

Travel Protection Plan
 Provided for the travelers of



Description of Coverage



DESCRIPTION OF COVERAGE

**Schedule: TRIP CANCELLATION / INTERRUPTION
 UPGRADE PLAN**
Plan Number: 249U-0514
Version: 0115

Schedule of Coverages & Services

Plan Benefits	Maximum Coverage Per Person
Trip Cancellation	Up to 100% of Insured Trip Cost
Trip Interruption	Up to 100% of Insured Trip Cost

Coverages listed are up to the limits shown above and underwritten by Transamerica Casualty Insurance Company.

Please read this Description of Coverage in its entirety for a summary of your terms and conditions.

IMPORTANT NOTES

This program is effective only when the appropriate plan cost has been received by the Policyholder. Please keep this document as your record of coverage.

Ten Day Free Look Period

If you are not completely satisfied within 10 days of purchasing this plan, the Policyholder will refund your plan cost, if you have not departed on your trip or filed a claim.

TERMS OF COVERAGE

Who Is Eligible For Coverage

A person who has arranged to take a Covered Trip, pays the required plan payment, and is a citizen or resident of the United States of America.

When Coverage Begins

All coverages (except Pre-Departure Trip Cancellation and Post-Departure Trip Interruption) will take effect on the later of 1) the date the plan payment has been received by the Policyholder; 2) the date and time you start your Covered Trip; or 3) 12:01 A.M. Standard Time on the Scheduled Departure Date of your Covered Trip.

Pre-Departure Trip Cancellation coverage will take effect at 12:01 A.M. Standard Time on the day after the date your plan payment is received by the Policyholder. Post-Departure Trip Interruption coverage will take effect on the Scheduled Departure Date.

When Coverage Ends

- Your coverage automatically ends on the earlier of:
1. the date the Covered Trip is completed;
 2. the Scheduled Return Date;
 3. cancellation of the Covered Trip covered by the plan;
 4. your arrival at the return destination on a round-trip, or the destination on a one-way trip.

All coverages under the plan will be extended if your entire Covered Trip is covered by the plan and your return is delayed by unavoidable circumstances beyond your control.

If coverage is extended for the above reasons, coverage will end on the earlier of the date you reach your originally scheduled return destination or seven (7) days after the Scheduled Return Date.

In no event will coverage be extended due to voluntary reasons without prior consent from Travelex Insurance Services.



Insurance Services

DEFINITIONS

In this Description of Coverage, “you”, “your” and “yours” refer to the Insured. “We”, “us” and “our” refer to the company providing the coverage. In addition, certain words and phrases are defined as follows:

Accident means a sudden, unexpected, unintended and external event, which causes injury.

Business Partner means an individual who is involved, as a partner, with you in a legal general partnership and shares in the management of the business.

Common Carrier means any land, water or air conveyance operated under a license for the transportation of passengers for hire.

Covered Trip means a period of travel away from Home to a destination outside your city of residence and the Covered Trip does not exceed 180 days.

Domestic Partner means a person who is at least eighteen years of age and you can show: 1) evidence of financial interdependence, such as joint bank accounts or credit cards, jointly owned property, and mutual life insurance or pension beneficiary designations; 2) evidence of cohabitation for at least the previous 6 months; and 3) an affidavit of domestic partnership if recognized by the jurisdiction within which they reside.

Elective Treatment And Procedures means any medical treatment or surgical procedure that is not medically necessary including any service, treatment, or supplies that are deemed by the federal, or a state or local government authority, or by us to be research or experimental or that is not recognized as a generally accepted medical practice.

Family Member includes your or the Traveling Companion’s dependent, spouse, child, spouse’s child, son-daughter-in-law, parent(s), sibling(s), brother-sister, grandparent(s), grandchild, step brother-sister, step-parent(s), parent(s)-in-law, brother-sister-in-law, aunt, uncle, niece, nephew, guardian, Domestic Partner, foster-child, or ward.

Financial Insolvency means complete suspension of operations due to insolvency, with or without the filing of a bankruptcy petition, whether voluntary or involuntary, by a tour operator, cruise line, airline, rental

car company, hotel, condominium, railroad, motor coach company, or other supplier of travel services other than the person, organization, agency or firm from whom you directly purchased or paid for your Covered Trip provided the Financial Insolvency occurs more than 14 days following your effective date for the Trip Cancellation Benefits. There is no coverage for the complete suspension of operations for losses caused by fraud or negligent misrepresentation by the supplier of travel services.

