendance at the following external events for work purposes, including

- seminars,
- training courses,
- trade fairs or similar

were paid with an Account, a Virtual Card or Corporate Card that provides insurance cover (contract in favour of third parties).

3. Scope of insurance cover

The insurer is required to pay benefits if the insured person cannot be reasonably expected to attend the booked event due to one of the important reasons outlined below, based on general life experience:

- a) death, serious accident or unexpected serious illness of the insured person, his spouse/life partner/common law spouse, children, parents, siblings, grandparents, grandchildren, parents in law or children in law;
- b) damages to the property of an insured person as a result of fire, acts of god or an intentional criminal act by a third party. The damages must be significant in relation to the financial position and wealth of the damaged party or his presence is required for damage assessment purposes.

4. Exclusions

- a) The insurer is not liable for the hazards of a war, civil war or warlike events and such hazards that arise from the hostile use of military equipment and the presence of military equipment as a result of one of these hazards, regardless of the state of war, along with violent political acts, unrest, other civil unrest and nuclear energy.
- b) The insurer is released from the obligation to provide benefits if the insured event could be foreseen with respect to the insured person at the time the insurance policy was concluded, or was brought about by the insured person himself.
- c) The insurer is not liable for cancellation costs arising from travel and accommodations costs in connection with the event.
- d) Costs for private attendance at training courses, seminars, trade fairs and similar are not deemed insured.

5. Responsibilities in the case of a damage event / Submitting a claim

Please observe the following in the case of a damage event:

- Each claim to insurance benefits must be immediately reported to the insurer.
- All documents deemed necessary by the insurer to assess damages must be submitted.
- All reasons must be outlined in full and in detail, and must be confirmed by supporting documents where applicable (e.g. physician's certificate confirming inability to travel)
- Supporting information in the form of a confirmation from the organiser regarding the non-attendance of the insured person and the costs that have been invoiced must be provided.
- Confirmation from the employer that no other employee took part in the event, along with written information about the costs incurred, must be submitted.

Supporting information must be provided that the event costs were paid with an Account, a Virtual Card or Corporate Card.

III. ASSISTANCE SERVICES

Medical and travel assistance

Valid for all contracts

The following assistance services are available to you under the hotline numbers shown below:

24/7 Hotline:	German	+49 893 803 5679
	English	+44 (0) 203 281 7210
	French	+33 170 770 434
	Italian	+39 068 750 3255

Only the listed organisation services are deemed agreed.

All resulting follow-up costs are the responsibility of the insured person.

Medical assistance

- Medical advice over the telephone.
- Information regarding medical funding agencies (names, addresses, telephone numbers and - where requested and available - office hours of medical funding agencies)
- Preparation for inpatient hospital admittance
- Translations (organisation of telephone translations of medical matters)
- Organisation of supplies of important medication
- Evacuation - Organisation of an evacuation for the traveller at the required scope to the nearest hospital that offers suitable medical care.
- Organisation of provision of suitable communication options, mobile medical equipment and a medical attending team.
- Return transport / Repatriation - medically meaningful and physician-ordered return by air plane or another suitable transport method from a domestic location and from abroad to a suitable hospital that is located at the insured person's residence location. In the case of death, the insured person will be repatriated to the last place of residence.
- Hospital visits - Organisation of an airline ticket for a hospital visit by a relative or friend of the insured person, if the insured person travelled alone and is treated at a hospital on an inpatient basis outside of his home country or country of residence.
- Accommodations - Organisation of hotel accommodations for the traveller, if a medical emergency evacuation, medical emergency return transport or inpatient treatment is required.

Travel assistance

- Information about vaccination and visa regulations
- Recommendations regarding translators
- Assistance with lost luggage
- Assistance with lost passports
- Information about legal advice - Provision of names, addresses, telephone numbers and - if requested and available - office hours of lawyers or other legal advisers ("lawyers") in the region of the traveller's current place of residence.
- Assistance with arranging meetings with lawyers
- Assistance with finding foreign representations - Provision of information regarding addresses, telephone numbers and office hours of the nearest consulate or embassy in charge.
- Provision of documents in the case of an emergency

Bulletin on Data Processing

Details of you, your insurance cover under this policy and claims will be held by us (acting as Data Controller) for underwriting, policy administration, claims handling, providing travel assistance, complaints handling, sanctions checking and fraud prevention, subject to the provisions of applicable data protection law and in accordance with the assurances contained in our website privacy notice (see below).

We collect and process these details as necessary for performance of our contract of insurance with you or complying with our legal obligations, or otherwise in our legitimate interests in managing our business and providing our products and services.

These activities may include:

use of sensitive information about the health or vulnerability of you or others involved in your assistance guarantees, in order to provide the services described in this policy. By using our services, you consent to us using such information for these purposes,

disclosure of information about you and your insurance cover to companies within the AXA group of companies, to our service providers and agents in order to administer and service your insurance cover, to provide you with travel assistance, for fraud prevention, to collect payments, and otherwise as required or permitted by applicable law; monitoring and/or recording of your telephone calls in relation to cover for the purposes of record-keeping, training and quality control;

technical studies to analyze claims and premiums, adapt pricing, support subscription process and consolidate financial reporting (incl. regulatory); detailed analyses on claims/missions/calls to better monitor providers and operations; analyses of customer satisfaction and construction of customer segments to better adapt products to market needs; obtaining and storing any relevant and appropriate supporting evidence for your claim, for the purpose of providing services under this policy and validating your claim; and sending you feedback requests or surveys relating to our services, and other customer care communications.

We will separately seek your consent before using or disclosing your personal data to another party for the purpose of contacting you about other products or services (direct marketing). You may withdraw your consent to marketing at any time, or opt-out of feedback requests, by contacting the Data Protection Officer (see contact details below).

We carry out these activities within the UK, in and outside the European Economic Area, in relation to which processing the data protection laws and or agreements we have entered into with the receiving parties provide a similar level of protection of personal data

By purchasing this policy and using our services, you acknowledge that we may use your personal data, and consent to our use of sensitive information, both as described above. If you provide us with details of other individuals, you agree to inform them of our use of their data as described here and in our website privacy notice (see below).

You are entitled on request to a copy of the information we hold about you, and you have other rights in relation to how we use your data (as set out in our website privacy notice – see below). Please let us know if you think any information we hold about you is inaccurate, so that we can correct it.

If you want to know what information is held about you by AXA Travel Insurance Limited, or have other requests or concerns relating to our use of your data, please write to us at:

Data Protection Officer
AXA Travel Insurance Limited
106-108 Station Road
Redhill
RH1 1PR

Email: dataprotectionenquiries@axa-assistance.co.uk

Our full privacy notice is available at: www.axa-assistance.com/en.privacypolicy
Alternatively, a hard copy is available from us on request.