

Annual TravelCare Insurance (Club Care)

MasterPolicy Number : PL-TRV-001025903/00/00

Endorsement Number : PL-TRV-001025903/00/03

Period of Insurance : from 13 November 2024 to 12 November 2025 (both dates inclusive)

The Policyholder and Bolttech Insurance (Hong Kong) Company Limited (the "Company") agree that:

This Policy document, the Policy Schedule and any endorsement to this Policy shall be read together as one contract.

The application, proposal and declaration that have been completed and provided to the Company are the basis of this contract and are deemed to be incorporated herein.

This Policy comes into force on the condition that the Policyholder has paid the premium specified in the Policy Schedule in full and the application has been approved by the Company.

The Company shall provide insurance coverage subject to the limits, terms, conditions and exclusions of this Policy.

The due observance of the terms, conditions, exclusions and endorsements of this Policy relating to anything to be done or to be complied with by the Insured Person or any other person claiming to be indemnified; and the truth of the contents of the application, proposal and declaration, shall be conditions precedent to any liability of the Company.

24-hour Worldwide Emergency Assistance Service

Worldwide Emergency Assistance service is rendered by a service provider nominated by us.

HOTLINE : (852) 2456 5400 (Hong Kong)

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PART I – GENERAL DEFINITIONS

The definitions below apply to the following words and phrases wherever they appear in this Policy, the Policy Schedule or any subsequent endorsements attached to this Policy:

Accident means an event occurring entirely beyond the Insured Person's control and caused by violent, external and visible means.

Act of Terrorism means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.

Bodily Injury means any bodily injury which (i) is caused by an Accident, (ii) solely and independently of any other cause, and (iii) (a) results in death within 12 calendar months of the date of the Accident or (b) necessitates medical and/or surgical treatment.

Chinese Medicine Practitioner means a Chinese medicine practitioner who is duly registered with the Chinese Medicine Council of Hong Kong pursuant to the Chinese Medicine Ordinance (Cap. 549) of the laws of Hong Kong, but excluding the Insured Person, the Policyholder, an insurance intermediary, an employer, employee, Immediate Family Member or business partner of the Policyholder and/or Insured Person.

Close Business Partner means a business associate that has a share in the Insured Person's business.

Company means Bolttech Insurance (Hong Kong) Company Limited.

Compulsory Quarantine means a compulsory quarantine in a Hospital or at a specific place required by the local government, but shall not include government required (i) compulsory home quarantine or (ii) dwelling place quarantine such as hotel quarantine. For the avoidance of doubt, self-quarantine or quarantine at home or in any dwelling place are excluded from this definition.

Confinement or **Confined** means being confined in a Hospital as an in-patient for medical treatment for a minimum continuous period of 24 hours upon the recommendation of a Medical Practitioner for stay in the Hospital prior to his discharge.

COVID-19 means Coronavirus disease 2019 (COVID-19), an infectious disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). Diagnosis of COVID-19 must be supported by a relevant test report issued by a Hong Kong or local government-approved testing institution (rapid antigen tests or any form of self-tests are not accepted as valid proof of diagnosis).

Designated Service Plan means a service plan contract provided by the Policyholder for a period of 12-month, 24-month or 36-month to the Service Subscriber.

Eligible Expenses in respect of medical expenses means those expenses necessitated by a Bodily Injury or a Sickness covered by this Policy and incurred on the recommendation of a Medical Practitioner but shall not exceed normal and customary charges for the same. The Eligible Expenses must be supported by official written receipt and shall not in any event exceed the actual charges incurred.

Expedition means any journey to high risk, inaccessible and/or inhospitable locations including but not limited to privately organized kayaking trips around the coast of a country or trips to generally inaccessible interiors of a country or areas previously unexplored or uncharted, or trips undertaken for scientific, research or political purposes to such locations or trips to Antarctica or similar remote and inhospitable locations. It does not mean Trekking and travel, outside of these previously given examples, provided by a recognized tour operator that are accessible to the general public without restrictions (other than general health or fitness warning), but always providing that the Insured Person is acting under the guidance and supervision of qualified guides and/or instructors of the tour operator.

Extreme Sports and Sporting Activities means any sport or sporting activities that present a high level of inherent danger (i.e. involves a high level of expertise, or exceptional physical exertion, or use of highly specialized gear or equipment) including but not limited to big wave surfing; winter activities like luge, bobsledding, ski or snow board jumping or stunts; bicycle, motor, air or sea craft speed trials or stunts; diving to a depth greater than 30 meters below sea level; canoeing down rapids; cliff jumping; horse jumping; horse polo; and stunts. Unless such activities are accessible to the general public without restriction (other than height or general health or fitness warnings) and which are provided by a recognized local tour operator/activity provider but always providing that Insured Person is acting under the guidance and supervision of qualified guides and/or instructors of the tour operator/activity provider when carrying out such tourist activities which will be covered. An activity where (i) the manoeuvre or navigation of such activity is responsible by another person who is adequately licensed for guiding such activity and (ii) the provider of such activity must be authorized by the relevant local authority will also be covered.

Home Contents means all the Insured Person's furniture, furnishings, home appliances, household and Personal Effects including household appliances hired to the Insured Person or the Insured Person's family members.

Hong Kong means Hong Kong Special Administrative Region of the People's Republic of China.

Hospital means an establishment duly constituted and registered under the laws of the territory in which the establishment is situated as a hospital for the care and treatment of sick and injured persons as paying bed-patients, and which has all of the following:

- a) facilities for diagnostic procedures and surgery;
- b) 24 hours nursing services by registered nurses; and
- c) supervision of a Medical Practitioner,
- d) and is not primarily a clinic; a place for alcoholics or drug addicts; a nursing, rest or convalescent home; or a home for the aged or similar establishment.

Immediate Family Members means an Insured Person's legal spouse, children (natural or adopted), brothers or sisters, parents, parents-in-law, grandparents, grandchildren, legal guardian, stepparents or stepchildren.

Infectious Disease means any kind of infectious disease for which the World Health Organisation has issued a pandemic alert or declared the said infectious disease as a public health emergency of international concern (PHEIC) and/or Compulsory Quarantine is enforced.

Insured Person(s) means the Service Subscriber, or if under Family Plan, includes his/her spouse and/or dependent child(ren), travelling outside Hong Kong on a Journey during the term of the Service Subscriber's Designated Service Plan while such Designated Service Plan is subscribed with the Policyholder during the Period of Insurance:

- a) Service Subscriber / Spouse : between 18 and 70 years old;
- b) Dependent child(ren) : below 18 years old and accompanied by either parent during insured Journey.

Journey means any trip departing from the Usual Country of Residence taken by the Insured Person during the Period of Insurance. Each Journey commences when the Insured Person completes the immigration departure clearance procedure at the Usual Country of Residence and ends when the Insured Person completes the immigration arrival clearance procedure for returning to the Usual Country of Residence after such Journey.

Loss of Hearing means the total and irrecoverable loss of hearing for all sounds of both ears where,

If a db – Hearing loss at 500 Hertz	If b db – Hearing loss at 1,000 Hertz
If c db – Hearing loss at 2,000 Hertz	If d db – Hearing loss at 4,000 Hertz
1/6 of (a+b+c+d) is above 80db.	

Loss of Limb means permanent and irrecoverable loss by physical severance at or above the wrist or ankle joint.

Loss of Sight means the entire, permanent and irrecoverable loss of sight.

Loss of Speech means the disability in articulating any three of the four sounds which contribute to the speech such as the Labial sounds, the Alveololabial sounds, the Palatal sounds and the Velar sounds or total loss of vocal cord or damage of speech centre in the brain resulting in Aphasia.

Medical Practitioner means only a medical practitioner who is duly qualified by a degree in western medicine and duly licensed or legally authorized in the geographical area of his practice to render medical and/or surgical service as a practitioner of western medicine, but excluding the Insured Person, the Policyholder, an insurance intermediary, an employer, employee, Immediate Family Member or business partner of the Policyholder and/or Insured Person.

Mountaineering means the ascent or descent of a mountain ordinarily necessitating the use of specified equipment including but not limited to crampons, pickaxes, anchors, bolts, carabineers and lead rope to top-rope anchoring equipment.

Natural Disaster means a large-scale extreme weather or environmental event that damages property, disrupts transportation or utilities, or endangers people, including without limitation: earthquake, wildfire, flood, hurricane, or volcanic eruption.

Period of Insurance means the period of time specified in the Policy Schedule during which this Policy is effective. For each Insured Person, it is further described as a 12-month period from the first day of successful registration during the Period of Insurance of this Policy.

- a) If a Service Subscriber is subscribed to a 12-month Designated Service Plan, the Period of Insurance shall be expired after 12 months;
- b) If a Service Subscriber is subscribed to a 24-month Designated Service Plan, the Period of Insurance shall be extended for the 2nd 12 months' period after the 1st 12 months' period is expired; subject to the confirmation of validity from the Policyholder;
- c) If a Service Subscriber is subscribed to a 36-month Designated Service Plan, the Period of Insurance shall be extended for the 2nd 12 months' period after the 1st 12 months' period is expired; and the 3rd 12 months' period after the 2nd 12 months' period is expired; subject to the confirmation of validity from the Policyholder.

Permanent Total Disablement means total disablement caused by an Accident that prevents the Insured Person from attending to his normal occupation for a minimum of 52 consecutive weeks certified at the end of such period of time by a Medical Practitioner acceptable to the Company to be a condition that will permanently and totally disable the Insured Person from engaging in any gainful occupation and that is beyond any hope of improvement.

Personal Effects means articles of personal possession normally worn or carried belonging to the Insured Person or the Insured Person's family members.

Policy means and refers to the entire policy contract among the Policyholder, the Insured Person and the Company including this policy document, application, proposal, declaration and/or beneficiary designation form submitted or made by the Policyholder or the Insured Person or his authorized representatives, the Schedule of Benefits, Policy Schedule

issued hereunder and any endorsements thereto.

Policyholder means CSL Mobile Limited and its affiliated companies.

Pre-Existing Condition means any sickness, disease or physical condition which existed before the commencement of the Period of Insurance in respect of the Insured Person, which presented signs or symptoms of which the Insured Person and/or the Policyholder were aware or should reasonably have been aware.

Prescribed Medicines means any medicine or drug for which a Medical Practitioner's prescription has been issued and has been dispensed in a Medical Practitioner's surgery or by a licensed pharmacist in respect of treatment covered under this Policy.

Principal Home means the building located in Hong Kong occupied as a private dwelling by the Service Subscriber as his only permanent residence.

Public Conveyance means all common public transport carriers (including but not limited to any bus, coach, ferry, hovercraft, hydrofoil, train, tram or underground train) which are mechanically propelled and are licensed to carry fare-paying passengers on fixed routes and regularly scheduled and any fixed-wing aircraft provided and operated by an airline which is duly licensed for the regular transportation of fare-paying passengers operating only between established commercial airports by the relevant authorities but exclude a contractor, chartered or private carriers, and any other carriers which are operated primarily for sight-seeing service and amusement of the passenger (e.g. cruise ship).

Serious Bodily Injury or Sickness means Bodily Injury or Sickness which requires treatment by a Medical Practitioner and which results in the Insured Person being certified by such Medical Practitioner as being dangerous to life and unfit to travel or continue with his original Journey. When 'Serious Bodily Injury or Sickness' is applied to the Insured Person's Immediate Family Member, it means injury or sickness certified as being dangerous to life by a Medical Practitioner and which results in the Insured Person's discontinuation or cancellation of his original Journey.

Service Subscriber means a person who subscribe to the Designated Service Plan provided by the Policyholder in Hong Kong.

Sickness means a physical condition marked by a pathological deviation from the normal healthy state of human being.

Travel Alert means an alert issued by the Government of Hong Kong under the Outbound Travel Alert (OTA) System. There are 3 levels of Travel Alert: "Amber Alert", "Red Alert" and "Black Alert". Definition of the "Travel Alert" may be changed by the Company from time to time based on changes to the OTA System communicated by the Government of Hong Kong.

Trekking means an overnight hike, tramp, trek or similar activity through mountainous terrain, national parks or reserve lands normally undertaken on foot but can be by other means, including but not limited to on animal or off-road vehicle, and which involves an overnight stay in the wilderness including campsites, huts, or lodges. For the purpose of clarity, it does not mean Mountaineering.

Usual Country of Residence means the place from which any Journey of an Insured Person commences, and outside of which country this Policy is effective. Usual Country of Residence will be deemed to be Hong Kong unless otherwise specifically endorsed in the Policy Schedule by the Company.

Worldwide Emergency Assistance Services means medical assistance or related service provider nominated by the Company.

PART II – ANNUAL TRAVELCARE INSURANCE TERMS AND CONDITIONS

In consideration of the payment of premium and subject to the definitions, exclusions, limitations, provisions and terms of the Master Policy No. PL-TRV-001025903/00/00 contained herein, endorsed hereon, or attached hereto, Bolttech Insurance (Hong Kong) Company Limited (hereinafter called "the Company") agrees to provide insurance to the Insured Person(s) named in the Policy Schedule issued in relation to the Journey that commenced and occurred within the Period of Insurance.

The Policy Schedule, this Policy wording, and endorsements (if any), shall constitute the entire contract of insurance (hereinafter called the "Policy"). Please be sure to read the Policy Schedule and this Policy wording and pay attention to the sections "Part V – General Provisions" and "Part VI – General Exclusions" herein which apply in all instances.

The Policy Schedule indicates the Schedule of Benefits, and Insured Person will find the important information such as enrolled plan type, Period of Insurance and details for assistance hotline therein.

This Policy is primarily designed and valid for conventional leisure and business travel. A range of benefits are available under this Policy. However, there are some circumstances where cover cannot be provided.

This Policy may provide partial coverage for COVID-19. Please refer to the Policy Schedule and paragraphs 1.1.4, 2.1.2, 2.1.3, 3B, 10.3, 11.6 under Part III – Benefits of this Policy for the details. Please refer to the Policy for details of the cover and the applicable exclusions (if any).

These limits, exclusions and conditions are described in this Policy wording. However, the Company draws Insured Person's attention to some important points below:

- a) This Policy covers residents of Hong Kong travelling overseas who hold valid HKID and purchase the Policy in Hong Kong.
- b) This Policy does not cover certain activities or travel, including but not limited to:
 - (i) Extreme Sports and Sporting Activities or competing in sporting competitions;
 - (ii) Expeditions, Trekking above 5,000 meters, Mountaineering;
 - (iii) Manual work; or
 - (iv) Missionary or humanitarian travel
- c) The Company will not accept liability for any losses incurred in the sanctioned countries. For details, please refer to paragraph 11 under Part VI – General Exclusions of this document.
- d) The Chinese version of the Policy wording is for reference only. Should there be any inconsistency between Chinese and English versions in Policy wording, the English version shall prevail.

PART III – BENEFITS (SECTION 1 – 15)

Table of Benefits

Unless otherwise stated and subject to any sub-limit as stated in any Section, the maximum liability in respect of each of the Insured Persons for each Journey is shown under the Table of Benefits below:

Section	Summary of Benefits and Sub-Limits	Maximum Limits (HK Dollars) Per Journey Per Insured Person	
		Plan A	Plan B
1	Medical Expenses Benefit Not Due to COVID-19 (Sub-limit for follow up treatment up to HK\$100,000) Medical Expenses Due to COVID-19	1,000,000 500,000	500,000 100,000
2	Overseas Hospital or Quarantine Cash Allowance a) Overseas Hospital Cash Allowance (Not Due to COVID-19) (HK\$500 per day) b) Hospital Cash Allowance Due to COVID-19 i) during overseas (HK\$1,000 per day) ii) after returned to Hong Kong (HK\$500 per day) c) Compulsory Quarantine Cash Allowance (Not Due to COVID-19) (HK\$500 per day)	10,000 14,000 7,000 10,000	5,000 14,000 7,000 5,000
3	(A) Worldwide Emergency Assistance Services (Not Due to COVID-19) a) Hospital Admission and Guarantee of Hospital Admission Deposit b) Emergency Medical Evacuation and Repatriation c) Transportation of Mortal Remains d) Compassionate Visit and Hotel Accommodation e) Return of Minor Children f) Convalescence Expenses g) Unexpected Return to Usual Country of Residence h) Additional Cost of Travel and Accommodation (B) Worldwide Emergency Medical Evacuation and Repatriation due to COVID-19	40,000 Actual Cost 40,000 40,000 40,000 40,000 40,000 40,000 100,000	40,000 Actual Cost 15,000 15,000 15,000 15,000 15,000 15,000 100,000
4	Personal Accident Benefit a) Accidental Death & Permanent Total Disablement • for the age between 18-70 • under the age of 18 and over the age of 70 b) Major Burns c) Credit Card Protection	1,000,000 300,000 200,000 30,000	500,000 300,000 100,000 15,000
5	Baggage Benefit a) Sub-limit per item / pair / set b) Sub-limit for loss of mobile phone	20,000 3,000 2,500	3,000 3,000 2,000

6	Baggage Delay Benefit	1,500	500
7	Loss of Personal Money Benefit	3,000	2,000
8	Loss of Travel Documents Benefit (Sub-limit for Travel and Accommodation Expenses per day)	20,000 2,000	5,000 1,000
9	Travel Delay Benefit a) Cash Allowance (HK\$ 300 for each and every full 6 hours delay) OR b) Additional Travel Cost for re-routing	2,500 10,000	600 2,500
10	Cancellation Charges Benefit a) Not due to COVID-19 b) Due to COVID-19	30,000 5,000	5,000 5,000
11	Curtailment of Trip Benefit a) Not due to COVID-19 b) Due to COVID-19	30,000 5,000	5,000 5,000
12	Loss of Home Contents Benefit	30,000	10,000
13	Personal Liability Benefit	3,000,000	1,500,000
14	Rental Vehicle Excess Benefit	5,000	3,000
15	Golfers "Hole-In-One" Benefit	3,000	1,000

All benefits payable to the Insured Person (or his or any Insured Person's legal representative) under this Policy are subject to the maximum limits and sub-limits as stated in this Policy and the Policy Schedule, and subject to all the terms, conditions and exclusions of this Policy.

