

# Group Emergency Travel Medical Coverage Summary

University of Alberta Graduate Student's  
Association



## Coverage

The information below summarizes **your** Emergency Travel Medical Insurance coverage. It contains important Information with respect to certain eligibility and benefit limits that apply to **your** coverage, but it does not reference all of the terms, conditions, limitations, and exclusions. Please refer to the policy for complete details. All amounts indicated are in Canadian currency, unless otherwise stated.

Emergency Travel Medical Insurance covers the reasonable and customary charges incurred as a result of **treatment** required by an **insured person** due to a **medical emergency** during a covered **trip** after leaving their province or territory of residence. Benefits are provided in excess of the **insured person's** government health insurance plan or by any other insurance plan under which they are covered.

The most **we** will pay for all benefits combined under the Emergency Medical Insurance Benefit, for each **insured person** for each covered **trip**, is limited to the amount shown in the Schedule of Benefits and must show as "Included."

Policyholder Name	University of Alberta Graduate Student's Association
Effective Date	September 1 <sup>st</sup> , 2025 – September 1 <sup>st</sup> , 2026
Policy Number	8624293
Class Description	Class 1: All Active registered full-time student of the Policyholder.
Termination	Terminates at the earlier of the member's attainment of age 65 or when no longer a student at the University of Calgary.
Covered Trip	While on the business of the policyholder and while on leisure <b>trips</b> .
Covered Trip Duration	Up to 120 days.
Pre-Existing Medical Condition	90 Days
Emergency Medical Treatment	\$5,000,000
Hospital Allowance	\$50 per day to a maximum of \$250
Paramedical Services	\$100 per practitioner for up to 180 days
Ground Ambulance	Included in Emergency Medical Insurance Limit up to a maximum of \$5,000
Medical Evacuation	Included in Emergency Medical Insurance Limit up to a maximum of \$50,000
Bedside Companion	Round-trip economy airfare and up to \$1,500 for meals and accommodation
Meals and Accommodation	\$100 per day to a maximum of \$250
Repatriation of Remains	a. \$5,000 b. \$5,000
Trip Cancellation and Trip Interruption	\$5,000
Lost Baggage	\$1,000



## Important Definitions

**Departure date** means the date an **insured person** leaves their province or territory of residence to commence a **trip**.

**Injury** means sudden bodily harm sustained by an **insured person**, caused by external and accidental means, while this coverage is in effect resulting in a **covered loss**, and is independent to all other causes, including **sickness** or disease.

**Insured person** means any person who has insurance under the terms of this policy as shown in the table above. It may include the insured person's spouse or child(ren) if a plan covering the spouse or child(ren) is selected.

**Medical condition** means any **sickness, injury**, disease, or any symptom or complications of pregnancy within the first thirty-one (31) weeks of pregnancy.

**Medical emergency** means an unforeseen **sickness** or **injury** that occurs during a **trip** and that requires immediate **treatment**. A medical emergency ends when the evidence reviewed by Zurich Travel Assist indicates that no further **treatment** is required at the **insured person's** destination or they are able to return to their province or territory of residence for further **treatment**.

**Pre-existing medical condition** means a **medical condition** that existed prior to the effective date of the policy.

**Return date** means the date the **insured person** is scheduled to return from any **trip**.

**Sickness** means illness, disease or any symptom related to that illness or disease.

**Stable** means that for any **medical condition** or related condition, all of the following statements are true:

1. There has not been any new **treatment** prescribed or recommended, or change(s) to existing **treatment** (including a stoppage in **treatment**);
2. A physician has not prescribed or recommended any new medication or any change to an existing medication (including an increase, decrease or stoppage to the prescribed dosage);
3. A physician has not determined that the **medical condition** has become worse;
4. There have not been any new, more frequent or more severe symptoms;
5. There has been no **hospitalization** or referral to a specialist;
6. A physician has not prescribed or recommended any test, investigation or **treatment** that are not yet complete, nor are there any outstanding test results; and
7. There is no planned or pending **treatment**.

