

AskTravel

Your Travel Companion taking care of all your Travel worries.
(Individual & Family Travel Insurance Policy Wording)

IMPORTANT POINTS

The policy should be read carefully, it gives full details of what is and what is not covered together with the conditions and exclusions of the cover. Failure to comply with them could prejudice an Insured's claim.

This document is only valid if attached with Travel ticket issued by askari general insurance co. ltd. bearing a unique e-ticket number.

Health Condition

1. **Nature of coverage:** This policy is not a general health insurance policy. Coverage is intended for use by the Insured in the event of a sudden and unexpected sickness or accident arising when the Insured is outside of his Home Country. Section wise schedule of benefits is attached as annexure "A".
2. **Pre-existing Exclusion:** This policy does not cover claims for any medical services arising from a Pre Existing Medical Condition as defined in this document.
3. **General Health Exclusion:** No claims under this policy will be paid where the Insured:
 - a) is travelling against the advice of a Physician; or
 - b) is receiving treatment, including but not limited to prescription medication, or is on a waiting list for treatment, or awaiting the results of medical tests; or investigations for medical treatment declared by a Physician; or
 - c) is travelling for the purpose of a obtaining treatment; or
 - d) has received a terminal prognosis for a medical condition.

Repatriation

The Insurers reserve this right to repatriate, by medically appropriate means, when in the opinion of the doctor in attendance and the Insurers Medical Advisors, the Insured is fit to travel. If the Insurers Medical Advisors, advise a date when it is feasible and practical to repatriate the Insured, but the Insured refuses to be repatriated and chooses instead to remain abroad, the Insurers liability to pay any further costs under Section B, after that date, will be limited to what be Insurers would have paid if the Insured's repatriation had taken place. Thereafter cover will be discontinued.

Policy Limits and Excesses

This policy has specific limits on the amount the Insurer will pay in the event of a claim (as per annexure "A"). A claim may be subject to an excess and if so this will be stated in the Schedule of Benefits. This means that the Insurers may not be liable for the first part of the claim and the excess amount has to be paid by the Insured.

Eligibility

This policy is valid for residents of Pakistan who are 80 years and under at date of expiry. Premium applicable for all plans is attached as annexure "B".

What To Do In The Event Of a Medical Emergency

Our overseas claims servicing agents, M/s Afro Asian Assistance (AAA) **MUST** be contacted immediately, in the event of any unfortunate incident including the death of an insured person, incurring of medical expenses in excess of \$500, or being involved in an accident, or being admitted to hospital. Insurers will not be liable for any costs without the express prior approval of M/S Afro Asian Assistance (AAA).

M/s Afro Asian Assistance (AAA) will provide a complete medical assistance service to the Insured. Operating 24 hours a day 365 days a year, M/s Afro Asian Assistance provides effective medical support to the Insured anywhere in the world and can be accessed by telephone or fax:

For assistance worldwide, contact:

AFRO ASIAN ASSISTANCE (AAA)

USA/Canada	+18885249672 Free
Europe/France	+ 33975180996
International/Bahrain	+ 97317510600
Fax Number	+ 97317530242
Email	claims@afroasianassistance.com

Note: In case of emergency, the insured may reverse charge the cost of the phone call to Afro Asian Assistance.

POLICY PERIODS

Policy Type: Single Trip

A single return trip, as defined in the Period of Insurance, beginning and ending in the Home Country.

Policy Type: Annual Multi Trip

A Yearly policy covering any number of single return trips, as defined, subject to each trip not to exceed 90 days at a time.

Period of Insurance: Single Trip

Under Section G (for Cancellation only), Insurance is effective from the date of issue of the Insurance Certificate and terminates on commencement of the trip.

In respect of all other sections, insurance commences when the Insured leaves their place of residence or business in their Home Country (whichever is the later) to commence the trip described in the territorial limits and shall cease with whichever occurs first of the following.

