

**AMERICAN BANKERS LIFE ASSURANCE COMPANY OF FLORIDA
AND
AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA**

CERTIFICATE OF INSURANCE

Amended and Restated Effective October 30, 2017

HSBC Premier World Elite Mastercard® and HSBC Jade World Elite Mastercard® Cardholders
Master Policies: HSBC0617 and HSBC0617

Emergency Travel Medical Insurance under this Certificate of Insurance does not apply to travel in Cuba.

This Certificate of Insurance contains a clause which may limit the amount payable. Additionally, this Certificate of Insurance contains a provision removing or restricting the right of the Insured Person to designate persons to whom or for whose benefit insurance money is payable.

This Certificate of Insurance contains information about Your insurance. Please read it carefully and keep it in a safe place. You should carry this Certificate of Insurance with You when You travel.

Purchase Assurance, Extended Warranty, Car Rental Collision/Loss Damage, Personal Effects, Trip Cancellation, Trip Interruption/Delay, and Baggage Delay or Loss Insurance are insurance coverages underwritten by American Bankers Insurance Company of Florida; and Common Carrier Accidental Death/Dismemberment, Car Rental Accidental Death/Dismemberment, and Emergency Travel Medical Insurance are insurance coverages underwritten by American Bankers Life Assurance Company of Florida (hereinafter collectively referred to as "Insurer") under Master Policy numbers HSBC0617 and HSBC0617 (hereinafter collectively referred to as the "Policy") issued by the Insurer to HSBC Bank Canada (hereinafter called the "Policyholder"). Claim payments and administrative services under the Policy are arranged by the Insurer.

The terms, conditions and provisions of the Policy are summarized in the Certificate of Insurance, which is incorporated into and forms part of the Policy. All benefits are subject in every respect to the Policy, which alone constitutes the agreement under which benefits will be provided. You, or a person making a claim under the Certificate of Insurance, may request a copy of the Policy and/or a copy of Your application for this insurance (if applicable) by writing to the Insurer at the address shown below.

In no event will a corporation, partnership or business entity be eligible for the insurance coverage provided by the Certificate of Insurance.

American Bankers Life Assurance Company of Florida and American Bankers Insurance Company of Florida – Canadian head office is located at 5000 Yonge Street, Suite 2000, Toronto, Ontario, M2N 7E9.

DEFINITIONS

Throughout this document, all capitalized terms have the specific meaning provided below:

Accident means a sudden, unexpected and unforeseeable cause of injury from an external source.

Accidental Bodily Injury means bodily injury caused by an Accident that:

- (i) occurs while the insurance evidenced by this Certificate of Insurance is in force;
- (ii) results, directly in any of the losses to which the insurance applies, within 365 days after the date of the Accident; and
- (iii) independent of any disease, bodily infirmity, bodily malfunction or any other cause.

Account means the Primary Cardholder's HSBC Mastercard Account which is in Good Standing with the Policyholder.

Administrator means the Insurer and/or the service provider(s) arranged by the Insurer to provide claims payment and administrative services under the Policy.

Cardholder means the Primary Cardholder and any supplemental Cardholder, who is a natural person, resident in Canada and who is also issued an HSBC Mastercard and whose name is embossed on the card. Cardholder may also be referred to herein using "You" and "Your."

Common Carrier means any land, air or water conveyance, which is licensed to carry passengers without discrimination and for hire, excluding courtesy transportation provided without a specific charge.

Dependent Child means Your unmarried natural, adopted or step-children who are dependent on You for maintenance and support and who are either:

- (i) under 21 years of age; or
- (ii) 21 years of age or over and
 - mentally or physically challenged and incapable of self-support; or
 - in full-time attendance at a governmentally accredited or recognized institution of higher learning and not have reached the age of 26.

Dollars and "\$" means Canadian dollars.

Eligible Expenses mean charges for any of the following travel arrangements which have been booked or reserved prior to Trip departure:

- (i) cost of transportation by a Common Carrier;
- (ii) cost of hotel or similar accommodations; and
- (iii) cost of a package tour which has been sold as a unit and includes at least two of the following:
 - transportation by a Common Carrier;
 - car rental;
 - hotel or similar accommodation;
 - meals;
 - tickets or passes for sporting events or other entertainment, exhibition or comparable event; or
 - lessons or the services of a guide.

Emergency Medical Treatment means treatment necessary for the immediate relief of a Medical Emergency.

Essential Items mean the minimum essential clothing and toiletries, the purchase of which is rendered absolutely necessary and indispensable due to the delay of an Insured Person's checked luggage.

GHIP means the government health insurance plan of an Insured Person's province or territory of residence in Canada.

Good Standing means, with respect to an Account, that the primary Cardholder has not advised the Policyholder to close it, it is in compliance with all terms of the Cardholder Agreement and the Policyholder has not suspended or revoked credit privileges or otherwise closed the Account.

Hospital means an institution which is licensed to provide, on an inpatient basis, medical care and treatment of sick and injured persons through medical, diagnostic and major surgical facilities, under the supervision of a staff of Physicians and with 24-hour-a-day service. Hospital does not include any institution or part of an institution which is licensed or used principally as a clinic, a continued care or extended care facility, a convalescent home, a rest home, a nursing home or home for the aged, a health spa or a treatment centre for drug addiction or alcoholism.

HSBC Mastercard means an HSBC Premier World Elite Mastercard and/or an HSBC Jade World Elite Mastercard issued by the Policyholder.

Immediate Family Member means the insured Cardholder's Spouse, child, parent, parent-in-law, sister or brother.

Immediate Relative means, in addition to an Immediate Family Member, a Primary Cardholder's stepbrother or stepsister, grandparent, grandchild, daughter-in-law, son-in-law, brother-in-law or sister-in-law.

Insured Person means a Cardholder and certain other eligible persons, as specified under the applicable coverage.

Medical Condition means any illness, injury or symptom, whether diagnosed or not.

Medical Emergency means any unforeseen illness or Accidental Bodily Injury which occurs during a Trip and requires immediate medical care or treatment from a Physician. A Medical Emergency ends when the illness or Accidental Bodily Injury has been treated such that the Insured Person's condition has stabilized. Treatment provided, when medical evidence indicates that an Insured Person could delay treatment or return to Canada for such treatment, is not considered a Medical Emergency and is not covered.

Mysterious Disappearance means an article of personal property cannot be located and the circumstances of its disappearance cannot be explained or do not lend themselves to a reasonable inference that a theft occurred.

Occupying means in or upon or entering into or alighting from.

Original Manufacturer's Warranty means an express written warranty valid in Canada and issued by the original manufacturer of personal property, excluding any extended warranty offered by the manufacturer or any third party.

Physician means a Physician or surgeon who is registered or licensed to practice medicine in the jurisdiction where the medical treatment or service is provided, and who is not related by blood or marriage to the Insured Person to whom the service is rendered.

Pre-existing Condition means any Medical Condition for which symptoms appeared or for which an Insured Person sought the attention of a Physician, had investigated, diagnosed, treated, had treatment or further investigation recommended or for which medication was prescribed or altered in the 180 days prior to the Trip departure date. A Pre-existing Condition does not include a Medical Condition which is controlled by the consistent use of medications prescribed by a Physician, provided that, during the 180-day period before the Insured Person's departure, there has been no other treatment or investigation recommended and there has been no change in medication. A new medication or increase/decrease in dosage constitutes a change.

Primary Cardholder means the principal applicant for an Account who is a natural person, resident in Canada, and to whom the Policyholder has issued an HSBC Mastercard.

Reasonable and Customary Charges means charges which do not exceed the general level of charges made by other providers of similar standing in the locality or geographical area where the charges are incurred, when furnishing comparable treatment, services or supplies for a similar Medical Emergency.

Rescheduling Expenses means the additional charges associated with Eligible Expenses, including administrative and change fees, which result from rescheduling a Trip prior to departure, and which have been charged to Your Account.

Spouse means the Cardholder's legal husband or wife, or the person with whom the Cardholder has lived and publicly represented as his or her Spouse for at least one continuous year.

Ticket means evidence of fare paid for travel on a Common Carrier, which has been charged in full to the Account.

Travel Companion means a person booked to travel with You and/or Your Spouse on a Trip, and who has prepaid accommodations and/or transportation arrangements for the same Trip.

