

Travel Insurance For Independent Schools

Policy Wording

SFS

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THE CONTRACT OF INSURANCE

Thank you for choosing **us** for **your** insurance. This document sets out what is and what is not covered. The schedule shows the sections of cover **you** have chosen and any special terms that apply.

Please check that the cover explained in this document and the schedule meets **your** needs and that **you** understand it. If **you** have any questions about **your** insurance, please contact SFS Group Ltd

This policy has been arranged by SFS Group Ltd on behalf of Novae Syndicates Limited, 21 Lombard Street, London EC3V 9AH under Binding Authority Unique Market Reference Number: RCA03816

This policy, the schedule and any endorsements form a legally binding contract of insurance between you and us and should be read as one document. They set out what is covered and what is not covered, together with the sums insured and any special terms applicable.

This insurance covers death, disability, damage, liability or loss that happens during any period of insurance for which **you** have paid, or agreed to pay the premium. Please read the whole document carefully and keep it in a safe place.

This insurance covers only the insured event that have a **sum insured** inserted against them. When an insured event has not been selected for cover, the words 'Not Covered' are shown next to that insured event on the schedule.

It is important that:

- **You** check that the information contained in the schedule is accurate and that the schedule reflect the coverage sections **you** have requested (see the 'Information you have given us' section);
- **You** notify **us** of any inaccuracies in the information contained in the schedule, or of any changes to that information (see the 'Notifying us of any changes or inaccuracies' section);

- **You** comply with **your** duties in the event of a claim, **your** duties under each section, and **your** duties under the insurance as a whole.

Failure to comply with the above could adversely affect your insurance or any claim you make.

Data Protection Act

You should understand that any information you provided will be processed by us, in compliance with the provisions of the Data Protection Act 1998, for the purpose of providing insurance and handling claims and complaints, if any, which may necessitate providing such information to other parties.

Information you have given us

In deciding to accept this insurance and in setting the terms, **we** have relied on the information **you** have given **us**. **You** must take care when answering any questions **we** ask by ensuring that any information provided is accurate and complete.

If **we** establish that **you** deliberately or recklessly provided **us** with false or misleading information **we** will treat this insurance as if it had never existed and decline all claims. However, if **we** establish that, unknown to **you**, an **insured person** deliberately or recklessly provided false or misleading information **we** will treat this insurance, in so far as it relates to the **insured person** concerned, as if it had never existed and decline all claims relating to such **insured person**.

If **we** establish that **you** carelessly provided **us** with false or misleading information it could adversely affect **your** insurance and any claim. For example, **we** may:

- Treat this insurance as if it had never existed and refuse to pay all claims and return the premium paid. However, if **we** establish that, unknown to you, an **insured person** was careless in providing information then **we** will treat this insurance, in so far as it relates to the **insured person** concerned, as if it had never existed and refuse to pay claims and

THE CONTRACT OF INSURANCE

return a proportion of the paid premium that relates to such **insured person**. **We** will only do this if **we** provided **you** with insurance cover which **we** would not otherwise have offered.

If **we** establish that **you** or an **insured person** was careless in providing **us** with the information **we** have relied upon in accepting this insurance and setting its terms and premium **we** may:

- Amend the terms of **your** insurance. **We** may apply these amended terms as if they were already in place if a claim has been adversely impacted by **you** or an **insured person's** carelessness; or
- Charge **you** more for **your** insurance or reduce the amount **we** pay on a claim in proportion with the premium **you** have paid bears to the premium **we** would have charged **you**; or
- Cancel **your** insurance in accordance with the 'Cancelling cover' section of this policy.

We or SFS Group Ltd will write to **you** if **we**:

- Intend to treat this insurance as if it had never existed; or
- Need to amend the terms of **your** insurance; or
- Require **you** to pay more for **your** insurance.

Notifying us of any changes or inaccuracies

If **you** become aware that the information **you** have given **us** is inaccurate or has changed, **you** must inform SFS Group Ltd as soon as practicable.

When **we** are notified that information **you** previously provided is inaccurate, or of any changes to that information, **we** will tell **you** if this affects **your** insurance. For example, **we** may amend the terms of **your** insurance, require **you** to pay more for **your** insurance or cancel **your** insurance in

accordance with the 'Cancelling cover' section of this policy

Choice of law

You and **we** are free to choose the law applicable to this contract of insurance. Unless specifically agreed to the contrary this contract of insurance will be governed by the laws of England and Wales and subject to the exclusive jurisdiction of the courts of England and Wales

The Contracts (Rights of Third Parties) Act 1999 Clarification Clause

A person who is not a party to this insurance has no right under the Contracts (Rights of Third Parties) Act 1999 to enforce any terms of this insurance but this does not affect any right or remedy of a third party which exists or is available apart from that Act,

Financial Services Compensation Scheme

We are covered by the Financial Services Compensation Scheme. **You** may be entitled to compensation from the Scheme if **we** are unable to meet our obligations to **you** under this insurance. If **you** were entitled to compensation under the Scheme, the level and extent of the compensation would depend on the nature of this insurance. Further information about the Scheme is available from the Financial Services Compensation Scheme (10th Floor, Beaufort House, 15 St. Botolph Street, London, EC3A 7QU) and on their website: www.fscs.org.uk

Novae Syndicates Limited

Novae Syndicates Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Registration Number 204888. The company is the managing agent of Syndicate 2007, subject to the supervision of the Society of Lloyd's.

Signed for and on behalf of Novae Syndicates Limited.

Angus Cerr.