Home means your primary or secondary residence.

Injury means bodily harm caused by an Accident which: 1) occurs while your coverage is in effect under the plan; and 2) requires examination and treatment by a Physician. The Injury must be the direct cause of loss and must be independent of all other causes and must not be caused by, or result from, Sickness.

Insured means an eligible person who arranges a Covered Trip, and pays any required plan payment.

Insurer means Transamerica Casualty Insurance Company.

Payments or Deposits means the amounts actually paid to the Policyholder for your Covered Trip. The plan will cover pre-paid, non-refundable airfare, hotel, cruise line and rental car charges not made directly with the Policyholder, provided the appropriate plan cost has been paid.

Physician means a person licensed as a medical doctor by the jurisdiction in which he/she is resident to practice the healing arts, including a chiropractor and Christian Science practitioner. He/she must be practicing within the scope of his/her license for the service or treatment given and may not be you, a Traveling Companion, or a Family Member of yours.

Policy means the contract issued to the Policyholder providing the benefits specified herein.

Policyholder means the legal entity in whose name this Policy is issued, as shown on the Benefit Schedule.

Pre-existing Condition means an illness, disease, or other condition during the 60 day period immediately prior to the date the plan payment has been received

by the Policyholder for which you or your Traveling Companion or Family Member is scheduled or booked to travel with you:

1. received or received a recommendation for a diagnostic test, examination, or medical treatment; or
2. took or received a prescription for drugs or medicine.

Item (2) of this definition does not apply to a condition which is treated or controlled solely through the taking of prescription drugs or medicine and remains treated or controlled without any adjustment or change in the required prescription throughout the 60 day period before coverage is effective under this Policy.

Schedule means the Benefit Schedule shown in the Description of Coverage for each Insured.

Scheduled Departure Date means the date on which you are originally scheduled to leave on your Covered Trip.

Scheduled Return Date means the date on which you are originally scheduled to return to the point where the Covered Trip started or to a different final destination.

Sickness means an illness or disease of the body which: 1) requires examination and treatment by a Physician, and 2) commences while the plan is in effect. An illness or disease of the body which first manifests itself and then worsens or becomes acute prior to the effective date of this plan is not a Sickness as defined herein and is not covered by the plan.

Terrorist Act means an act of violence, other than civil disorder or riot, (that is not an act of war, declared or undeclared) that results in loss of life or major damage to property, by any person acting alone or on behalf of or in connection with any organization which is generally recognized as having the intent to overthrow or influence the control of any government.

Traveling Companion means a person who during the Covered Trip will accompany the Insured.

A group or tour leader is not considered a Traveling Companion unless you are sharing room accommodations with the group or tour leader.

SUMMARY OF COVERAGES

Pre-Departure Trip Cancellation Benefits

If you are prevented from taking your Covered Trip for one of the Covered Reasons, we will reimburse you, up to the amount in the Schedule for the amount of forfeited, and prepaid, non-refundable, and unused Payments or Deposits that you paid for your Covered Trip.

We will pay your additional cost as a result of a published change in the per person occupancy rate for prepaid travel arrangements if a Traveling Companion's Covered Trip is canceled due to a covered reason and your Covered Trip is not canceled.

Post-Departure Trip Interruption Benefits

If you are unable to continue your Covered Trip for one of the Covered Reasons, we will reimburse you, less any refund paid or payable, for unused travel arrangements, plus the following:

1. the additional transportation expenses by the most direct route from the point you interrupted your Covered Trip: (a) to the next scheduled destination where you can catch up to your Covered Trip; or (b) to the final destination of your Covered Trip; or
2. the additional transportation expenses incurred by you by the most direct route to reach your original Covered Trip destination if you are delayed and leave after the Scheduled Departure Date; and
3. your additional cost as a result of a published change in the per person occupancy rate for prepaid travel arrangements if a Traveling Companion's Covered Trip is interrupted for a covered reason and your Covered Trip is continued.