Trip means a scheduled period of time during which an Insured Person is away from his or her province or territory of residence in Canada. For Emergency Travel Medical coverage, Trip is limited to the first 31 days from the date of departure from the Insured Person's province or territory of residence in Canada.

PURCHASE ASSURANCE AND EXTENDED WARRANTY INSURANCE

Purchase Assurance and Extended Warranty Insurance are available only to the Cardholder. No other person or entity shall have any right, remedy or claim, legal or equitable, to the benefits.

Purchase Assurance

Coverage is only available when the FULL cost of personal items is charged to the Account.

Benefits

Purchase Assurance coverage automatically, without registration, protects most new personal items purchased by You for 90 days from the date of purchase in the event of loss, damage or theft anywhere in the world, subject to the Limitations and Exclusions below. If such an item is lost, stolen or damaged, it will be replaced or repaired or You will be reimbursed the purchase price charged to the Account, at the Administrator's discretion.

Limitations and Exclusions

Purchase Assurance coverage is in excess of all other applicable valid insurance, indemnity, warranty or protection available to You in respect of the item(s) subject to the claim.

Purchase Assurance benefits are not available in respect of the following:

- (i) traveller's cheques, cash (whether paper or coin), bullion, precious metals, tickets, documents, stamps, negotiable instruments or property of a similar nature
- (ii) animals or living plants;
- (iii) golf balls or other sports equipment lost or damaged during the course of normal use;
- (iv) mail order, Internet, telephone purchases or any purchase being shipped until delivered and accepted by You in new and undamaged condition;
- (v) automobiles, motorboats, airplanes, motorcycles, motor scooters, snowblowers, riding lawn mowers, golf carts, lawn tractors, any other motorized vehicles (except for miniature electrically powered vehicles intended for recreational use by children), or any of their respective parts or accessories;
- (vi) perishables such as food, liquor and/or goods consumed in use;
- (vii) jewellery and gems stored in baggage unless such baggage is hand carried under the personal supervision of the Cardholder or such Cardholder's Travelling Companion with the Cardholder's knowledge;
- (viii) used or previously owned or refurbished items, including antiques, collectibles and fine arts;
- (ix) items purchased and/or used by or for a business or for commercial gain;
- (x) losses caused by or resulting from fraud, misuse or lack of care, improper installation, hostilities of any kind (including war, terrorism, invasion, rebellion or insurrection), confiscation by authorities, risks of contraband, illegal activities, normal wear or tear, flood, earthquake, radioactive contamination, Mysterious Disappearance, or inherent product defects;
- (xi) bodily injury, property damage, consequential damages, punitive damages, exemplary damages and legal fees; or
- (xii) services, including delivery and transportation costs of items purchased.

See General Provisions for Purchase Assurance and Extended Warranty Insurance below.

Extended Warranty

Coverage is only available when the FULL cost of personal items with an Original Manufacturer's Warranty valid in Canada is charged to the Account.

Benefits

Extended Warranty Insurance is available automatically, without registration, to provide You with double the period of repair services otherwise provided by the Original Manufacturer's Warranty, to a maximum of 1 additional year, on most personal items purchased new and charged to the Account, provided that, in all cases, automatic coverage is limited to Original Manufacturer's Warranties of 5 years or less.

Extended Warranty benefits apply to any parts and/or labour costs resulting from mechanical breakdown or failure of a covered item, where such obligation was specifically covered under the terms of the Original Manufacturer's Warranty. Extended Warranty benefits are limited to the lesser of the cost to repair or replace or the original purchase price of the eligible item, including applicable taxes.

Limitations and Exclusions

Extended Warranty coverage is in excess of all other applicable valid insurance, indemnity, warranty or protection available to You in respect of the item(s) subject to the claim.

The Extended Warranty benefit ends automatically upon the date when the original manufacturer ceases to carry on business for any reason whatsoever.

The Extended Warranty benefit does not cover the following:

- (i) aircraft, automobiles, motorboats, motorcycles, motor scooters, snowblowers, snowmobiles, riding lawn mowers, golf carts, lawn tractors, or any other motorized vehicles (except for miniature electrically powered vehicles intended for recreational use by children), or any of their respective parts or accessories;
- (ii) services;
- (iii) items purchased and/or used by or for a business or for commercial gain; or
- (iv) bodily injury, property damages, consequential damages, punitive damages, exemplary damages or aggravated damages and legal fees.

General Provisions for Purchase Assurance and Extended Warranty Insurance

Gifts

Eligible items that You give as gifts are covered for Purchase Assurance and Extended Warranty Insurance. In the event of a claim, You, not the recipient of the gift, must make the claim for benefits.

Limits of Liability

There is a maximum lifetime liability of \$60,000 per Account.

You will be entitled to receive no more than the original purchase price of the protected item as recorded on Your sales receipt.

When the covered item is part of a pair or set, You will receive no more than the value of the particular part or parts lost or damaged regardless of any special value that the item may have as part of an aggregate purchase price of such pair or set. The Insurer, at its sole option, may elect to:

- (i) repair, rebuild or replace the item lost or damaged (whether wholly or in part); or

- (ii) pay You for said item, not exceeding the lesser of the original purchase price, the replacement price or the repair cost thereof and subject to the exclusions, terms and limits of liability as stated in this Certificate of Insurance.

Other Insurance

Purchase Assurance and Extended Warranty Insurance is in excess of all other applicable valid insurance, indemnity, warranty or protection available to You in respect of the item(s) subject to the claim. The Insurer will be liable only for the amount of loss or damage over the amount covered under such other insurance, indemnity, warranty or protection and for the amount of any applicable deductible, and only if all such other coverage has been claimed under and exhausted, and further subject to the terms, exclusions and limits of liability set out in this Certificate of Insurance. This coverage will not apply as contributing insurance, notwithstanding any provision in any other insurance, indemnity or protection policies or contracts.

How to Claim

You must keep original receipts and other documents described herein to file a valid claim.

Immediately after learning of any loss or occurrence, You must notify the Administrator by telephoning **1-800-668-8680** from Canada and the United States or **416-977-6066** collect from elsewhere in the world. The Administrator will send You the applicable claim form(s). Your failure to provide proof of loss within 90 days from the date of loss or damage may result in denial of the related claim.

You must complete and sign the claim form which must contain the time, place, cause and amount of loss, and include the following:

- (i) the customer copy of Your sales receipt and a copy of the Account statement showing the charge;
- (ii) the original vendor's sales receipt;
- (iii) a copy of the Original Manufacturer's Warranty (for Extended Warranty claims); and
- (iv) a police, fire, insurance claim or loss report and/or other report of the occurrence of the loss sufficient for determination of eligibility for the benefits hereunder.

Prior to proceeding with any repair services, You must obtain the Administrator's approval in order to ensure the eligibility for payment of Your claim. At the sole discretion of the Insurer, You may be required to send, at Your own expense, the damaged item on which a claim is based to the Administrator in order to support Your claim. Payment made in good faith will discharge the Insurer to the extent of this claim.

Termination of Coverage

Coverage ends on the earliest of:

- (i) the date the Account is cancelled, closed or ceases to be in Good Standing;
- (ii) the date the Cardholder ceases to be eligible for coverage; and
- (iii) the date the Policy terminates.

No coverage will be provided for items purchased after the Policy termination date.

CAR RENTAL INSURANCE

Car Rental Insurance includes Car Rental Collision/Loss Damage Insurance, Personal Effects Insurance, and Car Rental Accidental Death and Dismemberment Insurance as outlined below.

Car Rental Insurance is only available when at least 75% of the cost of a vehicle rental is charged to the Account.

Car Rental Collision/Loss Damage

For this coverage, Insured Person means the Cardholder.

Eligibility

You are eligible for Car Rental Collision/Loss Damage Insurance when You rent most private passenger vehicles on a daily or weekly basis for a period NOT to exceed 31 consecutive days, provided that:

- (i) You initiate the rental transaction by booking or reserving the vehicle rental with Your HSBC Mastercard and by providing Your HSBC Mastercard as payment guarantee prior to the time You take possession of the vehicle;
- (ii) You decline the rental agency's collision damage waiver (CDW) or loss damage waiver (LDW), or similar provision; and
- (iii) You rent the vehicle in Your name and charge at least 75% of the cost of the vehicle rental to the Account.