1. SECTION 1 – MEDICAL EXPENSES BENEFIT

1.1 The Company will reimburse the Eligible Expenses reasonably incurred for medical treatment arising from Bodily Injuries or Sickness contracted or sustained outside the Usual Country of Residence during any Journey as follows:

1.1.1 Hospitalization, surgery, ambulance and paramedic services, diagnostic tests, consultation by Medical Practitioners and Prescribed Medicines;

1.1.2 Eligible Expenses for hospitalization are payable subject to the sub-limit for Room and Board of HK\$3,000 per day. For the purpose of this Section, "Room and Board" means Hospital accommodation charges including meals and general nursing services reasonably incurred by the Insured Person who is Confined in a Hospital. A daily reimbursement of all the Hospital charges inclusive of Room and Board and professional fees reasonably incurred by the Insured Person as a registered in-patient in a Hospital for medical treatment covered under this Section is limited to HK\$10,000 per day if no detailed breakdown of charges is provided; and

1.1.3 Payment for Eligible Expenses up to HK\$100,000 arising from follow-up medical treatment of the Insured Person within 90 days of his return from any Journey to the Usual Country of Residence. This benefit also covers Eligible Expenses arising from medical treatment of the Insured Person in Hong Kong by Chinese Medicine Practitioner(s) supported by original receipts from such Chinese Medicine Practitioner(s), subject to the daily limit per visit of HK\$200 and a total sub-limit of HK\$3,000 within the sub-limit for follow up treatment of up to HK\$100,000.

1.1.4 Medical Expenses Due to COVID-19

In the event of the Insured Person being hospitalized overseas due to Bodily Injury or Sickness from COVID-19, the Company will reimburse for necessary and reasonable fees, charges or expenses for:

- medical, surgical, Hospital, nursing home or nursing services and emergency ambulance services; and/or
- emergency dental treatment for the alleviation of sudden pain or treatment for damage to sound and natural teeth provided such damage is caused solely by Bodily Injury (excluding replacement of dentures and crowns).

This benefit will only be paid once while this Policy is in force. After the Company pays this benefit, the coverage will be terminated immediately and no further benefits due to COVID-19 shall be payable under this Policy.

PROVIDED THAT all such medical expenses shall be normal, customary and reasonably in nature; be supported by a detailed breakdown of charges, original receipts and medical reports with full diagnosis provided by a Medical Practitioner (or Chinese Medicine Practitioner in the case of clause 1.1.3 above), and with the exception of clause 1.1.3 be incurred outside the Usual Country of Residence.

The maximum benefit payable by the Company under this Section shall not exceed the limit stated in the Table of Benefits.

1.2 The Company shall not be liable for:

1.2.1 any expenses related to additional cost of a single or private room at a Hospital or charges in respect of special or private nursing; wheelchair, crutch or any other similar equipment;

- 1.2.2 any expenses related to cosmetic surgery, apparatus to correct visual acuity or refractive error, contact lenses, glasses or hearing aids, prosthesis, and medical equipment, appliances and accessories;
- 1.2.3 any expenses related to psychiatric, psychological disorder, mental or nervous disorders (including any related primary/basic signs and symptoms);
- 1.2.4 any expenses related to any and all conditions arising from surgical, mechanical or chemical methods of birth control and any and all conditions or treatments pertaining to infertility;
- 1.2.5 any expenses related to treatment or services undertaken without the recommendation of any Medical Practitioner; routine physical examinations or health check-ups not incidental to the treatment or diagnosis of any suspected covered Bodily Injury or Sickness sustained during any Journey covered by this Policy and occurring or arising during the Period of Insurance;
- 1.2.6 any expenses related to travel taken contrary to the advice of a Medical Practitioner or where the Journey is for the purpose of receiving medical or surgical treatment or for rest and recuperation following any prior Accident, illness or Pre-Existing Condition.

The liability of the Company under this Policy shall cease one calendar year after the date of when the Bodily Injury or Sickness is contracted or sustained during a Journey and the Company shall not be responsible for any medical and related expenses incurred after the expiration of such one-year period.

2. SECTION 2 – OVERSEAS HOSPITAL OR QUARANTINE CASH ALLOWANCE BENEFIT

- 2.1.1 Overseas Hospital Cash Allowance (Not Due to COVID-19)
The Company will pay a cash allowance of HK\$500 for each complete day (i.e. a continuous period of 24 hours) of the Insured Person's Confinement during any Journey, subject to the maximum limits stated in the Table of Benefits.
- 2.1.2 Hospital Cash Allowance (Due to COVID-19) (Overseas)
The Company will pay a cash allowance of HK\$1,000 for each complete day (i.e. a continuous period of 24 hours) up to a limit of 14 days of the Insured Person's Confinement due to COVID-19 during the Journey.

This benefit will only be paid once while this Policy is in force. After the Company pays this benefit, the coverage will be terminated immediately and no further benefits due to COVID-19 shall be payable under this Policy.
- 2.1.3 Hospital Cash Allowance (Due to COVID-19) (Hong Kong)
The Company will pay a cash allowance of HK\$500 for each complete day (i.e. a continuous period of 24 hours) up to a limit of 14 days of the Insured Person's Confinement due to COVID-19 within 14 days after the Insured Person has returned to Hong Kong.

This benefit will only be paid once while this Policy is in force. After the Company pays this benefit, the coverage will be terminated immediately and no further benefits due to COVID-19 shall be payable under this Policy.
- 2.2 Compulsory Quarantine Cash Allowance due to Infectious Disease (Not Due to COVID-19)
The Company will pay a cash allowance of HK\$500 for each complete day (i.e. continuous period of 24 hours) of the Compulsory Quarantine imposed on the Insured Person during any Journey or within 7 days of his return to the Usual Country of Residence for reason of being suspected or confirmed to have infected with Infectious Disease, subject to the maximum limit stated in the Table of Benefits.
- 2.3 The Company shall not be liable:
 - 2.3.1 for any dwelling quarantine;
 - 2.3.2 if the planned destination has been declared as an infected area by the local government and/or the World Health Organisation on or before the commencement date of a Journey (not applicable to clauses 2.1.2 and 2.1.3 above);
 - 2.3.3 if the Confinement or Compulsory Quarantine period is less than a continuous period of 24 hours;
 - 2.3.4 if the Confinement is due to a medical condition which is not covered by this Policy;
 - 2.3.5 if the Confinement is not recommended by any Medical Practitioner or is for routine physical examinations or health check-ups not incidental to the treatment or diagnosis of any suspected covered Bodily Injury or Sickness sustained during any Journey covered by this Policy and occurring or arising during the Period of Insurance.

3. WORLDWIDE EMERGENCY ASSISTANCE SERVICES

SECTION 3A – WORLDWIDE EMERGENCY ASSISTANCE SERVICES (NOT DUE TO COVID-19)

The following Worldwide Emergency Assistance Services are rendered by a service provider nominated by the Company (the "Nominated Service Provider", hereinafter referred to as "NSP"). All services are subject to the sole discretion of the NSP and the Company based on the Insured Person's medical condition.

- 3.1 Scope of Services
NSP shall, subject to the terms and conditions as defined hereunder, provide the following Services to any Insured Person calling the NSP hotline when he/she travels outside the Usual Country of Residence for periods not exceeding 90 consecutive days per Journey.
 - (a) Medical Assistance
 - (i) Telephone Medical Advice
NSP will arrange for the provision of medical advice to the Insured Person over the telephone.
 - (ii) Hospital Admission and Guarantee of Hospital Admission Deposit

If the medical condition of the Insured Person is of such gravity as to require hospitalisation, NSP will assist such Insured Person in the Hospital admission. In case of Hospital admission duly approved by NSP and the Insured Person is without means of payment of the required Hospital admission deposit, NSP will on behalf of the Insured Person guarantee or provide such payment up to HK\$ 40,000. The provision of such guarantee by NSP is subject to NSP first securing payment from the Insured Person through the Insured Person's credit card or from the funds from the Insured Person's family. NSP shall not be responsible for any third party expenses which shall be solely the Insured Person's responsibility.

(iii) Delivery of Essential Medicine

NSP will arrange to deliver to the Insured Person essential medicine, drugs and medical supplies that are necessary for an Insured Person's care and/or treatment but which are not available at the Insured Person's location. The delivery of such medicine, drugs and medical supplies will be subject to the laws and regulations applicable locally. NSP will not pay for the costs of such medicine, drugs or medical supplies and any delivery costs thereof. Such costs shall solely be the Insured Person's responsibility.

(iv) Emergency Medical Evacuation & Repatriation

NSP will arrange for the air and/or surface transportation, medical care during transportation, communications and all usual ancillary services required to move the Insured Person when in a Serious Medical Condition to the nearest Hospital where appropriate medical care is available. NSP will arrange for the provision of appropriate communications and linguistic capabilities, mobile medical equipment and medical escort crew.

NSP retains the absolute right to decide whether the Insured Person's medical condition is sufficiently serious to warrant Emergency Medical Evacuation. NSP further reserves the right to decide the place to which the Insured Person shall be evacuated and the means or method by which such evacuation will be carried out having regard to all the assessed facts and circumstances of which NSP is aware at the relevant time.

NSP will arrange for the return of the Insured Person to the Usual Country of Residence following the Insured Person's Emergency Medical Evacuation and subsequent hospitalisation outside the Usual Country of Residence.

NSP reserves the right to decide the means or method by which such repatriation will be carried out having regard to all the assessed facts and circumstances of which NSP is aware at the relevant time.

(v) Transportation of Mortal Remains

NSP will arrange for transportation of the Insured Person's mortal remains from the place of death to the Usual Country of Residence or arrange, if requested by the Insured Person's family, arrange for local burial at the place of death, subject to any governmental regulations.

(vi) Compassionate Visit and Hotel Accommodation

NSP will arrange for one economy class return airfare and hotel accommodations up to HK\$ 1,200 per person per day for a maximum period of five (5) consecutive days for two close relatives of the Insured Person to join the Insured Person who, when travelling alone, is hospitalised outside the Usual Country of Residence for a period in excess of three (3) consecutive days, subject to NSP's prior approval and only when judged necessary by NSP on medical and compassionate grounds.

(vii) Return of Minor Children

NSP will arrange for economy class one-way airfare for the return of minor children (aged 18 years old and below and unmarried) to the Usual Country of Residence if they are left unattended as a result of the accompanying Insured Person's illness, Accident or Emergency Medical Evacuation. Escort will be provided, when requested.

(viii) Convalescence Expenses

NSP will arrange for the additional hotel accommodation expenses necessarily and unavoidably incurred by the Insured Person related to an incident requiring Emergency Medical Evacuation, Emergency Medical Repatriation or hospitalisation up to HK\$ 1,200 per day for a maximum of five (5) consecutive days.

(ix) Unexpected Return to Usual Country of Residence

In the event of the death of the Insured Person's close relative in his/her Usual Country of Residence while the Insured Person is travelling overseas (save for in the case of migration) and necessitating an unexpected return to his/her Usual Country of Residence, NSP will arrange for one economy class return airfare for the return of the Insured Person to his/her Usual Country of Residence.

(x) Additional Cost of Travel and Accommodation

Following a Serious Medical Condition necessitating medical treatment of the Insured Person, NSP will arrange for economy class one-way airfare for the Insured Person to return to the Usual Country of Residence. NSP will also arrange for accommodation for his/her family member or travelling companion (who is also insured in this Policy) accompanying the Insured Person during his/her hospitalization outside the Usual Country of Residence.

The above Service [item (i)] is purely on referral or arrangement basis. NSP shall not be responsible for any third party expenses which shall be solely the Insured Person's responsibility.

The above Services [items (ii) & (iii)] are charged on a case by case basis. The provision of financial guarantees by NSP is subject to NSP first securing payment from the Insured Person through the Insured Person's credit card or from the funds from the Insured Person's family. NSP shall not be responsible for any third party expenses which shall be solely the Insured Person's responsibility.

The above Services [items (iv) to (x)] are subjected to the General Exclusions listed in Part VI of this Policy.

- (b) Travel Assistance
- (i) Inoculation and Visa Requirement Information

NSP shall provide information concerning visa and inoculation requirements for foreign countries, as those requirements are specified from time to time in the most current edition of World Health Organization Publication "Vaccination Certificates Requirements and Health Advice for International Travel" (for inoculations) and the "ABC Guide to International Travel Information" (for visas). This information will be provided to the Insured Person at any time, whether or not the Insured Person is travelling or an emergency has occurred. NSP shall inform the Insured Person requesting such information that NSP is simply communicating the requirements set forth in a document and NSP shall name the document.
- (ii) Lost Luggage Assistance

NSP will assist the Insured Person who has lost his/her luggage while travelling outside the Usual Country of Residence by referring the Insured Person to the appropriate authorities involved.
- (iii) Lost Passport Assistance

NSP will assist the Insured Person who has lost his/her passport while travelling outside the Usual Country of Residence by referring the Insured Person to the appropriate authorities involved.
- (iv) Legal Referral

NSP will provide the Insured Person with the name, address, telephone numbers, if requested by the Insured Person and if available, office hours for referred lawyers and legal practitioners. NSP will not give any legal advice to the Insured Person.

Although NSP shall make such referrals, it cannot guarantee the quality of the service provider and the final selection of a service provider shall be the decision of the Insured Person. NSP, however, will exercise care and diligence in selecting the service providers.
- (v) Emergency Travel Service Assistance

NSP shall assist the Insured Person in making reservations for air ticket or hotel accommodation on an emergency basis when travelling overseas.

The above Services [items (i) to (v)] are purely on referral or arrangement basis. NSP shall not be responsible for any third party expenses which shall be solely the Insured Person's responsibility.

- 3.2 Reasonable Precautions

The Insured Person shall take all reasonable precautions to prevent and minimise any Accident, injury, death or expenses.
- 3.3 Request For Assistance

In case of any request for assistance, and prior to taking personal action where reasonable, the Insured Person or his representative shall call:

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and should state:

 - His name, the number of his Policy and his I.D. card or passport number and,
 - The name of the place and the telephone number where NSP can reach the Insured Person or his representative and,
 - A brief description of the Accident and the nature of help required.
- 3.4 Examinations

NSP shall have the right and opportunity through its medical representative to examine the Insured Person whenever and as often as may reasonably require.
- 3.5 Undertakings
- 3.5.1 NSP undertakes to exercise due care and diligence in the appointment and/or referral of any service provider to assist the Insured Person. NSP assumes no responsibility for any advice given by any service provider and the Insured Person shall not have any recourse against NSP by reason of its referral of or contact with a service provider or other determination resulting therefrom.
- 3.5.2 The Insured Person undertakes not to have any recourse against NSP or the Company for any indirect or consequential loss suffered by the Insured Person arising from the Services.
- 3.6 Force Majeure

NSP shall not be liable for failure to provide Services and/or delays caused by acts of God, strikes, or other conditions beyond its control, including but not limited to, flight conditions or situations where the rendering of Services is prohibited or delayed by local laws, regulators or regulatory agencies.

SECTION 3B – WORLDWIDE EMERGENCY MEDICAL EVACUATION & REPATRIATION (DUE TO COVID-19)

- 3.7 The Company will pay for air or surface transportation, medical care during such transportation, communications and all usual ancillary charges incurred in moving the Insured Person with Serious Bodily Injury/Serious Sickness causing life threatening medical emergencies such as the Insured Person's death or serious impairment to the Insured Person's health, requiring the Insured Person immediate evacuation to obtain urgent medical treatment in the nearest Hospital where appropriate medical care is available, not necessarily to Hong Kong, as advised and approved by NSP.

In the event Insured Person is hospitalized while travelling outside Usual Country of Residence and it is medically necessary to bring Insured Person back to Hong Kong to continue treatment, NSP will provide the emergency medical repatriation services based on the advice of the treating Medical Practitioner. The Company will pay the reasonable and necessary repatriation costs including the reasonable transportation cost for 1 qualified medical attendant accompanying the Insured Person.

This benefit will only be paid once while this Policy is in force. After the Company pays this benefit, the coverage will be terminated immediately and no further benefits due to COVID-19 shall be payable under this Policy.

4. SECTION 4 – PERSONAL ACCIDENT BENEFIT

- 4.1 The Company will pay this benefit according to the percentage stated in the Compensation Table hereunder up to the maximum limits stated in the Table of Benefits in the event that an Accident occurred during any Journey results in the Insured Person's death or any Permanent Total Disablement as listed in the Table of Benefits within 12 months from the date of the Accident. Provided that
- 4.1.1 the total benefits payable under this Section for Insured Person(s) under the age of 18 and over the age of 70 shall not in any circumstances exceed HK\$300,000.
- 4.1.2 the total benefits payable under this Section shall not exceed 100% of the maximum limit for the Personal Accident Benefit regardless of the number of insured events occurred to the Insured Person during any Journey.