However, the benefit payable under (1) and (2) above will not exceed the cost of a one-way economy air fare (or first class, if the original tickets were first class) by the most direct route less any refunds paid or payable for your unused original tickets.

Trip Cancellation and Interruption Covered Reasons

Coverage is provided for the following unforeseeable events or their consequences which occur while coverage is in effect under this Policy if there is a change in plans by you, a Family Member traveling with you, or Traveling Companion:

1. Sickness, Injury or death of you or your Traveling Companion and/or you or your Traveling Companion's Family Member, or Business Partner. The Sickness must commence while coverage is in effect, require the examination of a Physician, in person, at the time of Trip Cancellation or Trip Interruption and, in the written opinion of the treating Physician, be so disabling as to prevent you from taking or continuing your Covered Trip;
2. Common Carrier delays resulting from inclement weather or organized labor strikes that affect public transportation;
3. arrangements canceled by an airline, cruise line, motor coach company, or tour operator, resulting from inclement weather or organized labor strikes that affect public transportation;
4. arrangements canceled by a tour operator, cruise line, airline, rental car company, hotel, condominium, railroad, motor coach company, or other supplier of travel services, resulting from Financial Insolvency;
5. being hijacked, kidnapped, quarantined, required to serve on a jury, or required by a court order to appear as a witness in a legal action, provided you, Family Member traveling with you or a Traveling Companion is not 1) a party to the legal action, or 2) appearing as a law enforcement officer;
6. your Home made uninhabitable by fire, flood, volcano, earthquake, hurricane or other natural disaster;
7. your destination made uninhabitable by fire, flood, volcano, earthquake, hurricane or other natural disaster;
8. you or your Traveling Companion have a previously approved military leave revoked or experience a military reassignment;
9. a Terrorist Act which occurs in your departure city or in a city which is a scheduled destination for your Covered Trip provided the Terrorist Act occurs within 30 days of the Scheduled Departure Date for your Covered Trip or during your Covered Trip.

GENERAL PLAN EXCLUSIONS

The following exclusion applies to the Trip Cancellation and Trip Interruption coverages:

We will not pay for loss or expense caused by or incurred resulting from a Pre-Existing Condition, as defined in the plan, including death that results therefrom. This Exclusion does not apply to benefits under covered expenses for emergency medical evacuation or repatriation of remains of the Medical Protection coverage.

Waiver of the Pre-Existing Condition Exclusion

The Pre-Existing Condition Exclusion is waived provided you meet the following requirements:

1. the payment for this plan is received within 14 days from the date you paid the initial Covered Trip deposit/payment for your Covered Trip;
2. you are not disabled from travel at the time you make your plan payment;
3. you insure all prepaid Covered Trip costs that are subject to cancellation penalties or restrictions and also insure the cost of any subsequent arrangements added to your Covered Trip within 14 days of the payment for those arrangements.

The following exclusions apply to all coverages:

We will not pay for any loss under the plan, caused by, or resulting from:

(a) suicide, attempted suicide, or intentionally self-inflicted injury of you, your Traveling Companion or Family Member booked to travel with you, while sane or insane (while sane in CO and MO); (b) mental, nervous, or psychological disorders, except if hospitalized (does not apply to Medical Expense Benefits); (c) being under the influence of drugs or intoxicants, unless prescribed by a Physician; (d) normal pregnancy or resulting childbirth (except for complications of pregnancy) or elective abortion; (e) participation as a professional in athletics while on the Covered Trip; (f) riding or driving in any motor competition; (g) declared or undeclared war, or any act of war; (h) civil disorder (does not apply to Trip Delay), travel warning/alert; (i) service in the armed forces of any country; (j) operating or learning to operate any aircraft, as pilot or crew; (k) scuba diving, mountain climbing, bungee cord jumping, skydiving, parachuting, hang gliding, parasailing or travel on any air supported device, other than on a regularly scheduled airline or air charter company; (l) any criminal acts, committed by you; (m) a loss or damage caused by detention,

confiscation or destruction by customs; (n) Elective Treatment and Procedures; (o) medical treatment during or arising from a Covered Trip undertaken for the purpose or intent of securing medical treatment; (p) a loss that results from an illness, disease, or other condition, event or circumstance and the loss occurs at a time when the plan is not in effect for you; (q) a diagnosed sickness from which no recovery is expected and which only palliative treatment is provided and which carries a prognosis of death within 12 months of your Effective Date; Sickness, Injury or Death if insurance is purchased after entering a hospice facility or receiving hospice treatment.