The following exceptions are considered stable:

- a. the routine adjustment of Coumadin, Warfarin or insulin (as long as they are not newly prescribed or stopped) and there has been no change in a **medical condition**; or
- b. a change from a brand name medication to a generic brand medication of the same dosage.

**Travel companion or business colleague** means any one person travelling with the **insured person**, who is employed by the policyholder, and whose fare for transportation and accommodation was pre-paid at the same time as the **insured person's** fare.

**Treatment** means hospitalization, medical, therapeutic, diagnostic or surgical services or procedures prescribed, performed or recommended by a physician or other licensed medical practitioner including, but not limited to, prescribed medication, investigative testing and surgery related to any medical condition, **injury**, or **sickness**.

**Trip** means a trip an **insured person** undertakes during the policy period as shown in the table above, while they are travelling on business of the policyholder, and if also included in the table above, for leisure trips:

- a. outside their province or territory of residence if the Out of Province plan is purchased and shown as "Included" in the Schedule of Benefits;
- b. outside their country of residence if the Out of Country plan is purchased and shown as "Included" in the Schedule of Benefits;
- c. outside their province or territory of residence if both the Out of Country plan and Out of Province plan is purchased and shown as "Included" in the Schedule of Benefits.

**We, us, our** and the **Company** refers to Zurich Insurance Company Ltd.

**You** and **your** refers to the individual insured who is eligible for coverage under this policy and is also included in the definition of **insured person**.



## Emergency Medical Insurance Summary of Benefits

### Expenses For Emergency Medical Treatment (Out of Province Plan and Out of Country Plan)

If shown as “Included” on the Schedule of Benefits, the Out of Province Plan will cover losses occurring within Canada but outside of **your** province or territory of residence up to the amount shown in the Schedule. If the Out of Country Plan is shown as “Included” than any losses occurring outside of Canada will be covered. If both Plans are shown as “Included”, the most **we** will pay for all benefits combined under the Emergency Medical Insurance for each **insured person**, per **trip** will be shown on the Schedule of Benefits.

Coverage for the reasonable and customary charges for emergency **medical treatment** expenses include: medical care from a physician, the cost of a semi-private hospital room, services of a private duty nurse in hospital, the rental or purchase of ambulatory aids and medical appliances such as a wheelchair, tests to determine a diagnosis, and drugs which are prescribed by a physician or dentist.

### Hospital Allowance

If **you** are hospitalized for at least 48 consecutive hours, incidental hospital expenses (telephone calls, television rental) will be covered up to the amount shown in the Schedule.

### Paramedical Services

Expenses for **treatment** due to a **medical emergency** by a licensed physiotherapist, chiropractor, chiropodist or podiatrist will be covered up to the maximum limit per practitioner, for up to 180 days after the **medical emergency**.

### Ground Ambulance

The reasonable and customary charges for transportation by a local licensed ambulance service to a hospital in the event of a medical emergency will be covered by this benefit. This also includes local taxi or ride sharing service fare in lieu of local ground ambulance service when it is medically required but not available.

### Medical Evacuation

If the attending physician or Zurich Travel Assist’s medical advisors recommend that **you** must return to **your** province or territory of residence due to a **medical condition** or following a **medical emergency**, **we** will cover the extra cost of economy class airfare, stretcher airfare on a commercial flight if medically necessary, return economy class airfare for a medical attendant if medically necessary, or the cost of an air ambulance if required.

### Bedside Companion

If **you** are travelling alone and are hospitalized for 3 or more days during **your trip** due to a **medical emergency** and **you** require a bedside companion, **we** will cover: the return economy class airfare for someone to join **you**, accomodation and meals for that person, and will provide Emergency Medical Insurance for **your** bedside companion until **you** are medically fit to return to **your** province or territory or residence.