- The expiry of the Policy Period as shown on the Insurance Certificate.
- The Insured's return home to the Home Country as planned, at the end of the trip;
- The Insured's return to the Home Country prior to the planned return at the end of the trip.

In the event of a covered injury, illness or Accident occurring during the Period of Insurance where the Insured is medically incapable of returning to his Home Country, this insurance will be extended for in-patient treatment only. Such treatment will be covered for a maximum of 12 months from the date of incident for which the Insured is claiming provided that Askari General Insurance has authorized such extension of cover with appropriate premium.

Period of Insurance: Annual Multi Trip only

Under Section G (for Cancellation only), Insurance is effective from the later of either the Date of Issue of the Insurance Certificate or the time at which a trip is booked and terminates with whichever occurs first of the following.

- The commencement of the trip; or
- The expiry of the Policy Period (being the expiry of 365 days from the date of issue.)

In respect of all other sections, insurance commences when the Insured leaves their place of residence or business in their Home Country (whichever is the later) to commence the trip described in the territorial limits and shall cease with whichever occurs first of the following;

- The expiry of the Policy Period (being the expiry of 365 dates from the date of issue);
- The Insured's return home to the Home Country as planned, at the end of the trip;
- The Insured's first return to their Home Country prior to the planned return at the end of the trip.

- The Insured's period of travel exceeding the period stated on the insurance certificate (if the Insured's period of travel exceeds, or was intended to exceed 30 days, then the entire period of travel, including the first 30 days will not be covered hereunder).

In the event of a covered injury, illness or accident occurring during the Period of Insurance where the Insured is medically incapable of returning to his Home Country, this insurance will be extended for in-patient treatment only. Such treatment will be covered for a maximum of 12 months from the date of incident for which the Insured is claiming, provided that Askari General Insurance has authorized such extension of cover with appropriate premium. Cover extends to each and every Period of Insurance up to the maximum duration stated herein for any one trip.

Policy Definitions

Wherever the following words or phrases appear within this policy they will always have the same meaning.

Accident means a sudden, unexpected, unusual, specific, violent, external event which occurs at a single identifiable time and place and independently of all other causes results directly, immediately and solely in physical bodily injury which results in a Loss. In no event shall the contracting of any disease and/or illness (including, but not limited to heart attack, stroke or cancer), nor the injection or ingestion of any substance, be considered an Accident. An event which directly or indirectly exacerbates a previously existing physical bodily injury shall not be considered an Accident.

Common Carrier means any commercial airline or ship or vessel operating under a license from a relevant authority for the transportation of passengers and cargo for hire.

Emergency Medical Expenses are those expenses which in the opinion of the treating Physician and Afro Asian Assistance are medically necessary in order to maintain life and/or relieve immediate pain or distress for illness, disease or accident first manifested or occurring during an insured trip that commences during the Period of Insurance.

Excess means the amount of expenses to be incurred by the Insured before the compensation under the cover shall become payable and shall not be reimbursed by the Company.

Home Country means Pakistan

Loss of Limb(s) means loss by physical severance of a hand at or above the wrist, or a foot at or above the ankle.

Loss of Sight means the complete and irrecoverable loss or sight of one or both eyes.

Medical Advisors Medical Practitioners appointed by Afro Asian Assistance who provides assistance and claims administration services on behalf of the Insurers.

Permanent Total Disablement means disablement which from the moment of Accident entirely prevents the Insured from attending to any business or occupation of any and every kind and which lasts 12 calendar months and at the expiry of that period is in the opinion of the Insurers' Medical Advisors beyond expectation of improvement.

Pre-Existing Medical Condition means any sickness for which the Insured has previously taken medication, treatment or sought medical advice any time during the 24 months prior to purchase of this policy. For Annual Multi Trip cover, this definition is extended to mean any sickness for which the Insured has previously taken medication, treatment or sought medical advice at any time during the 24 months prior to each and every covered Trip for the duration of the Annual Multi Trip policy.