Compensation Table Per Journey Per Insured Person Insured Event	Percentage of Maximum Benefits*
1 Death	100%
2 Permanent Total Disablement	100%
3 Total and permanent loss of all sight in one or both eyes	100%
4 Loss of Limb(s) – Total loss by physical severance or total and permanent loss of use of	
(a) one or two limbs	100%
(b) one or both hands	100%
(c) arm above the elbow	100%
(d) arm at or below the elbow	100%
(e) leg above the knee	100%
(f) leg at or below the knee	100%
5 Loss of Sight – Total and permanent loss of	
(a) sight in one eye except perception of light	50%
(b) lens of one eye	50%
6 Total and permanent	
(a) Loss of Hearing in both ears	75%
(b) Loss of Hearing in one ear	15%
(c) Loss of Speech	50%

*It is calculated as a percentage of the applicable limits of the Personal Accident Benefit set out in the Schedule of Benefit in the Policy Schedule of the Insured Person.

- 4.2 The maximum amount payable for any and all events arising under this Section shall not exceed the maximum limits for each Insured Person as stated in the Table of Benefits.
- 4.3 In the event of the death of an Insured Person giving rise to a claim under this Section the beneficiary shall be that person's estate if there is no next of kin unless a selected beneficiary has been stated on the Policy Schedule at the time of issue.
- 4.4 Major Burns Benefit
The Company will pay this benefit if the Insured Person suffers third-degree burn (i.e. the destruction of the skin to its full depth and damage to the tissues beneath with burnt areas equal to or greater than 5% of the Insured Person's head or 10% of the Insured Person's total body surface area) arising from an Accident during any Journey, provided that the assessment of the burns is certified by a Medical Practitioner with medical reports and full diagnosis. Such benefit can only be claimed once for each Accident during any Journey.
- 4.5 Credit Card Protection Benefit
In the event of a claim is payable under this Policy for the death of the Insured Person as a result of an Accident, the Company will also reimburse the outstanding balance charged to the Insured Person's credit card(s) as at the date of Accident up to maximum limits stated in the Table of Benefits. However, the Company shall not be liable for any interest accrued or financial charges on the outstanding balance.

For the purpose of this Section, if the body of the Insured Person has not been found within one year after the date of the disappearance, sinking or wrecking of the aircraft or other conveyance in which he is travelling either on

land or at sea during any Journey, it will be presumed that the Insured Person suffered an accidental death at the time of such disappearance, sinking or wrecking.

5. SECTION 5 – BAGGAGE BENEFIT

The Company will pay the baggage benefit up to the maximum limit stated in the Table of Benefits for loss, physical breakage or damage directly resulting from theft, robbery, burglary, Accident or mishandling by carriers during any Journey to an Insured Person's baggage or personal property carried on such Journey.

If there is loss of an Insured Person's mobile phone carried during the Journey due to theft, robbery or burglary during the Journey, the Company also will pay for a replacement of mobile phone up to the maximum limit stated in the Table of Benefits.

Provided That:

- 5.1 The loss must be reported to the local police where the loss occurs, the carriers or any third parties liable within 24 hours of the occurrence.
- 5.2 The Insured Person shall observe ordinary and proper care for the safety of the property insured, including safeguard his accompanied baggage or personal property and do not leave them unattended in a public place. All baggage are to be examined when received and in the event of any destruction, loss or damage coming to the notice of the Insured Person shall give IMMEDIATE notice to:
 - 5.2.1 The police in case of theft, loss or willful damage by a third party, and obtain written documentation from local police where the loss occurs.
 - 5.2.2 The carriers when loss or damage has occurred in transit, and obtain a copy of the official 'Baggage Irregularity Report'.
- 5.3 The limit of the Company's liability for each item/pair or set shall be HK\$3,000 (Camera body, lenses and accessories will be treated as a set).
- 5.4 In the event of loss of or damage to any article which is a part of a set, the measure of loss of or damage to such an article shall be a reasonable and fair proportion of the total value of the set and will not be construed to mean a total loss of the set.
- 5.5 Subject to clause 5.6, the Company will at its option pay for the cost of replacement or repair under this Section provided that the maximum liability of the Company shall not exceed the limit for Baggage Benefit.
- 5.6 For claim relating to breakage or damage, the claimant has to produce the damaged property as physical evidence for the Company's inspection at the claimant's cost.
- 5.7 The loss of mobile phone must be reported to the local police where the loss occurs, the carriers or any third parties liable within 24 hours of the occurrence.
- 5.8 Exclusion:
The Company will not be liable under this Section for any of the following:
 - 5.8.1 Loss or damage in consequence of delay, confiscation, detention or examination by customs authorities or other officials.
 - 5.8.2 Losses of cash, banknotes, plastic money (including credit cards, Octopus cards etc), negotiable instruments, bonds or securities, credit cards and other instruments of payment or documents of any kind, passports, visas, air tickets, and transportation, accommodation or any other travel vouchers or coupons.
 - 5.8.3 Loss of or breakage to any pager, portable telecommunication equipment (except mobile phone), computer equipment (except laptop computer or tablet), software and peripheral or breakage to mobile phone (including PDA phone, smart phone or similar device with telecommunications function and other accessories).
 - 5.8.4 Breakage or damage to fragile or brittle articles of every description, china, glassware, porcelains, objects of art, set and unset precious or semiprecious gemstones or foodstuff.
 - 5.8.5 Loss of or damage caused by wear and tear, moth, vermin or inherent vice, mechanical, electrical or electronic breakdown or derangement, cleaning, repairing or restoring process, atmospheric or climatic changes, depreciation in value and such depreciation shall be applied wholly at the discretion of the Company.
 - 5.8.6 Loss of or damage to business merchandise or samples.
 - 5.8.7 Loss to any baggage that is left behind or unattended in a Public Conveyance or a public place.
 - 5.8.8 Loss of or damage to baggage mailed or shipped separately.
 - 5.8.9 Any property or personal belongings specifically insured elsewhere or recovered/repared by a third party.
 - 5.8.10 Loss of jewelry and watches unless from baggage carried in the hand of the Insured Person or kept in the hotel safety deposit box.
 - 5.8.11 Any charges incurred by the Insured Person on his or her mobile phone account including contract cancellation fees or charges, call costs or interest.
 - 5.8.12 Any loss where the Insured Person is unable to produce the original receipt for the purchase of the mobile phone (which includes the date of purchase, the price paid, the model and type of mobile phone lost or stolen).
 - 5.8.13 Any unexplained loss or mysterious disappearance.

6. SECTION 6 – BAGGAGE DELAY BENEFIT

The Company will pay up to the maximum limit stated in the Table of Benefits for each Insured Person for the

additional cost to get back the baggage or emergency purchase of essential items of toiletries or clothing consequent upon temporary deprivation to baggage for at least 6 hours from the time of arrival at destination abroad due to delay or misdirection in delivery.

Provided That:

- 6.1 The delay is certified by an official 'Baggage Irregularity Report' from the airline or in writing by a letter from the tour operator.
- 6.2 The delay is not as a result of detention or confiscation by customs or other law enforcing officials.
- 6.3 Documentation (including original purchase bills) is produced by the Insured Person showing the details of the expenditure.
- 6.4 Claim cannot be made under this Section if the same loss is claimed for under Section 5 of Baggage Benefit of this Policy.
- 6.5 The Company shall not be liable for any loss which occurred after the Insured Person returns to the Usual Country of Residence or reaches his final destination.

7. SECTION 7 – LOSS OF PERSONAL MONEY BENEFIT

The Company will pay this benefit for loss of the Insured Person's personal money in the form of banknotes, cash or travellers cheques directly arising only from theft, robbery or burglary during any Journey up to the limit stated in the Table of Benefits.

Provided That:

- 7.1 If the Insured Person experiences any loss of cash, banknotes or travellers cheques, report must be made to the local police where the loss occurs and relevant branch of the travellers cheques issuing authority within 24 hours of the loss. All forms of proof such as Police Report, receipts shall be made available to the Company at the Insured Person's own cost.
- 7.2 The Company shall not be liable for loss or shortages of personal money due to an error or omission by any third party, fluctuation of the rate of currency exchange, devaluation, or confiscation by any governmental authorities.
- 7.3 The Company shall not be liable under this Section if the Insured Person contributed to his own loss by leaving the personal money unattended in a public place.

8. SECTION 8 – LOSS OF TRAVEL DOCUMENTS BENEFIT

If an Insured Person loses his passports, travel tickets and travel documents as a direct result of theft, robbery, burglary or accidental loss during any Journey, the Company will pay for (a) the replacement cost of passports, travel tickets and/or travel documents charged by the issuing body during such Journey; and/or (b) additional hotel accommodation and travel expenses reasonably incurred by such Insured Person for the sole purpose of obtaining such replacements from the issuing body which is nearest to the place where the Insured Person is first aware of the loss of such document, and for returning to the Usual Country of Residence (limited to economy class) due to the invalidity of the original return ticket attributable to such loss up to the amount stated in the Table of Benefits.

Exclusions:

The Company will not be liable under this Section for any of the following:

- 8.1 if within 24 hours or as soon as practicable after the Insured Person is aware of the loss as described above the Insured Person fails to report such loss to the police and to obtain a copy of the related police report.
- 8.2 if the Insured Person contributed to his own loss by leaving the passports, tickets or travel documents unattended in a public place.
- 8.3 The reimbursement cost for air ticket other than economy class.
- 8.4 Loss of any passports, travel tickets and travel documents which is not necessary for completing the Journey.
- 8.5 Any loss of the passports, travel tickets and travel documents arising from the confiscation or detention by a government authority, customs official or police.

9. SECTION 9 – TRAVEL DELAY BENEFIT

This benefit is payable in the event Insured Person's scheduled travel is delayed because the Public Conveyance for which the Insured Person has arranged or scheduled to travel is delayed during any Journey due to adverse weather conditions, Natural Disaster, closure of airport, industrial action, hi-jack, technical or other mechanical derangement of such Public Conveyance, and the cancellation or postponement of such Public Conveyance due to such derangement is entirely beyond the Insured Person's control.

- (a) Cash Allowance - The Company will pay up to HK\$300 for an initial delay in excess of 6 consecutive hours and HK\$300 for each subsequent 6 consecutive hours period up to the maximum limits stated in the Table of Benefits.
- (b) Additional Travel Cost for Re-routing - The Company will reimburse additional public transportation expenses

up to the maximum limits stated in the Table of Benefits reasonably and inevitably incurred for alternative means of transport at the same fare class originally selected by the Insured Person as a direct consequence of travel delay by at least 6 consecutive hours from the scheduled time of departure.

A claim under this Section can only be made under item (a) or (b).

Provided That:

- 9.1 The period of delay is in excess of 6 consecutive hours, which is effective from the scheduled commencement of a trip until the trip recommences on the first available alternative transportation offered by the carrier.
- 9.2 The delay does not arise from the failure of the Insured Person to confirm the advanced booking or check in at the scheduled time before departure.
- 9.3 Confirmed advanced booking is given prior to the commencement of an industrial action affecting the carrier.
- 9.4 Official documentation from the airline/carrier is submitted in support of any claim under this Section, which states the cause, date, time and duration of the delay.
- 9.5 No cover is provided for a claim arising from a strike or industrial action existing at the issue date of the Policy Schedule.
- 9.6 The delay does not arise from the Insured Person's refusal or failure to take the first available alternative transportation offered by the relevant Public Conveyance provider.
- 9.7 If the Insured Person has consecutive connecting flights, each period of delayed hours cannot be accumulated and the proximate cause of the delay must be due to the covered perils under the coverage.

10. SECTION 10 – CANCELLATION CHARGES BENEFIT

- 10.1 The Company will pay, up to the maximum limits stated in the Table of Benefits, the deposits or any part of the payment made in advance for travel ticket, accommodation or tour package which are forfeited and irrecoverable from the relevant tour operator, airline or any service provider upon cancellation prior to any Journey as a direct result of any of the following events:-
 - 10.1.1 Death, Serious Bodily Injury or Sickness of the Insured Person.
 - 10.1.2 Death, Serious Bodily Injury or Sickness of (a) the Insured Person's Immediate Family Members or Close Business Partner, or (b) the travel companion of the Insured Person who is also insured under the same Policy of the Insured Person.
 - 10.1.3 Witness summons, jury service or Compulsory Quarantine of the Insured Person.
 - 10.1.4 Serious damage to the Insured Person's Principal Home in Hong Kong arising from fire or flooding within 10 days from the departure date which requires the Insured Person's continued presence on the premises.
 - 10.1.5 Any adverse weather conditions, Natural Disaster, unexpected outbreak of Infectious Disease/ industrial action involving Public Conveyance, riot or civil commotion, the Security Bureau of the Government of Hong Kong issues a Travel Alert with category of Black Alert or Red Alert at the planned destination of such Journey within 7 days before the scheduled departure date of such Journey which prevents the Insured Person from commencing such Journey.
- 10.2 Provided that the benefit payable under this Section is subject to the following conditions:
 - 10.2.1 With respect to any event stated in 10.1.1 & 10.1.2 in this Section, the benefit will only be payable if it happens (i) at least 24 hours after the commencement date of the Period of Insurance and (ii) within 30 days prior to the commencement date of the relevant Journey.
 - 10.2.2 With respect to any event stated in 10.1.3 in this Section, the benefit will only be payable if an order or notice of compliance is issued to the Insured Person (i) at least 24 hours after the commencement date of the Period of Insurance and (ii) within 30 days prior to the commencement date of the relevant Journey.
 - 10.2.3 With respect to Travel Alert stated in 10.1.5 in this Section, the benefit will be payable 100% for Black Alert and 50% for Red Alert, no benefit shall be payable for Amber Alert.
 - 10.2.4 The Insured Person shall provide and surrender the original unused tickets to the Company.
 - 10.2.5 Once a claim with respect to a Journey is made under this Section, no other benefits for such Journey shall be payable and all coverage under this Policy with respect to such Journey shall cease.
 - 10.2.6 This benefit does not cover any loss arising from Black Alert or Red Alert, medical or physical conditions or other circumstances affecting the Insured Person known to exist on the commencement date of the relevant Journey.
- 10.3 Cancellation Charges Benefit Due To COVID-19
The Company shall indemnify irrecoverable costs that the Insured Person had paid in advance up to the maximum limit stated in the Table of Benefits of this Endorsement subject to Insured Person prevented from proceeding with the Journey due to being diagnosed with COVID-19 30 days before start of Journey.

This benefit will only be paid once while this Policy is in force. After the Company pays this benefit, the coverage will be terminated immediately and no further benefits due to COVID-19 shall be payable under this Policy

11. SECTION 11 – CURTAILMENT OF TRIP BENEFIT

If any Journey is interrupted after the commencement of such Journey, the Company will pay this benefit, up to

the maximum limit stated in the Table of Benefits, on a pro-rata basis for each complete day of such Journey which is interrupted for (i) loss of the prepaid and unused portion of the transport or accommodation arrangement which is forfeited and irrecoverable from the relevant tour operator, airline or any source and (ii) reasonable additional travel expenses which is necessary for the Insured Person to return to the Usual Country of Residence by Public Conveyance on economy class due to a necessary, unforeseen and unavoidable curtailment of such Journey as a direct result of:

- 11.1 death, Serious Bodily Injury or Sickness of the Insured Person or his Immediate Family Members, his travel companion who is also insured under the same Policy, or his Close Business Partner.
- 11.2 hijack of an aircraft or conveyance or any mechanical propelled vehicles and vessels arranged by travel agency in which the Insured Person is travelling as a fare-paying passenger.
- 11.3 any adverse weather conditions, Natural Disasters, unexpected outbreak of Infectious Diseases/ industrial action involving Public Conveyance, riot or civil commotion at the planned destination of such Journey which prevents the Insured Person from continuing with such Journey or where the Security Bureau of the Government of Hong Kong issues a Travel Alert of category Black Alert or Red Alert with respect to the planned destination is in effect during such Journey.

Provided That:

- 11.4 With respect to Travel Alert stated in 11.3 in this Section, the benefit will be payable 100% for Black Alert and 50% for Red Alert, no benefit shall be payable for Amber Alert.
- 11.5 Any such cause does not arise from Black Alert or Red Alert, medical or physical conditions or other circumstances affecting the Insured Person or his Immediate Family Members or the travel companion or Close Business Partner of the Insured Person known to exist on the commencement date of the relevant Journey.
- 11.6 Curtailment Of Trip Benefit Due To COVID-19
The Company shall indemnify additional expenses incurred to return to Hong Kong up to the maximum limit stated in the Table of Benefits of this endorsement subject to Insured Person not being able to return to Hong Kong as per original itinerary due to being diagnosed with COVID-19.

This benefit will only be paid once while this Policy is in force. After the Company pays this benefit, the coverage will be terminated immediately and no further benefits due to COVID-19 shall be payable under this Policy.

12. SECTION 12 – LOSS OF HOME CONTENTS BENEFIT

- 12.1 If the Principal Home in the Usual Country of Residence suffers loss of or damage to the Home Contents as a result of burglary accompanied by forcible and violent entry to or exit from the premises whilst the Principal Home is unoccupied during any Journey, the Company will pay the cost of replacement or repair of such Home Contents up to the maximum limit stated in the Table of Benefits. Notice must be given to the police immediately upon the Insured Person becoming aware of the loss or damage to the Home Contents as a result of the burglary.
- 12.2 The Company shall not be liable for:
 - (a) Loss due to use of any key or duplicate thereof to gain access to the Principal Home irrespective whether the key belongs to the Insured Person.
 - (b) Loss caused or facilitated by the reckless or wilful act of the Insured Person or the Insured Person's family member.
 - (c) Loss or damage of cash, banknotes, coins, travelers cheques, negotiable instruments, bonds or securities, credit cards and other instruments of payment or documents of any kind, passports, visas, air tickets, and transportation, accommodation or any other travel vouchers or coupons, mobile phones, contact or corneal lenses, animals and motor vehicles (including accessories), motorcycles, boats, any other conveyances and computer system records.