THE POLICY

The Travel Policy for Schools is issued to the Policyholder, the school named on the schedule. It is designed to cover any pupil attending the policyholder's school on **official school trips** worldwide, including the United Kingdom, and

includes journeys to and from school on official school transport. The policy also covers any member of staff or parent accompanying an **official school trip**.

PRE-TRAVEL ADVICE

The European Health Insurance Card (EHIC) is a replacement for the old E111 form.

An EHIC is free. To get an EHIC, apply online at www.dh.gov.uk/travellers or by telephone on 0300 330 1350. You should always leave a photocopy with a friend or relative.

The EHIC entitles UK nationals to free or discounted medical care in 28 European countries. On 1st January 2006, the EHIC replaced the E111.

Essentially, the EHIC entitles **you** to the same state provided healthcare that is generally offered to the locals of the country **you** are visiting. This does not mean **you** will be entitled to the same standard offered by the NHS in the UK. Private treatment is not covered.

The EHIC is no substitute for travel insurance as **you** will not necessarily be covered for all medical costs or for any emergency flights home.

GETTING MEDICAL TREATMENT ABROAD

The UK has reciprocal healthcare agreements with some countries, which enables travellers to receive free or low cost emergency care, and public hospitals should be used where practical. In most countries around the world, medical treatment is carried out in private hospitals or clinics.

In the case of a serious medical emergency, contact must be made with Intana Global who operate a 24 hour emergency service. Full details are shown on page 22.

HEALTH ADVICE FOR TRAVELLERS TO AUSTRALIA

Medicare

www.fco.gov.uk/medicare is the Australian reciprocal healthcare agreement that allows UK citizens to limited subsidised health services for immediately necessary treatment while visiting Australia.

Period of Cover

If **you** are a resident of the **United Kingdom**, **you** are covered for the duration of **your** approved visit to Australia.

Access to Cover

Reciprocal healthcare agreements cover treatment that is immediately necessary. Immediately necessary treatment means any ill health or injury which occurs while **you** are in Australia and requires treatment before **you** return home. There may be some instances where, before **you** can gain access to Medicare benefits in Australia, **you** will need to show written proof from the treating doctor that a particular treatment was immediately necessary.

Students

If **you** are visiting Australia on a student visa, **you** are not covered by Medicare and so this travel insurance cover is important.

Further Information

For more information about Medicare and receiving medical treatment whilst in Australia, visit the Medicare website:
www.medicareaustralia.gov.au/public/register/index.jsp

DEFINITIONS

The following words or phrases have the meanings given below whenever they appear in this policy document.

Accident

A sudden, unexpected, unusual, specific event (including being exposed to weather) which occurs at an identifiable time and place during the **operative time** and during the Period of Insurance

Accident Accumulation Limit

The most **we** will pay under this contract of insurance for an **accident** involving more than one **insured person**. If a claim goes over the limit shown on the schedule, **we** will pay for each **insured person** an amount equal to this limit divided by the number of insured people **you** are claiming for.

Appropriate Authority

Police, Airline, Shipping Company, Holiday Representative, Tour Representative or Hotel Management.

Bodily Injury

Physical injury which is caused by an **accident** (including **illness** directly resulting from that physical injury), which results in an **insured person's** death or disability within 24 months of the date of the **accident**.

Business Trip

Any trip taken to carry out business on **your** behalf, which begins during the period of insurance, and which is scheduled to last for no more than 60 days. This includes non-business activities that are in connection with, or a result of, a **business trip**.

Employees

Any person under a contract of service or apprenticeship with **you**.

Emergency Travel Expenses

The extra transport and accommodation expenses (less any possibly recovery or saving) for an **insured person** and up to 2 people who need to travel to stay with, or escort an ill or injured **insured person**.

Hijack

Illegally seizing, or wrongfully taking control of an aircraft, ship, train or vehicle in which an **insured person** is travelling.

Illness

Sickness or disease, the symptoms of which first appear during the **Period of insurance**.

Insured Trip

Any **Official School Trip** or **Business Trip** for which an **insured person** is covered for, as shown on the schedule.

Insured Person

Any pupil attending the school named as the insured on the schedule and any member of staff or accompanying adult on an **official school trip**.

Legal Expenses

- a. Any fees, expenses and other amounts the **legal representative** reasonably pays or agrees to pay in connection with any claim or legal proceedings. The includes cost and expenses of expert witnesses as well as those **we** have to pay in connection with any claim or legal proceedings.
- b. Any costs an **insured person** has to pay following an award of costs by any court or tribunal and any costs they have to pay following an out-of-court settlement made in connection with any claim or legal proceedings.
- c. Any fees, expenses and any other amounts the **legal representative** reasonably pays or agrees to pay in appealing or resisting an appeal against the judgement of a court tribunal or arbitrator.

Legal Representative

A solicitor, firm of solicitors, or any appropriately qualified person, firm or company, appointed to act for an **insured person** in line with the terms of this insurance.

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Loss of Hearing

Total and permanent loss of hearing.

Loss of Limb

In the case of a leg, total and permanent physical loss of, or loss of use of, a complete foot or leg.

In the case of an arm, total and permanent physical loss of, or loss of use of, a complete arm or hand.

Loss of Sight

The permanent and total loss of sight which **we** will consider as having happened:

- In both eyes, if the **insured person's** name is added to the Register of Blind Persons on the authority of a fully-qualified ophthalmic specialist; or
- In one eye if, after correction, the degree of sight the **insured person** has left in that eye is 3/60 or less on the Snellen scale (meaning the **insured person** can see at 3 feet what the **insured person** should be able to see at 60 feet.

Loss of Speech

Total and permanent loss of speech.