Public Transport is a train, bus, coach, ferry or scheduled flight service, running to a published timetable used to join the booked travel itinerary.

Relative means spouse, parent, parent in law, son, daughter, brother, sister or finance (e).

Sum Insured is the maximum payable for each Insured under each section of this insurance as specified in the Schedule of Benefits.

The Insured is any person whose name appears on the certificate and who has paid the appropriate premium. The term 'his' shall be held on mean 'her' where appropriate.

Valuables are photographic equipment, audio, video, telecommunication and computer equipment of any kind, telescopes and binoculars, spectacles and contact lenses, sunglasses, antiques, jewelry, watches, furs, silk, leather goods animal skins, precious stones and articles made of or containing gold, silver or other precious metals.

Section A- Personal Accident

The Company shall compensate the Insured or his nominee (in case of death of the Insured) for any accidental Injury suffered by the Insured during the Period of Insurance whilst on a Trip abroad, as per Table of Benefits appended below, but not exceeding the Sum Insured, for the following: The event must occur within 180 days of the accident.

1. Death only 100% of Sum Insured
2. Permanent Disablement :
 - i) Permanent total loss of both eyes or two limbs 100%
 - ii) Permanent total loss of one eye and one limb 75%
 - iii) Permanent total loss of one eye or one limb 50%

- iv) Permanent total loss of one finger or toe 10%
- 3. Temporary Total Disablement
 - i) Temporary total disablement @ Rs.5/- per Rs.1,000 sum insured per week
 - ii) Temporary partial disablement @ Rs.1.25 per Rs.1,000 sum insured per week. Payable up to 06 weeks – applicable to both 3 (i) & 3 (ii).

Conditions Applicable to Section A

1. The benefit payable for event 1(Death) shall be limited to the following. For the insured under the age of 16 and over the age of 65 :
 - a) Dependents limit is US\$ 5,000.
 - b) Insured/spouse over 65 years of age will be entitled to 50% of available limits.
2. No benefit shall be payable for event 2(Permanent Total Disablement) for the insured aged over 65.
3. A benefit amount will not be payable for more than one of the events 1-4 in respect of same physical bodily injury.

Section B- Emergency Medical Expenses, Emergency Medical Evacuation and Other Expenses

What you are covered for:

The insurers will reimburse the insured up to the amount shown in the schedule of Benefits in respect of the following expenses necessarily incurred as a result of the insured sustaining accidental bodily injury or becoming ill:

Section B-1: Emergency Medical Expenses and Emergency Medical Evacuation

The cost of emergency medical, surgical and hospital treatment and ambulance costs up to the amount shown in the Schedule of Benefits for the immediate relief against any illness or accident. The insurers reserve the right to repatriate when in the opinion of the doctor in attendance and the insurers' Medical Advisors, the insured is fit to travel. The cost of return to home country of an injured or sick insured by air ambulance or other medically appropriate means where in the opinion of the insurers' Medical Advisors such return is medically necessary.

Should the insured refuse to be repatriated and elects instead to remain abroad, the insurers liability to pay any further costs under this section, after that date, will be limited to what the insurers would have paid if the insured's repatriation had taken place. Thereafter the cover will be discontinued.

Section B-2: Emergency Dental Care

The cost of emergency medical, surgical and hospital treatment and ambulance costs for immediate relief of pain only up to the sum insured only.

Section B-3: Repatriation of Mortal Remains

The Company will pay the actual cost of transporting the remains of an insured to his home country, or the cost of funeral in the country where death occurs.

Section B-4: Repatriation of Family Member Travelling With The Insured Person

If Insured is hospitalized for more than 5 days, the actual expenses of the repatriation of the family member, if needed, will be covered according the Schedule of Benefits.