Rental vehicles which are part of a Car Sharing program are eligible for this Car Rental Collision/Loss Damage Insurance if at least 75% of the cost of the rental of the vehicle was charged to the Account and all other eligibility requirements were met.

"Free Rentals" are also eligible for benefits when received as the result of a promotion conditioned on Your making previous vehicle rentals, if each such previous rental met the eligibility requirements of this Certificate of Insurance.

Benefits

Subject to the terms, exclusions and limits of liability set out in this Certificate of Insurance, You are provided with the same protection against losses arising from the contractual liability assumed when renting and operating a rental vehicle as You would have if You accepted the rental agency's collision or loss damage waiver (or similar provision) up to the actual cash value of the damaged or stolen rental vehicle as well as any reasonable, valid and documented loss of use, reasonable and customary towing charges and administration charges resulting from damage or theft occurring while the rental vehicle is rented in Your name. Coverage is limited to one vehicle rental during any one period. If, during the same period, more than one vehicle is rented by the Cardholder, only the first rental will be eligible for coverage.

In some jurisdictions the law requires the rental agencies to include CDW/LDW in the price of the vehicle rental. In these locations, Car Rental Collision/Loss Damage Waiver Insurance under the Policy will only provide coverage for any deductible that may apply, provided all the requirements outlined in this Certificate of Insurance have been met and You have waived the rental agency's deductible waiver. No CDW/LDW premiums charged by the rental agencies will be reimbursed under the Policy. Rental vehicles which are part of pre-paid travel packages are eligible for benefits if the total cost for Your Trip was charged to the Account and all other requirements herein are met. This coverage is available on a 24-hour basis anywhere in the world, except where prohibited by law, or where the coverage is in violation of the terms of the rental contract in the jurisdiction in which it was formed. (See the section "Know Before You Go" for tips on how to avoid having use of this coverage challenged.)

This coverage does not provide any form of third party automobile property damage or personal injury liability insurance.

Important: Check with Your personal insurer and the rental agency to ensure that You and all other drivers have adequate personal property, personal injury and third party liability coverages. The Policy only covers loss or damage to a rental vehicle, as stipulated herein.

"Know Before You Go"

While Car Rental Collision/Loss Damage Waiver Insurance provide coverage on a worldwide basis (except where prohibited by law), and the coverage is well received by car rental merchants, there is no guarantee that this coverage will be accepted at every car rental facility. Some rental agencies may resist Your declining their CDW/ LDW coverage. They may try to encourage You to take their coverage. If You refuse, they may insist You provide a deposit. Before booking a vehicle, confirm that the rental agency will accept this Car Rental Collision/Loss Damage Waiver Insurance without requiring a deposit. If they won't, find one that will, and try to get written confirmation. If booking Your Trip through a travel agency, let them know You want to take advantage of this Car Rental Collision/Loss Damage Waiver Insurance and have them confirm the rental agency's willingness to accept this coverage.

You will not be compensated for any payment You may have to make to obtain the rental agency's CDW/LDW.

Check the rental vehicle carefully for scratches, dents and windshield chips and point out any damage to the agency representative before You take possession of the vehicle. Have them note the damage on the rental agreement (and take a copy with You), or ask for another vehicle.

If the vehicle sustains damage of any kind, immediately phone the Administrator at one of the numbers provided. Advise the rental agent that You have reported the claim and provide the Administrator's address and phone number.

Do not sign a blank sales draft to cover the damage and loss of use charges.

Coverage Period

Insurance coverage begins as soon as the Cardholder or any other person who is authorized to operate the rental vehicle under the rental agreement takes control of the vehicle, and ends at the earliest of:

- (i) the time the rental agency assumes control of the rental vehicle, whether it be at its place of business or elsewhere;
- (ii) the date the Account is cancelled, closed or ceases to be in Good Standing;
- (iii) the date the Cardholder ceases to be eligible for coverage; or

- (iv) the date the Policy terminates.

Types of Vehicles Covered

The types of rental vehicles covered include cars, sport utility vehicles and mini-vans (as defined below).

Mini-vans are covered provided they:

- (i) are for private passenger use with seating for no more than 8 occupants including the driver;
- (ii) do not exceed a "3/4 ton" rating; and
- (iii) are not to be used for hire by others.

Types of Vehicles NOT Covered

Vehicles which belong to the following categories are NOT covered:

- (i) any vehicle with a manufacturer's suggested retail price, excluding taxes, over \$65,000 at the time and place of loss;
- (ii) vans (except as defined above);
- (iii) trucks, pick-up trucks or any vehicle that can be reconfigured into a pick-up truck;
- (iv) campers or trailers or recreational vehicles;
- (v) off-road vehicles;
- (vi) motorcycles, mopeds or motorbikes;
- (vii) expensive or exotic vehicles;
- (viii) customized vehicles;
- (ix) antique vehicles; and
- (x) leased vehicles.

An antique vehicle is one which is over 20 years old or its model has not been manufactured for 10 years or more.

Limousines that have been stretched or altered from the original factory design are excluded. However, standard production models of these vehicles that are not used as limousines are not excluded.

Limitations and Exclusions

Car Rental Collision/Loss Damage insurance does not cover any loss caused or contributed to by:

- (i) operation of the rental vehicle:
 - a) in violation of the law or any terms and conditions of the rental agreement/contract;
 - b) by any driver not so authorized under the rental agreement;
 - c) by any driver not in possession of a driver's license that is valid in the rental jurisdiction;
 - d) on other than regularly maintained roads;
 - e) at any time while intoxicated (where the driver's blood alcohol concentration is equal to or over the blood alcohol concentration limit for impaired driving under the Criminal Code of Canada or the jurisdiction in which the vehicle rental occurred, if lower,) or the driver is charged for impaired driving;
 - f) at any time while under the influence of any narcotic;
- (ii) nuclear reaction, radiation or radioactive contamination;
- (iii) damage to tires unless in conjunction with an insured cause;
- (iv) wear and tear, gradual deterioration, mechanical breakdown of vehicle;
- (v) any damage caused by moving or transporting cargo;
- (vi) insects or vermin, inherent vice or damage;
- (vii) war, hostile or warlike action, insurrection, rebellion, revolution or civil war;
- (viii) seizure or destruction under quarantine or customs regulations or confiscation by any government or public authority;
- (ix) transporting contraband or illegal trade;
- (x) transportation of property or passengers for hire; or
- (xi) any dishonest, fraudulent or criminal act committed or attempted by the Cardholder and/or any authorized driver.

Car Rental Collision/Loss Damage does NOT include coverage for:

- (i) vehicles rented for a period that exceeds 31 consecutive days[†], whether or not under one or more consecutive rental agreements;
- (ii) a replacement vehicle for which Your personal automobile insurance, car dealer, repair shop, or other party is covering all or part of the rental cost;
- (iii) loss or theft of personal belongings in the vehicle, including but not limited to cellular telephones, portable computers, electronic and communication devices;
- (iv) expenses assumed, waived or paid or payable by the rental agency or its insurer;
- (v) third party liability (injury to anyone or anything inside or outside the vehicle); or
- (vi) any amount payable by Your employer or employer's insurance coverage, if the rental car was for business purposes.

[†] No coverage will be provided for vehicles rented for a period that exceeds 31 consecutive days, even for the first 31 consecutive days, whether or not under one or more consecutive rental agreements. Coverage may not be extended for more than 31 days by renewing or taking out a new rental agreement with the same or another vehicle rental agency for the same or another vehicle.

How to Claim

You must report a Car Rental Collision/Loss Damage claim to the Administrator as soon as possible, and in all events within 48 hours of the damage or theft having occurred. Call **1-800-668-8680** from within Canada and the United States or **416-977-6066** locally or collect from elsewhere in the world. Failure to report a claim within 48 hours may result in denial of the claim or reduction of Your benefit.

A customer service representative will take down some preliminary information, answer any questions You may have, and send You a claim form. You will be required to submit a completed claim form including the following documentation:

- (i) a copy of the driver's license of the person who was driving the vehicle at the time of the loss;
- (ii) a copy of the loss/damage report You completed with the rental agency;
- (iii) a copy of a police report, required when the loss results in damage or theft over \$1,000;
- (iv) a copy of Your sales receipt, and Your statement of Account showing the rental charge;
- (v) the front and back of the original opened and closed-out rental agreement;
- (vi) a copy of the itemized repair estimate, final itemized repair bill and parts invoices;
- (vii) original receipt(s) for any repairs for which You may have paid; and
- (viii) if loss of use is charged, a copy of the rental agency's complete daily utilization log from the date the vehicle was not available for rental, to the date the vehicle became available to rent.