Medical Expenses

The costs arising outside of the **United Kingdom**, or an **insured person's** country of residence, for medical, surgical or other attention or treatment given or prescribed by a **medical practitioner** and all hospital, nursing home and ambulance charges up to the amount shown in the schedule. We will pay up to £2,500 for dental expenses if they result from an emergency or **bodily injury**.

Medical Practitioner

Any suitably qualified medical person other than:

- a. an **insured person**
- b. a member of the **insured person's** immediate family; or
- c. any person under a contract of service, or apprenticeship, or work experience with **you**.

Money

Coins, bank or currency notes, banker's drafts, bills of exchange, letters of credit, luncheon vouchers, credit, debit or charge cards, phone cards, postal or money orders, traveller's cheques, petrol or other coupons with a financial value, or credit vouchers which belong to or are in the custody and control of an **insured person** and are intended for travel, meals, accommodation and personal spending only.

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Official School Trip

Any trip taken as part of an organised party on **your** behalf, which begins during the period of insurance and is scheduled to last for no more than 60 days and for which 75% of the participants are pupils at **your** school. This includes non-school activities when they are incidental to a trip. It also includes journeys to and from school on school buses or buses authorised and chartered by the School.

Operative time

An insured person is covered worldwide, when participating on an **official school trip**, and in respect of Sections A, whilst on journeys to and from school in official school transport.

Cover in respect of an **official school trip** starts from the time the insured person leaves home or school in the United Kingdom, whichever is later, until they

DEFINITIONS

return to their home or school in the United Kingdom, whichever is first.

Permanent Total Disability (Students)

Bodily injury which entirely prevents an **insured person** from attending full-time education for a continuous period of 52 consecutive weeks and which, at the end of that period shows no signs of ever improving and leaves them without the prospect of being able to do any paid work or of being able to support themselves financially.

Permanent Total Disability (Teachers)

Bodily injury which entirely prevents an **insured person** from working in any business or occupation which they are reasonably suited to by training, education or experience, and which after a period of 52 consecutive weeks from the date of disability, shows no signs of ever improving.

Personal Property

Property owned by, or in the custody or control of, an **insured person**.

Policyholder

The school named on the schedule.

Pre-existing Condition

Any condition (or any medical complication directly attributable to that condition or tests or investigations that are ongoing) whether diagnosed or not, for which the **insured person** has sought advice, diagnosis, treatment or counselling or of which they were aware or should have been aware at inception of this contract of insurance or for which they have been treated at any time during the 12 months prior to the inception of this contract of insurance (Inception relates to the start date shown in the current schedule).

Rescue Expenses

The cost of transporting an **insured person**, by any suitable method, to an appropriate medical facility or to their home in the **United Kingdom** or country of residence. **Our** appointed medical advisor and the local attending **medical practitioner** must recommend this action. If the **insured person** dies, **we** will pay the costs of transporting their body or ashes and their personal belongings back to the **United Kingdom** or country of residence. Or, **we** will pay the reasonable expenses, up to £5,000, for a funeral abroad.

Sums insured

The most **we** will pay out, as shown in the schedule.

Terrorism

An act, or acts, of any person or group committed for political, religious, or similar purposes, with the aim of influencing any government or putting the public, or any section of the public, in fear. **Terrorism** can include, but is not limited to, using or threatening to use force or violence. The people who carry out acts of **terrorism** can either be acting alone, or acting on behalf of or in connection with any organisation or government.

United Kingdom

England, Scotland, Wales and Northern Ireland.

We, us, our

Novae Syndicates Limited.

Winter Sports

Includes dry slope skiing, ice skating, ski blading, skiing, mono-skiing, snowboarding, skiing off piste with a local guide or another adult who is insured to ski off piste and in areas that resort management consider to be safe.

You, Your

The **policyholder**.

OPTIONAL BUSINESS TRAVEL EXTENSION

ONLY APPLICABLE IF SHOWN ON YOUR SCHEDULE

An **employee** is covered while on a **business trip** as shown below:

- Outside the **United Kingdom**. Cover starts from the time the **employee** leaves their home or their place of work in the **United Kingdom**, whichever is later, until they return to their home or place of work in the **United Kingdom**, whichever is sooner.
- In the **United Kingdom** that involves an overnight stay or a flight. Cover starts from the time the **employee** leaves their home or place of work, whichever is later, until they return to their home or place of work, whichever is sooner.

SECTION A – PERSONAL ACCIDENT

Cover – What is Covered

If an **insured person** suffers a **bodily injury** on an **official school trip** or on an official school bus during the **operative time**, **we** will pay **you** or, in the case of **medical expenses**, the **insured person**, up to the **sum insured** shown in **your** schedule.

If an **insured person** disappears and it is reasonable to believe that they died as a result of an **accident** covered by this section, **we** will pay the claim as long as **you** sign an agreement that if the **insured person** is later found to be alive, **you** will refund any amount **we** have paid.

If an **insured person** suffers a **bodily injury** during the **operative time** which results in them being continuously unconscious, **we** will pay **you** £200 a week for each full week they are unconscious. **We** will do this for up to 52 weeks from the date the **insured person** first became unconscious.

If **we** pay a claim to a teacher for permanent total disability, **we** will also pay **you** for reasonable expenses **you** have to pay in retraining that **insured person** for another job. **We** will pay up to £500.

Special Conditions

The following conditions apply to Section A – Personal Accident. Please see the General Conditions on Pages 22 & 23, which apply to all of this insurance.

1. **We** will not pay a claim under more than one of items 1 to 4 of Section A on the schedule for any one **insured person** for any one accident.