### Meals and Accomodation

If a **medical emergency** prevents **you** or **your travel companion** or **business colleague** from returning to **your** province or territory of residence or if **you** or **your travel companion** or **business colleague** require a transfer to a location which is different from **your** original destination, **we** will reimburse the **insured person** up to the daily maximum shown in the Schedule for their total cost for meals, hotel and taxi or ride sharing service. This must be pre-authorized by Zurich Travel Assist.

### Repatriation of Remains

If an **insured person** dies during a **trip** due to a **medical emergency**, **we** will provide the maximum limit shown in the Schedule of benefits for one of the following options:

- Preparation of the body where they die and cover the cost of the standard transportation container normally used by the common carrier in addition to the return of the body to the province or territory or residence;
- Preparation of the body and the cost of a standard burial container, in addition to \$5,000 for their burial where death occurs;
- Cremate the body where they die and the cost of returning the ashes to their province or territory of residence.

If someone is legally required to identify the body and must travel to the location where death occurred, **we** will pay for the return economy class airfare and up to the maximum limit shown in the Schedule for that person's hotel and meal expenses. Emergency Medical Insurance under the same terms and limitations will also be provided for that person up to 72 hours.



## Emergency Medical Insurance Exclusions

In addition to the Trip Cancellation and Interruption Insurance Exclusions and General Travel Benefits Exclusions, this policy does not pay for any **treatment**, service, expense or benefit arising from, caused by, contributing to, relating to, or resulting from, whether directly or indirectly, any one or more of the following:

1. Expenses that exceed the reasonable and customary charges where the **medical emergency** occurs.
2. Expenses that exceed 80% of the cost **we** would normally have paid under this policy if the **insured person** does not, or someone on their behalf does not, contact Zurich Travel Assist at the time of the **medical emergency**.
3. Magnetic resonance imaging (MRI), computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies, cardiac catheterization, angioplasty or cardiovascular surgery including any associated diagnostic test or charge unless approved in advance by Zurich Travel Assist prior to being performed. All surgery must be authorized by Zurich Travel Assist prior to being performed except in extreme circumstances where a request for prior approval would delay surgery needed in a life-threatening medical crisis.
4. Any non-emergency, investigative or elective **treatment** such as cosmetic surgery, chronic care, rehabilitation, or any directly or indirectly related complications.
5. The continued **treatment** of a **medical condition** when the **insured person** has already received **treatment** for that **medical condition** during their **trip** and Zurich Travel Assist's medical advisors or our medical advisors determine that their **medical emergency** has ended.
6. A **medical emergency** resulting from: mountain climbing requiring the use of specialized equipment, including carabineers, crampons, pick axes, anchors, bolts and lead-rope or top-rope anchoring equipment to ascend or descend a mountain; rock-climbing; parachuting, skydiving, hang-gliding or using any other air-supported sporting device; participating in a motorized speed contest; or the insured person's professional participation in a sport, snorkeling or scuba-diving when that sport, snorkeling or scuba-diving is the **insured person's** principal paid occupation.
7. If the **insured person** specifically purchased this policy to obtain such **treatment** or services, whether or not it was authorized by a physician.
8. For insured children under two years of age, any **medical condition** related to a birth defect.
9. Any benefit that must be authorized or arranged in advance by Zurich Travel Assist when it has given no authorization or made no arrangement for that benefit.
10. Any **medical emergency** that occurs or recurs after our medical advisors recommend that the **insured person** return to their province or territory of residence following **treatment**, and they choose not to.
11. Death or **injury** sustained while piloting an aircraft, learning to pilot an aircraft, or acting as a member of an aircraft crew.
12. For policy extensions or top ups: any **medical condition** that first appeared, was diagnosed or treated after the scheduled **departure date** and prior to the effective date of the insurance extension or top up.