Section B-5: The Travel of One Immediate Family Member Travelling with the Insured

The cost of one immediate family member accompanying the Insured at the moment of the event, having the same country of residence as the Insured, if the immediate family member is unable to travel by his own means of transport or the means of transport used for the initial trip according to the Schedule of Benefits.

What You Are Not Covered For

The Insurers shall not be responsible for:

1. The excess for each claim for each separate incident as shown in the Schedule of benefits;
2. Claims arising directly or indirectly as a result of a Pre Existing Medical Condition of the Insured or his traveling companion, or any other person on whom the Insured's travel plans may depend (such as relative, close business colleague or person with whom you intend to stay), unless such pre-existing Medical Condition has been notified to Insurers and accepted by Insurers in writing.
3. Claims arising if an Insured is traveling against the advice of a medical practitioner or for the purposes of obtaining medical treatment of convalescent care or;
4. Claims arising for treatment or surgery which in the opinion of the Insurers Medical Advisors is not essential or can reasonably be delayed until the Insured's return to his Home Country;
5. Claims arising for medical treatment of any kind received after Insured having returned to his Home Country.
6. Claims arising from medical treatment of any kind received in any country where the Insured qualifies for national or state healthcare unless this is in excess of the national or state healthcare provisions;
7. Claim arising directly or indirectly from pregnancy. Complications of pregnancy occurring during the first 6 months will however be covered.

8. Claims except at the usual, customary and reasonable level of charges for such services or claims that are not medically necessary;

9. Hospital treatment which is not provided by a registered health services provider.

Special Note: In the event of the death of an Insured, incurring of medical expenses in excess of US Dollar 500, or being involved in an accident, or being admitted to hospital, M/s AFRO ASIANASSISTANCE must be advised Immediately and liability shall only attach for expenses agreed by them. Failure to notify M/s Afro Asian Assistance (AAA) will prejudice the Insureds' rights and will result in the Insurers non acceptance of liability of such claims.

Section C: Additional Assistance Services

Section C-1: Escort Of Dependent Child

What You Are Covered for

If the Insured is traveling alone with Child(ren) and is hospitalized because of a covered Illness or Injury for more than seven days, and the Child(ren) aged 15 or under is left unattended, the Insurer's Medical Advisors will arrange and pay for one way economy fare (s) less the value of applied credit from any unused travel tickets per person to their Home Country, with an attendant if necessary.

Section C-2: Delivery of Medicines

What You Are Coved For

If the Insured has his medicines lost or stolen during the Trip, the Insurer will take charge of delivering the medicines (or those that have similar composition), to the Insured during the covered trip and which cannot be found in the place where he has traveled to. Under no circumstances will the Insurer meet the cost of the medicines. Proof of loss will be required.

Section C-3: Long Distance Medical Information Services

What You Are Covered For

The medical information will be provided to the Insured by the Insurer's Medical Advisors, upon request from the Insured. The service is not considered in any case as a diagnosis but it is a connection services.

Section C-4: Medical Referral/Appointment Of Local Medical Specialist

What You Are Covered For

Through the Insurer's Medical Advisors call center, the Insured will be given access and referred to any agreed medical center or medical practitioner of the Insured's international network.

Section C-5: Connection Services

What You Are Covered For

Whilst travelling abroad, the Insured will be entitled to contact the Insurer's Medical Advisors in order to obtain miscellaneous services in the country where he is located and in particular rental car referral and reservation and legal and administrative information and referral. Any miscellaneous service required by the Insured which is not covered through his policy shall remain at the Insured's own charge.

Section C-6: Relay Of Urgent Messages

What You Are Covered For

The Insurer will, where possible take charge of relaying the urgent messages of the Insured parties, relating to any of the events covered in the policy.