2. The maximum amount the underwriter will pay in respect of a single accident involving more than one person injured is £2 million.
3. **We** will not pay benefit of more than £7,500 under item 1 of Section A for an **insured person** who is a pupil.

Exclusions – What is not Covered

The following exclusions apply to Section A – Personal Accident.

We will not cover any claim resulting from:

- an **insured person's** death or disability which occurs more than 24 months after the date of the accident;
- any **pre-existing condition** which has not been notified to, and agreed by, **us** in writing;
- flying, other than as a passenger;
- active service in the armed forces of any nation, other than the **United Kingdom's** officially recognised volunteer reserves or a school combined cadet force;
- any sickness or disease not resulting from an accidental **bodily injury**;
- any naturally-occurring condition or process; or
- any gradual cause.

SECTION B – TRAVEL

B1 – MEDICAL, EMERGENCY TRAVEL AND RESCUE EXPENSES

Cover – What Is Covered

If an **insured person** suffers **bodily injury** or **illness** during the **operative time** we will pay **you** or the **insured person** for **medical expenses**, **emergency travel expenses** and **rescue expenses** reasonably charged as a direct result. **We** will pay this for up to 2 years from the date of the injury or **illness** up to the **sum insured** shown in **your** schedule.

We will pay up to £2,500 for dental expenses if they result from an emergency or **bodily injury**.

We will also pay the reasonable expenses, up to £5,000 for a funeral abroad.

Exclusions – What is not Covered

We will not cover any claim resulting from:

- a medical condition which existed during the 12 months before any trip, which **you** book or start, and for which an **insured person** had seen a doctor, received treatment or medication, or been on a treatment waiting list, which has not been notified to **us**, and agreed by **us**, in writing.
- An **insured person** travelling against the advice of a **medical practitioner**, or for the purpose of getting medical treatment, or advice abroad, or after a terminal prognosis has been given.
- an **insured person** being refused travel (or having travelled) against a carrier's policy on carrying passengers, or contrary to the health and safety restrictions of a carrier or any other publicly licensed sea vessel, train or coach, or their handling agents;
- any surgery or treatment that is not medically necessary, cosmetic surgery, reversing cosmetic surgery, or any corrective treatment needed as a result of previous cosmetic surgery;

SECTION B2 – CANCELLING OR CUTTING SHORT AN INSURED TRIP, TRAVEL DELAY OR REPLACEMENT

Cover – What Is Covered

We will pay **you** or an **insured person** up to the **sum insured** shown in the schedule for any irrecoverable payments (whether paid or contracted to be paid) for travel and accommodation and for any reasonable extra payments which have to be made for travel, accommodation and pre-booked excursions, for return to the **United Kingdom** if an **insured trip**, within the **operative time**, has to be cancelled, cut short or rearranged as a result of any of the following reasons:

- the death, accidental **bodily injury, illness**, compulsory quarantine, redundancy (provided that such redundancy qualifies for payment under the United Kingdom's Redundancy Payments Acts), summoning to jury service or witness attendance in a court of the U.K. of an **insured person** or other members of the party, or a close relative (meaning any relative including fiancé(e) whose death, injury or **illness** necessitates the presence in the U.K. of the person concerned) or close business associate of either;
- **hijack**;
- adverse weather conditions making it impossible for an **insured person** to travel to point of departure at commencement of outward journey;
- major damage or burglary at the **insured person's** home or place of business which requires their presence;
- Foreign and Commonwealth Office advising against all but essential travel to a country or specific parts of a country

When pre-booked travel arrangements in connection with an **insured trip** have to be altered after the **insured person** leaves, **we** will pay **you** or them for the extra costs of travel and accommodation which

you or they cannot recover from elsewhere. These costs must be necessary to allow the **insured person** to continue the **insured trip** or return to the **United Kingdom**.

Travel Delay

If the ship, aircraft or train on which the **insured person** is booked to travel to get to their planned destination, is delayed due to strike, industrial action, poor weather conditions or mechanical breakdown, **we** will pay £30 for every hour over six hours the **insured person** is delayed. The most **we** will pay is £150.

Replacement – Teacher/Adults Only

We will pay **you** up to the **sum insured** shown in **your** schedule if an **insured person** has to return home before an **insured trip** is scheduled to finish as a direct result of a claim for cutting short of the trip for one of the reasons shown above.

We will pay for the necessary extra costs of travel and accommodation to return them to the **United Kingdom** or their country of residence. **We** will also pay the extra costs of travel and accommodation which are necessary as a direct result of sending a replacement to take over their duties. However, **we** will not pay for any amount **you** can recover from elsewhere.

In the event of a claim under Section B2 for more than one insured person, the most **we** will pay for any one incident is GBP 50,000

Exclusions – What is not Covered

We will not cover any claim for cancelling or cutting short an **insured trip**, or for replacement, resulting from the following:

- Any **pre-existing condition** unless notified to and agreed in writing by **us**.
- Any claim arising from a set of circumstances known to **you** or an **insured person** at the time of booking of a insured

SECTION B2 – CANCELLING OR CUTTING SHORT AN INSURED TRIP, TRAVEL DELAY OR REPLACEMENT

trip where those circumstances could reasonably have been expected to give rise to a cancelling or cutting short of an **insured trip**, unless notified to and agree in writing by **us**.