GENERAL PROVISIONS

Beneficiary: Your estate, unless written notice of a designated beneficiary is provided to the Plan Administrator.

Concealment or Fraud: We do not provide coverage if you have intentionally concealed or misrepresented any material fact or circumstance relating to the plan.

Conformity To Law: Any provision of the plan that is in conflict with the laws of the state in which it is issued is amended to conform with the laws of that state.

Duplication of Coverage: You may only purchase one certificate from us for each Covered Trip. If you do purchase more than one certificate for a specific Covered Trip, the Maximum Limit of Coverage payable will be as specified in the certificate with the highest level of benefits. We will refund plan payments received from you under any other certificate.

Entire Contract; Changes: The plan, the Group Application and any other attachments is the entire contract between us. Any statement you make is a representation and not a warranty. No statement will be used by us to void or reduce benefits unless that statement is a part of any written application or enrollment form. The plan may be changed at any time by written agreement between us. Only our President, Vice President or Secretary may change or waive the provisions of the plan. No agent or other person may change the plan or waive any of its terms. The change will be endorsed on the plan.

Examination Under Oath: As often as we may reasonably require, you or any person making a claim under the plan must submit to examination under oath.

Maximum Limit of Coverage: The Maximum Benefit Amount for each claim is listed in the Schedule, subject to the individual benefit amount and the company's Maximum Limit of Liability. The total limit of our liability for any one covered event, in which two or more persons submit a claim, is subject to the individual benefit amount and the company's Maximum Limit of Liability. In the event of multiple claims by you for one event, the available funds will be distributed in order of notice of claim by each insured subject to the above limitations.

Maximum Limit of Liability: All limits are applied per Covered Trip. We will pay no more than \$1,000,000 per occurrence to or on account of any person insured under the plan.

Our Maximum Limit of Liability for all claims resulting from the same occurrence will be \$15,000,000 under the TAHC5000, TAHC6000 and TAHC7000 Group series of policies. We will pay no more than \$1,000,000 per occurrence, under the TAHC5000, TAHC6000 and TAHC7000 Group series of policies, to or on account of any person insured under the TAHC5000, TAHC6000 and TAHC7000 Group series of policies.

Our Right To Recover From Others: We have the right to recover any payments we have made from anyone who may be responsible for the loss. You and anyone else we insure must sign any papers and do whatever is necessary to transfer this right to us. You and anyone else we insure will do nothing after the loss to affect our right.

CLAIM PROVISIONS

Notice of Claim: We must be given written notice of claim within 30 days after a covered loss occurs. If notice cannot be given within that time, it must be given as soon as reasonably possible. Notice may be given to us or to our authorized agent. Notice should include the claimant's name and enough information to identify him or her.

Claim Forms: When we receive notice of claim, you will be sent forms to file proof of loss. If the forms are not sent within 15 days after we receive notice, then the claimant will meet the proof of loss requirements by giving us a written statement of the nature and extent of the loss. This must be sent to us within the time limit stated in the Proof of Loss provision.

Proof of Loss: Written Proof of Loss must be sent to us within 90 days after the date the loss occurs. We will not reduce or deny a claim if it was not reasonably possible to give us written Proof of Loss within the time allowed. In any event, you must give us written Proof of Loss within 12 months after the date the loss occurs unless you are legally incapacitated.

Physical Examination and Autopsy: At our expense, we have the right to have you examined as often as necessary while a claim is pending. At our expense, we may require an autopsy unless the law or your religion forbids it.

Legal Actions: No legal action may be brought to recover on the plan within 60 days after written proof of loss has been given. No such action will be brought after 3 years from the time written proof of loss is required to be given. If a time limit of the plan is less than allowed by the laws of the State where you live, the limit is extended to meet the minimum time allowed by such law.