13. SECTION 13 – PERSONAL LIABILITY BENEFIT

The Company will pay this benefit up to the maximum limit stated in the Table of Benefits if the Insured Person incurs legal liability to a third party (inclusive of reasonable legal costs and expenses) for accidental Bodily Injury to a third party or accidental loss or damage to third party's property, as a direct result of the Insured Person's negligence towards the third party during any Journey.

The Company shall not be liable for any liability, loss or claim (i) payable by any other insurance company or third party, or (ii) in respect of loss or damage to properties belonging to or in the care, custody or control of the Insured Person, or (iii) where the Insured Person or his authorized representative has admitted liability or entered into any agreement or settlement without notifying and obtaining the prior written consent of the Company, or (iv) arising directly or indirectly from:

- 13.1 Employer's liability, contractual liability or liability to Immediate Family Members of an Insured Person.
- 13.2 Properties or animals belonging to or held in trust, in the care, custody or control of an Insured Person.
- 13.3 Any wilful, malicious, unlawful or deliberate act.
- 13.4 Pursuit of a trade business or profession.

- 13.5 Ownership or occupation of lands or buildings (other than occupation only of any temporary residence).
- 13.6 Ownership, possession, hire, use or operation of vehicles, aircraft or watercraft.
- 13.7 Legal costs resulting from any criminal proceedings, fine, penalties or punitive damage.
- 13.8 Insanity, the use of any drug (except as medically prescribed but excluding drug addiction), or intoxicating liquor, or the use of firearms.
- 13.9 Pollution unless due to sudden, unintended and unexpected occurrence.
- 13.10 Asbestos or any materials containing asbestos in whatever form or quantity.

This benefit shall not be payable in respect of judgments which are not in the first instance delivered by or obtained from a court of competent jurisdiction within Hong Kong.

14. SECTION 14 – RENTAL VEHICLE EXCESS BENEFIT

The Company will pay this benefit up to the maximum limit stated in the Table of Benefits for the vehicle insurance excess or deductible for a car accident, parking damage or theft during the Journey under a rental agreement of a private car or motor home, provided that the Insured Person:

- 14.1 has hired a vehicle from a registered vehicle rental company and taken out the motor vehicle insurance Policy on his hired vehicle covering the rental period;
- 14.2 is nominated as a driver on the rental agreement;
- 14.3 is driving the hired vehicle at the relevant time of the car accident;
- 14.4 is a licensed driver in the country where he operates the hired vehicle;
- 14.5 has fulfilled all the terms and conditions of the rental agreement and the applicable motor vehicle insurance.

The Company shall not be liable for:

- 14.6 any condition under the influence of alcohol or drugs of the Insured Person who is controlling the rental vehicle during the rental period;
- 14.7 any illegal or unlawful use of the rental vehicle by the Insured Person during the rental period;
- 14.8 any liability other than loss of or damage to the rental vehicle.

For the avoidance of doubt, a hired vehicle or private car in this Section shall mean any motor vehicle but excluding all kinds of commercial vehicles, motor cycles, and any vehicle with more than 9 seats.

15. SECTION 15 – GOLFERS “HOLE-IN-ONE” BENEFIT

If the Insured Person hits a ‘hole-in-one’ in a competition or friendly game at any recognised golf courses during any Journey, the Company will pay the one-off bar expenses incurred at the same golf course up to the maximum limit stated in the Table of Benefits. Recognised golf course means a golf course operated by a club or an organization which is registered at any local government as providing the golf or golf practicing.

The Company shall not be liable if the Insured Person is a professional golfer.

PART IV – GENERAL CONDITIONS

- 1. At the time of applying this Policy, the Insured Person must be fit to travel, and this Policy does not cover any circumstances which already exists on the Effective Date or was announced before the effective date, or any Pre-Existing Conditions.
- 2. Upon issuance of the Policy, all the insurance details, including the Insured Persons, departure date, expiry date and destinations, are confirmed and final and cannot be changed.
- 3. Eligibility of this Policy is restricted to residents of Hong Kong travelling overseas who hold valid HKID and purchase the Policy in Hong Kong. Financial compensation will be paid to Hong Kong bank account only. Claims reimbursements shall only be transacted in Hong Kong Dollars and be paid into an account of licensed banks in Hong Kong, as authorized by the Hong Kong Monetary Authority.
- 4. This Policy may not be extended. However, if any circumstance exists during any Journey which is outside the Insured Person’s control and such Journey is extended beyond 90 consecutive days, the Company will automatically extend such Journey for a maximum ten (10) consecutive days without charge for such an extended period as is reasonably necessary for completion of the Insured Person’s Journey.
- 5. If the Insured Person is covered under more than one (1) comprehensive voluntary travel insurance policies underwritten by the Company for the same trip, only the travel insurance Policy with the greatest compensation will apply and benefits thereunder be payable.

6. Any non-disclosure or fraudulent misrepresentation in any material shall lead to the whole Policy being void from inception.

PART V – GENERAL PROVISIONS

1. This Policy shall be issued in Hong Kong and shall be governed and construed in accordance with the laws of Hong Kong and subject to the exclusive jurisdiction of the Hong Kong courts.
2. If the Company declines any claim under this Policy and the Insured Person does not initiate any legal action in respect of such claim within twelve months from the date of such decline, then the claim shall for all purposes be deemed to have been irrevocably abandoned and shall not thereafter be recoverable.
3. Throughout this Policy, where the context so admits, words embodying the masculine gender shall include the feminine gender, and words indicating the singular case shall include the plural and vice- versa.
4. Headings are for convenience only and shall not affect the interpretation of this Policy.
5. This Policy may be cancelled by either Party by giving thirty (30) calendar days' prior written notice to the other party. The day of giving notice will be deemed the termination date of this Policy. From the termination date of this Policy, new customers of the Policyholder will not be able to enroll under this Policy. The termination of this Policy shall not affect the cover provided to Service Subscriber(s) who have been enrolled prior to the termination date of this Policy. The Company will not provide any refund of premium if this Policy is cancelled.
6. In the event of any payment made under this Policy, the Company shall be subrogated to all the Insured Person's right of recovery and indemnity against any third party and any amount so recovered shall belong to the Company.
7. There is no direct billing provided under this Policy except as arranged and through approved by the Company.
8. The age limit for persons(s) insured under this Policy shall be from a minimum age of 6 weeks up to a maximum age of 70 years. All children under the age of 18 years must be accompanied by a parent who is also an Insured Person under the same Policy. No benefit will be provided once the Insured Person reaches the age of 71.
9. The Company will pay benefits under this Policy up to the amount stated in the Table of Benefits. However, there may be times when the total costs and expenses incurred by the Insured Person exceed the total amount payable under this Policy. The Insured Person shall be liable for all such excess costs and expenses.
10. Only Journeys taken by the Insured Person within the Period of Insurance and for a period of no longer than 90 consecutive days each will be covered under this Policy.
11. Only the Policyholder and/or Service Subscriber can exercise all rights and privileges provided under this Policy unless specified otherwise. Failure by the Service Subscriber to comply with the Claims Procedure under "Part V – General Provisions paragraph 16" or investigation may result in denial of the claim. If any claim shall be fraudulent or intentionally exaggerated or if any false declaration or statement shall have been made, then this Policy shall be void and no claim shall be payable.
12. This Policy shall be subject to the Limits of Liability for each Section as stated on the Policy and in the Policy Schedule.
13. The maximum liability of the Company in respect of all claims shall not exceed its ratable proportion of such claim which but for the existence of this Policy would be covered under any other insurance policies or cover notes. If the Insured Person is covered by more than one travel insurance Policy issued by the Company for the same Accident, the maximum amount the Company will pay for that Accident will be based on the Policy which provides the highest amount of benefit for that Accident, subject to that Policy's maximum limits and sub-limits for each section as applicable.
14. **WARRANTY.** The Insured Person warrants that to the best of his knowledge and belief no Insured Person is travelling contrary to the advice of a Medical Practitioner or for the purpose of obtaining medical treatment and that he understands that treatment of any pre-existing, existing, recurring or congenital medical conditions are not covered. The Insured Person further warrants that he is not aware of any warning against travelling to the planned destination which was known to be at elevated risk through media or governmental agencies being issued prior to the Period of Insurance.
15. Any person or entity who is not a party to this Policy shall have no rights under the Contracts (Rights of Third Parties) Ordinance (Cap 623 of the Laws of Hong Kong) to enforce any terms of this Policy.
16. **CLAIMS PROCEDURE**
- 16.1 Notice of any claim must be given to the Company within thirty-one days after the occurrence of any incident giving rise to a claim, and in the instance of a claim under the Section on Personal Liability Benefit, such notice must be given in writing as soon as possible and in any event not later than 14 days after the incident giving rise to such a claim. All claims shall be made together with proof satisfactory to the Company and all proof shall be rendered on demand at the expense of the Service Subscriber or his representative.
- 16.2 All claims must be submitted with comprehensive supporting information including:
- 16.2.1 In the case of Personal Accident Benefit:

Hospital, Medical Practitioner's reports giving details on the nature of the Bodily Injury and the extent and period of disability; police report where relevant and if death shall have resulted, a copy of the death certificate and the relevant coroner's report.

16.2.2 In the case of Credit Card Protection Benefit:

Credit card statement, customer copy of the credit card sales slip, bill and /or payment receipt.

16.2.3 In the case of Medical Expenses Benefit, Worldwide Emergency Assistance Services, Overseas Hospital or Quarantine Cash Allowance, Cancellation Charges Benefit and Curtailment of Trip Benefits:

All bills, receipts, tickets, coupons, contracts or agreements relevant to the claim and if the claim relates to medical treatments, then a full Medical Practitioner's (or if applicable, Chinese Medicine Practitioner's) report stipulating the diagnosis of the condition treated and the date the disability commenced and a summary of the course of treatment including medicines prescribed and services rendered.

16.2.4 In the case of Baggage Benefit, Baggage Delay Benefit, Personal Money Benefit, Loss of Travel Documents Benefit and Loss of Home Contents Benefit:

All details including receipts as to date of purchase, price, model and type of items lost or damaged; a copy of the IMMEDIATE notification to airline/carrier and their official acknowledgment in writing when loss or damage has occurred in transit; official documentation such as property irregularity report from airline/public common carrier including date, time and duration of the delay; certified copy of IMMEDIATE report to and written documentation from the local police in the case of theft, loss or willful damage of baggage by a third party; certified copy of report to and written documentation from the police of the Insured Person's Usual Country of Residence where the Principal Home is located in the case of loss or damage to the Home Contents as a result of burglary (such report shall have been made immediately upon (and in any event within 24 hours of) the Insured Person becoming aware of such loss or damage); copy of the report to the issuing authority of travelers cheques and certified copy of the police report in the case of loss of travellers cheques.

In any event reports to relevant airline/carrier, issuing authorities or police must be made no later than 24 hours of the insured event and in respect of Loss of Home Contents Benefit, no later than 24 hours of the Insured Person becoming aware of the insured event.

16.2.5 In the case of Travel Delay Benefit:

Official documentation such as delay confirmation report from the airline/public common carrier including date, time, duration of the delay, ticket for original itinerary, and ticket for the alternative means of transport travel to the planned destination.

16.2.6 In the case of Personal Liability Benefit:

IMMEDIATE written notification to the Company of the possible claim indicating the nature and circumstances of the incident or event, together with a confirmation that no admission of liability has been made and that no settlement has been made or agreed to without the prior knowledge and written consent of the Company. Full documentation, including copies of the summons, court documents, solicitors' and other legal correspondence, etc., must be submitted to the Company at the earliest opportunity.

16.2.7 In the case of Rental Vehicle Excess Protection Benefit

Rental agreement with detailed terms and conditions between the Insured Person and the rental vehicle company; original receipts issued by the rental vehicle company evidencing the rental charges, certified copy of the Police Report, documents of the claim which the Insured Person has lodged with the insurer of the rental vehicle, and written report from the rental vehicle company confirming that the Insured Person is liable to pay the excess.

16.2.8 In the case of Hole-in-One Benefit

Original "Hole-in-One" certificate authenticated by a recognised golf course and original receipts of the bar expenses incurred issued by such recognised golf course.

Additional document relevant to the claim may be required upon the Company's request.

PART VI – GENERAL EXCLUSIONS

Unless specifically provided otherwise, this Policy does not cover losses arising out of :

1. War, invasion, act of foreign enemies, hostilities or war like operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising military or usurped power.
2. Any Act of Terrorism except for Sections 1 – Medical Expenses Benefit, Section 2 – Overseas Hospital or Quarantine Cash Allowance, Section 3 – Worldwide Emergency Assistance Services, Section 4 – Personal Accident Benefit, Section 9 – Travel Delay Benefit, Section 10 – Cancellation Charges Benefit and Section 11 – Curtailment of Trip Benefit.
3. Any loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with nuclear energy or radioactivity of any kind including but not limited to any of the following regardless of any other cause or event contributing concurrently or in any other sequence to the loss:
 - (a) ionising radiations from or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel;
 - (b) the radioactive, toxic, explosive or other hazardous or contaminating properties of any nuclear installation, reactor or other nuclear assembly or nuclear component thereof; or

- (c) any weapon or other device employing atomic or nuclear fission and/or fusion or other like reaction or radioactive force or matter.

This exclusion does not apply to loss, damage, cost or expenses directly or indirectly caused by, resulting from or in connection with nuclear energy or radioactivity of any kind, which is in turn caused by Act of Terrorism with respect to benefits under Sections 1 – Medical Expenses Benefit, 2 – Overseas Hospital or Quarantine Cash Allowance, 3 – Worldwide Emergency Assistance Services, 4 – Personal Accident Benefit, 9 – Travel Delay Benefit, 10 – Cancellation Charges Benefit and 11 – Curtailment of Trip Benefit.

4. Pre-Existing Condition, congenital or hereditary conditions.
5. Suicide, attempted suicide or intentional self-inflicted bodily injuries, insanity, abortion, miscarriage, assigned complications, pregnancy, child-birth, venereal diseases, the use of alcohol or drugs other than those prescribed by a Medical Practitioner, dental treatment unless resulting from accidental Bodily Injury to sound and natural teeth.
6. Accidents whilst engaging in:
 - (i) Riding or driving in any kind of motor racing, competition, engaging in a professional capacity in any sport where an Insured Person would or could earn income or remuneration from engaging in such sport as a source of income; or participation in any of Extreme Sports and Sporting Activities;
 - (ii) Mountaineering, or undertaking Expeditions or similar activities;
 - (iii) Trekking at an altitude of over 5,000 meters above sea-level;
 - (iv) diving to a depth greater than 30 meters below sea-level;
 - (v) other hazardous pursuits or occupations.
7. Any activity or involvement of the Insured Person in the air unless such Insured Person is at the relevant time (i) travelling as a fare paying passenger on a regular scheduled flight or licensed chartered aircraft operated by a recognised airline, or (ii) participating in such activity where the maneuver or navigation of such activity is responsible by another person who is adequately licensed for guiding such activity and the provider of such activity must be authorized by the relevant local authority.
8. The Insured Person being a crew member or an operator of any air carrier; Accident whilst engaging in any kind of manual labour work; engaging in offshore activities including commercial diving, oil rigging, mining or aerial photography; handling of explosives, performing as an actor/actress, being a site worker, tour guide or tour escort; or armed force services.
9. Losses which are indirect and consequential in nature except herein provided.
10. Cyber Risks Exclusion
Property damage covered under this Policy shall mean physical damage to the substance of property.
Physical damage to the substance of property shall not include damage to data or software, in particular any detrimental change in data, software or computer programs that is caused by a deletion, a corruption or a deformation of the original structure. Consequently the following are excluded from this Policy :
 - (a) Loss of or damage to data or software, in particular any detrimental change in data, software or computer programs that is caused by a deletion, a corruption or a deformation of the original structure, and any business interruption losses resulting from such loss or damage. Notwithstanding this exclusion, loss of damage to data or software which is the direct consequence of insured physical damage to the substance of property shall be covered.
 - (b) Loss or damage resulting from an impairment in the function, availability, range of use or accessibility of data, software or computer programs, and any business interruption losses resulting from such loss or damage.
11. Sanction Exclusion
Notwithstanding anything to the contrary in this Policy the following shall apply:
If, by virtue of any law or regulation which is applicable to the Company at the inception of this Policy or becomes applicable at any time thereafter, providing coverage to the Insured Person is or would be unlawful because it breaches any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom, United States of America or The People's Republic of China/Hong Kong, that the Company shall provide no coverage or benefit or have no liability whatsoever to the Insured Person, to the extent that it would be in breach of such law or regulation.
12. COVID-19/Pandemic Exclusion
Notwithstanding any provision to the contrary, this insurance excludes any loss, damage, liability, expense, fines, penalties or any other amount directly or indirectly caused by, in connection with, or in any way involving or arising out of any of the following – including any fear or threat thereof, whether actual or perceived :
 - Coronavirus (COVID-19) including any mutation or variation thereof (not applicable to Policy Benefits – Sections 1, 2, 3, 10 and 11); or
 - Pandemic or epidemic, as declared as such by the World Health Organization or any governmental authority.

PART VII – ONGOING DUTY OF DISCLOSURE

If the Insured Person suffers a new medical or dental event or the Insured Person's general state of health deteriorates after this Policy is issued, but before the departure date, the Insured Person must contact the Company, otherwise the consequences of the change in health may not be covered under the Policy once the Journey commences. Under a Family Plan, the Service Subscriber and/or his/her spouse shall be responsible for informing the Company of any such new medical or dental event or deterioration of the general state of health regarding the dependent child(ren) insured under this Policy as Insured Person(s).

