

PGL SKI TRAVEL INSURANCE – Summary for Party Leaders – 2011/2012

Dear Party Leader,

Attached to this summary are your policy documents for your group. You must read the Policy document and ensure that you understand what is and what is not covered and that it is suitable for you and your groups needs. If you have any questions please contact PGL immediately. If the cover is not suitable please inform PGL within 14 days of receipt of your policy documents.

You must make copies of the Policies available to every person to read. You should keep a record where you have provided a copy of the policy to each person.

You are responsible for notifying the Claims Handlers of any claims by your group under the policy. What is required is set out at the end of each section. This ensures you are aware of all claims for submission by your group.

You should keep a note of the Master Policy No., Assistance contact details with you at all times. We suggest that you also give a copy to any other responsible adults travelling with the group. Each person in your group will receive a **Medi-Card**. The **Medi-Card** should be carried by each person at all times. Each **Medi-Card** has its own specific number and will need to be shown to the medical provider should any person suffer an emergency medical injury or illness during your trip.

The Policy document contains two policies. The first policy, the **Pre-travel Policy**, provides pre-travel cover, cancellation charges, and covers the travellers from the time they purchase the policy until they leave home to start their trip. The second policy, the **Travel Policy**, provides travel cover and this starts when the traveller leaves home to start the trip and ends when they return home or the policy ends, whichever is the first.

We have tried to keep the wording as simple as possible. There are conditions and exclusions applying to the **Pre-Travel Policy** and there are terms and exclusions which apply to all parts of the **Travel Policy**. Each section tells you what is covered, what is not covered and what you need to do if you need to claim under that section. There are no hidden parts or small print.

Like many other policies this insurance excludes pre-existing health conditions unless under 18 years travelling in the United Kingdom or Europe. If a member of your group does need the cover, unlike some other policies, they may be able to obtain cover for these conditions by calling the Referral Helpline on the lo-call number shown under the 'Disclosure of Material Facts and Pre-existing Health Conditions' section of the policy. Cover is not available on all conditions and for a condition to be included we may need to charge an additional premium or increase the policy excess for the traveller with this condition (an excess is the first part of the claim cost) You should bear in mind that this excess will apply to everyone on the booking if they have to claim for cancellation or curtailment (cutting short the trip) due to the travellers health condition. Cover is not available for conditions which are under investigation or awaiting treatment. Referral should be made for pre-existing health conditions of close relatives or business associates who are not travelling with the group for advice on cover.

You must make sure all travellers are aware of the following statement
"if you do not tell us about your pre-existing health conditions (all travellers outside Europe and anyone over 18) or about pre-existing health conditions of anyone on whom the travel plans depend, they will not be covered at all and you will not be able to claim for anything caused by them."

If a traveller's health changes after you have bought the policy they must call the Referral Helpline immediately. As there are two policies, cancellation under the **Pre-travel Policy** will be effective, but cover for the **Travel Policy**, which has not started, may change. Travel insurers require stability of health conditions whilst away so what cover is available will depend on the condition, the medication and the period of time before travel. In some instances the new condition may be excluded and on a few occasions we may agree to pay the travellers cancellation charges at the time of diagnosis.

Under the insurance policy, cancellation claims are paid at the time the event or the new diagnosis is made which makes it necessary for the traveller to cancel. **You must, therefore, confirm cancellation by any member of your group to the tour operator immediately it becomes necessary, firstly by phone and then, in writing. Cancellation charges are raised by the tour operator dependant on the number of days prior to departure. The closer the departure date – the higher the cancellation charges. Any delay may mean that you will not receive as much as the holiday cancellation charges.**

The personal possessions section covers items on a market value basis. This means that we will deduct an amount for age, wear and tear, to reflect the expected lifetime of the item. The cover is limited to a maximum amount for each item, a maximum amount for items described as 'valuables' and has an overall limit for each person. Mobile telephones are not covered under your policy and cover on photographic equipment and jewellery is very limited. We do not recommend taking jewellery away on holiday at all. You will be required to pay the first amount (policy excess) on each claim for each person claiming.

The personal money section covers a wide variety of things but the cover on cash and currency is limited. This section also provides some cover for the loss of travel documents, the cover is for travel and accommodation charges to get to either a ticketing office or consulate for a lost passport.

This is not a private health insurance and the emergency medical expenses section is only there to cover genuine emergencies. Routine treatment and replacement of existing medication or dressings are specifically excluded, as is non-emergency dental treatment. You should make sure that our emergency assistance service has been advised of any hospitalisation within 48 hours of admission; the telephone number is given within the **Travel Policy**. We will pay you an additional daily amount under the hospital benefit cover, for the cost of visitor's taxis, newspapers etc. if the traveller is in a state hospital.

If a traveller needs to cut short their trip you must confirm this with our emergency assistance service (details in the policy), before arranging any travel. If the traveller has been admitted to hospital they should already be aware of the situation and will deal with it as necessary. If a traveller needs to come home because of a close relative the emergency assistance service should be contacted as soon as possible and they will arrange ticketing.

Overseas Emergency Medical Treatment Within most countries in the European Economic Area medical treatment is free, or at a very reduced cost, if you use state facilities under the reciprocal health arrangement. Travellers are strongly advised to obtain a valid **European Health Insurance Card (EHIC)**. Please be careful, in many areas hotel staff may direct you to private facilities. Whilst many of these resemble luxury private hospitals they can be very limited in respect to medical facilities and in the health conditions they can treat. The state facilities can usually treat everything and, if the condition requires specialist treatment, will transfer you to the specialist unit. Additionally your policy carries an excess (which varies depending upon age) under the emergency medical section. *This excess will be removed if you use a state hospital, saving you money.* Unfortunately any additional excess for a specific health condition will still apply.

This insurance is arranged by **Fogg Travel Insurance Services Limited**, which is authorised and regulated by the Financial Services Authority. Our FSA Register reference is 307304. This can be checked at www.fsa.gov.uk/pages/register

Your insurer Union Reiseversicherung AG, URV, is authorised in Germany by BAFin and regulated in the United Kingdom by FSA. URV is a member of the Financial Services Compensation scheme, which offers you protection in the event that the Insurer is not financially able to meet its liabilities in respect of your claim, the FCSC can cover 90% of the claim without any upper limit.

We sincerely hope you will not need to complain about your insurance policies or claims settlement. However, if you do need to complain please forward details of your complaint to

The General Manager, Fogg Travel Insurance Services Limited, Crow Hill Drive, Mansfield, Notts NG19 7AE.

We wish you and your group a pleasant trip.

General Manager, Fogg Travel Insurance Services Limited.