Payment of Claims: Claims for benefits provided by the plan will be paid as soon as written proof is received. Benefits for loss of life will be paid to your estate, or if no estate, to your beneficiary. All other benefits are paid directly to you, unless otherwise directed. Any accrued benefits unpaid at your death will be paid to your estate, or if no estate, to your beneficiary. If you have assigned your benefits, we will honor the assignment if a signed copy has been filed with us. We are not responsible for the validity of any assignment.

CLAIMS PROCEDURES

To facilitate prompt claims settlement:

Trip Cancellation: IMMEDIATELY call your Travel Supplier and the Claims Administrator, as listed within this Description of Coverage, to report your cancellation and avoid non-covered expenses due to late reporting. The Claims Administrator will then advise you on how to obtain the appropriate form to be completed by you and the attending Physician.

If you fail to notify the appropriate Travel Supplier and the Claims Administrator of your cancellation within 72 hours of becoming aware of the need to cancel, we will pay only the cancellation penalties you were subject to at the time of becoming aware of the need to cancel. If you are medically unable to notify the appropriate Travel Supplier and the Claims Administrator within 72 hours, you must notify them as soon as medically possible.

Trip Interruption: Obtain medical statements from the doctors in attendance in the country where Sickness or accident occurred. These statements should give complete diagnosis, stating that the Sickness or accident prevented traveling on dates contracted. Provide all unused transportation tickets, official receipts, etc.

Plan is designed by Travelex Insurance Services, Inc.

Travel insurance is underwritten by Transamerica Casualty Insurance Company, Columbus, Ohio; NAIC #10952 (all states except as otherwise noted) under Policy/Certificate Form series TAHC5000. In CA, HI, NE, NH, PA, TN and TX Policy/Certificate Form series TAHC5100 and TAHC5200. In IL, IN, KS, LA, OR, OH, VT, WA and WY Policy Form #'s TAHC5100IPS and TAHC5200IPS. Certain coverages are under series TAHC6000 and TAHC7000.

Please take this Description of Coverage with you on your Covered Trip. This is a brief Description of Coverage, which outlines benefits and amounts of coverage available to you. To view your state-filed form, please visit www.travelexinsurance.com/SBPlans.aspx or call 1-844-843-9404 to obtain your Individual Policy in the following states: IL, IN, KS, LA, OR, OH, VT, WA and WY or your Group Certificate for all other states. Your Individual Policy or Group Certificate include the complete terms and conditions of your coverage. Coverage will not be provided if you encountered an event that resulted in a claim prior to purchasing the Travel Protection Plan.

This plan provides insurance coverage for a covered trip. The purchase of travel insurance is not required to purchase any other product or service from the travel retailer. You may already have coverage that provides similar benefits and you may wish to compare the terms of this coverage with your existing coverage. If you have questions about your current coverage, call your insurer or agent. The travel retailer is not qualified to answer questions about the benefits, exclusions or conditions of the travel insurance. Travelex Insurance Services, Inc. 9140 West Dodge Road, Suite 300, Omaha, NE 68114. Toll free 1-844-843-9404. Email: customerservice@travelexinsurance.com.

California Residents: California Insurance Department: Toll free consumer hotline is 1-800-927-7357. Travelex CA Agency License #0D10209

Maryland Residents: To file a complaint with the Maryland Department of Insurance, call 1-800-492-6116 or visit www.mdinsurance.state.md.us

New York Residents: The licensed producer represents the insurer for purposes of the sale. Compensation paid to the producer may depend on the policy selected, the producers expenses or volume of business. The purchaser may request and obtain information about the producer's compensation except as otherwise provided by law.

Plan Questions

1-844-843-9404

8:00am - 5:00pm CST, M-F

Emergency Travel Assistance & Concierge Services

Within U.S.A. & Canada: 1-855-892-6495

Outside U.S.A. & Canada: 603-328-1373

24 Hours a Day, 7 Days a Week

Claim Questions & Status Inquiries

1-866-968-2061

7:30am - 7:00pm CST, M-F

Refer to your Plan Number: **249U-0514**

To Download a Claim Form Visit:
<http://www.travelexinsurance.com/SBClaims/>

Completed Claim Forms May Be Sent To:
Transamerica Claims Administration
Travelex Claims Department
4600 Witmer Industrial Estates, Suite 6
Niagara Falls, NY 14305
Fax: 1-877-367-2496

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Insurance Services