## Trip Cancellation and Interruption Insurance Summary of Benefits

### Trip Cancellation (Before Departure)

If **you** are unable to travel due to an applicable Covered Cause, which occurs before **your departure date**, **we** will cover the prepaid unused portion of **your trip** that is non-refundable and non-transferable to another travel date up to the maximum limit shown in the Schedule. In addition, if **your travel companion or business colleague** must cancel their **trip** due to a Covered Cause applicable to them, and **you** proceed to go on **your trip** as planned, **we** will cover the cost of the next occupancy charge up to the maximum limit shown in the Schedule.

### Trip Interruption (After Departure)

If **your trip** is interrupted due to an applicable Covered Cause, which occurs on or after **your departure date**, **we** will pay up to the maximum amount noted in the Schedule for:

1. The amount of unused travel arrangements paid for prior to **your departure date** up to the maximum covered amount that is non-refundable and non-transferable to another travel date, less the prepaid unused return transportation;
2. **Your** additional unplanned hotel, meal expenses, essential phone calls and taxi or ride sharing service (such as Uber) fares, to a maximum of \$300 per day for up to two days when no earlier transportation arrangements are available; or
3. **Your** one-way economy class airfare to **your** next destination, or to return **you** to **your** province or territory of residence. **We** will pay the change fee charged by the airline for their missed connection if this option is available or up to \$1,000 for the cost of their one-way economy airfare to the next destination.

## Summary of Trip Cancellation and Interruption Covered Causes

Benefits are payable under the Trip Cancellation and Interruption Benefit if any of the following occur:

- a. **you** or **your travel companion or business colleague** develop(s) a sudden and unforeseen **medical condition** or die(s).
- b. **your** immediate family member, **your travel companion or business colleague's** immediate family member, or any key person develops a sudden and unforeseen **medical condition** or dies; or the person whose guest they will be during their **trip** is unexpectedly admitted to a hospital or dies.
- c. **you** or **your** spouse: (i) become pregnant after **you** book **your trip** and **your departure date** falls in the nine weeks before or after the expected delivery date, or (ii) legally adopt a child and the notice of custody is received after the effective date and the date of custody is scheduled in the nine weeks before or after **your** departure date.
- d. **you** or **your travel companion or business colleague's** travel visa is not issued for a reason beyond **your** control.
- e. **you** or **your** spouse are called to service as a reservist, fire-fighter, military or police staff, or to jury duty or to be a defendant in a civil suit, during their **trip**; or **you** or **your** spouse are subpoenaed to be a witness during **your trip**.
- f. **you**, **your** spouse, **your travel companion or business colleague** or **your travel companion or business colleague's** spouse are quarantined or hijacked.
- g. **you** or **your travel companion or business colleague** are unable to occupy **your** respective principal residence or to operate **your** respective business because of a natural disaster.
- h. **you**, **your** spouse, **your travel companion or business colleague** or **your travel companion or business colleague's** spouse lose a permanent job because of lay-off or dismissal without just cause.
- i. **you** or **your travel companion or business colleague** are transferred by the employer with whom **you** or **your travel companion or business colleague** were employed with at the time of application for this policy that requires the relocation of **your** or **your travel companion or business colleague's** principal residence.
- j. a business meeting that is the main purpose of the **trip** and was scheduled before **you** or **your travel companion or business colleague** purchased this policy is cancelled for a reason beyond **your** control or the control of **your** employer and the meeting is between companies with unrelated ownership. Benefits are only payable to the **insured person** and their **travel companion or business colleague** (one individual) who purchased **our** insurance, if they are the one who planned to attend the business meeting.
- k. a Government of Canada Travel Advisory is issued during a **trip**, or after **you** purchase this policy but before **your departure date**, advising Canadians to avoid all or non-essential travel to a destination included in **your trip**.
- l. weather conditions, earthquakes or volcanic eruptions cause the scheduled common carrier, on which **you** are booked, to be delayed for a period of at least 30% of **your trip** and **you** choose not to travel.
- m. **you** miss a connection or must interrupt **your trip** because of the delay of **your** connecting private passenger vehicle or common carrier, when the delay is caused by the mechanical failure, a traffic accident, an emergency police-directed road closure or weather conditions, earthquakes or volcanic eruptions. **Your** connecting private passenger vehicle or common carrier must have been scheduled to arrive at their point of boarding at least two hours before the scheduled time of departure.
- n. the airplane the **insured person** is ticketed to fly on leaves earlier or later than scheduled. Note: This benefit is only covered under Trip Interruption.
- o. **sickness, injury** or death of **your** service animal if **you** are an individual with a physical, mental or visual disability, and travel arrangements have been made for the animal to accompany **you** on **your trip**. For this benefit to apply, the travel arrangement cost for their service animal must be included in the covered amount insured under this policy.