Claims submitted with incomplete or insufficient documentation may not be paid.

Personal Effects

For this coverage, Insured Person means the Cardholder and Immediate Family Members travelling with the Cardholder who rented the vehicle.

Benefits

Personal Effects coverage is provided for loss, theft or damage to personal effects while such personal effects are in transit or in any hotel or other building en route during a trip with a covered rental vehicle, for the duration of the vehicle rental period, as outlined in the Car Rental Collision/Loss Damage Insurance section above.

Coverage is provided for the personal effects of the Cardholder when the Cardholder rents a vehicle, and extends to the personal effects of any Immediate Family Member travelling with You.

Benefits during such rental period will be the actual cash value of the personal effects up to a maximum of \$1,000 for each Insured Person, per occurrence. Total benefits for all Insured Persons during each vehicle rental period are limited to \$2,000 per Account

Limitations and Exclusions

Personal Effects do not include money (whether paper or coin), bullion, bank notes, securities, documents, memorabilia, collectibles, medals or other property of a similar nature. Benefits are not paid if loss results from Mysterious Disappearance.

How to Claim

In the event of a claim, contact the Administrator at **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world.

Other Insurance

Personal Effects coverage is in excess of all other applicable valid insurance, indemnity or protection available to the Insured Person in respect of the items subject to the claim. The Insurer is liable only for the amount of the loss or damage over the amount covered under such other insurance, indemnity or protection and for the amount of any applicable deductible, only if all other insurance has been claimed under and exhausted and subject to the terms, exclusions and limits of liability set out in this Certificate of Insurance. This coverage does not apply as contributing insurance, notwithstanding any provision in any other insurance, indemnity or protection policies or contracts.

Car Rental Accidental Death and Dismemberment

For this coverage, Insured Person means the Cardholder and Immediate Family Members while Occupying the rental car.

Benefits

Car Rental Accidental Death and Dismemberment coverage is provided in the event an Insured Person sustains an Accidental Bodily Injury while Occupying a covered rental vehicle during the vehicle rental period, as outlined in the Car Rental Collision/Loss Damage Insurance section above. The applicable benefit specified for the resulting Loss will be paid according to the following Schedule of Insurance:

Schedule of Insurance

Loss	Amount of Benefit	
	Cardholder*	Each Other Occupant
Loss of life	\$200,000	\$20,000
Loss of both hands or both feet	\$200,000	\$20,000
Loss of one foot or one hand and the entire sight of one eye	\$200,000	\$20,000
Loss of sight of both eyes	\$200,000	\$20,000
Loss of one hand and one foot	\$200,000	\$20,000
Loss of speech and hearing	\$200,000	\$20,000
Loss of one hand or one foot	\$100,000	\$10,000
Loss of sight of one eye	\$100,000	\$10,000
Loss of speech	\$100,000	\$10,000
Loss of hearing	\$100,000	\$10,000
Loss of thumb and index finger on the same hand	\$100,000	\$10,000

*In this Schedule of Insurance, Cardholder means the Cardholder who rented the vehicle in his/her name.

The maximum benefit payable for Loss resulting from any one Accident is \$300,000 per Account. If more than one described Loss is sustained by an Insured Person, then the total benefit payable from one Accident to such person is limited to the greatest amount payable for any one Loss sustained.

Beneficiary

Unless otherwise specified by the Cardholder, any amount due under this Certificate of Insurance for Loss of life:

- (i) upon the Cardholder's death, will be paid to the Cardholder's Spouse if living, otherwise equally to the Cardholder's living children if any, otherwise equally to the Cardholder's then living parents or parent, otherwise to the Cardholder's estate;
- (ii) upon the death of any other Insured Person, will be paid to the Cardholder if then living, otherwise as though it were a sum payable under (i) above.

All other benefits will be paid to the Insured Person suffering the Loss.

The beneficiary designation outlined above may be changed in accordance with the Change of Beneficiary provision.

Limitations and Exclusions

Coverage will be provided on the same terms, conditions, limitations and exclusions applicable to Car Rental Collision/Loss Damage Waiver (above).

In addition, Car Rental Accidental Death and Dismemberment benefits are not payable for a Loss caused by or resulting from:

- (i) intentionally self-inflicted injuries;
- (ii) suicide or attempted suicide;
- (iii) illness or disease;
- (iv) pregnancy or complications of pregnancy, including resulting childbirth or abortion;
- (v) bacterial infection except bacterial infection of an Accidental Bodily Injury, or if death results from the accidental ingestion of a substance contaminated by bacteria; or
- (vi) the commission or attempted commission of a criminal offence.

How to Claim

In the event of a claim, contact the Administrator at **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world.

TRIP INSURANCE

Trip Insurance includes Trip Cancellation, Trip Interruption/Delay, Baggage Delay or Loss, Common Carrier Accidental Death and Dismemberment, and Emergency Travel Medical insurance.

Trip Cancellation Insurance (Prior To Departure)

For this coverage, Insured Person means the Primary Cardholder, his or her Spouse and/or Dependent Children booked to travel on a Trip with the Primary Cardholder and/or his or her Spouse.

Coverage applies when at least 75% of Eligible Expenses for a Trip are charged to the Account.

Benefits

Should the Insured Person have to cancel a Trip prior to the scheduled departure date due to one of the following Covered Causes for Cancellation, You will be reimbursed for any Eligible Expenses which are not refundable or reimbursable in any manner, up to a maximum limit of \$2,000 per Insured Person and \$5,000 per Trip for all Insured Persons. It is important that Insured Person cancel travel arrangements with the travel supplier as soon as a Covered Cause for Cancellation arises and must also advise the Administrator immediately.

You will be reimbursed for any Rescheduling Expenses which are not refundable or reimbursable in any manner if, prior to the scheduled departure date, an Insured Person chooses to reschedule a Trip due to one of the following covered Causes for Cancellation. The amount payable is the lesser of the Rescheduling Expenses and the amount that would have been paid under this Certificate of Insurance if the Trip had been cancelled outright. Your rescheduled trip will be considered a new Trip under this Certificate of Insurance.

Covered Causes for Cancellation (first occurring after the Trip was booked) mean the following:

Covered Causes for Cancellation - Medical

- (i) death of an Insured Person, an Immediate Relative, or a Travel Companion;
- (ii) Accidental Bodily Injury, or sudden and unexpected sickness, or quarantine of an Insured Person, an Immediate Relative, or a Travel Companion which caused Insured Person to be unable to start the Trip. A Physician must provide confirmation in writing that prior to the scheduled departure date, the Insured Person was advised to cancel the Trip or that the Medical Condition or Accidental Bodily Injury made it impossible for the Insured Person to start the Trip;
- (iii) Accidental Bodily Injury, or sudden and unexpected illness or death of a caregiver with whom the Insured Person has contracted to care for a Dependent Child in his or her absence which requires the care and attendance of a Physician and the Physician has recommended cancellation of the Trip;
- (iv) complications of the Insured Person's pregnancy within the first 28 weeks of pregnancy;
- (v) side effects and/or adverse reactions to vaccinations required for the Insured Person's Trip; or
- (vi) hospitalization or the death of an Insured Person's host at destination.

Covered Causes for Cancellation - Non-medical

- (i) an enforceable call of an Insured Person to jury duty or sudden and unexpected subpoena of an Insured Person to act as a witness in a court of law requiring the Insured Person's presence in court during the Trip, except where the Insured Person is a law enforcement officer;
- (ii) a written formal notice issued by the Department of Foreign Affairs Trade and Development of the Government of Canada, advising Canadians not to travel to a country, region or city for which a Ticket had originally been issued for a period that includes an Insured Person's Trip;
- (iii) a natural disaster that renders an Insured Person's principal residence uninhabitable;

- (iv) an Insured Person's quarantine or hijacking;
- (v) a call to service of an Insured Person by government with respect to reservists, military, police or fire personnel;
- (vi) default whereby a contracted travel supplier stops all service completely as a result of bankruptcy or insolvency;
- (vii) weather conditions delay the Insured Person's connecting schedule carrier for 30% or more of the total duration of the Trip and the Insured Person elects not to continue with the Trip; and
- (viii) a delay causing an Insured Person to miss a connection for a Common Carrier or resulting in the interruption of an Insured Person's travel arrangements including the following:
 - a delay of an Insured Person's Common Carrier, resulting from the mechanical failure of that carrier;
 - a traffic accident or an emergency police-directed road closure (either must be substantiated by a police report); or
 - weather conditions.