In this circumstance, the Company reserves the right to review the cover granted including withdrawing or amending cover previously approved for the Journey. If the Company applies new cover restrictions and the new restrictions imposed by the Company prevents the Insured Person from undertaking the planned Journey, then the Insured Person will have the right to lodge a claim under Part III – Benefits Section 10 (Cancellation Charges Benefit).

PART VIII – PERSONAL INFORMATION COLLECTION STATEMENT ("PICS")

Please scan the following QR code for review of Bolttech Insurance (Hong Kong) Company Limited's (the "Company") PICS. You can also request a copy of the PICS by calling the Company's Customer Service Hotline at 2603 9435.



English

TravelCare 全年旅遊保險 (Club Care)

保單持有人與保特保險 (香港) 有限公司同意：

本保單文件、保單承保表及本保單的任何批註應一併閱讀，並構成一份合約。

已填妥並交回本公司的投保申請文件、投保書及聲明為本合約的依據，並視為已納入作本保單的一部份。

本保單在保單持有人已全數繳交載列於保單承保表的保費及本公司已核准其投保申請的情況下生效。

本公司將在本保單的上限、條款、條件及不保事項的規限下提供保險保障。

受保人或提出索償的任何其他人士須妥為遵守本保單有關須予作出或遵守的任何事宜的條款、條件、不保事項及批註；且投保申請文件、投保書及聲明內容均屬真實，乃本公司承擔任何賠償責任的先決條件。

24 小時全球緊急支援服務

全球緊急支援服務由我們所委任的服務機構提供。

香港熱線：(852) 2456 5400

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第一部份 一般定義

以下釋義適用於本保單、保單承保表或本保單隨附的任何後續批註內出現的下列詞語：

意外指因暴力、外在及可見手段而引致並且在完全超出受保人所能控制的範圍下發生的事件。

恐怖主義活動指由任何人士或團體（不論單獨行事或代表或與任何組織或政府共同行事）所採取的一項行動，包括但不限於使用武力或暴力及／或以之作為威脅，以達到政治、宗教、意識形態或類似目的，包括意圖影響任何政府及／或令公眾人士或其中任何部份人士感到恐慌。

身體傷害指 (i) 因意外導致，(ii) 僅由任何其他原因單獨導致，及 (iii) (a) 在意外發生之日起計 12 個曆月內導致死亡，或 (b) 需要接受醫藥及／或手術治療的任何身體傷害。

中醫師指根據《中醫藥條例》（香港法例第 549 章）於香港中醫藥管理委員會正式註冊的中醫師，惟不包括受保人、保單持有人、保險中介人或保單持有人及／或受保人的僱主、僱員、直系親屬或業務夥伴。

緊密業務夥伴指於受保人的業務佔有重大股份的業務夥伴。

公司指保特保險（香港）有限公司。

強制隔離指於醫院或其他由當地政府要求的特定地點進行的強制隔離，但不包括政府要求的（i）強制家居隔離或（ii）酒店檢疫等居住場所隔離。為免生疑問，自我隔離或在家中或任何居住場所隔離均不在此釋義範圍內。

住院指按醫生建議使住院病人留院最少連續 24 小時接受治療後才可出院。

2019 冠狀病毒病指由一種名為嚴重急性呼吸綜合症冠狀病毒 2 的新型冠狀病毒引起的疾病。2019 冠狀病毒病的診斷必須獲得由香港或當地政府認可機構所發出的相關檢測報告支持（快速抗原測試或任何形式的自檢均不被接受作為有效的診斷證明）。

指定服務計劃指保單持有人提供給服務計劃申請者的為期 12 個月、24 個月或 36 個月的服務計劃合約。

合資格費用就醫療費用而言，指就本保單承保範圍內的身體傷害或疾病所需，並經醫生建議認為需要的服務所支付的費用，但不得超過該項服務合理慣常的收費。無論如何，合資格費用必須有正式書面收據支持，並且在任何情況下都不得超過實際支付費用。

探險是指任何旅程涉及前往高風險、交通不便及／或荒涼的地點，包括但不限於在一個國家的海岸附近的私人獨木舟旅行或前往一個未經探索或地圖未標明且一般交通不便的國家領土或地區的旅行，或為科學、研究或政治目的前往該等地點的旅行或前往南極洲或類似的偏遠荒涼的地點的旅行。探險並不是指在前面給出的例子以外，只要由獲認可的導遊公司提供、開放予公眾參與且不設限制（一般健康狀況或合適性警告除外）的跋涉及旅行，但前提始終是您在導遊公司的合資格導遊及／或指導員的指引及監督下行動。

極限運動及體育活動是指其性質存有高度的危險性（即涉及高度專門技術、超乎正常的體力運用、使用專門工具或裝備等）的任何運動或體育活動，包括但不限於衝巨浪；冬季活動例如運動雪橇滑雪、有舵雪橇滑雪、雪橇或滑雪板跳躍或特技表演；單車、機動車、飛行器或船舶速度測試或特技表演；潛水至超過海平面以下 30 米的深度；獨木舟激流；跳懸崖；馬術障礙賽；馬球和特技表演。除非該運動是開放予公眾參與、不設限制（高度或一般健康狀況或合適性警告除外）並由獲認可的當地導遊公司／活動提供者提供的一般旅遊活動，但前提是您在開展該旅遊活動的導遊公司或活動提供者的合資格導遊及／或指導員的指引及監督下行動，方可獲保障。由另一位已持牌帶領有關活動的人士負責操縱或航行，及提供活動的舉辦者亦已獲當地有關當局授權的活動，亦可獲保障。

家居財物指受保人的所有家具、陳設品、家庭電器、家居及個人用品，包括受保人或其親屬租用的家庭電器。

香港指中華人民共和國香港特別行政區。

醫院指根據當地法律正式成立及註冊為醫院，為患病及受傷人士提供收費留院護理及治療服務的機構，並須設有下列

各項：

- (a) 診斷及進行手術的設施；
- (b) 由註冊護士提供 24 小時護理服務；及
- (c) 有醫生監督，

並非一般診所、戒酒或戒毒中心、護理院、寧養或療養院，護老院或類似機構。

直系親屬指受保人的合法配偶、子女（親生或領養）、兄弟姊妹、父母、配偶的父母、祖父母、孫子女、法定監護人、繼父母或繼子女。

傳染病指世界衛生組織發出大流行警戒或宣布該傳染病成為國際關注的突發公共衛生事件及/或已實施強制隔離的任何類型傳染病。

受保人指服務計劃申請者，或在家庭計劃保障下的配偶及/或受撫養子女，在保險期內與保單持有人簽訂指定服務計劃，到香港以外地方旅行的受保旅程中被保障的人士：

- (a) 服務計劃申請者/配偶：年齡必需介乎於18歲至70歲；
- (b) 受撫養子女：年齡必需為18歲以下，並在受保旅程期間由父或母任何一方陪同。

旅程指受保人於保險期內從常住國啟程的任何旅程。每段旅程由受保人於常住國辦妥離境手續時開始，並在受保人於該旅程後返回常住國及辦妥入境手續時結束。

失聰指雙耳完全對所有聲音永久失聰並無法復原，即：

如果 a 分貝—損失聽力至 500 赫茲	如果 b 分貝—損失聽力至 1,000 赫茲
如果 c 分貝—損失聽力至 2,000 赫茲	如果 d 分貝—損失聽力至 4,000 赫茲
(a+b+c+d) 的 1/6 高於 80 分貝。	

肢體殘缺指手腕或足踝關節或以上部份的肢體完全永久從身體分離並無法復原。

失明指完全、永久喪失視力並無法復原。

喪失說話能力指無法發出說話所需的四種語音中的任何三種，如唇音、齒齶音、顎音及軟顎音，或聲帶完全喪失功能，或大腦控制說話部份的中樞受損，導致失語症。

醫生僅指具有西醫學位資格，並獲得其執業當地頒發的正式執照或合法授權以西醫從業員的身份提供醫療及 / 或外科診療服務的人士，但不包括受保人、保單持有人、保險中介人、保單持有人及 / 或受保人的僱主、僱員、直系親屬或業務夥伴。

登山是指通常必需使用特定設備上山或下山的活動，該等設備包括但不限於冰爪、鎬、錨、螺釘、登山扣及登山繩或頂繩錨固設備。

自然災害是指造成財產損毀，破壞交通或公用設備或危及人類的大規模極端天氣或環境事故，包括但不限於：地震，山火，洪水，颶風或火山爆發。

保險期指保單承保表內所列的本保單生效期限。對每位受保險人再進一步說明，保險期為於本保單的保險期內成功登記的首日起計12個月內。

- (a) 若服務訂閱者訂購了12個月的指定服務計劃，則保險期限將在12個月後屆滿；
- (b) 若服務訂閱者訂購了24個月的指定服務計劃，則保險期限在第一個12個月期限屆滿後，將延續第二個12個月期限；以保單持有人確認該計劃之有效性為準；
- (c) 若服務訂閱者訂購了36個月的指定服務計劃，則保險期限在第一個12個月期限屆滿後，將延續第二個12個月的期限；及於第二個12個月期限屆滿後的第三個12個月期限；以保單持有人確認該計劃之有效性為準。

永久完全傷殘指因發生意外而使受保人完全傷殘，導致受保人至少連續52個星期不能從事其正常工作，並在上述時段結束時經本公司認可的醫生證明該情況將對受保人造成永久及完全傷殘，導致其未能從事任何可獲得報酬的工作，且該狀況的康復希望渺茫。

個人財物指屬於受保人或受保人家屬一般穿著或攜帶的個人物件。

保單指保單持有人、受保人與本公司之間的整份保單合約，包括本保單文件、由保單持有人或受保人或其授權代表所提交的投保申請文件、投保書、聲明及 / 或保險受益人委任表、保障項目表、根據本保單發出的保單承保表及其任何批註。

保單持有人指香港移動通訊有限公司及其關聯公司。

投保前已存在的傷患指受保人於保險期開始前已存在的任何病痛、疾病或身體狀況，而受保人及 / 或保單持有人當時已知悉或應已合理知悉出現的病徵或徵兆。

處方藥指為本保單承保範圍內的治療而經由醫生處方並於外科手術中使用或由註冊藥劑師配發的任何藥物或藥品。

主要住所指服務計劃申請者於香港佔用作為私人住所並為其唯一永久居住地的樓宇。

公共交通工具指所有利用機器推動並持相關機構發出的牌照以固定路線並定期安排接載付費乘客的公共交通工具（包括但不限於任何巴士、旅遊巴士、渡輪、氣墊船、水翼船、火車、電車或地下鐵路），以及由正式持牌定期運載購票乘客的航空公司提供及經營並僅往來既定商用機場，但並不包括承辦商、特許或私營的運輸工具，以及任何其他主要為乘客提供觀光服務及消遣活動的運輸工具（例如：郵輪）。

嚴重身體傷害或嚴重疾病指須接受醫生治療的身體傷害或疾病，並由醫生證明受保人有生命危險及不適合旅遊或繼續其原本的旅程。當「嚴重身體傷害或嚴重疾病」適用於受保人的直系親屬時，即表示醫生證實該等傷害或疾病構成生命危險，並導致受保人終止或取消其原本的旅程。

服務計劃申請者指在香港簽訂保單持有人所提供的指定服務計劃的人士。

疾病指身體出現異於正常健康狀態的情況。

旅遊警示指香港政府根據外遊警示 (OTA) 制度發佈的警示。旅遊警示包括三個級別：「黃色警示」、「紅色警示」及「黑色警示」。本公司可基於香港政府發佈的外遊警示制度修訂隨時更改「旅遊警示」的釋義。

跋涉是指通過山地、國家公園或保護區過夜的遠足、徒步、跋涉或類似活動，通常通過徒步進行，但可以通過其他方式，包括但不限於動物騎乘或越野車輛，其中涉及到在野外過夜，包括露營地、棚屋或小屋。為澄清起見，這並不是指登山。

常住國指受保人展開任何旅程的地點，而本保單在該地區以外生效。除非本公司在保單承保表中另行明確認可，否則常住國將被視為香港。

全球緊急支援服務指由本公司所委任的服務機構提供的醫療支援或相關服務。

第二部份 全年旅遊保險條款及細則

當保特保險(香港)有限公司（以下稱為「本公司」）收受保費後，即依據主保單保單號碼PL-TRV-001025903/00/00或批註內的定義、不受保項目、限制、條款和細則，同意承保名字列於保單承保表內之受保人對在受保日期內出發和發生的旅程之損失作出賠償。

保單承保表、本保險條款及細則及隨後之保單批註共同構成保險合約（以下稱為「保單」）。請緊記細閱及列印保單承保表及本旅遊保險條款及條件，並留意「第五部份 — 一般條文」及「第六部份 — 主要不保項目」兩條規定。

保單承保表列示了保障表，您會找到重要的資訊，例如所投保之計劃類型、保障期和有關支援熱線的詳情。

本保單主要是為常規的假期旅遊及商務旅遊而設計及生效。本保單提供多種權益。然而，若干情況不受保障。

本保單提供部份延伸之2019冠狀病毒保障。有關詳情請參考閣下之保單承保表及第三部份保障章節中的第 1.1.4、2.1.2、2.1.3、3B、10.3及11.6 項。有關保障詳情及適用之不保事項（如有），請參閱保單。

該等限制、不保事項和條件載於本保險條款及細則。然而，我們謹請您注意以下重要事項：

- (a) 本保單保障持有有效香港身份證並在香港購買保單的人士的香港居民之海外旅程。
- (b) 本保單不承保若干活動或旅行，包括但不限於：
 - (i) 極限運動及體育活動或參加體育競賽；
 - (ii) 探險、5000公尺以上跋涉、登山；
 - (iii) 體力勞動工作；或
 - (iv) 宣道或人道主義旅行。
- (c) 我們不承擔於受制裁國家招致的任何損失。詳情請參閱本文件第六部份主要不保項目第11段。
- (d) 中文版本的保單僅供參考。若中文版本與英文版的條款和細則有任何歧異，則以英文版本為準。

第三部份 保障(第1 – 15項)

保障表 – 優質計劃

除另有說明及在任何部份所列任何分項賠償上限的規限下，就每名受保人在每段旅程作出的最高賠償額載列於下文的保障表內：

項	承保範圍概述及分項賠償上限	最高保障金額 (港元) 每名受保人的每段旅程	
		計劃 A	計劃 B
1	醫療費用保障 (非因 2019 冠狀病毒病所引致) (覆診費用的分項賠償上限為 100,000 港元) 醫療費用 (因 2019 冠狀病毒病所引致)	1,000,000 500,000	500,000 100,000
2	海外住院或隔離現金津貼 a) 海外住院現金津貼 (非因 2019 冠狀病毒病所引致) (每日 500 港元) b) 住院現金津貼 (因 2019 冠狀病毒病所引致) i) 於海外時 (每日 1,000 港元) ii) 返抵香港 (每日 500 港元) c) 強制隔離現金津貼 (非因 2019 冠狀病毒病所引致) (每日 500 港元)	10,000 14,000 7,000 10,000	5,000 14,000 7,000 5,000
3	(A) 全球緊急支援服務 (非因 2019 冠狀病毒病所引致) a) 住院及住院按金保證 b) 緊急醫療撤離及遣返 c) 遺體 / 骨灰運送 d) 近親探望及酒店住宿 e) 送返未成年子女 f) 復康住宿費用 g) 緊急啟程返回常住國 h) 額外交通及住宿費用	40,000 全部開支 40,000 40,000 40,000 40,000 40,000 40,000	40,000 全部開支 15,000 15,000 15,000 15,000 15,000 15,000

	(B) 全球緊急醫療撤離及遣返 (因 2019 冠狀病毒病所引致)	100,000	100,000
4	個人意外保障 a) 意外死亡及永久完全傷殘 • 年齡介乎於18歲至70歲 • 18 歲以下及70歲以上 b) 嚴重燒傷 c) 信用卡欠款結餘保障	1,000,000 300,000 200,000 30,000	500,000 300,000 100,000 15,000
5	行李保障 a) 每件 / 每對 / 每套的分項賠償上限 b) 遺失手提電話的分項賠償上限	20,000 3,000 2,500	3,000 3,000 2,000
6	行李延誤保障	1,500	500
7	個人錢財保障	3,000	2,000
8	旅遊證件遺失保障 (每日交通及住宿費分項賠償上限)	20,000 2,000	5,000 1,000
9	旅程延誤保障 a) 現金津貼 (受保人可就每 6 個完整小時的延誤獲得 300 港元賠償) 或 b) 改動行程引致的額外交通費用	2,500 10,000	600 2,500
10	旅程取消保障 a) 非因 2019 冠狀病毒病所引致 b) 因 2019 冠狀病毒病所引致	30,000 5,000	5,000 5,000
11	縮短旅程保障 a) 非因 2019 冠狀病毒病所引致 b) 因 2019 冠狀病毒病所引致	30,000 5,000	5,000 5,000
12	家居爆竊保障	30,000	10,000
13	個人責任保障	3,000,000	1,500,000
14	租賃車輛自負額保障	5,000	3,000
15	高爾夫球「一桿入洞」保障	3,000	1,000

受保人 (或其任何受保人的合法代表) 依據本保單可獲得的所有賠償將受本保單及保單承保表所載保障項表所列的最高賠償上限及分項賠償上限規限，並須遵守本保單內的所有條款、條件及不保事項。

1. 第 1 項 – 醫療費用保障

1.1 如受保人在任何旅程期間因於常住國以外地區身體受傷或患病而接受治療，本公司將賠償以下各項合理產生的合資格費用：

1.1.1 住院、手術、救護車及輔助醫療、診斷測試、向醫生求診及處方藥；

1.1.2 住院的合資格費用以每日 3,000 港元的住院房間及膳食費用的分項賠償上限為限。就本項而言，「住院房間及膳食費用」指住院費用，包括住院的受保人合理地引致的膳食及一般護理服務費用。若未提供各項收費明細，則所有醫院費用 (包括受保人在醫院登記為住院病人以接受本項承保的治療而合理地引致的住院房間及膳食費