Section D: Loss or Delay of Checked Baggage

What You Are Covered For

The Insurers will pay up to the amount shown in the Schedule of Benefits in the event of the Insured suffering a total loss of baggage that has been checked by an International Airline for an International flight. In the event of loss of baggage, the Insurers reserve the right to replace or pay the intrinsic value of any lost article. In the event of delay of checked baggage, the Insurers will refund the Insured for the cost of purchasing necessities, up to the maximum as shown in the Schedule of Benefits. Payment made due to delay will be deducted from the amount of claims arising if the baggage is permanently lost.

What You Are Not Covered For:

Insurers shall not be responsible for:

1. The excess for each claim for each separate incident as shown in the Schedule of Benefits;
2. Partial loss or damage to checked baggage. However, total loss or damage of an individual unit(s) of baggage shall not be construed as falling within this exclusion;
3. Items valued in excess of US\$ 100 without proof of ownership. Such proof shall be presented to M/s Afro Asian Assistance (**AAA**) when submitting your claims;
4. Wear, tear and depreciation of the articles (s);
5. Claims for Valuable or Fragile articles in checked baggage;
6. Claims arising from delay, detention, seizure or confiscation by Customs or other officials;

Specific Condition Applicable to Section D:

1. The amount payable in respect of any one article, pair or set is limited to \$300.
2. In the event of loss of property, a Property Irregularity Report (PIR) or baggage claim form must be obtained from the airline immediately upon discovering the loss which must be presented to AAA when submitting your claim.

Section E: Loss Of Passport:

What You Are Covered For:

If during a trip outside your Home Country, the Insured loses his Passport, the Insurer will, up to the limit of cover shown in the Schedule of Benefits, reimburse actual expenses necessarily and reasonably incurred by the Insured in connection with obtaining a duplicate or fresh passport.

What You Are Not Covered For:

The Insurers shall not be responsible for:

1. The excess for each claim as shown in the Schedule of Benefits;
2. Loss or damage to passport due to delay or from confiscation or detention by customs, police or other authority;
3. Theft which is not reported to any appropriate police authority 24 hours of discovery and an official report obtained;
4. Loss or theft of passport left unattended by the Insured unless located in a locked hotel room or apartment and an appropriate size safety deposit box was not available for use by the Insured.

Section F: Personal Liability:

What You Are Covered For:

The insurers will indemnify the insured up to the amount as shown in the schedule of benefits for the legal liability of the insured for accidental injury to third parties and /or accidental damage to their property. This cover is applicable only in respect of liability under the law of the country in which the event giving rise to the claim occurred.

What You Are Not Covered For:

The Insurers shall not be responsible for:

1. The excess for each claim for damage to property for each separate incident as shown in the Schedule of Benefits;

2. Claims arising directly or indirectly from, happening through or in consequence of:

- a) Employer's liability contractual liability, or liability to a member of the Insured's family or travelling companion;
- b) Animals belonging to, or in the care, custody or control of the Insured;
- c) Wilful, malicious or unlawful acts of the use of firearms;
- d) The pursuit of trade, business or profession;
- e) Ownership or occupation of land or buildings; or
- f) The influence of intoxicating liquor or drugs;

3. Claims arising directly or indirectly from, happening through or in consequence of ownership possession or use of any vehicle, automobile, aircraft, water craft or any mechanically propelled conveyance;

4. Claims for legal fee and costs resulting from any criminal proceedings.

SPECIAL NOTE: No liability shall be admitted and no admission, arrangement, offer promise or payment shall be made by the Insured without the written consent of the Insurers, who shall be entitled, if they so desire, to take over and conduct, in the name of the Insured, their defence of any claim or to prosecute for their own benefit any claims for indemnity, damages or otherwise against any third party. The Insurers shall have full discretion in the conduct or any negotiations, proceedings, or the settlement of any claims and the Insured shall, wherever possible, give all such information and assistance as the Insurers may require.

Section G: Cancellation and Curtailment:

What You Are Covered For:

If the Insured Trip is necessarily and unavoidably cancelled or the Insured has to return to their Home Country before the scheduled return date due to any one of the reasons listed below occurring to either the Insured or his travelling companion, during the Period of Issuance, the Insurers will refund the Insured up to the amount shown in the Schedule of Benefits.