The benefit under this Covered Cause of Cancellation is the Insured Person's one-way economy fare via the most cost-effective route to the Insured Person's next destination. The outright cancellation of a flight is not considered as a delay.

Limitations and Exclusions

Benefits are not payable for the cancellation of any Trip resulting directly or indirectly from:

- (i) any reason other than those listed under Covered Causes for Cancellation;
- (ii) pregnancy, childbirth and/or related complications occurring within 8 weeks of the expected delivery date;
- (iii) intentionally self-inflicted injuries, suicide or any attempt thereat;
- (iv) illness or any injury sustained while under the influence of drugs, medication, alcohol or other intoxicants;
- (v) participation in a criminal offence;
- (vi) acts of terrorism, insurrection or war, whether declared or undeclared;
- (vii) voluntary participation in a riot or civil commotion;
- (viii) mental or emotional disorders that do not immediately require hospitalization; or
- (ix) participation in professional or dangerous sports, including, but not limited to any speed contest, SCUBA diving, unless the Insured Person holds a basic SCUBA designation from a certified school or other licensing body, hang-glider, sky diving, parachuting, bungee jumping, parasailing, spelunking, mountaineering, rock climbing or a flight accident, except as a passenger in a commercially licensed airline;
- (x) any Trip commenced against the advice of the Insured Person's Physician;
- (xi) failure of any travel supplier through which You contract for services if this supplier was, at the time of booking, in bankruptcy, insolvency or receivership; or in the case of U.S. Air Carriers, under Chapter 11 in the U.S. Bankruptcy Code. No protection is provided for failure of travel agents, agencies or brokers; or
- (xii) non-presentation of required travel documents, i.e., visa, passport, inoculation vaccination reports.

How to Claim

When a Covered Cause for Cancellation occurs, the Primary Cardholder must call the Administrator at **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world within 48 hours. Failure to notify the Administrator within 48 hours may reduce the amount payable.

Trip Interruption/Trip Delay (After Trip Departure)

For this coverage, Insured Person means the Primary Cardholder, Spouse and/or Dependent Children while travelling with the Primary Cardholder and/or Spouse.

Coverage applies when at least 75% of Eligible Expenses for a Trip are charged to the Account.

Benefits

You will be reimbursed the lesser of the additional charges paid by You for a change in ticketing, or the cost of a one-way economy fare to return to point of departure or to get to the next destination point, plus the unused portion of any other Eligible Expenses which are not refundable in any other manner if, as a result of one of the following Covered Causes for Interruption or Delay occurring during the Trip, an Insured Person is prevented from continuing a Trip or returning on his or her scheduled return date. The maximum amount payable excludes the cost of pre-paid unused return transportation, and is subject to a maximum limit of \$2,000 per Insured Person and \$5,000 per Trip.

Please note: These coverages will only cover any excess cost (i.e. the administration charges to cancel or change the itinerary) over and above the travel rewards provided by any reward or frequent flyer plan. The value of the loss of reward or frequent flyer plan points are not covered.

Covered Causes for Trip Interruption or Delay - Medical

- (i) death of an Insured Person or Travel Companion during the Trip;
- (ii) Accidental Bodily Injury or sudden and unexpected illness of an Insured Person or Travel Companion which, in the sole opinion of the Administrator based on medical advice provided by the attending Physician, requires immediate medical attention and prevents an Insured Person from returning from the Trip on the scheduled return date;
- (iii) death, Accidental Bodily Injury or sudden and unexpected illness of a caregiver with whom the Insured Person has contracted to care for a Dependent Child in his or her absence, which, in the sole opinion of the Administrator based on medical advice provided by the attending Physician, requires immediate medical attention and prevents an Insured Person from returning from the Trip on the scheduled return date;
- (iv) Accidental Bodily Injury or sudden and unexpected illness of an Immediate Relative during the Trip, which requires immediate hospitalization and which was not known to the Insured Person prior to the Trip departure date; and hospitalization or the death of an Insured Person's host at destination.

Covered Causes for Trip Interruption or Delay - Non-medical

- (i) a written formal notice issued by the Department of Foreign Affairs, Trade and Development Trade of the Canadian government during the Trip, advising Canadians not to travel to a country, region or city for which a ticket has been issued for a period that includes an Insured Person's Trip;
- (ii) a natural disaster that renders an Insured Person's principal residence uninhabitable;
- (iii) an Insured Person's quarantine or hijacking;
- (iv) a call to service of an Insured Person by government with respect to reservists, military, police or fire personnel; and
- (v) a delay causing an Insured Person to miss a connection for a Common Carrier or resulting in the interruption of an Insured Person's travel arrangements including the following:
 - A delay of an Insured Person's Common Carrier, resulting from the mechanical failure of that carrier;
 - A traffic accident or an emergency police-directed road closure (either must be substantiated by a police report); or
 - Weather conditions.

The benefit under this Covered Cause for Interruption is the Insured Person's one-way economy air fare via the most cost-effective route to the Insured Person's next destination (inbound and outbound). The outright cancellation of a flight is not considered as a delay.

Limitations and Exclusions

Benefits are not payable for the cancellation of any Trip resulting directly or indirectly from:

- (i) any reason other than those listed under Covered Causes for Cancellation;
- (ii) pregnancy, childbirth and/or related complications occurring within 8 weeks of the expected delivery date;
- (iii) intentionally self-inflicted injuries, suicide or any attempt thereat;
- (iv) illness or any injury sustained while under the influence of drugs, medication, alcohol or other intoxicants;
- (v) participation in a criminal offence;
- (vi) acts of terrorism, insurrection or war, whether declared or undeclared;
- (vii) voluntary participation in a riot or civil commotion;
- (viii) mental or emotional disorders that do not immediately require hospitalization; or
- (ix) participation in professional or dangerous sports, including, but not limited to any speed contest, SCUBA diving, unless the Insured Person holds a basic SCUBA designation from a certified school or other licensing body, hang-glider, sky diving, parachuting, bungee jumping, parasailing, spelunking, mountaineering, rock climbing or a flight accident, except as a passenger in a commercially licensed airline;
- (x) any Trip commenced against the advice of the Insured Person's Physician;
- (xi) failure of any travel supplier through which You contract for services if this supplier was, at the time of booking, in bankruptcy, insolvency or receivership; or in the case of U.S. Air Carriers, under Chapter 11 in the U.S. Bankruptcy Code. No protection is provided for failure of travel agents, agencies or brokers; or
- (xii) non-presentation of required travel documents, i.e., visa, passport, inoculation vaccination reports.

How to Claim

When a Covered Cause for Trip Interruption or Delay occurs, the Primary Cardholder must call the Administrator at **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world within 48 hours. The Administrator will assist the Primary Cardholder with making the necessary arrangements to return. Failure to notify the Administrator within 48 hours may reduce the amount payable.

Baggage Delay or Loss

For this coverage, Insured Person means the Primary Cardholder, Spouse and Dependent Children while travelling with the Primary Cardholder and/or Spouse.

Coverage applies when at least 75% of Eligible Expenses for a Trip are charged to the Account.

Benefits

Baggage Delay insurance provides a reimbursement to the Primary Cardholder if any Insured Person's accompanying checked-in baggage is not delivered within 12 hours of his/her arrival at the scheduled destination point, for the purchase of Essential Items to a maximum of \$200 per Trip provided that:

- (i) such baggage was in the custody of a scheduled airline or Common Carrier; and
- (ii) such baggage was not delayed when the Insured Person returned to the original point of departure.

Baggage Loss insurance covers the actual cash value for direct physical loss or damage of baggage and personal property contained therein when an Insured Person's baggage is checked with an airline or Common Carrier or carried by the Insured Person on a Common Carrier up to a total loss of \$750 per Insured Person for:

- (i) loss or damage of baggage and/or personal property worn or used by You and accompanying You during the Trip. Coverage is limited to \$500 per item;
- (ii) theft, burglary, fire or transportation hazards to baggage and/or personal property worn or used by You during the Trip. Coverage is limited to \$500 per item;
- (iii) loss or damage to camera equipment during the Trip. Camera equipment is collectively considered one item. Coverage is limited to \$500 per item; and
- (iv) loss or damage to jewellery during the Trip. Jewellery is collectively considered one item. Coverage is limited to \$500 per item.