- If **you** or an **insured person** decide not to travel or decide not to continue an **insured trip** within the **operative time**.
- An **insured person** being refused travel (or having travelled) against a carrier's policy on carrying passengers, or contrary to the health and safety restrictions of a carrier or any other publicly licensed sea vessel, train or coach, or their handling agents.
- any surgery or treatment that is not medically necessary, cosmetic surgery, reversing cosmetic surgery, or any corrective treatment needed as a result of previous cosmetic surgery;
- If **you** make an **insured person** redundant or end their contract of employment with 31 days of a pre-booked **insured trip** during the **operative time**.
- If **you** make an **insured person** redundant or end employment once an **insured trip**, within the **operative time**, has started.
- If any company (or their agent) acting for **you** or an **insured person**, fails to provide transport or accommodation.
- Any regulations made by any public authority or government.
- A strike, labour dispute, mechanical breakdown or failure of transport (other than disruption of road and rail services by avalanche, snow or flood) unless the departure of a ship, aircraft or train on which the **insured person** is booked to travel is delayed by at least 24 hours. However, **we** will not provide any cover if the delay is due to a strike or industrial action which existed, or the possibility of which existed, and for which advance warning has been given before the **insured trip** was booked.
- Any expenses arising if an **insured trip** within the **operative time**, was, or was due to be, taken against the advice of a medical practitioner or for the purpose of getting medical treatment or advice abroad.
- Any claim for cancellation if an **insured person** fails to check in according to the itinerary supplied unless the failure was due to strike or industrial action.
- The first £40 of any claim or claims arising out of one event for each **insured person**.

SECTION B3 – PERSONAL LIABILITY

Cover – What is Covered

We will pay up to the amount shown in the schedule for any one event or series of events leading to **you** or an **insured person** becoming legally liable to pay claims for **bodily injury** to a person, or loss of or damage to property, which happens during the **operative time**.

Special Conditions

The following condition applies to Section B3 – Personal Liability. Please see the General Conditions on Pages 22 & 23, which applies to all of this insurance.

1. **You** must without delay send **us** every communication about a claim against **you** or an **insured person** (including any writ, summons or claim form) without answering it first. If legal proceedings are under way, **you** must tell **us** and take all reasonable steps to reduce the costs of these proceedings as far as possible. **You**, or an **insured person**, must not admit any liability, or make, arrange, offer or promise any payment without **our** written permission.

Exclusions – What is not Covered

We will not cover any claim resulting from the following:

- **Bodily injury** to any person who is under a contract of employment, service or apprenticeship with **you** if the injury results from their employment by **you**.
- **Bodily injury** to any member of an **insured person's** family or anyone who lives with them.
- Liability arising in any way in connection with the use of any mechanically-propelled vehicle, aircraft or watercraft.
- Any other watercraft above 12 feet.
- Liability arising in connection with an animal belonging to, or in the care, custody or control of, an **insured person**.
- Liability arising in connection with **you** or an **insured person**:
 - i. owning, possessing or occupying land, buildings, property or caravans which cannot be moved, other than living in them temporarily;
 - ii. committing any deliberate, malicious or unlawful act;
 - iii. carrying on any trade, business or profession; or
 - iv. being involved in any racing activity.
- Accidental loss of or damage to property belonging to, held in trust, or in the custody or control of **you** or an **insured person** or any of **your** or their **employees** or any member of their family or household.
- Liability **you** or an **insured person** have under contract, unless **you** or the **insured person** would have had that liability anyway.
- Liability for which payment should be claimed under any other more specific contract of insurance in **your** or an **insured person's** name.
- An **insured person** having a mental disorder or form of dementia.
- Sexually-transmitted diseases, AIDS or any AIDS-related condition.

SECTION B4 – PERSONAL PROPERTY

Cover – What is Covered

If an **insured person** loses, has stolen or damages **personal property** during the **operative time**, **we** will pay **you** or the **insured person** the cost of replacing or repairing the item. **We** will pay up to £1,000 per insured pupil and up to £2,000 per insured teacher or parent.

If the **insured person's personal property** is temporarily lost for more than 12 hours, **we** will pay up to £150 towards the cost of buying essential and reasonable replacement items. If the **personal property** which has been temporarily lost becomes permanently lost and this results in a claim, **we** will take the amount **we** have already paid for the temporary loss from the final payment.

Travel Documents

If, during the **operative time**, an **insured person** loses or damages their passport, animal passport, visa, travel tickets or other essential travel documents, **we** will pay **you** or them for the reasonable and necessary costs of replacing them. **We** will pay up to £1,000.

Exclusions – What is not Covered

We will not cover any claim resulting from the following:

- Any item, article or set valued at more than £1,000 unless **we** specifically agree beforehand.
- Loss due to chipping, scratching or breakage of glass, china or other fragile articles, unless due to fire, theft or accident to the vehicle in which they were being transported.
- Loss or damage caused by:
 - i. moth, vermin, wear and tear, weather or gradual deterioration; or
 - ii. mechanical or electrical failure or breakdown; or
 - iii. any process of cleaning, dyeing, restoring, repairing or alteration.
- A loss not reported to the police or **appropriate authority** as soon as possible and a report obtained.
- Any loss or damage whilst in the custody of a carrier not reported to the carrier as soon as possible and a report obtained.
- Loss or damage caused by delay, detention or confiscation by order of any government or public authority.
- Loss or damage to vehicles, their accessories or spare parts.
- Loss or damage to **personal property** sent as freight or under an airway-bill or bill of lading.
- Loss of **money**, bonds and securities of any kind.
- Loss or damage incurred on the journey to and/or from school.

SECTION B5 – MONEY

Cover – What is Covered

We will pay you or an **insured person** for the loss or theft of money or travel tickets, or financial loss **you** or they suffer on an **insured trip** as the result of fraudulent use of credit, debit, or charge cards during the **operative time**. We will pay up to £250 per pupil or £1,000 per adult.

