

## Cruise cover extension (Policy B)

### Cabin confinement

#### on payment of additional premium

**We will up to the amount shown in the schedule of cover for:**

each full 24-hour period, up to a maximum the maximum amount shown in the schedule of cover, **you** are confined to **your** cabin as a result of injury or **illness**.

#### **Provided:**

**you** provide written confirmation, from the ship's doctor or another medical practitioner, of **your** injury or illness which made **your** quarantine necessary.

**There is no cover provided under this section for anything mentioned in the General conditions and exclusions applying to all sections of cover in the main policy wording. Additionally, no cover is provided under this section for:**

1. treatment or surgery which is not directly related to the injury or **illness** which made **your** confinement necessary.
2. any treatment or surgery which (based on information from the ship's doctor) can be reasonably delayed until your return to **your home country**.
3. any claim caused by a disease where **you** have not had the recommended inoculations and/or taken the recommended medication.

#### **If you need to make a claim:**

For emergency medical treatment and/or repatriation call **our** 24/7 assistance team 24 hours a day, 7 days a week, 365 days a year, from anywhere in the world on +44 (0)2920 474133

Download a claim form at

[www.imglobal.com/member/assistance/claims](http://www.imglobal.com/member/assistance/claims) or call +44 (0)2920 474138 or write to Travel Claims Team, 3rd Floor, Fitzalan House, Fitzalan Court, Cardiff CF24 0EL.

#### **Our** claims handlers will need to see:

- Completed claim form
- Booking invoice(s) for the **trip**
- Your assistance case number, for emergency medical claims
- Medical report(s) confirming the diagnosis
- Invoices, bank / card statements and receipts for self-paid costs
- A copy of your GHIC (or old EHIC) card covering the incident date, if travelling in Europe
- Details of other insurance, or third party responsible, if applicable

#### **Missed port departure\***

#### on payment of additional premium

**We will pay up to the amount shown in the schedule of cover for:**

reasonable additional travel expenses incurred to reach the next overseas port destination due to:

the vehicle in which **you** are travelling to **your** international **cruise** departure point becomes un-drivable due to mechanical failure or being involved in an accident

Or

**your** public transport is delayed, preventing **you** from being able to check-in on time for **your** outward departure.

#### **Provided:**

1. **you** have allowed sufficient time to get to **your** destination as shown on **your** itinerary.
2. the claim is not due to the failure of public transport services that is due to poor weather conditions, a strike or industrial action that started or that had been announced before the date of **your** departure from **your home**.

**\*Missed Port Calculation = cruise cost / days or nights (depending on the booking confirmation) x number of ports missed as a result of the incident = Claim value, subject to policy limit.**

**There is no cover provided under this section for anything mentioned in the General conditions and exclusions applying to all sections of cover in the main policy wording. Additionally, no cover is provided under this section for:**

1. an accident/breakdown of the vehicle in which **you** are travelling for which a professional repairers report is not provided.
2. a breakdown of any vehicle in which **you** are travelling if the vehicle is owned by **you** and has not been serviced properly and maintained in accordance with manufacturer's instructions.
3. any claim for Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Civil Aviation Authority or a Port Authority or any such regulatory body in a country which **you** are travelling to/from.
4. any delay caused by a riot, civil commotion, strike or industrial action which began or was announced before the start date of your policy and the date **your** travel tickets or confirmation of booking were issued (whichever is the latter).
5. additional expenses where the scheduled Public Transport operator has offered reasonable alternative travel arrangements.
6. any claim that results from volcanic ash.

#### **If you need to claim:**

Download a claim form at

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#### **Our** claims handlers will need to see:

- Completed claim form
- Booking invoice(s) for each part of the **trip**
- Evidence of the mechanical failure, or accident, of the vehicle you're travelling in, or of the delay to public transport being used, to get **you** to **your** international departure point
- Invoices, bank / card statements and receipts for additional costs **you** incurred
- Details of other insurance, or third party responsible, if applicable

### **Itinerary change**

#### **on payment of additional premium**

**We will pay up to the amount shown in the schedule of cover for:**

cancellation of a scheduled port visits due to adverse weather or **timetable restrictions**.

#### **Provided:**

**you** obtain a written statement from **your** carrier confirming the reason for the cancelled port visit.

**There is no cover provided under this section for anything mentioned in the General conditions and exclusions applying to all sections of cover in the main policy wording. Additionally, no cover is provided under this section for:**

1. any claims arising from missed ports caused by strike or industrial action, if the strike or industrial action was notified at the time the insurance was purchased or the **trip** was booked (whichever is the latter).
2. any claims arising from when **your** ship cannot put people ashore due to a scheduled tender operation failure.
3. any claims where a monetary amount (including on board credit) of compensation has been offered by the ship or tour operator.