Cancellation: Cancellation cost which cannot be refunded from any other party.

Curtailment: Curtailment costs which are lost and which cannot be refunded from any other party.

Covered reasons for Cancellation and Curtailment:

1. Death, serious injury or serious illness occurring during the Period of Insurance, of the Insured, the Insured's travelling companion, an Insured's Relative or the person with whom the Insured has arranged to stay whilst on the Trip;

2. Jury service, witness call or compulsory quarantine of the Insured;
3. Accident to the Insured vehicle within 7 days prior to the intended date of departure (applicable to self- drive holidays only);
4. Accident damage to the Insured's home rendering it uninhabitable or the Police requiring the Insured's presence following a burglary at the Insured's home within 7 days prior to the commencement of or during the Insured's Journey or holiday.
5. Pregnancy, occurring during the Period of Insurance;
 - a) And birth is expected with three months of the booked departure or return date; or
 - b) Where complication of pregnancy occur prior to the sixth month.

What You Are Note Covered For:

The Insurers shall not be responsible for:

1. The excess for each claim as shown in the Schedule of Benefits;
2. Claims arising directly or indirectly as a result of a pre-existing Medical Condition of the insured or the insured's travelling companion, or any other person on whom the insured' travelling plans depend (such as a relative, close business colleague or a person with whom the insured intends to stay), unless such pre-existing Medical Condition has been notified to insurers and accepted by insurers in writing.
3. Claims arising if an insured whose medical condition giving rise to the claim is travelling against the advice of a practitioner or for the purpose of obtaining medical treatment or convalescent care or is on a hospital waiting list or awaiting the results of medical investigations or has received a terminal prognosis at the date of application for insurance;
4. Claims arising which are not supported by written medical confirmation and clinical reports from medical service providers, as well as all other proof of the happening of an event causing Cancellation and Curtailment;
5. Claims for any costs associated with unused timeshare property, airlines or other like promotions;
6. Claims arising where the Insured has not been able to receive the necessary inoculations or vaccinations or obtain necessary visas;
7. Claims for travel expenses for the Insured to travel to the Home Country (or final destination country) when the Insured did not assess return travel tickets;
8. Claims arising from circumstances which are known to exist at or before date when the insurance is purchased;

9. Claims resulting from any change or plans or disinclination on the part of the Insured to commence or continue a Trip.

Special Note: It is a condition of this section that any claim for Cancellation and Curtailment be advised as soon possible to M/s Afro Asian Assistance (AAA) and a claim form requested. Curtailment for any reason must be authorized in advance by M/s Afro Asian Assistance (AAA) following written confirmation from the treating doctor that IT IS MEDICALLY NECESSARY THAT YOUR RETURN TO THE HOME COUNTRY BEFORE THE SCHEDULED RETURN DATE.

Section-H: Emergency Return Home Following Death Of A Close Family Member:

What You Are Cover For:

If the Insured has to curtail journey because of the unexpected death of an immediate family member, the Insurer will meet the cost of the travel to his Home Country, whenever he is unable to travel by his own means of transport or the means or transport hired for the Insured trip. The Insured shall furnish the evidence, documents or certificates of the event, which caused the journey to be cut short (death certificate).

Section -I: Advance Of Bail Bond:

What You Are Covered For:

In the event that the Insured is incarcerated overseas, the Insurer will pay up to the amount in the Schedule of Benefits for the advance of a bail bond for the provisional release from custody for unintentional contravention or infringement of statutory/administrative provisions of the country of visit. Such advance is to be reimbursed to the Insurer within 30 days of provisional release from custody.