Payment is based on the actual replacement cost of any lost or stolen article provided the article is actually replaced. Otherwise, payment is based on the actual cash value of the article at the time of loss.

Limitations and Exclusions

Baggage Delay or Loss insurance does not cover, provide service or pay claims resulting from:

- (i) loss or damage caused by normal wear and tear, gradual deterioration, moths, or vermin;
- (ii) loss or damage to animals, automobiles, (including equipment and contents), trailers, motorcycles, bicycles, boats, motors, other conveyances or their accessories, souvenirs, fragile or collectible items, household effects and furnishings, contact lenses, nonprescription sunglasses, artificial teeth and prostheses, medical equipment and appliances, money, securities, tickets, documents, any property pertaining to a business, profession or occupation; personal computers, software or cellular phones;
- (iii) loss or damage to jewellery or camera equipment stored in baggage, unless such baggage is hand carried under the personal supervision of the Cardholder or such Cardholder's Spouse or Travel Companion with the Cardholder's knowledge
- (iv) loss, damage or delay of items due to radiation, confiscation by any government authority, war (declared or undeclared) risks, or contraband or illegal transportation or trade; or
- (v) loss, damage or delay incurred while You are performing a negligent act(s) or criminal act(s).

Baggage Delay or Loss insurance coverage is in excess of all other applicable valid insurance, indemnity, reimbursement or protection available to You in respect of the claim. The Insurer will be liable only for the amount of loss or damage over the amount covered under such other insurance, indemnity, reimbursement or protection and for the amount of any applicable deductible, only if all such other coverage has been claimed under and exhausted and subject to the terms, exclusions and limits of liability set out in this Certificate of Insurance. This coverage will not apply as contributing insurance, notwithstanding any provision in any other insurance, indemnity or protection policies or contracts.

When the protected item is part of a pair or set, You will receive no more than the value of the particular part or parts lost or damaged regardless of any special value that the item may have as part of an aggregate purchase price of such pair or set. The Administrator, on behalf of the Insurer, reserves the right to repair or replace any damaged or lost property with other of like quality and value, and to require submission of property for appraisal of damage, the cost of which is the responsibility of the insured.

How to Claim

In the event of a claim, contact the Administrator at **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world.

Common Carrier Accidental Death and Dismemberment

For this coverage, Insured Person means the Primary Cardholder, Spouse and/or Dependent Children while travelling with the Primary Cardholder.

Eligibility

Coverage is only available when the full cost of fare(s) for travel on a Common Carrier is charged to the Account. When purchasing a package tour, the amount charged to the Account must be at least as much as the cost of the Common Carrier transportation in order to be eligible for Common Carrier Accidental Death and Dismemberment benefits.

Coverage is in force when an Insured Person is Occupying a Common Carrier to:

- (i) travel directly to the point-of-departure terminal for the trip shown on the Ticket;
- (ii) make the trip shown on the Ticket; and
- (iii) travel directly from the point-of-arrival terminal for the trip shown on the Ticket to the next destination.

Benefits

If an Insured Person sustains an Accidental Bodily Injury while Occupying a Common Carrier as a fare paying passenger, the applicable benefit specified for the resulting Loss will be paid according to the following Schedule of Insurance:

Schedule of Insurance

Loss	Amount of Benefit
Loss of life	\$500,000
Loss of both hands or both feet	\$500,000
Loss of one foot or one hand and the entire sight of one eye	\$500,000
Loss of sight of both eyes	\$500,000
Loss of one hand and one foot	\$500,000
Loss of speech and hearing	\$500,000
Loss of one hand or one foot	\$250,000
Loss of sight of one eye	\$250,000
Loss of speech	\$250,000
Loss of hearing	\$250,000
Loss of thumb and index finger on the same hand	\$125,000

The maximum benefit payable for Loss resulting from any one Accident is \$750,000 per Account. If more than one described Loss is sustained by an Insured Person, then the total benefit payable from that Accident to such person is limited to the greatest amount payable for any one Loss sustained. The maximum benefit payable for Loss resulting from any one Accident to such person is limited to the greatest amount payable for any one Loss sustained.

For benefits to be payable, the Loss must occur within 365 days of the Accidental Bodily Injury that caused the Loss.

Exposure and Disappearance

If by reason of an Accident covered by the Policy an Insured Person is unavoidably exposed to the elements and as a result of such exposure suffers a Loss, such Loss will be covered under the terms of the Policy.

An Insured Person is presumed to have suffered Loss of life caused by an Accident when:

- (i) the Insured Person's body remains unbound after 365 days following the date of a disappearance which was caused by sinking or wrecking of the Common Carrier
- (ii) the Insured Person occupied such Common Carrier at the time of the Accident, subject to the terms and conditions of the Certificate of Insurance.

Beneficiary

Unless otherwise specified by the Primary Cardholder, any amount due under this Certificate of Insurance for Loss of life:

- (i) upon the Primary Cardholder's death, will be paid to the Primary Cardholder's Spouse if living, otherwise equally to the Primary Cardholder's living children if any, otherwise equally to the Primary Cardholder's then living parents or parent, otherwise to the Primary Cardholder's estate;
- (ii) upon the death of any other Insured Person, will be paid to the Primary Cardholder if then living, otherwise as though it were a sum payable under (i) above.

All other benefits will be paid to the Insured Person suffering the Loss.

The beneficiary designation outlined above may be changed in accordance with the Change of Beneficiary provision.

Limitations and Exclusions

Common Carrier Accidental Death and Dismemberment benefits are not payable for a Loss caused by or resulting from:

- (i) intentionally self-inflicted injuries;
- (ii) suicide or attempted suicide;
- (iii) illness or disease;
- (iv) pregnancy or complications of pregnancy, including resulting childbirth or abortion;
- (v) bacterial infection except bacterial infection of an Accidental Bodily Injury, or if death results from the accidental ingestion of a substance contaminated by bacteria;
- (vi) any act of war, declared or not, or civil disorders;
- (vii) an Accident occurring while operating or learning to operate, or serving as a member of the crew of any aircraft;
- (viii) the commission or attempted commission of a criminal offence; or
- (ix) an Accident occurring while Occupying a water conveyance, unless the conveyance itself is involved in an Accident which causes the Loss to the Insured Person.

How to Claim

In the event of a claim, contact the Administrator at **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world.

Emergency Travel Medical

For this coverage, Insured Person means the Primary Cardholder, Spouse and/or Dependent Children while travelling with the Primary Cardholder and/or Spouse.

Emergency Travel Medical Insurance under this Certificate of Insurance does not apply to travel in Cuba.

Eligibility

To be eligible for Emergency Travel Medical coverage, all Insured Persons must be residents of Canada, under 65 years of age on the departure date of a Trip, and insured by their provincial or territorial GHIP. For Dependent Children, see the definition for age limits.

Coverage Period

Only the first 31 consecutive days of a Trip, as determined by the originally scheduled departure and return dates, will be covered. There is no coverage for that portion of a Trip which extends beyond the first 31 consecutive days. In the event of a claim, proof of scheduled Trip duration will be required.

Coverage begins at 12:01 a.m. on the date the Insured Person leaves his or her province or territory of residence on a Trip. Coverage will terminate on the earliest of the following:

- (i) the date the Insured Person returns to his or her province or territory of residence in Canada;
- (ii) the date the Account is cancelled, closed or is no longer in Good Standing;
- (iii) the date the Insured Person has been absent for more than 31 consecutive days (including the day of departure and day of return) from his or her province or territory of residence in Canada; or
- (iv) the date the Insured Person attains age 65* (For Dependent Children, see the Definitions section for age limits).

*Coverage terminates for all Insured Persons on the date the Primary Cardholder attains age 65.

Automatic Extension of Coverage

When an Insured Person is hospitalized due to a Medical Emergency, subject to the eligibility requirement above, Emergency Travel Medical coverage will remain in force for as long as the Insured Person is hospitalized plus a further period of three (3) days following the Insured Person's discharge from Hospital.