#### **If you need to claim:**

Download a claim form at

[www.imglobal.com/member/assistance/claims](https://www.imglobal.com/member/assistance/claims) or call +44 (0)2920 474138 or write to Travel Claims Team, 3rd Floor, Fitzalan House, Fitzalan Court, Cardiff CF24 0EL.

**Our** claims handlers will need to see:

- Completed cancellation claim form
- Booking invoice(s) for each part of the **trip**
- Carrier's letter confirming the scheduled port visit cancellation and the exact reason for the cancellation
- Details of other insurance, or third party responsible, if applicable

### **Unused excursions**

#### **on payment of additional premium**

**We will pay up to the amount shown in the schedule of cover for:**

The cost of excursions pre-booked before **you** go on **your** trip which **you** are unable to use as a direct result of being a hospital in-patient due to an accident or **illness** that is covered under the emergency medical and repatriation expenses section of the main policy wording.

#### **Provided:**

**you** have contacted the 24/7 assistance team.

**There is no cover provided under this section for anything mentioned in the General conditions and exclusions applying to all sections of cover in the main policy wording. Additionally, no cover is provided under this section for:**

1. **your** failure to attend the excursion as per **your** original itinerary for reason other than **your** accident or **illness**.
2. any claims made against the hospital benefit section of the main policy wording.
3. any medication and/or treatment which at the time of departure is known to be required or to be continued outside **your** home country.
4. expenses incurred as a result of a disease where **you** have not had the recommended inoculations/ or taken the recommended medication.
5. claims arising from normal pregnancy, without any accompanying bodily injury, illness, disease, or complication. Normal Childbirth would not constitute an unforeseen event. Please see pregnancy under Health/existing medical conditions in the main policy wording.
6. services or treatment received by **you**, for any form of cosmetic or elective surgery.
7. any services or treatment received by **you** after the date that in the opinion of **our** 24/7 assistance team, in consultation with **your** treating doctor, which can reasonably wait until **you** return to **your** home country.

#### **If you need to claim:**

Download a claim form at

<https://www.imglobal.com/member/assistance/claims> or call +44 (0)2920 474138 or write to Travel Claims Team, 3rd Floor, Fitzalan House, Fitzalan Court, Cardiff CF24 0EL.

**Our** claims handlers will need to see:

- Completed claim form
- Booking invoice(s) for each part of the trip
- Evidence to support the reason that **you** were unable to use your excursion, including medical reports confirming the diagnosis. This doesn't apply if the medical reason relates to **you** and **you** have contacted our assistance team at the time, and they have confirmed **you** require medical emergency treatment
- Proof of the cost of the unused excursion.
- Details of other insurance, or third party responsible, if applicable

### **Cruise interruption**

#### **on payment of additional premium**

**We will pay up to the amount shown in the schedule of cover for:**

additional travel and accommodation expenses incurred to reach the next port to re-join **your** **cruise** if:

1. **your** temporary **illness** required hospital treatment on dry land
2. **your** Passport being lost after **your** international departure but before embarkation of **your** planned **cruise** or during dis-embarkation ashore on one of the scheduled stops as a result of loss or theft.

#### **Provided**

**you** have contacted the 24/7 assistance team to approve and assist with any travel arrangements prior to **you** arranging any additional travel.

**There is no cover provided under this section for anything mentioned in the General conditions and exclusions applying to all sections of cover in the main policy wording. Additionally, no cover is provided under this section for:**

1. claims where less than 25% of the trip duration remains.
2. any medication and/or treatment which at the time of departure is known to be required or to be continued outside **your** home country.
3. expenses incurred as a result of a disease where **you** have not had the recommended inoculations/ or taken the recommended medication.
4. claims arising from normal pregnancy, without any accompanying bodily injury, **illness**, disease, or complication. Normal Childbirth would not constitute an unforeseen event. Please see pregnancy under Health/existing medical conditions in the main policy wording.
5. services or treatment received by **you**, for any form of cosmetic or elective surgery.
6. any services or treatment received by **you** after the date that in the opinion of **our** 24/7 assistance team, in consultation with **your** treating doctor, which can reasonably wait until **you** return to **your** home country.
7. any loss of passport not reported to the police or other authority within 48 hours of discovery and which **you** do not get a written report.
8. any passports that are legally detained or held by any customs or any other officials.
9. any passports that **you** do not carry with you on **your** person (unless they are held in a locked cabin or safety deposit box).
10. any passport that **you** lose or is stolen while not in **your** control or while they are in the control of any person other than an airline or carrier.

**If you need to claim:**

call **our** 24/7 assistance team 24 hours a day, 7 days a week, 365 days a year, from anywhere in the world on +44 (0)2920 474133

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**Our** claims handlers will need to see:

- Completed claim form
- Booking invoice(s) for the **trip**
- **Illness:** **Your** assistance case number, for emergency medical claims
- **Illness:** Medical report(s) confirming the diagnosis
- Passport: police or other authority report
- Invoices, bank / card statements and receipts for additional costs **you** incurred
- Details of other insurance, or third party responsible, if applicable