What You Are Not Covered For:

The Insurers shall not be responsible for any wilful, malicious or criminal act of the Insured a deliberate breach of any law or enactment by the Insured;

Section -J: Loss Of Credit Card

What You Are Covered For:

If during a trip abroad, the insured is deprived of cash due to loss of credit card, the insurer will advance funds on behalf of an insured up the amount shown in the Schedule of Benefits. The insured will be required to repay any sum advanced within 45 days. M/s Afro Asian Assistance (AAA) will require valid counter guarantee or deposit prior to any fund advance related to such fund advance.

Exclusions Applicable To All Sections:

The Insurers shall not be responsible for claims arising;

1. Directly or indirectly by, happening through or in consequence of war, invasion, terrorism, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalization, or requisition or destruction of, or damage to property by or on the order of any Government, public or Local Authority except as a specifically provided herein to the contrary;
2. From loss or destruction of, or damage to any property whatsoever, or any loss or expense whatsoever resulting in or arising therefrom, or any consequential loss of any legal liability of whatsoever nature, directly or indirectly caused by or contributed to, arising from:
 - Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel; or
 - The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof;
3. For any medical services arising from a Pre-Existing Medical Condition as defined in the documents.
4. From Acquired Immune Deficiency Syndrome (AIDS) or AIDS related complex and/or any illness arising as complications from these conditions;
5. From the Insured engaging in any illegal or criminal act;
6. From any consequential loss whatsoever. Claim shall only be paid for those losses which are specifically stated under the terms of this insurance;
7. Directly or indirectly out of financial incapacity of the Insured;
8. Which but for the existence of this insurance, would be covered under any other insurance policy(ies), including any amounts recovered by the Insured from private health insurance, any reciprocal health agreements, airlines, hotels, home contents insurers or any other recovered by the Insured which is the basis of a claim;
9. From the Carrier or any other company, firm or person either becoming insolvent, or being unable or unwilling to fulfill any part of their obligation of the policy;
10. As a result of injury sustained following participation in any activity that requires a degree of skill or involves a greater risk including but not limited to all winter sports, racing (other than on foot), mountaineering with the use of ropes, pot holing, caving, hang gliding, micro-lighting, paragliding, parachuting, bungee jumping, diving with the use of breathing apparatus, go karting, motor racing or motor cycling above 125 cc;

The exclusion 10 will not apply for those sports and activities listed below when the appropriate additional premium has been paid;

- **Grade 0:** Badminton, banana boating, basketball, bowls, incidental one day bungee jumping, cycling, fishing, incidental one day go karting motor cycling up to 125 cc, orienteering, racquetball, rambling, roller blading/skating, snorkeling, squash, surfing, tennis.
- **Grade 1:** Abseiling, archery, deep sea fishing, dinghy sailing, football/ soccer, paragliding over water, parascending over water, pony trekking, sail boarding, sailing, sea kayaking, scuba diving (max 9 meters), safari trekking/hiking below 3,000 meters, volleyball, wake boarding, paint balling, water polo, water skiing, white water rafting up to grade 3, wind surfing, yachting;
- **Grade 2:** Horse riding, fencing, jet skiing, judo, karate, mountain biking up to grade 2.
- **Grade3:** Piste skiing, cross country skiing, sledging, tobogganing, ice skating, snowboarding.
- **NO COVER** under any circumstances for American football, big game hunting, bobsleigh, boxing, cave diving, flying, gliding, hang gliding, ice hockey, high diving, lugging, manual work, motor sport, mountaineering, parachuting, polo, pot holing, quad biking, rock climbing, shooting/hunting/weight lifting.

All Insured persons covered for their chosen sport or activity must adhere to all principles, rules, regulation and bylaws laid down by the recognized governing body of the chosen sport or activity and any additional local advice instruction and, where appropriate, under the direct supervision of qualified and licensed professionals. No coverage will be afforded for competitions, racing and time trials of any kind.