We will cover foreign currency and traveller's cheques bought for **insured trips** within the **operative time**. The cover for these items will also apply from the time they are collected or 120 hours before departing on the **insured trip** whichever is later, and up to 120 hours after the **insured trip** ends or until deposited or cashed, whichever is sooner.

Exclusions – What is not Covered

We will not cover any claim resulting from:

- any loss of cash worth more than £250 per pupil or £1,000 per adult; or
- loss or theft of a credit card, charge card or cash card unless **you**, or an **insured person**, have kept to all the terms and conditions under which the card was issued; or
- any loss due to confiscation or detention by customs or other officials, mistakes, neglect or loss of value; or
- any loss not reported to the police or **appropriate authority** as soon as possible and a report obtained.

B6 – LEGAL EXPENSES

Cover – What is Covered

We will pay **you**, on behalf of the **insured person**, up to the **sum insured** in the policy schedule for **legal expenses** incurred on their behalf in making a claim for damages against someone else who has caused **bodily injury** or **illness** to the **insured person** during the **operative time** outside the **United Kingdom**.

Special Conditions

The following conditions apply to Section B6 – **Legal Expenses**. Please see the General Conditions on Pages 22 & 23, which applies to all of this insurance.

1. We can appoint a **legal representative** to act on **your** behalf. We will have direct access to the **legal representative** at all times.

2. We may withdraw this cover at any stage and from then on **we** will not pay for any further expenses. We will notify **you** and the **insured person** in writing.

Exclusions – What is not Covered

We will not cover any claim resulting from:

- any **legal expenses** incurred without **our** written permission (which **we** will not unreasonably withhold); or
- any **legal expenses** for action made against **you**, **us** or **our** agents, travel agents, tour operators, or an **insured person's** family.

SECTION B7 – HIJACK, KIDNAP AND DETENTION

Cover – What is Covered

We will pay £250 for each complete day that an insured person is forcibly or illegally held as the result of a detainment, internment hijack or kidnap which starts during the **operative time**.

We will also pay any legal, travel accommodation and related incidental expenses reasonable and necessary incurred to secure the release of an **insured person**.

We will pay up to £25,000.

Exclusions – What is not Covered

We will not cover any claim resulting from:

- paying a ransom; or
- **you** committing any acts which would be considered an offence under English Law.

B8 – WINTER SPORTS

This insurance is extended to include **Winter Sports** for not more than 17 days during the **operative time** and includes the following additional cover:

Cover – What is Covered

Ski Pack

We will pay up to £250 to each **insured person** for any irrecoverable payments paid or contracted to be paid in respect of:-

1. The value of any unused ski pass lost by an **insured person** during the **operative time**..
2. The value of any unused ski pass, ski hire or tuition fees, should an **insured person** suffer **bodily injury** or **illness**, certified by a local **medical practitioner** during the **operative time**.

Piste Closure

We will pay up to £200 for each **insured person** in accordance with the following scale, should all skiing facilities at the pre-booked resort be closed due to lack of snow:-

1. Up To £ 10 per day for reasonable additional travel expenses incurred in reaching an alternative skiing site or,
2. £20 per day for each completed 24 hour period that pre-booked resort skiing facilities

are closed and no alternative skiing site is available.

Avalanche

We will pay up to £150 each **Insured Person** for reasonable additional travel and accommodation expenses incurred, if as a result of avalanche, landslide or landslide, the **Insured Person** is unavoidably delayed from leaving the pre-booked resort.

Exclusions – What is Not Covered

We will not pay for: -

1. Any claims within the **United Kingdom**
2. Any claims arising within Europe in respect of **insured trips** commencing or ending during the period 1st May to 30th November inclusive

Also under this **Winter sports** extension **we** do not cover:-

1. Any claims due to **Winter sports** involving ski and ski-bob racing in international or national events; services or inter services championships, or heats or officially organised practice or training for these events; ski jumping; ice hockey; or the use of skeletons or bob-sleigh.

GENERAL EXCLUSIONS

The following exclusions apply to the whole of this insurance.

This insurance does not cover death, loss, disability or expense caused or contributed to, by, resulting from or in connection with:

1. War, act of foreign enemy (whether war is declared or not), hostilities or any other act of war, civil rebellion, revolution, military or usurped power, **terrorism**, or any similar event.
2. The actual or threatened malicious use of pathogenic or poisonous biological or chemical materials by any person(s) committed for political, religious, ideological or similar purposes with the intention to influence any government and/or to put the public or any section of the public in fear.
3. Any **pre-existing Condition**.

However, if any **insured person** has one (and only one) medical condition and it is listed below, cover is provided. However, should a claim arise from that condition, the **insured person's medical practitioner** must confirm in writing the date of diagnosis, that the condition was stable prior to travel and that there was no foreseeable reason why the **insured person** should need to claim on this policy.

- Acid Reflux
- Acne
- Arthritis
- Asthma (if well controlled – inhalers only)
- Benign lumps
- Blindness
- Cataracts
- Cholesterol (if well controlled)
- Colds/Flu
- Deafness
- Dermatitis
- Diabetes*
- Dyspepsia
- Eczema
- Epilepsy

- Glaucoma
- Gout
- Hay-fever
- Hernia
- Hypertension (high blood pressure)**
- Hyperthyroidism (over-active thyroid)
- Hypothyroidism (under-active thyroid)
- Irritable bowel syndrome
- Meniere's disease
- Migraine
- Varicose veins

Any condition that does not appear in the above list must be referred to **us**, and agreed back in writing if cover is to be provided.