Also, Emergency Travel Medical insurance will be automatically extended beyond the 31-day limit for up to 3 days if an Insured Person's return to his or her province or territory of residence in Canada is delayed solely as the result of:

- (i) the delayed departure of a Common Carrier on which the Insured Person is booked;
- (ii) a delayed return as a result of an accident or the mechanical breakdown of an Insured Person's personal vehicle;
- (iii) You must delay Your scheduled return due to a Medical Emergency of another Insured Person.

Benefits

In the event of a Medical Emergency, the Reasonable and Customary Charges for Emergency Medical Treatment will be paid by the Insurer, less any amount payable by or reimbursable under a GHIP, any group or individual health plans, insurance policies or reimbursement programs.

Benefits are limited to \$1,000,000 for each Insured Person, subject to the Limitations and Exclusions.

The following expenses are eligible for reimbursement:

Emergency Hospital, Ambulance and Medical Expenses

- (i) Hospital room and board charges, up to semi-private or the equivalent. If medically required, expenses for treatment in an intensive or coronary care unit are covered;
- (ii) Physician charges;
- (iii) use of an operating room, anaesthesia and surgical dressings;
- (iv) the cost of licensed ambulance service;
- (v) emergency room charges;
- (vi) prescription drugs and medication; and
- (vii) the cost for rental or purchase of minor medical appliances such as wheelchairs and crutches.

Diagnostic Services, including laboratory tests, x-rays when prescribed by a Physician. NOTE: magnetic resonance imaging (MRI), computerized axial tomography (CAT scans), sonograms and ultrasound must be authorized in advance by the Administrator.

Private Duty Nursing Expenses. Benefits are payable to a maximum of \$5,000 per Insured Person for the professional services performed by a registered nurse (not related to the Insured Person by blood or marriage) during hospitalization when medically necessary and prescribed by a Physician. This includes medically necessary nursing supplies.

Emergency Air Transportation or Evacuation. The following are covered expenses provided they are approved and arranged in advance by the Administrator:

- (i) air ambulance to the nearest appropriate medical facility or to a Canadian Hospital;
- (ii) transport on a licensed airline for emergency return to the Insured Person's province or territory of residence in Canada for immediate medical attention; and
- (iii) a medical attendant to accompany the Insured Person on the flight back to Canada.

Other Professional Services. Where the professional services of a physiotherapist or podiatrist are medically necessary as a result of a Medical Emergency to a maximum of \$150 per Insured Person per discipline.

Emergency Dental Expenses. Covers the cost of repair or replacement of natural teeth or permanently attached artificial teeth required as the result of an accidental blow to the mouth, to a maximum of \$2,000 per Insured Person. To be eligible for coverage, dental treatment must take place during Your Trip. Treatment for the emergency relief of dental pain is covered to a maximum of \$150 per Insured Person.

Transportation to Bedside, Coverage includes one round trip economy airfare by the most direct route from Canada, plus lodging and meals up to a maximum of \$250, for one Immediate Family Member to:

- (i) be with an Insured Person who is travelling alone and has been confined to a Hospital. The Insured Person must be expected to be an inpatient for at least seven (7) days outside their home province or territory and have verification from the attending Physician that the situation is serious enough to require the visit; or
- (ii) identify a deceased Insured Person prior to release of the body, where necessary.

This benefit must be pre-approved by the Administrator.

Return of Deceased. In the event of the death of an Insured Person while on a Trip, this insurance covers up to \$3,000 for the preparation (including cremation) and transportation of the Insured Person's remains (excluding the cost of a burial coffin or urn) to his/her province or territory of residence in Canada.

Additional Hotel and Meal Expenses. If the return of an Insured Person to Canada is delayed due to a Medical Emergency, this insurance covers the cost for hotel and meal expenses incurred after the Insured Person's planned return date up to \$200 a day to a maximum of 10 days per Account. To receive reimbursement, original receipts must be submitted.

Return of Vehicle. Vehicle return is covered to a maximum of \$1,000 to return an Insured Person's vehicle to his or her place of residence in Canada, or in the case of a rented vehicle, to the nearest appropriate rental location, when the Insured Person is unable to return the vehicle as a result of a Medical Emergency or death. Eligible for reimbursement is the cost of the return performed by a

professional agency only, or the following necessary and reasonable expenses incurred by an individual returning the vehicle on behalf of the Insured Person: fuel, meals, overnight accommodation, one-way economy airfare. To receive reimbursement, original receipts must be submitted. Any other expenses are not covered. Expenses incurred by anyone travelling with the person returning the vehicle are not covered.

Benefits will only be payable when the return of the vehicle is pre-approved and/or arranged by the Administrator and the vehicle is returned to the Insured Person's normal place of residence or the nearest appropriate rental agency within 30 days of the Insured Person's return to Canada.

Limitations and Exclusions

No benefits are payable for any expenses incurred directly or indirectly as a result of:

- (i) a Medical Emergency while an Insured Person is travelling in Cuba;
- (ii) any Pre-Existing Condition as defined herein;
- (iii) the continued treatment, recurrence or complication of a Medical Condition following emergency treatment of that Medical Condition during the Trip, if the medical advisors of the Administrator determine that the Insured Person is able to return to Canada and the Insured Person chooses not to return;
- (iv) a Medical Condition for which the Insured Person delayed or refused further treatment or investigation which was recommended by a Physician before the departure date;
- (v) surgery, including but not limited to angioplasty and/or cardiac surgery, and any associated diagnostic charges, which are not approved by the Administrator prior to being performed, except in extreme circumstances where surgery is performed on an emergency basis immediately following admission to a Hospital;
- (vi) invasive procedures and any of the following procedures which are not authorized in advance by the Administrator, including any associated charges: MRI (Magnetic Resonance Imaging), CAT (Computer Axial Tomography) scans, sonograms, ultrasounds, biopsies;
- (vii) treatment not performed by or under the supervision of a Physician or dentist;
- (viii) pregnancy, miscarriage, childbirth or complications of any of these conditions occurring within eight (8) weeks of the expected date of birth;
- (ix) riot or civil disorder; committing or attempting to commit a criminal offence;
- (x) intentional self-injury; suicide or attempted suicide; abuse of medication; any Accident while under the influence of illicit drugs or alcohol where the concentration of alcohol in the Insured Person's blood exceeds 80 milligrams of alcohol in 100 milliliters of blood;
- (xi) mental or emotional disorders that do not require immediate hospitalization;
- (xii) the Insured Person voluntarily and knowingly exposing himself/herself to risk from: an act of war whether declared or undeclared, rebellion, revolution, hijacking or terrorism, and any service in the armed forces;
- (xiii) drugs and medication which are commonly available without a prescription or which are not legally registered and approved in Canada;
- (xiv) prescription refills;
- (xv) replacement of lost or damaged eyeglasses, contact lenses, or hearing aids;
- (xvi) participation in professional or dangerous sports, including, but not limited to any speed contest, SCUBA diving, unless the Insured Person holds a basic SCUBA designation from a certified school or other licensing body, hang-gliding, sky diving, parachuting, bungee jumping, parasailing, spelunking, mountaineering, rock climbing or a flight accident, except as a passenger in a commercially licensed airline;
- (xvii) any treatment or surgery where the Insured Person can return to his/her province or territory of residence for such treatment, without adversely affecting his/her Medical Condition;
- (xviii) any treatment or surgery during a Trip when the Trip is undertaken for the purpose of securing or with the intent of receiving medical or Hospital services, whether or not such Trip is on the advice of a Physician;
- (xix) any Trip commenced or continued against the advice of the Insured Person's Physician; or
- (xx) regular care of a chronic condition; elective treatment, cosmetic treatment or any treatment or surgery that is not required for relief of acute and emergent pain or suffering.

Any portion of benefits that require prior authorization and arrangements by the Administrator will not be paid if such benefits were not pre-authorized and arranged by the Administrator, except in extreme circumstances where a request for prior approval would delay medical treatment in a life-threatening Medical Emergency.

Emergency Travel Medical Insurance pays for covered expenses in excess of the Insured Person's GHIP and any other insurance or compensation plan. After payment of the covered expenses, the Administrator will seek reimbursement from the Insured Person's GHIP. Benefits payable under any other insurance plan under which the Insured Person may have coverage will be coordinated by the Administrator in accordance with current guidelines. Payment under the Policy and any other plan will not exceed 100% of the eligible expenses incurred. The Insurer is authorized to receive in Your name, and endorse and negotiate on Your behalf, these eligible payments.