## Trip Cancellation and Interruption Insurance Exclusions

In addition to the Emergency Medical Insurance and General Travel Benefits Exclusions, this policy does not pay for any expense or benefit arising from, caused by, contributing to, relating to, or resulting from, whether directly or indirectly, any one or more of the following:

1. Any **pre-existing medical condition** that was not **stable** in the three months prior to the **insured person's** effective date.
2. Any heart condition the **insured person** or their **travel companion or business colleague** has if, during the three months prior to their effective date, they or their **travel companion or business colleague** have taken any form of nitroglycerine for the relief of angina pain.
3. Any lung condition the **insured person** or their **travel companion or business colleague** has if, during the three months prior to their effective date, they or their **travel companion or business colleague** required **treatment** with oxygen or Prednisone for a lung condition.
4. An event when, on the effective date the **insured person** or their **travel companion or business colleague** knew, or it was reasonable to expect, may eventually prevent them from going on or completing their **trip** as booked.
5. The **medical condition** or death of a person who is ill when the purpose of their **trip** is to visit that person.
6. A travel visa that is not issued because of its late application.
7. Failure of any travel supplier with which the **insured person** contracts for services. No protection is provided for failure of any travel agent, agency or broker.
8. If a Travel Advisory is issued after their **departure date**, coverage under this Trip Cancellation and Interruption Insurance Benefit in that specific country, region or city will be limited to a period of ten days from the date the Travel Advisory was issued, or to a period that is reasonably necessary for them to safely evacuate the country, region or city.



## Emergency Medical Insurance and Trip Cancellation and Interruption Insurance Exclusions

The following exclusions are in addition to the exclusions mentioned above for each insurance respectively, and are applicable to both Emergency Medical Insurance and Trip Cancellation and Interruption Insurance. This policy does not pay for any expense or benefit arising from, caused by, contributing to, relating to, or resulting from, whether directly or indirectly, any one or more of the following for:

1. The **insured person** committing or attempting to commit a criminal act.
2. A **medical condition** that meets any of the following criteria:
  - a. When the **insured person** knew, or for which it was reasonable to expect before they left to their province or territory of residence, or before the effective date of coverage, that they would need or be required to seek **treatment** for that **medical condition**.
  - b. A **medical condition** for which future investigation or **treatment** was planned before the **insured person** left their province or territory of residence.
  - c. A **medical condition** that produced symptoms that would have caused an ordinarily prudent person to seek **treatment** in the three months before the **insured person** left their province or territory of residence.
  - d. A **medical condition** that had caused the **insured person's** physician to advise them not to travel.
  - e. A **medical condition** that is the result of the **insured person** not following **treatment** as prescribed including prescribed medication, **treatments** and therapy.
3. Any non-emergency, investigative or elective **treatment** such as cosmetic surgery, chronic care, rehabilitation, or any directly or indirectly related complications.
4. Intoxication, the misuse, abuse, overdose of, or chemical dependence on medication, drugs, alcohol or other intoxicant.
5. The **insured person's**:
  - a. routine prenatal care;

- b. pregnancy or childbirth or complications thereof when they happen in the nine weeks before or after the expected date of delivery;
  - c. child born during their **trip**, or coverage for such child.
6. Any loss or any medical condition the insured person suffers or contracts in a specific country, region or city when a Government of Canada Travel Advisory, issued before their **departure date**, advises Canadians to avoid all or non-essential travel to that specific country, region or city. In this Exclusion, "medical condition" is limited, related or due to the reason for the Travel Advisory.
- If the Travel Advisory is issued after the **insured person's departure date**, their coverage under this Emergency Medical Insurance Benefit in that specific country, region or city will be limited to a period of ten days from the date the Travel Advisory was issued, or to a period that is reasonably necessary for them to safely evacuate the country, region or city.
7. Any act of terrorism directly or indirectly caused by, resulting from, arising out of, or that is in connection with biological, chemical, nuclear or radioactive means.