* Diabetes will be covered provided it is well controlled and there are no associated conditions, eg glaucoma or other eye problems, kidney problems or peripheral vascular disease.

** Hypertension will be covered provided there has been no change to an **insured person's** medication in the last six months and they have not been admitted to hospital in the last 12 months.

4. Radioactive contamination from
 - ionising radiation or contamination from any nuclear fuel, or from any nuclear waste arising from burning nuclear fuel; or
 - the radioactive, toxic, explosive or other dangerous effect of any explosive nuclear equipment or part of that equipment.
5. Suicide, attempted suicide or intentional self-injury.
6. An **insured person** taking part in any of the following activities:
 - Base jumping
 - Bungee jumping
 - Deep sea fishing
 - Elephant riding

GENERAL EXCLUSIONS

- Glacier skiing
- Gliding
- Hang gliding
- Heli-skiing
- Hiking or trekking over 4,000 metres
- Hot air ballooning
- Luge
- Microlighting
- Motor boating over 3 miles from shore
- Motorcycling
- Mountaineering
- Parachuting
- Paragliding
- Parascending
- Polo
- Scuba diving in excess of 30 metres
- Skydiving
- White water rafting
- **Winter sports** involving ski and ski-bob racing in international or national events, services or inter services championships, or heats or officially organised practice or training for these events, ski jumping, ice hockey or the use of skeletons or bobsleighs

If an activity is shown above then it is excluded unless it has been referred, agreed and endorsed on to **your** policy.

7. An **insured person** having neuroses, psychoneuroses, psychopathies or psychosis, anxiety, stress, fatigue or mental or emotional diseases or disorders of any type.
8. An **insured person** being under the influence of alcohol or non-prescribed drugs, or abusing prescribed drugs.
9. An **insured person's** deliberate exposure to exceptional danger (except in an attempt to save human life).
10. **You** or an **insured person** taking part in any criminal act.
11. Any liability, loss or damage that is also covered by any other insurance. This exclusion does not apply to Section A – Personal Accident.
12. Any travel to:
 - i. to countries where the Foreign and Commonwealth Office advise against all travel to the country;
 - ii. specific parts of a country where the Foreign and Commonwealth Office advise against all travel to specific parts of that country.

GENERAL CONDITIONS

The following conditions apply to all sections of this insurance. Each section may also have its own special conditions:

1. Arbitration

If **we** accept **your** claim, but disagree over the amount due to **you** or an **insured person**, the matter will be passed to an arbitrator who both **you** and **we** agree to. When this happens, the arbitrator must make a decision before **you** can start proceedings against **us**.

2. Margins Clause

In the event of a variation of more than 10% in the number of **insured persons** covered under this insurance and upon which the initial premium has been based, a review of the premium may be made by **us**.

3. Cancelling Cover

You may cancel the insurance, without giving reason, by sending **us** written notice within 14 days of the policy starting or within 14 days of **you** receiving the insurance documents, whichever is later. If you wish to cancel, please contact:

SFS Group Ltd
Unit 21 Dean House Farm
Church Road
Newdigate, Dorking
Surrey
RH5 5DL

Telephone: 01306 746300
Email: info@sfsgroup.co.uk

We will not make a charge as long as **we** have not paid a claim or are not due to pay one.

You can cancel this insurance at any other time by giving **us** 14 days' notice to SFS Group Ltd. (address shown above). **We** will refund the part of **your** premium which applies to the remaining period of insurance (as long as a claim has not been made). If **you** cancel this insurance outside

the cooling off period, there will be an additional charge of 25% of the original premium, to cover the administrative cost of providing the insurance.

We have the right to cancel **your** Policy at any time by giving **you** 28 days' notice in writing where there is a valid reason for doing so. **We** will send **our** cancellation letter to the latest address **we** have for **you** and will set out the reason for cancellation in **our** letter. Valid reasons may include but are not limited to:

- Non payment of premium; or
- Where **you** are required in accordance with the terms of this Policy to co-operate with **us**, or send **us** information or documentation and **you** fail to do so in a way that materially affects **our** ability to process a claim, or **our** ability to defend **our** interests. In this case **we** may issue a cancellation letter and **we** will cancel **your** Policy if **you** fail to co-operate with **us** or provide the required information or documentation by the end of the 7 day cancellation notice period;
- Where **we** reasonably suspect fraud; or
- Use of threatening or abusive behaviour or language, or intimidation or bullying of our staff or suppliers.

4. Claims Evidence

You and/or an **insured person**, must provide, at **your/their** own expense, evidence to support a claim. An **insured person** must have any medical examinations **we** decide are necessary. **We** will pay for these.

5. Telling us about Claims

You or the **insured person** must advise **us** of any possible claim as soon as possible. See page 23 for the 'Claims Procedure' section of this policy.

GENERAL CONDITIONS

6. If you do not Keep to the Policy Conditions

We may not pay a claim if **you** or an **insured person** have not kept to a condition(s) of this policy and this results in a claim under the policy, unless **you** or the **insured person** can prove that the breach in no way could have increased the risk of such a claim.

7. Change in Circumstances

You must tell **us** as soon as possible about any change in the information **you** have provided to **us** which happens before or during the **operative time** of this policy. **We** will tell **you** if such change affects **your** insurance and if so, whether the change will result in revised terms and/or premium being applied to **your** policy. If **you** do not inform **us** about a change it may affect any claim **you** make or could result in **your** insurance being invalid.