用以及專業費用)的每日賠償額以每日 10,000 港元為限；及

- 1.1.3 受保人結束任何旅程後返回常住國起計 90 日內覆診所引致的合資格費用賠償額最高為 100,000 港元。此項保障亦包括受保人於香港接受中醫師治療所產生及由該中醫師發出收據正本證明的合資格費用，每日每次上限為 200 港元，總分項賠償上限為 3,000 港元，覆診分項賠償上限最高為 100,000 港元。

- 1.1.4 醫療費用 (因 2019 冠狀病毒病所引致)

若受保人因 2019 冠狀病毒病引致身體傷害或疾病而需在海外住院，本公司將按需要及合理的費用、收費或開支作出賠償：

- a) 醫療、外科、醫院、療養院或護理服務以及緊急救護車服務；和 / 或
- b) 緊急牙科治療以緩解突發疼痛或對健全和天然牙齒的損傷進行治療，前提是此類損傷僅由身體傷害引起 (不包括更換假牙和牙冠)。

此保障項目僅在本保單生效期間支付一次。本公司支付此保障後，該承保項目將立即終止，本保單不會再就 2019 冠狀病毒病所引致的費用作出賠償。

前提是，上述醫療費用須屬正常、慣常及合理性質；並須提交詳細的開支賬目、收據正本及由醫生 (或如為上文第 1.1.3 條的情況，則為中醫師) 提供的醫療報告連同詳細診斷資料以作證明，且 (除第 1.1.3 條外) 於常住國以外的地方產生。

本公司根據本項應付的最高賠償額應不超過保障表所列的上限。

- 1.2 本公司不負責賠償：

- 1.2.1 任何有關入住醫院的單人或私家病房或聘用特別或私家看護的額外費用；輪椅、拐杖或任何其他類似儀器的費用；
- 1.2.2 任何有關整容手術、視力或屈光矯正器材、隱形眼鏡、眼鏡或助聽器、義肢及醫療器材、裝置及附件的費用；
- 1.2.3 任何有關精神病、心理失常、精神或神經紊亂 (包括任何相關的原發 / 初期徵兆或病徵) 的費用；
- 1.2.4 任何有關因以手術、機械或化學避孕方法所引致的任何及所有情況及與不育有關的任何及所有情況或治療的費用；
- 1.2.5 任何有關非由任何醫生建議的治療或服務；例行身體或健康檢查 (並非因受保人需治療或診斷懷疑於本保單承保的任何旅程期間及於保險期內發生或引致的任何受保障的身體傷害或疾病而須作出的例行身體或健康檢查) 的費用；
- 1.2.6 任何有關有違醫生勸告的旅行或為接受醫療或手術治療或因任何先前發生的事故、疾病或投保前已存在的傷患休養而作出旅程的費用。

本公司於本保單的賠償責任將在受保人於旅程期間遭受身體傷害或患病之日起計一個曆年終止，本公司將不會對該一年期間屆滿後產生的任何醫療及相關費用負責。

2. 第 2 項 – 海外住院或隔離現金津貼保障

- 2.1.1 海外住院現金津貼 (非因 2019 冠狀病毒病所引致)

如受保人於任何旅程期間住院，本公司將就每個完整天數 (即連續 24 小時期間) 支付現金津貼 500 港元，以保障表所列的最高賠償額為限。

- 2.1.2 住院現金津貼 (因 2019 冠狀病毒病所引致) (於海外時)

如受保人於旅程期間因 2019 冠狀病毒病住院，本公司將就每個完整天數 (即連續 24 小時期間) 支付現金津貼 1,000 港元，上限為 14 天。

此保障項目僅在本保單生效期間支付一次。本公司支付此保障後，該承保項目將立即終止，本保單不會再就 2019 冠狀病毒病所引致的費用作出賠償。

- 2.1.3 住院現金津貼 (因 2019 冠狀病毒病所引致) (返抵香港)

如受保人於回港後 14 天內因 2019 冠狀病毒病住院，本公司將就每個完整天數 (即連續 24 小時期間) 支付現金津貼 500 港元，上限為 14 天。

此保障項目僅在本保單生效期間支付一次。本公司支付此保障後，該承保項目將立即終止，本保單不會再就 2019 冠狀病毒病所引致的費用作出賠償。

2.2 因傳染病而強制隔離的現金津貼 (非因 2019 冠狀病毒病所引致)

如受保人因疑似感染或確診患上傳染病而於任何旅程期間或於返回常住國後 7 日內被強制隔離，本公司將就每個完整天數(即連續24小時期間)支付現金津貼500 港元，以保障表所列的最高賠償額為限。

2.3 本公司將不負責賠償：

2.3.1 任何家居隔離；

2.3.2 若受保人已計劃前往的旅程目的地於旅程開始之日或之前已被當地政府及 / 或世界衛生組織宣佈為受感染區域 (不適用於上述第 2.1.2 及 2.1.3 條款) ；

2.3.3 若住院或強制隔離期少於連續 24 小時；

2.3.4 若因本保單不承保的傷患狀況而住院；

2.3.5 若住院並非由任何醫生建議或為進行例行身體或健康檢查，而非治療或診斷懷疑於本保單承保的旅程期間及於保險期內發生或引致的任何受保障的身體傷害或疾病。

3. 全球緊急支援服務

第 3A 項 – 全球緊急支援服務 (非因 2019 冠狀病毒病所引致)

下述全球緊急支援服務由本公司所委任的服務機構提供。所有服務均由委任的服務機構和公司根據受保人的健康狀況自行決定。

3.1 服務範圍

委任的服務機構應在本項所界定的條款及條件規限下，向離開常住國旅行，每段旅程的持續時間不超過連續 90 日，並致電委任的服務機構的任何受保人提供下列服務。

(a) 醫療援助

(i) 電話醫療諮詢

委任的服務機構將安排透過電話向受保人提供醫療建議。

(ii) 住院及住院按金保證

如受保人的身體狀況嚴重而須住院治療，委任的服務機構將協助受保人住院。若住院治療獲委任的服務機構正式核准，且受保人無法支付所需的住院按金，則委任的服務機構將代表受保人擔保或提供最高 40,000 港元的住院按金。委任的服務機構必須首先從受保人的信用卡或以受保人家庭的資金獲得付款，委任的服務機構才會提供此類擔保。委任的服務機構概不負責支付任何第三方費用，該項費用須由受保人獨自承擔。

(iii) 運送所需藥物

委任的服務機構將安排向受保人運送受保人護理及 / 或治療所需而在受保人所在地無法提供的必要藥物、藥品及醫療用品。運送該等藥物、藥品及醫療用品須遵守當地適用的法律及法規。委任的服務機構將不會支付該等藥物、藥品及醫療用品的費用及與此有關的任何運送費用，該項費用須由受保人獨自承擔。

(iv) 緊急醫療撤離及遣返

為將處於嚴重傷患狀況的受保人轉移至可提供適當醫療護理服務的最就近醫院，委任的服務機構可安排提供空中及 / 或地面交通工具、運送途中的醫療護理、通訊及所需的所有常用輔助服務。委任的服務機構將安排提供適當的通訊及語言翻譯支援、流動醫療器材及醫療護送人員。

委任的服務機構保留絕對權利決定受保人的傷患狀況是否嚴重至需要緊急醫療撤離。委任的服務機構進一步保留權利，在考慮到委任的服務機構在相關時候所獲悉的所有事實及情況評估後，決定將受保人撤離至何地及撤離所採取的交通工具或方法。

委任的服務機構將安排受保人在緊急醫療撤離及在常住國以外地區入院治療後返回常住國。

委任的服務機構保留權利，在考慮委任的服務機構在相關時候所獲悉的所有事實及情況評估後，決定送返受保

人的交通工具或方法。

(v) 遺體 / 骨灰運送

委任的服務機構可安排運送不幸身故的投保人的遺體或骨灰至常住國，或應投保人家屬的要求，安排在身故當地安葬，但須遵守任何政府的法規。

(vi) 近親探望及酒店住宿

若投保人獨自旅遊，而須在常住國以外地區留院超過連續三 (3) 日，委任的服務機構將就投保人兩名近親前往該地照料投保人安排各一張往返經濟客位機票，及酒店住宿每人每日最多 1,200 港元，最多連續五 (5) 日，但須事先獲得委任的服務機構的批准及委任的服務機構基於醫療及陪伴理由而判斷投保人需要近親照料。

(vii) 送返未成年子女

若投保人因突發疾病、遇上意外或緊急醫療撤離而導致隨行未成年子女 (18 歲及以下及未婚子女) 無人照料，委任的服務機構將安排一張單程經濟客位機票供其未成年子女返回常住國。委任的服務機構將應要求安排護送人員隨行。

(viii) 復康住宿費用

委任的服務機構將為因發生事故而須緊急醫療撤離、緊急醫療遣返或住院的投保人安排必需及無法避免的額外酒店住宿及支付有關費用，每日最多為 1,200 港元，最多連續五 (5) 日。

(ix) 緊急啟程返回常住國

如居於投保人常住國的近親在投保人於海外旅遊 (移民除外) 時身故，以致投保人須緊急返回其常住國，委任的服務機構將安排提供一張往返經濟客位機票，以便投保人返回常住國。

(x) 額外交通及住宿費用

在投保人遇上嚴重傷患狀況而須接受治療後，委任的服務機構將安排提供一張單程經濟客位機票，以便投保人返回其常住國。委任的服務機構亦將為其同行家屬或同行夥伴 (亦由本保單承保) 安排投保人在常住國以外地區住院期間的住宿。

上述 [(i) 項] 服務純粹提供轉介安排。委任的服務機構概不負責支付任何第三方費用，該項費用須由投保人獨自承擔。

上述 [(ii) 及 (iii) 項] 服務乃按具體情況收費。委任的服務機構必須首先從投保人的信用卡或以投保人家屬的資金獲得付款，委任的服務機構才會提供財務擔保。委任的服務機構概不負責支付任何第三方費用，該項費用須由投保人獨自承擔。

上述 [(iv) 及 (x) 項] 服務受第六部份主要不保事項的規限。

(b) 旅遊支援

(i) 提供防疫及簽證資料

委任的服務機構應提供有關外國簽證及接種疫苗要求的資訊，該等要求不時在世界衛生組織刊物「接種疫苗證書要求與國際旅行健康建議」(防疫之用) 及「國際旅行信息指南 ABC」(簽證之用) 的最新版本內列明。投保人可隨時獲得該等資料，無論投保人是否在旅程中或發生緊急狀況。委任的服務機構應告知索取該等資料的投保人，委任的服務機構僅傳達某份文件上所載的規定，且委任的服務機構應告知該文件的名稱。

(ii) 行李遺失援助

如投保人在常住國以外旅遊時遺失行李，委任的服務機構可向投保人介紹適當的機構以提供協助。

(iii) 護照遺失援助

如投保人在常住國以外旅遊時遺失護照，委任的服務機構可向投保人介紹適當的機構以提供協助。

(iv) 法律轉介

如投保人要求及如可提供，委任的服務機構將向投保人提供所介紹的律師及執業律師的名稱、地址、電話號碼及辦公時間。委任的服務機構將不會向投保人提供任何法律意見。

儘管委任的服務機構應作出有關轉介，惟無法保障服務供應商的質素，服務供應商的最終選擇由投保人決定。然而，委任的服務機構將小心審慎地挑選服務供應商。

(v) 緊急旅遊服務支援

委任的服務機構應協助在海外旅遊的受保人在緊急情況下預訂機票或酒店住宿。

上述 [(i) 至 (v) 項] 服務純粹提供轉介安排。委任的服務機構概不負責支付任何第三方費用，該項費用須由受保人獨自承擔。

3.2 合理預防措施

受保人應採取一切合理的預防措施，以避免及盡量減少任何意外、傷害、死亡或費用。

3.3 請求協助

如需支援，在自行採取合理行動前，受保人或其代表應致電委任的服務機構支援中心，其聯絡號碼載列如下：

香港：(852) 2456 5400

並應說明：

- 受保人的姓名、保單編號、身份證或護照號碼；及
- 委任的服務機構可找到受保人或其代表的地點及電話號碼；及
- 意外的簡要描述及尋求協助的性質。

3.4 檢查

委任的服務機構有權及可能透過其醫療代表，在其合理要求的任何時間，盡量為受保人進行身體檢查。

3.5 承諾

3.5.1 委任的服務機構承諾適當小心審慎地委任及 / 或轉介任何服務供應商，以協助受保人。委任的服務機構不會就任何服務供應商提供的任何意見承擔責任，而受保人不得就委任的服務機構轉介或聯絡服務供應商或由此產生的其他決定向委任的服務機構提出任何申索。

3.5.2 受保人承諾不會就其因服務所蒙受的任何間接或後果性損失向委任的服務機構或本公司提出任何申索。

3.6 不可抗力

委任的服務機構概不會就因天災、罷工或超出其控制範圍的其他情況（包括但不限於飛行狀況或致使提供服務被當地法律、監管或監督機構禁止或延遲的情況）而導致未能及 / 或延誤提供服務承擔責任。

第 3B 項 – 全球緊急醫療撤離及遣返 (因 2019 冠狀病毒病所引致)

3.7 本公司將為患有嚴重身體傷害 / 嚴重疾病導致危及生命的受保人，在醫療緊急情況（例如受保人死亡或嚴重損傷）及在本公司委任的服務機構建議和批准的情況下，立即撤離至最最近有適當醫療服務的醫院（不一定是香港）接受緊急醫療，並支付有關空中或地面運輸、運輸過程中的醫療護理、通訊等費用。

如受保人在常住國家以外的地方出差住院，並因醫療需要將受保人接回香港繼續治療，本公司委任的服務機構將根據主治醫生的建議提供緊急醫療遣返服務醫生。本公司將支付合理且必要的遣返費用，包括陪同受保人的 1 名合資格醫療人員的合理交通費用。

此保障項目僅在本保單生效期間支付一次。本公司支付此保障後，該承保項目將立即終止，本保單不會再就 2019 冠狀病毒病所引致的費用作出賠償。

4. 第 4 項 – 個人意外保障

4.1 如受保人在任何旅程期間遇上意外，而於意外發生之日後 12 個月內身故或遭受保障表所列的任何永久完全傷殘，本公司將按照下文所載賠償表所載的百分比就本保障作出賠償，金額以保障表所載的最高賠償額為上限。前提是：

4.1.1 不論在任何情況下，就年齡 18 歲以下及 70 歲以上的受保人而言，本項的最高賠償額不超過 300,000 港元。

4.1.2 不論受保人於任何旅程中發生受保事故的次數多寡，根據本項應付的總賠償額不超過人身意外保障的最高賠償額的 100%。

每名受保人每段旅程賠償表 受保事故	最高保障百分比*
1 死亡	100%
2 永久完全傷殘	100%
3 完全及永久喪失單目或雙目視力	100%
4 肢體殘缺 – 肢體完全從身體分離而完全喪失或完全及永久喪失以下身體部份的活動能力	
(a) 單肢或雙肢	100%
(b) 單手或雙手	100%
(c) 手肘以上的手臂	100%
(d) 手肘或手肘以下的手臂	100%
(e) 膝蓋以上的腿部	100%
(f) 膝蓋或以下腿部	100%
5 失明 – 完全及永久喪失	
(a) 單目的視力 (對光線感應除外)	50%
(b) 單目的晶狀體	50%
6 完全及永久喪失	
(a) 雙耳聽覺	75%
(b) 單耳聽覺	15%
(c) 說話能力	50%

* 按受保人的保單承保表的保障表所載人身意外保障下適用的賠償上限百分比計算。

4.2 就本項所產生的任何及一切事故應付的最高賠償額將不超過保障表所列適用於各受保人的最高賠償額。

4.3 如受保人身故而按本項提出索償，若受保人並無直系親屬，則受益人應為該受保人的遺產繼承人，惟在保單承保表簽發時已列明有指定受益人則除外。

4.4 嚴重燒傷

若受保人於任何旅程期間因意外蒙受三級程度燒傷（即深入至皮下組織的損傷，且燒傷部份佔其頭部表面面積達 5% 或以上或其身體總表面面積達 10% 或以上），本公司將就此保障作出賠償，惟燒傷的評估須由醫生所簽發並詳列診斷結果的醫療報告證明。有關保障只能就任何旅程期間中的每次意外事故索償一次。

4.5 信用卡欠款結餘保障

如受保人因意外身故而根據本保單可獲得賠償，本公司亦會賠償受保人於意外發生之日記入信用卡的未繳款項，最多為保障表所列的最高賠償額。然而，本公司將不會賠償就未繳款項須支付的利息或財務費用。

就本項而言，如受保人於任何旅程期間失蹤、其乘搭的飛機或其他陸上或海上交通工具沉沒或墜毀，並於該失蹤、沉沒或墜毀日期後一年內未能找到受保人的屍首，則將認定受保人在失蹤、沉沒或墜毀時已意外身故。

5. 第 5 項 – 行李保障

本公司將賠償受保人於任何旅程中攜帶的行李或個人財物因盜竊、搶劫、爆竊、意外或運送者運送時不小心處理而直接導致的遺失、破損或毀壞，行李保障賠償以保障表所列的最高賠償額為限。