## Lost, Damaged or Delayed Baggage Benefit Summary of Benefits

### Lost or Damaged Baggage

If **you** suffer a loss of or damage to baggage or personal effects that **you** use during **your trip**, **we** will reimburse **you** up to the amount per item and maximum benefit payable as shown in the Schedule of Benefits.



## Lost, Damaged or Delayed Baggage Exclusions and Limitations

In addition to the General Travel Benefits Exclusions, this policy does not pay for any expense or benefit caused by, contributing to, relating to, or resulting from, whether directly or indirectly, any one or more of the following:

- a. Animals, perishable items, bikes that are not checked as baggage with the common carrier; household items, furniture, artificial teeth or limbs, hearing aids, eyeglasses of any type, contact lenses, money, tickets, securities, documents; items related to the **insured person's** occupation (other than business equipment), antiques or collector items, items that are fragile, items that are obtained illegally, or articles that are insured on a valued basis by another insurer.
- b. Damage or loss resulting from wear and tear, deterioration, defect, mechanical breakdown, due to the **insured person's** imprudence or omission.
- c. Unaccompanied baggage; unattended personal property; any personal property left in an unattended vehicle or unlocked trunk, any jewellery or camera placed in the custody of a common carrier, any personal electronic device such as a mobile phone, laptop, tablet or iPad.
- d. In instances of theft, losses unreported to authorities.
- e. An act of terrorism.



## General Travel Benefit Exclusions

In addition to the exclusions for specific benefits listed above, this policy does not pay for any **treatment**, service, expense or benefit arising from, caused by, contributing to, relating to, or resulting from, whether directly or indirectly, any one or more of the following:

- 1. Suicide or any attempt at suicide or intentionally self-inflicted **injury** or any attempt at intentionally self-inflicted **injury** including, but not limited to, any attempt to restrict the flow of oxygen to the brain for purposes of auto-eroticism or auto-erotic asphyxiation, unless medical evidence establishes that the **injuries** are related to a mental health illness.
- 2. An act of war.
- 3. Involvement in any type of active military service.



4. Participation in the commission or attempted commission of a crime, any felony, an assault, insurrection, or riot.
5. Parasailing, bungee jumping, heli-skiing, scuba diving or any other extra-hazardous activity.
6. Being intoxicated while operating a motor vehicle.
  - a. They will be conclusively presumed to be intoxicated if the level of alcohol or drugs or both in his or her blood exceeds the amount at which a person is presumed, under the law of the locale in which the accident occurred, to be intoxicated, if operating a motor vehicle.
  - b. An autopsy report from a licensed medical examiner, law enforcement officer reports, or similar items will be considered proof of their intoxication.
7. Being under the influence of any prescription drug, controlled substance or cannabis, or hallucinogen, unless such prescription drug, controlled substance or cannabis, or hallucinogen was prescribed by a physician and taken in accordance with the prescribed dosage.
8. Travel or flight in any aircraft except as a fare-paying passenger on a regularly scheduled charter or commercial flight.
9. Release, whether or not accidental, or by any person unlawfully or intentionally, of nuclear energy or radiation, including sickness or disease resulting from such release.
10. Alcoholism, drug addiction or the use of any drug or controlled substance or cannabis except as prescribed by a licensed medical provider operating within his or her scope of authority.
11. Participation in any team sport or any other athletic activity as a professional.
12. Any condition for which an insured person is entitled to benefits under any Workers' Compensation Act, No Fault Auto Coverage or similar law.
13. Riding in or driving any type of motor vehicle as part of a speed contest or scheduled race, including testing such vehicle on a track, speedway or proving ground.
14. Any payment or any service or benefit to any policyholder, **insured person**, beneficiary, or third party who may have any rights under this policy to the extent that such cover, payment, service, benefit, or any business or activity of the policyholder, the insured person, beneficiary, or third party would violate any applicable trade or economic sanctions law or regulation.