8. Reasonable Care

You and each **insured person** must take all reasonable steps to avoid or reduce any loss or damage as far as possible. **You** and each **insured person** must also make every effort to recover any property which has been lost.

9. Transferring this Policy

You cannot transfer the benefit of this policy to anyone else or use this contract of insurance as a mortgage or guarantee of any kind.

10. Sanctions Limitation & Exclusion Clause

We will not provide any cover or be liable to pay any claim or provide any benefit under this contract of insurance if the provision of such cover, payment of such claim or provision of such benefit would expose **us** to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, **United Kingdom** or United States of America.

This means **we** will not provide any insurance coverage for Sanctioned Designated Nationals i.e. individuals or entities subject to trade or economic sanctions as per the laws and regulations of the European Union, **United Kingdom** or United States of America. **We** will not provide any coverage in respect of any risk or exposure located in, or arising from, or in connection with a country which is subject to sanctions, by either the United Nations, European Union, **United Kingdom** or United States of America.

CLAIMS PROCEDURE

IN THE CASE OF A MEDICAL EMERGENCY: Phone Intana Global 24-hour service:

Telephone: 44 (0) 20 7902 7405

Email: operations@Intana-global.com

You, or the **insured person**, must do this immediately in the case of a serious medical emergency abroad where they will need to stay in hospital, have hospital treatment or change travel arrangements. If **you** or the **insured person** cannot contact Intana Global immediately, **you**, or they must do so as soon as possible.

When calling Intana Global for help, please provide the following information:

- The **insured person's** name and the address they are staying at.
- The phone number **you**, or the **insured person**, are calling from
- The name and phone number of the doctor and hospital treating the **insured person**.
- The policy number (shown on **your** schedule) and **your** name.
- The nature of the emergency.

Not contacting Intana Global, or not following their instructions, could affect **your** claim. Intana Global must agree, beforehand, any **emergency travel expenses** involving air travel.

- If cover cannot be confirmed at the start of a medical emergency, it is agreed that **you** will guarantee payment until such time as **we** have confirmed cover

If you wish to make a claim, please contact the SFS Group Ltd on 01306 746300 or email info@sfs-group.co.uk

For claims under all sections, except Section B6 (Legal Expenses), your claim will be processed by:

Adjusting Associates LLP
Unit 2, Sovereign Court
Sterling Drive
Llantrisant
Rhondda Cynon Taff
CF72 8LX

T: 01443 229513

For claims under Section B6 (Legal Expenses), your claim will be processed by:

Arc Legal Assistance
PO Box 8921
Colchester
CO4 5YD

T: 0344 770 1053

You must report any claim as soon as possible. Also, **you** must contact SFS Group as soon as **you** find out about any condition or circumstances which may cause an **insured trip** to be cancelled or cut short.

CLAIMS PROCEDURE

In the event of an accident, where possible, the insured person must seek the attention of a duly qualified medical practitioner. Notice must be given to SFS Group Ltd in the event of an insured person's death resulting or alleged to result from an accident.

The insured person must provide us or our medical adviser with the necessary authorisation to access or obtain all the insured person's medical records, notes and correspondence referring to the subject of a claim or a related pre-existing condition. The medical adviser must not for the purpose of reviewing the claim, be allowed to examine the insured person as we consider necessary.

The insured person must provide our claims management company with all information we may

reasonably require including a fully completed claim form. We will only request information in relation to the claim.

Fraudulent Claims

If any pupil, parent or member of staff makes any claim knowing the same to be false or fraudulent as regards to amount or otherwise, such a claim will be forfeited and that pupil, parent or member of staff will be excluded from the contract between SFS Group Ltd, Novae Syndicates Ltd and the policyholder immediately. If the policyholder is knowingly complicit in the attempt to make a fraudulent claim, then Novae Syndicates Ltd reserve the right to cancel the contract with the policyholder immediately.

COMPLAINTS PROCEDURE

Our Promise to you

We are committed to providing **you** with a high quality service and **we** want to make sure that **we** maintain this at all times. If **you** have any questions or concerns about **your** policy, please contact the broker or intermediary who arranged cover for **you**.

If **you** have any questions or concerns about the handling of a claim you should. In the first instance, contact:

SFS Group Ltd
Unit 21 Dean House Farm
Church Road
Newdigate, Dorking
Surrey
RH5 5DL

Tel No: 01306 746300

In the event that **you** remain dissatisfied and wish to make a complaint, **you** can do so at any time by referring the matter to the Complaints team at Lloyd's. Their address is:

Complaints
Lloyd's
One Lime Street
London
EC3M 7HA
Tel No: 020 7327 5693
Fax No: 020 7327 5225
E-mail: complaints@lloyds.com
Website: www.lloyds.com/complaints

Details of Lloyd's complaints procedures are set out in a leaflet "Your Complaint – How We Can Help" available at www.lloyds.com/complaints and are also available from the above address.

If **you** remain dissatisfied after Lloyd's has considered **your** complaint, **you** may have the right to refer **your** complaint to the Financial Ombudsman Service (FOS). Their address is:

The Financial Ombudsman Service
South Quay Plaza
Exchange Tower
London
E14 9SR

Tel No 1: 0800 023 4567 (calls to this number are free from "fixed lines" in the UK)

Tel No 2: 0300 123 9 123 (calls to this number are charged at the same rate as 01 and 02 numbers on mobile phone tariffs in the UK).

E-mail: complaint.info@financial-ombudsman.org.uk.



INSURANCE FOR INDEPENDENT SCHOOLS

SFS Group Ltd
Unit 21 Dean House Farm
Church Road
Newdigate, Dorking 01306 746300
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