如受保人於旅程中攜帶的手提電話於旅程中遭盜竊、搶劫或爆竊而遺失，本公司亦將賠償更換手提電話的費用，以保障表所列的最高賠償額為限。

前提是：

- 5.1 所有損失必須於事發後 24 小時內向事發地點的警方、承運方或任何須負責的第三方報告。
- 5.2 受保人須對受保財物提供慣常合理的保護以確保安全，包括小心看管隨身行李或個人財物及不會放置在無人看管的公眾地方。所有行李在收到時均須進行檢查，若受保人發現有任何毀壞、遺失或損毀，須即時作出以下通知：
 - 5.2.1 若遭盜竊、遺失或第三者故意損毀，通知警方並從損失發生當地的警方處獲取書面文件。
 - 5.2.2 若在運送期間遺失或損毀，通知承運方並獲取一份正式「行李事故報告」副本。
- 5.3 本公司就每件 / 每對或每套物品的賠償上限為 3,000 港元 (相機機身、鏡頭及配件將被視為一套。)
- 5.4 如一套物品中的任何一件遺失或受損，該物品遺失或受損的賠償額將依該配件於原套物品總值中所佔的合理及公平比例計算，且該套物品並不會因此而被視為完全損毀。
- 5.5 在第 5.6 條規限下，本公司將可選擇支付本項下的更換或維修費用，但本公司的最大賠償額不超過行李保障的賠償上限。
- 5.6 就與破損或損毀有關的索償而言，索償人須向本公司提供被損毀的財物作為實物證據，以供本公司審查，費用由索償人承擔。
- 5.7 手提電話遺失必須於事發後 24 小時內向遺失物件當地的警方、承運方或任何須負責的第三方報告。
- 5.8 不保事項：

根據本項規定，本公司不對以下任何情況負責：

- 5.8.1 因遭海關或其他有關部門延遲、充公、扣留或檢查而引致的損失或損毀。
- 5.8.2 現金、鈔票、電子貨幣 (包括信用卡、八達通卡等)、可流通票據、債券或證券、信用卡及其他付款工具或任何類型的文件、護照、簽證、機票以及交通、住宿或任何其他旅遊代用券或優惠券的損失。
- 5.8.3 傳呼機、手提便攜式通訊器材 (手提電話除外)、電腦器材 (手提電腦及平板電腦除外)、軟件及週邊設備的損失或破損，或手提電話出現破損 (包括電子手帳電話、智能手提電話或擁有通訊功能的類似儀器及其他配件)。
- 5.8.4 所有易碎或容易損壞的物品、瓷器、玻璃物品、陶具、藝術品、已鑲嵌或未經鑲嵌的寶石或半寶石或食品的破損或損毀。
- 5.8.5 自然損耗、蠹患、害蟲或固有的瑕疵、機械、電力或電子故障或搗亂、清洗、維修或翻新過程、空氣或氣候轉變引致的損失或損毀，或價值本身的折舊，本公司可全權酌情決定其折舊率。
- 5.8.6 商品或樣品的損失或損毀。
- 5.8.7 遺漏或在無人看管下放置在公共交通工具上或公共地方的任何行李損失。
- 5.8.8 另行郵寄或運送的行李損失或損毀。
- 5.8.9 由其他公司指定承保或由第三方追回 / 修復的任何財物或私人物件。
- 5.8.10 珠寶及手錶損失，除非是由受保人隨身攜帶的行李內或存放於酒店保管箱內的珠寶或手錶。
- 5.8.11 受保人於其手提電話賬戶中所產生的任何費用，包括合約解除費用或收費、通話費或利息。
- 5.8.12 受保人無法提供購買手提電話的收據正本 (列明遺失或被盜手提電話的購買日期、所付價款、型號及款式) 而產生的損失。
- 5.8.13 任何無法解釋的損失或神秘失蹤。

6. 第 6 項 – 行李延誤保障

若因行李延誤或誤送，導致受保人在抵達海外目的地後至少 6 小時後仍暫時未能取回行李，本公司將賠償受保人支付取回行李而產生的額外費用或緊急購買日常必需品或基本衣物的費用，金額以保障表所載適用於每位受保人的最高賠償額為上限。

前提是：

- 6.1 該延誤須有航空公司的正式「行李事故報告」或旅行社的書面函件證實。
- 6.2 延誤並非因遭受海關或其他執法部門扣留或充公所引致。
- 6.3 受保人須提供文件 (包括購買單據正本) 證明開支明細。

- 6.4 若同一損失已根據本保單第三部份保障章節中第 5 項 (行李保障) 作出索償, 則不得根據本項作出索償。
- 6.5 本公司將不負責賠償受保人在返回常住國或到達最終目的地後發生的任何損失。

7. 第 7 項 – 個人錢財保障

如受保人於任何旅程中因盜竊、搶劫或爆竊而直接導致其個人錢財 (即鈔票、現金或旅行支票) 有所損失, 本公司就此作出的賠償不超過保障表所載的上限。

前提是:

- 7.1 若受保人遭受任何現金、鈔票或旅遊支票的損失, 須於損失發生後 24 小時內報告予損失事發當地的警方及相關的旅行支票發行機構分行。受保人須自費向本公司提供所有形式的證據, 如警方報告、收據等。
- 7.2 本公司將不負責賠償因任何第三方的錯誤或遺漏、貨幣匯率的浮動、貶值或任何政府機構充公而引致的個人錢財損失或不足。
- 7.3 在本項下, 如受保人在無人看管下將個人錢財放置於公共地方而導致損失, 本公司將不負責賠償。

8. 第 8 項 – 旅遊證件遺失保障

若受保人於任何旅程中因盜竊、搶劫、爆竊或意外遺失而直接導致遺失其護照、機票及旅遊證件, 本公司將賠償: (a) 在該旅程中有關簽發機構就補領護照、機票及 / 或旅遊證件而收取的費用; 及 / 或 (b) 受保人在發現遺失旅遊證件後須即時前往最就近簽發機構辦理補領遺失旅遊證件而引致的合理額外酒店住宿費及旅費, 以及因有關旅遊證件遺失導致原定回程票無效而涉及返回常住國的費用 (以經濟客位為限), 金額以保障表所載的最高賠償金額為上限。

不保事項:

根據本項規定, 本公司不對以下任何情況負責:

- 8.1 若受保人未於發現上文所述的損失後 24 小時內或於可行的情況下盡快向警方報案並獲取一份有關警方報告副本。
- 8.2 若受保人在無人看管的情況下將護照、機票或旅遊證件放置在公共地方以致遺失。
- 8.3 除經濟客位以外的機票費用賠償。
- 8.4 遺失與是次旅程無關的任何護照、機票及旅遊證件。
- 8.5 遺失的護照、機票及旅遊證件是因被政府機構、海關或警方充公或扣留所致。

9. 第 9 項 – 旅程延誤保障

若因惡劣天氣情況、自然災害、機場關閉、工業行動、劫持、公共交通工具出現技術或其他機械故障, 導致受保人原定安排或計劃乘坐的公共交通工具在任何旅程中延誤, 且該等故障導致有關公共交通工具的取消或延誤完全並非受保人所能控制, 導致受保人原定旅程延誤, 則本公司應就該保障作出賠償。

- (a) 現金津貼 - 本公司將就首段超過連續 6 個小時的延誤賠償最多 300 港元及就後續每連續 6 小時的期間賠償最多 300 港元, 金額以保障表所列的最高賠償額為上限。
- (b) 改動行程導致的額外交通費用 - 由原定啟程時間起計, 旅程延誤長達連續 6 小時或以上, 而該旅程延誤為受保人必須轉乘與最初選擇的公共交通工具的客位等級相同的替代交通工具的直接原因, 本公司將賠償受保人因此所引致的合理及無可避免的額外公共交通費用, 金額以保障表所列的最高賠償額為限。

本項的索償僅可根據 (a) 或 (b) 項作出申請。

前提是:

- 9.1 自原定旅程開始時間起至改乘由該承運方提供的最早可啟程的替代交通工具的開出時間為止, 延誤時間必須超過連續 6 小時。
- 9.2 延誤並非因受保人未能預先確認其預訂或未於啟程前指定的時間辦理登機手續而引致。
- 9.3 已確認的預訂是在影響該承運方的工業行動前作出。
- 9.4 根據本項提出的任何索償, 須提交由該航空公司 / 承運方發出的正式文件, 列明延誤原因、日期、時間及持續期間, 以茲證明。

- 9.5 本公司概不就於保單承保表發出日期時已存在的罷工或工業行動所引致的索償提供保障。
- 9.6 延誤並非因受保人拒絕或未有乘搭由有關公共交通工具機構所提供的最早可啟程的替代交通工具所引致。
- 9.7 如受保人乘搭連續轉接航班，各延誤期間不得累積計算，且延誤的直接原因必須為承保範圍下的承保風險。

10. 第 10 項 – 旅程取消保障

- 10.1 如受保人直接因下列任何原因而要在任何旅程展開前取消旅程，其已預先付費的機票、住宿或旅行團的訂金或任何部份費用被沒收，而有關旅行社、航空公司或任何服務供應商並不退回該金額，本公司將向受保人作出賠償，金額以保障表所列的最高賠償額為限：—
- 10.1.1 受保人身故、遭遇嚴重身體傷害或嚴重疾病。
- 10.1.2 (a) 受保人的直系親屬或緊密業務夥伴；或 (b) 由與受保人相同的保單承保的受保人同行夥伴身故、遭遇嚴重身體傷害或嚴重疾病。
- 10.1.3 受保人須出任審判證人、陪審員或遭強制性隔離。
- 10.1.4 在出發日期前十天內，受保人於香港的主要住所因受到火災或水災嚴重損毀而需要受保人繼續在場。
- 10.1.5 於該旅程預定出發日期前 7 日內，已計劃前往的該旅程目的地天氣情況惡劣、發生天然災害、突然爆發廣泛性傳染病 / 涉及公共交通工具的工業行動、發生暴動或內亂，香港政府保安局發佈黑色或紅色外遊警示，以致受保人不能展開該旅程。
- 10.2 本項應付的保障賠償受下列條件規限：
- 10.2.1 就本項 10.1.1 及 10.1.2 所載列的任何事件而言，該事件須於 (i) 保險期起始日後至少 24 小時及 (ii) 相關旅程開始之日前 30 日內發生。
- 10.2.2 就本項 10.1.3 所載列的任何事件而言，有關的合規命令或通知須於 (i) 保險期起始日後至少 24 小時及 (ii) 相關旅程開始之日前 30 日內向受保人頒佈或發出。
- 10.2.3 就本項 10.1.5 所載列的外遊警示而言，黑色警示將支付100%的賠償，紅色警示將支付50%的賠償，而黃色警示將不會支付賠償。
- 10.2.4 受保人須把未曾使用的機票正本交由本公司處置。
- 10.2.5 本部份的保障一經索償，本公司將無須作出其他賠償，而本保單下的所有保障亦即終止。
- 10.2.6 該保障不承保因於相關旅程開始之日已知存在的黑色警示或紅色警示、醫療或身體狀況或其他影響受保人的情況所產生的任何損失。
- 10.3 因 2019 冠狀病毒病所引致的旅程取消保障
- 如受保人在旅程開始前 30 日內被確診感染 2019 冠狀病毒病而要取消旅程，本公司將向受保人賠償已提前支付但無法收回的費用，金額以保障表所列的最高賠償額為限。
- 此保障項目僅在本保單生效期間支付一次。本公司支付此保障後，該承保項目將立即終止，本保單不會再就 2019 冠狀病毒病所引致的費用作出賠償。

11. 第 11 項 – 縮短旅程保障

於任何旅程開始後，如下列任何情況直接引致該旅程受到阻礙，因而受保人在未能預見及無可避免的情況下必須縮短該旅程，本公司會就該旅程各完整的受阻日數按比例向受保人賠償 (i) 就作廢及不獲有關旅行社、航空公司或任何機構退回的交通或住宿安排中已預先付費但未使用部份的損失及 (ii) 受保人乘搭經濟客位的公共交通工具返回常住國所需的合理額外旅費，金額以保障表所列的最高賠償額為上限：

- 11.1 受保人或其直系親屬、同樣受相同保單承保的同行夥伴或緊密業務夥伴身故、遭遇嚴重身體傷害或嚴重疾病；
- 11.2 受保人以付費乘客身份乘搭的航機或交通工具、或旅行社安排的任何機器推動的車輛或船隻遭劫持；
- 11.3 已計劃前往的該旅程目的地天氣情況惡劣、發生自然災害、突然爆發廣泛性傳染病 / 涉及公共交通工具的工業行動、發生暴動或內亂，而致受保人不能繼續該旅程或香港政府保安局就計劃前往的該旅程目的地發佈黑色或紅色外遊警示。

前提是：

- 11.4 就本項11.3所載列的外遊警示而言，黑色警示將支付100%的賠償，紅色警示將支付50%的賠償，而黃色警示將不會支付賠償。
- 11.5 任何有關原因並非因於相關旅程開始之日已知存在的黑色警示或紅色警示、醫療或身體狀況或影響受保人、其直系親屬或受保人的同行夥伴或緊密業務夥伴的其他情況所產生。
- 11.6 因 2019 冠狀病毒病所引致的縮短旅程保障
如受保人因被確診感染 2019 冠狀病毒病而無法按原定行程返回香港，本公司將賠償因返回香港而產生的額外費用，金額以保障表所列的最高賠償額為限。
此保障項目僅在本保單生效期間支付一次。本公司支付此保障後，該承保項目將立即終止，本保單不會再就 2019 冠狀病毒病所引致的費用作出賠償。

12. 第 12 項 – 家居爆竊保障

- 12.1 如於常住國的主要住所任何旅程期間空置，遭人爆竊並伴隨使用強制及暴力手段闖入或離開，導致家居財物損失或損壞，本公司將賠償重置或修理其家居財物的費用，金額以保障表所列的最高賠償額為上限。受保人在知悉家居財物因爆竊而遭損失或損壞後必須即時通知警方。
- 12.2 本公司不負責賠償：
- (a) 因使用任何鑰匙或複製的鑰匙進入主要住所而導致的損失，無論該鑰匙是否屬於受保人。
 - (b) 因受保人或其親屬的魯莽或故意行為而引致或導致的損失。
 - (c) 現金、鈔票、硬幣、旅行支票、可流通票據、債券或證券、信用卡及其他付款工具或任何類型的文件，護照、簽證、機票以及交通、住宿或任何其他旅遊代用券或優惠券、手提電話、隱形眼鏡、動物及汽車（包括配件）、摩托車、輪船、任何其他交通工具及電腦系統記錄的損失或損壞。

13. 第 13 項 – 個人責任保障

如受保人在任何旅程期間因受保人的疏忽直接導致第三方身體意外受傷或第三方財物意外遺失或損壞，而須向第三方負上法律責任（包括合理的法律費用及開支），本公司將作出賠償，金額以保障表所載的最高賠償額為限。

本公司概不負責賠償以下任何責任，損失或索償：(i) 應由任何其他保險公司或第三方支付者；或 (ii) 涉及屬受保人擁有、由其看管、保管或受其控制的財物損失或損毀；或 (iii) 受保人或其授權代表已承認責任或達成任何協議或和解，而事前並無知會本公司及取得本公司的書面同意；或 (iv) 由下列各項直接或間接引起：

- 13.1 僱主責任、合約責任或對受保人直系親屬的責任。
- 13.2 屬受保人擁有、由其託管、看管、保管或受其控制的財物或動物。
- 13.3 任何蓄意、惡意、非法或故意的行為。
- 13.4 從事商業貿易或職業。
- 13.5 擁有或佔用土地或建築物（僅佔用作任何臨時居所則除外）。
- 13.6 擁有、佔用、租用、使用或操作車輛、飛機或船隻。
- 13.7 任何刑事訴訟涉及的法律費用、罰款、處罰或懲罰性損害賠償。
- 13.8 精神錯亂、使用任何藥物（經醫生處方者除外，但不包括毒癮），或醉酒或使用武器。
- 13.9 污染，因突發、非故意和意外事件引起則除外。
- 13.10 石棉或含有任何形式或數量石棉的任何物料。

此項保障不適用於並非由香港具司法管轄權的法院發送或從該處獲得初審判決的任何判決。

14. 第 14 項 – 租賃車輛自負額保障

若受保人以租賃協議租用私家車或汽車屋，並於任何旅程期間發生汽車意外或車輛在停泊時遭損毀或被盜竊，本公司將就該租用車輛承擔的汽車保險自負額或扣除額作出保障賠償，金額以保障表所載的最高賠償額為限，惟受保人：

- 14.1 自持牌車輛租賃公司租用該車輛，並為該租用車輛購買一份汽車保險，於租賃期內為該租用車輛提供保障；
- 14.2 為租賃協議中的指定駕駛者；

- 14.3 於汽車意外發生時駕駛租用車輛；
- 14.4 於其駕駛租用車輛的國家持有有效駕駛執照；
- 14.5 已履行租賃協議及適用汽車保險的所有條款及細則。本公司不負責賠償；
- 14.6 於租賃期內，受保人在酒精或藥物影響下操控該租用車輛而引致的任何情況；
- 14.7 於租賃期內，受保人違法或非法使用租用車輛；
- 14.8 除租用車輛損失或損毀外的任何其他責任。

為免生疑，本項所述的租用車輛或私家車指除所有類別的商用車輛、電單車及任何九座位以上的車輛以外的任何汽車。

15. 第 15 項 – 高爾夫球「一桿入洞」保障

如受保人於任何旅程期間在任何認可的高爾夫球場內進行比賽或友誼賽時成功創下「一桿入洞」的佳績，本公司將支付受保人在該高爾夫球場內一次酒吧消費的費用，金額以保障表所列的最高賠償額為限。認可的高爾夫球場指在任何當地政府登記以提供高爾夫球運動或高爾夫球練習的俱樂部或機構所經營的高爾夫球場。