## How to File a Claim

IN THE EVENT OF A MEDICAL EMERGENCY, CONTACT ZURICH TRAVEL ASSIST  
IMMEDIATELY

1 (877) 541-0127 (toll-free call from the USA or Canada)

or

1 (416) 649-2555 collect to Canada from anywhere else in the world.

Zurich Travel Assist is available to assist you 24 hours a day, each and every day of the year.

**You** must call Zurich Travel Assist before obtaining **treatment**, so that **we** may:

- confirm coverage; and
- provide pre-approval for **treatment**.

Please note that if the **insured person** or someone on their behalf does not call Zurich Travel Assist in a **medical emergency** and prior to **treatment**, the **insured person** will have to pay 20% of the eligible medical expenses **we** would normally pay under this policy. If it is medically impossible for the **insured person** to call when the **medical emergency** happens, **we** ask that someone call on their behalf.

If the **insured person** chooses to pay eligible expenses directly to a health service provider without prior approval by Zurich Travel Assist, eligible expenses will be reimbursed to the **insured person** based on the reasonable and customary charges that **we** would have paid directly to such provider. Medical charges that the **insured person** pays may be higher than this amount. Therefore, the **insured person** will be responsible for any difference between the amount they paid and the reasonable and customary charges reimbursed by **us**.

### Notice and Proof of Claim

Claims must be reported within thirty (30) days of occurrence of a claim arising under this policy. **Your** written notice of a claim must be sent to Zurich Travel Assist in one of the following ways, no later than thirty (30) days from the date a claim occurs under the policy on account of an accident, **sickness** or disability by:

- personal delivery or by sending it by registered mail to our head office in Ontario;
- personal delivery to our authorized agent in the province; or
- delivery by electronic means to: travelclaims@wtp.ca.

Proof of claim must be sent to Zurich Travel Assist within ninety (90) days of the date a claim has occurred or the service was provided.

### **Failure to Give Notice or Proof of Claim**

Failure to give notice or proof of claim within the prescribed period does not invalidate the claim if the notice or proof is given or provided as soon as reasonably possible and in no event later than one (1) year from the date of the occurrence arising under this policy, if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed.

### **Provider Note**

This document provides a brief description of the important features of the insurance program. It is not a contract of insurance. The terms and conditions of coverage are set forth in the policy. All claims under the policy will be adjudicated according to the events and circumstances of that particular claim pursuant to the terms and conditions of the policy and in compliance with applicable law, including law governing economic sanctions. This policy will not cover any loss, **injury**, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Iran, Syria, Sudan, North Korea or the Crimea region. Possession of this document does not guarantee payment.

### **Data Sharing Consent**

In order to provide a seamless insurance service globally, Zurich may transfer any data Zurich has received from and any data it holds on the policyholder to other units of Zurich Insurance Group Ltd, such as branches, subsidiaries, or affiliates within Zurich Insurance Group Ltd, cooperative partners of Zurich Insurance Group Ltd, coinsurance and reinsurance companies located in the country of the policyholder or abroad.

The recipient(s) will be required to maintain the confidentiality of the data to the same degree as required of the Zurich party that transferred it.

Zurich as well as such recipients may use, process and store the data, in particular for the purpose of risk evaluation, policy execution, premium setting, premium collection, claims assessment, claims processing, claims payment, statistical evaluation or to otherwise ensure Zurich' global insurance service delivery.