11. From suicide or attempted suicide or wilful exposure to danger (except in an attempt to save human life.) mental disorder, stress or depression, venereal infection, the influence of or in connection with the use alcohol or drugs, unless as prescribed by a treating doctor;

12. From an Insured being in or entering or descending from an aircraft other than a fully licensed passenger carrying aircraft in which an Insured is travelling as a passenger and not for the purpose of undertaking any trade or technical operation therein or thereon;

13. From the Insured's exposure to a peril. The Insured must exercise reasonable care to prevent illness, injury or loss or damage of his property as if uninsured;

14. Directly or indirectly from the Insured being engaged in any manual employment after the commencement of the trip;

15. Which have not been conclusively proven and the amount thereof substantiated;

16. Directly or indirectly from pregnancy, Complication of pregnancy occurring during the first 6 months will however be covered

17. Directly or indirectly as a result of a pandemic as declared by the World Health Organization.

Conditions Applicable To All Sections:

1. All material facts must be disclosed to the Insurer at the time of taking out this insurance. Failure to do so may result in the Insurer's non liability for claims. A material fact is any fact known to the Insured which is likely to influence the Insurer in the acceptance or assessment of the insurance. If the Insured is in any doubt as to whether a fact is "material" then for the Insured's own protection it should be disclosed. All information provided in purchasing this insurance shall form the basis of the contract. The Insured should keep a record (including copies of letters) of all information provided to the issuing broker/agent for the purposes of entering into this contract.

2. All certificates, information and evidence required by the Insurers shall be provided at the expense of the Insured. The Insured shall when required submit to a medical examination on behalf of the Insurers at the Insured's expense. In the event of death of the Insured, the Insurers may require a post mortem examination. Any items for which a claim is made for loss or damage shall be for Insurers inspection if required at the Insurers following final settlement of the claim.

3. In the event of any occurrence which may give rise to a claim under this insurance, the Insured shall take all reasonable steps to minimize any loss arising out of such claim.

4. This insurance is non-transferable. Should the journey or holiday be cancelled prior to departure for any reason whatsoever then the insurance cover terminates immediately and the premium is not refundable.

5. The Insurers may, at their own expense, take proceeding in the name of the Insured to recover compensation or secure an indemnity from any third party in respect of any loss or damage covered by this insurance and any amount so recovered shall belong to the Insurers.

6. If any fraudulent claim is made or if any fraudulent means or devices are used to obtain any benefit under this policy, all benefits there under shall be forfeited as well as premium paid.

7. The Insured will not be covered if they choose to travel to any country against the advice of the Government of Pakistan.

In the event that the Insured experiences a problem with the policy or the claims process, the Insured may contact the offices of Insurers :

Askari General Insurance Company Limited, 3rd Floor, Army Welfare Trust Plaza, Mall Road, Rawalpindi Cantt Phone: 051 - 9272425-7 Fax: 051 - 9272424 E-mail: agicoho@agico.com.pk

What to do in the event of a Claim:

Please contact our overseas agents, M/s Afro Asian Assistance through e mail, fax or telephone as follows:

USA/Canada	+18885249672 Free
Europe/France	+ 33975180996
International/Bahrain	+ 97317510600
Fax Number	+ 97317530242
Email	claims@afroasianassistance.com

Cancellation of Policy Due to Non Utilization:

Policy can be cancelled, upon written request of the insured due to non-utilization of cover only if:

- a) Request letter form the Insured.
- b) The insured returns the original policy with the required coupons.
- c) The person cancels the policy before the effective date or
- d) The person submits his passport XEROX copy (photo state) as a proof that he/she has not traveled before the effective date written on the policy
- e) Original letter from the consulate requesting for the cancellation of the policy.
- f) Original Policy.
- g) If the visa issued to insured, policy document neither refund nor cancel or it's status become null and void

Cancellation by us:

We may cancel this policy by giving **you** at least seven days' notice at **your** last known address. **We** reserve the right to amend policy terms, conditions and exclusions.

Note: A cancellation charge equivalent to administrative Surcharge will be deducted from all types of refund.