In consultation with the Insured Person's attending Physician, the Administrator reserves the right to transfer the Insured Person to a preferred medical service provider or to the Insured Person's province or territory of residence in Canada. Refusal to comply will absolve the Insurer of any liability for expenses incurred after the proposed transfer date.

The Insurer, the Administrator and the Policyholder are not responsible for the availability, quality or results of any medical treatment or transportation, or the failure of an Insured Person to obtain medical treatment.

Medical Emergency Procedures

When a Medical Emergency occurs, You must contact the Administrator without delay. The Administrator is available 24 hours a day, every day.

Call **1-800-668-8680** from Canada and the United States or **416-977-6066** locally or collect from elsewhere in the world. If calling from somewhere in the world where a collect call is not possible, call direct and You will be reimbursed.

The Administrator will confirm coverage, provide directions to the preferred medical service provider or the nearest appropriate medical facility, provide the necessary authorization of payment of eligible expenses and manage the Medical Emergency.

The Administrator will make every effort to pay or authorize payment of eligible expenses to Hospitals, Physicians and other medical providers directly. If direct payment or payment authorization is not possible, an Insured Person may be required to make payments. In that event, the Insured Person will be reimbursed for eligible expenses on submission of a valid claim.

Note: Benefits may be excluded or reduced where the Administrator has not been contacted in advance of treatment, as noted above.

How to Claim

In the event of a claim, contact the Administrator at **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world.

If the Administrator authorized Hospital or other medical payments on an Insured Person's behalf, the Insured Person must sign an authorization form allowing the Administrator to recover payments from the Insured Person's GHIP, other health plans or insurers and return it to the Administrator within 30 days. If an advance has been made for expenses later determined to be ineligible, the Insured Person will be required to reimburse the Administrator. If eligible expenses are incurred for which payment has not been pre-authorized by the Administrator, they should be submitted to the Administrator with original receipts and payment statements.

When making a claim, evidence of the Insured Person's departure date, scheduled return date, and actual return date to their province or territory of residence in Canada will be required. The Insured Person will be required to submit a completed claim form and provide documentation to substantiate the claim, including the following:

- (i) the cause or nature of the Medical Condition requiring treatment;
- (ii) itemized medical invoices and receipts;
- (iii) original prescription receipts;
- (iv) the Primary Cardholder's date of birth and the Insured Person's date of birth (proof of age may be required);
- (v) a photocopy of the Insured Person's GHIP card;
- (vi) name, address, and telephone number of the Insured Person's employer;
- (vii) proof of the Insured Person's departure and return dates (i.e. copy of tickets, receipts, accommodation invoice, gas receipts);
- (viii) name, address and policy numbers for all other insurance coverage the Insured Person may have, including group and individual insurance, credit card coverage and any other reimbursement plans; and
- (ix) signed authorization to obtain any further required information.

Claims submitted with incomplete or insufficient documentation may not be paid.

GENERAL PROVISIONS AND STATUTORY CONDITIONS

Unless otherwise expressly provided herein or in the Policy, the following general provisions apply to the benefits described in this Certificate of Insurance.

Notice and Proof of Claim

Immediately after learning of a loss, or an occurrence which may lead to a loss under any of these insurance benefits, notify the Administrator. You will then be sent a claim form.

Written notice of claim must be given to the Administrator as soon as reasonably possible after the occurrence or commencement of any loss covered by the Policy, but in all events must be provided no later than 90 days from the date of loss. Written notice given by or on behalf of the claimant or the beneficiary to the Administrator with information sufficient to identify the Insured Person, will be deemed notice of claim.

The appropriate completed claim forms, together with written proof of loss, must be delivered as soon as reasonably possible.

Failure to provide notice or furnish proof of claim within the time prescribed herein does not invalidate the claim if the notice or proof is given or furnished as soon as reasonably possible, and in no event later than one year from the date a claim arises hereunder, if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed. If the notice or proof is given or furnished after one year, Your claim will not be paid.

Examination and Autopsy

The Insurer at its own expense shall have the right and opportunity to examine the person of any Insured Person whose injury is the basis of a claim hereunder when and so often as may be reasonably required during pendency of a claim hereunder, and also the right and opportunity to make an autopsy in case of death, where it is not forbidden by law.

Payment of Claims

Benefits payable under the Policy will be paid upon receipt of full written proof of loss, as determined by the Insurer.

The benefit for Loss of life will be payable in accordance with the beneficiary provisions under the Car Rental Accidental Death and Dismemberment and Common Carrier Accidental Death and Dismemberment benefits provisions of the Certificate of Insurance. Any other accrued benefits unpaid at the Insured Person's death may, at the option of the Insurer, be paid either to such person's beneficiary or to the Primary Cardholder in whose name the Account is maintained.

All other benefits will be payable to the applicable Cardholder.

Change of Beneficiary

The right to change beneficiary is reserved to the Primary Cardholder or Cardholder, as applicable, and subject to any provision or rule of law governing the right to change the beneficiary. The consent of the beneficiary or beneficiaries will not be required.

To change the beneficiary designation, call the Administrator at **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world.

Copy of the Policy

You or a person making a claim under this Certificate of Insurance may request a copy of the Policy and/or a copy of your application for this insurance (if applicable) by writing at the address shown below:

Assurant
Canadian Head office
5000 Yonge Street, Suite 2000
Toronto, Ontario M2N 7E9

Termination of Insurance

Coverage for Insured Persons ends on the earliest of:

- (i) the date the Account is cancelled, closed or ceases to be in Good Standing;
- (ii) the date the Insured Person ceases to be eligible for coverage; and
- (iii) the date the Policy terminates.

No losses incurred after the Policy termination date will be paid, unless otherwise specified.

Subrogation

Following payment of an Insured Person's claim for loss or damage, the Insurer shall be subrogated to the extent of the amount of such payment, to all of the rights and remedies of the Insured Person against any party in respect of such loss or damage, and shall be entitled at its own expense to sue in the name of the Insured Person. The Insured Person shall give the Insurer all such assistance as is reasonably required to secure its rights and remedies, including the execution of all documents necessary to enable the Insurer to bring suit in the name of the Insured Person.

Due Diligence

The Insured Person shall use diligence and do all things reasonable to avoid or diminish any loss of or damage to property protected by the Policy.

False Claim

If You make a claim knowing it to be false or fraudulent in any respect, You shall no longer be entitled to this insurance, nor to the payment of any claim under the Policy.

Legal Action

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act, Limitations Act*, or other applicable legislation in the Primary Cardholder's province or territory.

TRAVEL ASSISTANCE SERVICES

You do not need to use Your HSBC Mastercard to be eligible for the following services.

Travel Assistance Services are services only, not insurance benefits. Any costs incurred for or in connection with such services will be charged to the Account (subject to credit availability). If not chargeable, payment for such costs will be arranged (where reasonably possible) through family and friends.

These services are provided to the Primary Cardholder and/or his or her Spouse on a 24-hour, 7 day a week basis. To take advantage of any of the services described below, simply call the Administrator **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world.

Travel Assistance Services may not be available in countries of political unrest and such countries may from time to time be determined to be unsafe and/or inaccessible.

Emergency Cash Transfer

In the event of theft, loss or an emergency while travelling away from home, You can call us for assistance in arranging for an emergency cash transfer, including a cash transfer to Your Account, to a maximum of \$5,000.

Emergency Message Centre

In case of a Medical Emergency, the Administrator can help to relay important messages to or from Your family, business or Physician.

Lost Document and Ticket Replacement

In the event of theft or loss of necessary travel documents or tickets when travelling, You can call for assistance with arrangements for their replacement.

Lost Luggage Assistance

The Administrator will help locate or replace lost or stolen luggage and personal effects. The cost of obtaining replacement luggage and personal effects will be charged to the Account.

Pre-trip Information

You can call and obtain information regarding passport and visa regulations, and vaccination and inoculation requirements for the country You are visiting.

Medical Assistance and Consultation

You will be directed to the nearest appropriate medical facility wherever possible. It is recommended that you contact the Administrator for this assistance prior to seeking treatment for any Medical Emergency.

Legal Referrals and Payment Assistance

If, while travelling, You require legal assistance, You can call for referral to a local legal advisor and/or for assistance with arrangements for the posting of bail and the payment of legal fees, to a maximum of \$5,000, which will be charged to the Account.