If a broker or agent is acting on behalf of the policyholder, Zurich is authorized to use, process and store data of the policyholder received from such broker or agent, and to forward to such broker or agent data of the policyholder relating to the execution of the Policy and the collection of premiums and payment of claims.

Zurich may procure data from government offices and third parties relating to the policyholder to assess a claim in the event of loss or damage.

### **Disclaimer**

This letter constitutes Zurich Insurance Company Ltd's ("Zurich") summary of coverages and terms, which may differ from the coverages and terms requested or on the policy. Please note the terms and conditions of this letter form part of the policy which will be issued. Zurich reserves the right to modify the terms of this letter, including premium amounts, if any of the factors used as a basis for this quotation are incorrect or change, including new risks being added, existing risks changing or multi-line pricing efficiencies no longer applying. This letter will not be superseded by the policy to be issued.

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### **Privacy Consent Notice**

By submitting the requested information, which may include, but is not limited to, name, address, date of birth, driver's licence number, medical information, financial information, driving record, automobile insurance policy history, and automobile insurance claims history, **you** are providing consent to Zurich Insurance Company Ltd and its subsidiaries and affiliates located in your country of residency or abroad (collectively, "Zurich"), for the

collection, storage, use, disclosure, and processing of **your** personal information as may be necessary for the purposes of securing and administering the requested insurance coverage(s), including but not limited to, risk evaluation, policy execution, premium setting, premium collection, claims adjusting, administration, investigation and settlement, fraud prevention, detection and suppression, or statistical evaluation. **You** are also providing consent to Zurich for the disclosure of **your** personal information to third parties, as required for and in relation to the above-stated purposes, including reinsurers, third party administrators, brokers, agents, claims adjusters, regulators or other governmental or public bodies, taxing authorities, industry associations, other insurers, and other third parties involved in providing insurance services ("Third Parties"). If **your** policy is being arranged by a broker or an agent, you authorize Zurich to collect, store, use, disclose, and process personal information received from such broker or agent in relation to the above-stated purposes. Additionally, by providing information about a third party, including but not limited to, a family member, director, officer, employee, or any party that has an interest in or derives a benefit from the policy, you hereby covenant and warrant that you have obtained the appropriate consent from such third party to disclose their personal information to Zurich and for Zurich to use and disclose such information for any of the above-stated purposes.

Zurich is committed to protecting the privacy and confidentiality of information provided. **Your** personal information may be processed by and is securely stored within the offices of Zurich and authorized Third Parties, both in domestic and foreign jurisdictions outside Canada and is subject to applicable laws.

Zurich may retain your personal information as needed for any of the above-stated purposes or as necessary to comply with Zurich's legal and regulatory obligations, resolve disputes, and enforce Zurich's agreements. **You** may request to review the personal information Zurich maintains about you and make corrections by writing to: Privacy Officer, Zurich Insurance Company Ltd (Canadian Branch), 100 King Street West, Suite 5500, P.O. Box 290, Toronto, ON M5X 1C9 or by emailing [privacy.zurich.canada@zurich.com](mailto:privacy.zurich.canada@zurich.com).

**You** may refuse to consent or withdraw **your** consent to the collection, storage, use, disclosure or processing of **your** personal information; however, **your** refusal to provide consent may result in Zurich being unable to offer and administer insurance coverage or prevent Zurich from being able to pay any claim benefits payable under **your** policy.

Please contact the Zurich Privacy Officer if **you** require further information regarding the collection, use, disclosure, processing and storage of **your** personal information or if **you** have any complaints via email at [privacy.zurich.canada@zurich.com](mailto:privacy.zurich.canada@zurich.com). You can also review our Privacy Policy at <https://www.zurichcanada.com/en-ca/about-zurich/privacy-statement>.

For the purpose of the Insurance Companies Act (Canada), this document was issued in the course of the Company's insurance business in Canada.

Signature

A handwritten signature in black ink, appearing to read "Alan Roy".

Head of Underwriting, Canada Authorized Representative