如受保人為職業高爾夫球手，本公司不負責支付該費用。

第四部份 一般條件

- 1. 在投保本保險時，受保人必須適宜旅遊。本保單不承保於生效日期之前已存在或已宣布的任何情況，或任何已先存在狀況。
- 2. 本保單一經發出，所有保險資料，包括受保人、出發日期、屆滿日期及目的地，均屬已確定的最終確定，不會接受任何變更。
- 3. 本保單僅供前往海外的香港居民申請及持有有效香港身份證並在香港購買保單的人士。有關之賠償僅支付至並存入香港金融管理局授權的香港持牌銀行戶口，並僅以港元結算。
- 4. 本保單或可續期或延長。然而，如果在任何受保旅程期間出現任何超出受保人控制範圍的情況，使該受保旅程超過連續九十（90）天，本公司將自動免費最多延長連續十（10）天，讓受保人享有合理需要的時間去完成受保旅程。
- 5. 倘若受保人就同一旅程擁有多於一（1）份由本公司承保的全面性自願旅遊保險保單時，本公司將按最大賠償額的旅遊保險保單支付賠償。
- 6. 任何個別資料如未有披露或出現欺詐性失實陳述，將令本保單自初始起失效。

第五部份 一般條文

- 1. 本保單須於香港簽發，並受香港法例規管及據此詮釋，且服從香港法院的專屬管轄權。
- 2. 倘本公司拒絕本保單的任何索償，且受保人並未於拒絕之日起計十二個月內就該索償提出任何法律訴訟，則該索償就所有目的而言將被視為已不可撤銷地放棄，並不得在日後重新提出索償。
- 3. 於本保單內，如文義允許，表示男性意義的詞語涵蓋女性，表示單數意義的詞語涵蓋複數，反之亦然。
- 4. 有關標題僅為方便而設，並不影響對本保單的闡釋。
- 5. 本保單可由任何一方提前三十（30）個曆日以書面通知另一方取消。該書面通知的發出日期將被視為本保單的終止日。自本保單終止日起計，保單持有人的新客戶將不能加入本保單。本保單的終止，並不影響在此終止日期之前已為服務計劃申請者所提供的保險。本保單一旦被取消，本公司將不提供任何保費退款。
- 6. 若本公司根據本保單作出任何賠償，則本公司取代受保人所享有對任何第三方的所有追討及賠償的權利，且所追回的全部金額將歸本公司所有。
- 7. 除非經本公司安排及批准，否則本保單將不提供任何直接支賬。

8. 本保單下投保人的年齡限制為最小6星期，最大70 歲。所有未滿18歲的兒童須由一名受同一保單保障的家長陪同。受保人一旦年滿 71 歲，本公司將不會提供任何保障。
9. 本公司根據本保單支付的賠償以保障表所載的金額為限。然而，有時受保人花費的總金額可能會超出根據本保單應付的總賠償額。受保人須承擔所有該等超額費用。
10. 只有受保人於保險期內開展且持續時間不超過連續 90 日的旅程才會獲得本保單承保。
11. 除另有指定外，只有保單持有人及 / 或服務計劃申請者才可行使本保單規定的所有權利及特權。若服務計劃申請者未能遵守第五部份一般條文第16段索償程序或調查，或會導致索償被拒絕；若任何索償屬欺詐或蓄意誇大，或作出任何虛假聲明或陳述，本保單將會作廢，且本公司亦不會支付任何索償。
12. 本保單的賠償責任以本保單及保單承保表中所述各項的賠償責任上限為限。
13. 本公司就所有索償的最大賠償責任，在假設並無本保單的情況下，不得超過任何其他保單或暫保單就該等索償提供保障賠償的比例。若受保人就同一意外受保多於一份由本公司簽發的旅行保險單，則本公司對該意外的賠償最高限額將根據對該意外提供最高賠償金額的保單計算，並以該保單的最高保障金額和每個分項的賠償上限為限。
14. 保證。受保人保證，就其所悉及所信，受保人概無違反醫生的建議或為接受治療而外遊，且受保人明白本保單概不承保任何投保前已存在、現有、不時復發或先天性疾病的治療。受保人進一步保證，其並不知悉有任何通過媒體或政府機構所發出的旅遊警告，指在保險期之前所計劃前往的旅程目的地已知悉為屬高風險的國家。
15. 任何不是本保單某一方的人士或實體，不能根據《合約（第三者 權利）條例》（香港法例第 623 章）強制執行本保單的任何條款。
16. 索償程序
 - 16.1 任何索償須於引致索償的任何事故發生後三十一日內通知本公司，如為人身責任保障項下的索償，則必須在可行情況下盡快且無論如何不遲於引致該索償的事故發生後 14 日內以書面方式發出有關通知。所有索償均須連同本公司信納的證據一併提交予本公司，所有證據須應本公司的要求提供，而所需費用由服務計劃申請者或其代表承擔。
 - 16.2 所有索償必須連同全面的證明資料一併提交，包括：
 - 16.2.1 如屬人身意外保障：

醫院及醫生的報告，載列關於身體受傷的性質以及傷殘的程度及期間的詳情；有關的警方報告；若導致死亡，則為死亡證明及相關驗屍報告的副本。
 - 16.2.2 如屬信用卡欠款結餘保障：

信用卡結單、信用卡簽賬的持卡人存根、賬單及 / 或付款收據。
 - 16.2.3 如屬醫療費用保障、全球緊急支援服務、海外住院或隔離現金津貼、旅程取消保障及縮短行程保障：

與索償有關的所有賬單、收據、機票、優惠券、合約或協議，若索償與治療有關，則提交醫生（或如適用，指中醫師）的詳細報告，列明所治療病情的診斷，開始傷殘的日期，以及治療過程概要，包括經處方的藥物及提供的服務。
 - 16.2.4 如屬行李保障、行李延誤保障、個人錢財保障、旅遊證件遺失保障及家居財物損失保障：

所有詳細資料，包括顯示遭遺失及損壞物件的購買日期、價格、型號及款式的收據；當運送過程中遭損失或損毀時，即時向航空公司 / 承運方作出的通知副本及其正式確認書；航空公司 / 公共交通工具經營機構提供的正式文件，如行李事故報告，載明延誤的日期、時間及持續時間；若行李被盜、損失或被第三方故意損毀，則即時向當地警方作出的報告及當地警方書面文件的經核證副本；若家居財物因爆竊而損失或損壞，向受保人主要

住所所在的常住國警方作出的報告(有關報告應於受保人知悉有關損失或損壞後即時(無論如何須於24小時內)作出)及警方的書面文件的經核證副本;若旅行支票損失,向旅行支票發行機構作出的報告的副本及警方報告的經核證副本。

無論如何,向有關航空公司/承運方、發行機構或警方作出的報告不得遲於受保事件發生後24小時內作出,如屬家居財物損失保障,則不得遲於受保人知悉受保事件後24小時內作出。

16.2.5 如屬旅程延誤保障:

航空公司/公共交通工具經營機構發出的正式文件,如延誤確認報告,列明延誤的日期、時間、持續期間、原定行程的機票及前往計劃目的地的替代交通工具的車票。

16.2.6 如屬人身責任保障:

須即時以書面知會本公司可能引致的索償並註明事件或事故的性質及情況,連同一份確認書,確認未有在未經本公司事先確認及書面同意前承認任何責任及達成或同意和解。包括傳票、法庭文件、律師及其他法律信函等副本的全部文件須盡快提交予本公司。

16.2.7 如屬租車自負額保障

受保人與租車公司之間的租賃協議,包含詳細的條款及條件;租車公司發出以證明租車費用的收據正本、警方報告的經核證副本、受保人向其租用的汽車所屬的保險公司提出索償的文件及租車公司發出以證明受保人須負責支付自負額的書面報告。

16.2.8 如屬一桿入洞保障

認可高爾夫球場發出的「一桿入洞」證書正本及由該認可高爾夫球場發出的酒吧消費收據正本。

受保人可能須應本公司要求提供其他與索償有關的文件。

第六部份 主要不保項目

除另行明確規定外,本保單不承保因以下事項導致的損失:

1. 戰爭、侵略、外敵行動、敵對或類似戰爭的行動(不論正式宣戰與否)、內戰、叛亂、革命、起義、內亂升級或擴大至大規模叛變事件、軍事或篡權行動。
2. 任何恐怖主義活動,惟第三部份保障章節中第1項 – 醫療費用保障、第2項 – 海外住院或隔離現金津貼、第3項 – 全球緊急支援服務、第4項 – 個人意外保障、第9項 – 旅程延誤保障、第10項 – 旅程取消保障及第11項 – 縮短旅程保障除外。
3. 由核能或任何類別的放射性物質直接或間接導致、引起或與之有關的任何性質的損失、損害、費用或開支,包括但不限於下列任何類別(不論當中有否任何其他原因或事件同時促使或先後發生而導致損失):
 - (a) 由任何核能燃料或任何核廢料或燃燒核能燃料所造成的電離子輻射或放射性污染;
 - (b) 任何核能裝置、反應堆或其他核能機組或其核能元件的放射性、毒性、爆炸性或其他危險性或污染物質;或
 - (c) 任何使用原子或核裂變及/或聚變或其他類似反應或輻射性能量或物質的武器或其他設備。本不保事項不適用於就第三部份保障章節中第1項 – 醫療費用保障、第2項 – 海外住院或隔離現金津貼、第3項 – 全球緊急支援服務、第4項 – 個人意外保障、第9項 – 旅程延誤保障、第10項 – 旅程取消保障及第11項 – 縮短旅程保障項目下保障範圍而言因恐怖主義活動所造成的核能或任何類型輻射而直接或間接導致、引起或與之有關的損失、損害、費用或開支。
4. 投保前已存在的傷患、先天性及遺傳性疾病。
5. 自殺、企圖自殺、蓄意自殘身體、精神錯亂、墮胎、流產、懷孕及其併發症、分娩、性病、服用酒精或非由醫生處方的藥物、牙齒護理(因意外導致身體傷害而損壞健全的天然牙齒除外)。
6. 參加下列活動而導致的意外:

- (i) 受保人乘坐或駕車輛用作賽車、比賽或任何專業運動，當中受保人會或可以賺取收入或酬金作為收入來源；或受保人參與任何極限運動及體育活動；
 - (ii) 登山或探險或類似活動引致的損失；
 - (iii) 跋涉高於海拔5,000公尺以上地方；
 - (iv) 在逾 30 米水深進行水肺潛水；
 - (v) 其他危險活動或職業。
7. 受保人進行或涉及任何空中活動，除非當時受保人 (i) 是以付費乘客身份乘坐認可航空公司的固定航班或持牌的包機，或 (ii) 參與的活動是由另一位持牌帶領有關活動的人士負責操縱或航行，而該活動的舉辦者亦獲當地有關當局授權。
8. 受保人為任何空中乘載工具的機務人員或操作員；從事任何類型的體力勞動工作時的意外；從事離岸活動，包括商業潛水、油田鑽探、採礦或空中攝影；處理爆炸品、作為演員表演、地盤工人、導遊或領隊；或為軍隊服務。
9. 除本保單規定外，本質上屬間接且後果性的損失。
10. 網絡風險不保事項
- 本保單承保的財物損毀指財物本身的實質損毀。
- 財物本身的實質損毀不包括數據或軟件的損毀，尤其是數據、軟件或電腦程式因原本結構被刪減、受損或變形而產生的任何不良變化。因此，本保單不承保以下事項：
- (a) 數據或軟件的損失或損毀，尤其是數據、軟件或電腦程式因原本結構被刪減、受損或變形而產生的任何不良變化，以及該損失或損毀導致的任何業務中斷損失。儘管有此項不保事項條款規定，但假如數據或軟件的損失或損毀是因財物本身遭到受保障的實質損毀而直接引致，則屬本保單的保障範圍。
 - (b) 因數據、軟件或電腦程式的功能、供應、使用範圍或存取出現缺陷而引致的損失或損毀，以及該損失或損毀導致的任何業務中斷損失。
11. 屬制裁的不保事項
- 不論本保單內是否有相反規定，下列條款將適用：
- 倘根據於本保單開始生效時適用於本公司或於其後任何時間適用於本公司的任何法律或法規，向受保人提供保障或將會因違反聯合國決議下的任何制裁、禁令或限制，或歐盟、英國、美國或中華人民共和國 / 香港的貿易或經濟制裁、法律或法規而屬違法，則本公司無論如何將不會向受保人提供會導致其違反上述法律或法規的保障或利益或承擔任何責任。
12. 2019冠狀病毒病 / 流行病 除外條款
- 即使存在任何相反的規定，本保單不包括因以下任何一項，其中包括任何恐慌或威脅（不論是實際的還是感覺到恐慌或威脅），而直接或間接造成、與之相關，或以任何方式涉及或引起的任何損失、損害、責任、費用、罰金、罰款或任何其他金額：
- 2019冠狀病毒病，包括其任何突變或變異後的病毒（不適用於第三部份保障章節中第1, 2, 3, 10及11項）；或
 - 世界衛生組織或任何政府機關宣布的全球性高傳染性的流行病。

第七部份 持續披露責任

若您或將受本保單保障的人士於本保單簽發後，但在開始您的旅程前出現新的醫療或牙科事件，或您的整體健康狀況惡化，您須聯絡我們，否則一旦您的旅程開始後，您的健康狀況變化造成的後果可能不受本保單保障。在家庭計劃下，服務計劃申請者及/或其配偶應負責將任何此類新的醫療或牙科事件或相關受保人在本保單下受保的受撫養子女的整體健康狀況惡化告知本公司。

在此情況下，我們保留權利以審核已批出的保障，包括撤銷或修訂先前就旅程批出的保障。若我們採用新的保障限制，而我們施加的新限制阻止您展開原定旅程，則您有權根據第三部份保障章節中第10項「旅程取消保障」提出索償。

第八部份 收集個人資料的聲明

請掃描以下二維碼查看保特保險(香港)有限公司(「本公司」)的收集個人資料聲明。您亦可致電本公司的客戶服務熱線 2603 9435 索取收集個人資料聲明副本。



中文

Endorsement 保單批改

Date of Issue 保單發出日期	: 03/04/2025
Policy Number 保單編號	: PL-TRV-001025903/00/07 TravelCare 旅遊保險
Effective Date 生效日期	: 09/04/2025
Renewal/End No. 續保／批單編號	: 0 / 7
Period of Insurance 保單有效期限	: From 13/11/2024 To 12/11/2025 Both Dates Inclusive
The Policyholder 保單持有人	: CSL Mobile Limited and affiliates
Correspondence Address 通訊地址	: 33/F, PCCW Tower, Taikoo Place, 979 King's Road, Quarry Bay, Eastern, Hong Kong
Intermediary 保險中介人	: HKFAPH *HKT FINANCIAL SERVICES (IA) LIMITED

It is hereby noted and agreed that with effect from 9th April 2025, the members of Policyholder's affiliated company "eSmartHealth Limited" (brand name: Dr.Go) will be incorporated under this Policy.

Subsequently, the following definitions under Part I – GENERAL DEFINITIONS will be revised and not as originally stated in the policy.

1. Designated Service Plan means:
 - (a) a service plan contract provided by the Policyholder for a period of 12-month, 24-month or 36-month to the Service Subscriber;
 - (b) selected membership scheme arranged by the Policyholder's affiliated company "eSmartHealth Limited" to the Service Subscriber.
2. Insured Person(s) means :
 - (a) the Service Subscriber under Designated Service Plan (a), or if under Family Plan, includes his/her spouse and/or dependent child(ren), travelling outside Hong Kong on a Journey during the term of the Service Subscriber's Designated Service Plan while such Designated Service Plan is subscribed with the Policyholder during the Period of Insurance:
 - (i) Service Subscriber / Spouse : between 18 and 70 years old;
 - (ii) Dependent child(ren) : below 18 years old and accompanied by either parent during insured Journey.
 - (b) the Service Subscriber under Designated Service Plan (b), who are aged between 18 and 70 years old.
3. Period of Insurance means the period of time specified in the Policy Schedule during which this Policy is effective.
 - (a) For each Insured Person under Designated Service Plan (a), it is further described as a 12-month period from the first day of successful registration during the Period of Insurance of this Policy.
 - (i) If a Service Subscriber is subscribed to a 12-month Designated Service Plan (a), the Period of Insurance shall be expired after 12 months;
 - (ii) If a Service Subscriber is subscribed to a 24-month Designated Service Plan (a), the Period of Insurance shall be extended for the 2nd 12 months' period after the 1st 12 months' period is expired; subject to the confirmation of validity from the Policyholder;
 - (iii) If a Service Subscriber is subscribed to a 36-month Designated Service Plan (a), the Period of Insurance shall be extended for the 2nd 12 months' period after the 1st 12 months' period is expired; and the 3rd 12 months' period after the 2nd 12 months' period is expired; subject to the confirmation of validity from the Policyholder.
 - (b) For each Insured Person under Designated Service Plan (b), it is further described as a 12-month period from the commencement date of the Designated Service Plan.

Subject otherwise to the terms conditions and exclusions of the Policy.

Subject otherwise to the terms conditions and exclusions of the Policy

Signed For And On Behalf Of The Company



Levy collected by the Insurance Authority has been imposed on relevant policy at the applicable rate. The payment received for such levy will be remitted to the Insurance Authority under the prescribed arrangement. For further information, please visit www.bolttechinsurance.hk or contact: +852 2603 9435.

保險業監管局已向相關的保單按規定的徵費率徵收保費徵費。已收取的徵費付款會按規定轉付予保險業監管局，詳情請瀏覽 www.bolttechinsurance.hk 或聯絡 +852 2603 9435。